

Presentation to Health Overview and Scrutiny Panel

28 February 2013

This discussion paper has been prepared using the reported experiences of a wide number of people using the hospitals in Southampton over several years.

Patient Surveys

- In 2000 a Patient User Group (PUG) was formed in the Elderly Care Wards. This was extended to Medicine 4 years later. It ceased to meet in 2010 when the Trust became a Foundation Trust
- In 2003 and 2005 - the PUG did two patient and visitor surveys - both reported that car parking and travel to the hospital needed improving. The reports included:
 - Parking - cost, lack of spaces, lack of information for patients and visitors about concessions, which car park to use, etc. Some action on parking was taken as result - but it did not address the wider issues on travel to and from the hospital
 - Some of these were
 - Lack of accessible public transport
 - Lack of direct transport routes to the hospital sites
 - Number of time people had to change buses on the way to and from the hospital
 - Timing and schedules of the buses - how to find the right bus stop and the right bus
 - Directions from the motorway to the hospital
 - Cost of taxis to use as alternatives
 - Need for more disabled parking spaces
 - Distance of the disabled car park from the entrance (and to the wards and appointments in the hospital)
 - Some of these haven't changed e.g. directions from the motorway - but the development of sat navs have helped with this

Car Parking

- In looking at the issues - it is impossible to ignore car parking on site because it is an integral reason why public transport should change and improve.
- Car parking used to be provided free of charge - charges were raised originally to prevent or discourage parking by people, who work elsewhere in Southampton, from

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using the car park and going to work thus preventing parking by people going to the hospital .

- A multi story car park was not built at the front because of objections from neighbours
- Pay car park - OK - some tweaks would improve - but on balance good - and the income enhances hospital services - BUT needs greatly improved communication and information made available for users
 - not enough spaces
 - will always have people who come on site even if they could park elsewhere or use other transport
 - not clear which is nearest car park to appointments on site
 - long distances from car park to wards for older people
 - not clear to patients and relatives about concessions - often pay for a long time before finding out about concessions - not all staff seem to know about it or promote it
 - better customer care would be helpful - the patients and visitors are the clients of the hospital - and a culture change is probably needed.

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In considering the current situation, I have been struck by the number of car parks there are in Southampton (over 50).

They use business marketing and planning as well as customer care to ensure that their customers can access major shopping areas - by car or by public transport.

In this day and age shouldn't we be looking at similar issues for transport to the hospitals?

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Transport - UHS Hospitals

- UHS is a major transport HUB - over 500,000 patients seen on site each year - with consequently high numbers of visitors and relatives.
- If it was a shopping mall - it would be treated as a major business opportunity with potential customer care issues and both business plans and marketing plans would ensure sufficient public transport and car parking to encourage shoppers.
- It is my understanding that currently 2 public transport service routes go to the hospital - and for a city the size of Southampton that feels inadequate

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- I understand there is a bus service from Thornhill to UHS for staff to get to work - it has a fixed low journey cost - is it publicised and available for patients and visitors?
- Is the transport accessible? Is it user friendly?
- Could the idea not be extended to other areas by judicious changes to timetables?
- It could be helpful to look at
 - **Distances from different parts of Southampton to the hospital** - change of buses and time taken
 - **Distances from the train station** e.g. Bognor lady in 80s - two buses in Soton - train - two buses the other end
 - **Distances from IOW** - ferry - what bus to the hospital?
 - **Distances from places like Jersey - Southampton Airport, Eastleigh Parkway**
 - Routes from these points to the hospitals could include other current stops but add in the additional destinations to and from the hospitals
 - I understand there is one bus from the ferry to the hospital for people coming for treatment for cancer - if you miss the return journey - it means a taxi - why not a regular service route? It needs to be well advertised and have a number of stops for others to use it.
 - There is a regular free bus from the railway station - goes to West Quay, Town Quay - Red Funnel and other commercial interests pay for it

Why can we not arrange something similar to the hospital, even if passengers are charged, from station and IOW ferries?

- Why not a single bus journey from different parts of the City to the hospitals?
- Why not a bus from railway station to hospital?
- Why not a bus from IOW Ferries to hospital?
- Why not a bus from Eastleigh - airport and train station
- Why not a minibus system running regularly from different parts of the City to the Hospitals, and between the hospitals?
- What about better use of voluntary transport?
- What about better communication and information that is available and understood by patient and carers and the general public.
- Good publicity and easily understood journey planning is essential

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Better still - Park and Ride

- There are approximately 50 car parks in Southampton - but where are the Park and Ride facilities? They are made available for major events such as football - what about visiting hospital patients and outpatient appointments?

With the numbers indicated earlier - there is good commercial reason for providing Park and Ride as well as a good customer care reason

Regional Issues

- Signposting from motorway - still abysmal
- As regional centre - shouldn't we be looking at wider transport issues as well as improving the current situation?

The new in-words are

- **Coproduction** - which effectively means including the people most affected by your project, service or business in planning, implementing and monitoring your service.

This could also be known as customer care - and be looking at affordable, accessible, available and quality transport facilities which match customer needs.

That is providing what is needed rather than expecting everyone to fit in with what is provided

It should include staff e.g. transport between hospitals for staff is available also Thornhill bus.

But what about patients and visitors - are they included in the planning and implementation? Are they consulted on what is needed?

- **Person centred coordinated care** - not just health and social care but looking at the holistic needs of clients/patients/visitors which should cover the needs of the person to access services - and this includes realistic and affordable, accessible transport available to meet appointment and visiting times