
SOUTHAMPTON CITY COUNCIL
HEALTH OVERVIEW AND SCRUTINY PANEL
MINUTES OF THE MEETING HELD ON 28 FEBRUARY 2013

Present: Councillors Pope (Chair), Lewzey (Vice-Chair), Claisse, Jeffery, Councillor Parnell, Tucker and McEwing

Apologies: Councillor Keogh

40. **APOLOGIES AND CHANGES IN MEMBERSHIP (IF ANY)**

The Panel noted that Councillor McEwing was in attendance as a nominated substitute for Councillor Keogh in accordance with Council Procedure Rule 4.3.

41. **PUBLIC AND SUSTAINABLE TRANSPORT PROVISION TO SOUTHAMPTON GENERAL HOSPITAL**

The Panel considered the report of the Senior Manager, Communities, Change and Partnerships for the Panel to note evidence from stakeholders in relation to public and sustainable transport provision to Southampton General Hospital and provide comments on emerging recommendation by 8 March. (Copy of the report circulated with the agenda and appended to the signed minutes)

The following corrections were made to paragraph 6 of the report so it should read:

- The hospital has up to a total of **7,500** staff;
- In the region of **600,000** patients are seen at the hospital each year

The Panel heard presentations and asked questions of the following speakers:

Harry Dymond, SLINK

The Panel noted that:

- that transport to the Southampton General Hospital was often raised at SLINK meetings, particularly for people living to the east of the City and there was confusion over changes to bus services.
- in a recent survey carried out by SLINK transport to health services was reported to be an issue;
- SLINK had detailed their concerns in the report circulated as part of the agenda papers;
- taxi's are an expensive form of transport and those with children find it difficult to get to the hospital using public transport;
- the bus network was fragmented, with different operators, bus routes keep changing and were confusing for users.
- that cost had not been raised as an issue in relation to public transport to the hospital.

Anne Meader, Carers Together (see paper appended to minutes)

The Panel noted that:

- the main issues raised were lack of accessible public transport to the hospital, lack of direct bus routes which required users to change buses a number of times to get to the hospital, timing and scheduling difficult and there was a lack of directions from the motorway to the hospital;
- a planning and customer care survey should be carried out regarding public transport;
- a bus service was provided for hospital staff from Thornhill to the hospital - could there be a public bus service?;
- people could travel long distances to the hospital. Better links were required from the train station, ferry and wider region, possibly a park and ride option for patients and carers;
- co-ordinated care should be centred on the individual, taking into account their requirements.

The Panel discussed the Patient Transport Services and whether people were aware of them. It appeared that information was not readily available and often patients were not made aware of the service. It was acknowledged that when people were unwell it was more difficult to be proactive to find out about options available for transport. GP's often refer people for appointments at the hospital, but it was not clear whether information was given out regarding options for transport.

Tracy Eldridge, Member of the Public

Tracy Eldridge, Member of the Public was present and with the consent of the Chair addressed the Panel regarding her observations at the hospital and long waiting times for a patient waiting for the patient transport service.

Michael Woodward, Joint Staff Side Chair / Unite UHS on behalf of Unite and Unison

The Panel noted that:

- union staff felt that bus services were unreliable and confusing;
- better information was required regarding bus routes and location of bus stops. Staff who use buses may take multiple buses to travel to work ("bus jumping"), which could be expensive and timing consuming;
- when the bus routes and numbers changed no consultation took place and no information had been available at bus stops and the information about the old buses routes was still advertised.

David Smith – Consultant Anaesthetist and Maria Johnston – Radiographer – Staff Reps UHS

David Smith and Maria Johnston reported they were representatives of staff and they were members of transport strategy and steering groups.

It was noted that:

- there were 10,125 staff contracts and 3,500 parking permits issued to staff;
- the 2020 vision for the hospital was to extend staff working hours until 8 pm in order to offer a longer service for outpatients;

- the main issues raised by hospital staff in relation to travel was the fact that buses services cease at 6 pm and that it was not easy to move about the City - buses travel into the City Centre and out again and therefore more than one bus might need to be used; it is also confusing to know which bus stop you need to use;
- lighting around the hospital was felt to be poor, particularly at bus stops and was a safety issue. Only the Unilink bus enters Southampton General Hospital which at times of the day could cause problems with movement of vehicles;
- the number of staff travelling to work by bike had increased. Safety of cyclists was an issue, particularly as there were not many cycle path routes to the hospital. It was not possible to report the number of showers at the meeting. Money had been ringfenced for the development of facilities and that space to provide lockers for those cycling to work was being addressed;
- the cost to staff to use the park and ride facility was less than to park at the hospital.

Anita Beer, Interim Deputy Director of Commercial Development – University Hospital Southampton

It was noted that:

- the Trust had been working to improve transport related issues around the hospital such as hospital parking, encouraging cycling and provision of shower facilities. Consultation had been carried out on permits and a park and ride facility was offered to staff. Research had been carried out regarding staff travel patterns;
- knowledge about patients and visitors travel patterns was limited;
- the Trust were keen to work with partners regarding public transport;
- patient questionnaires: Patients at the hospital were routinely issued questionnaires regarding the treatment received but no questions were asked about transport. Questions about transport had not been a priority because they were a healthcare provider, and need to focus on quality of care, dignity and responding to issues raised in the Frances report. UHS would like to work with others to better understand patient and visitor travel;
- the number of showers provided for cyclists was being increased. It was not possible to provide the number of showers available for staff at the meeting. Cycle theft was an issue, on average one bike was stolen a week.
- the Trust work with the bus companies. Bus companies had talked to staff at the hospital to about changes that were introduced last year. A willingness was expressed by the Trust to work with the bus companies.
- it could be difficult to plan travel times to and from the hospital if travel involved using more than one bus, or more than one method of transport when waiting times and potential delays needed to be factored in order to make sure a patient arrives for an appointment on time;
- the Trust was not responsible for the contract for the Patient Transport service, but accepted there are issues in accessing PTS in a timely manner. Publicity of the service was discussed. GP's were responsible informing patients of the service.

James Smith, Unison Trade Union

James Smith was present and with the consent of the Chair addressed the meeting. Upon hearing rumours that the First Bus service was to potentially remove the bus service after 8 pm a questionnaire had been drawn up regarding bus travel for staff at the hospital. Attempts to contact First Bus had been difficult. Concern was expressed regarding the safety risk for people travelling at night around the hospital.

Ian Taylor, Uni-link Manager and Paul Coyne, Operations Manager – Bluestar and Uni-link

It was noted that:

- Bluestar and Uni-Link were willing to work and engage with the Council and others in relation to bus provision;
- user groups and Steering groups had been established in other parts of Hampshire and the bus groups were invited to attend these meetings and were happy to attend these meetings;
- a bus service would only be provided if there was the demand to make it commercially viable. Discussions took place around public transport and the requirement to be customer focused. Capacity on U6 increasing later this year;
- Southampton University had a very good travel plan and engaged with people using mass media. They have resources and a transport and estates department. Students may be able to help with a survey.

Dervla McKay, General Manager – First South Coast

It was noted that:

- 13 direct services to the hospital. The S1 bus service was currently funded by the Council. The other services were commercial. A range of tickets were available for users;
- it was acknowledged that bus stop locations were not always easy to find, they would consider how to improve;
- customer panels took place in other areas but not in Southampton. The panels had representation from local Councillors, public, local authority transport department and issues such as complaints, fleet changes and disability issues were discussed. It was reported that if a Customer Panel was set up for Southampton they would be happy to attend;
- First South Coast was not linked up to ROMANSE system which supplies up to date bus information. It was anticipated that bus services would link up to ROMANSE in early summer;
- consultation prior to making changes on bus services involves consulting the transport department of the relevant local authority and consulting staff and union representative. The public would not be consulted;
- First South Coast were reviewing the bus services in the light of the budget cut from the Council.

Simon Bell, Public Transport and Operations Manager and Dale Bostock, Active Travel Officer – Southampton City Council

- it was reported that cycling routes were to be reviewed with the intention of promoting cycling, particularly for the less confident cyclist;
- most cycle routes were on road but looking to improve;
- the complaints system was being used to address issues raised by members of the public;
- there was clearly a lack of information as buses do exist for some of the routes raised tonight – ie from the ferry and train station;
- Travel Line was available to provide information;
- it would be useful to have patient and visitor survey data to improve planning.

RESOLVED:

- i) that the Panel requested the further information from speakers at the meeting, detailed below:
 - Anne Meader, Carers Together - details on the main areas of concern;
 - James Smith, Unison Trade Union – details on the questionnaire that had been produced for staff in relation to bus provision;
 - Anita Beer – details of staff showers on site;
 - Dervla McKay, First South Coast – details of the consultation carried out prior to the reduction in bus services in April 2012;
- ii) that the Panel recommended that a Steering Group be established for public transport in Southampton, including providers and users;
- iii) the Panel recommended that survey work be carried out to establish how patients and visitors travel to and from the general hospital and the results used to inform future service planning;
- iii) the Panel recommended that survey work be carried out to establish how patients and visitors travel to and from the general hospital and the results used to inform future service planning;
- iv) the Panel recommended early engagement between the hospital and its staff and public transport providers regarding the proposed extension of working hours for staff at the hospital; and
- v) that the Panel agreed to consider the Patient Transport Service in more detail in at a future meeting in order to better understand how the services are managed, publicised to patients and concerns with the current service. Commissioners and Providers of the service to be invited.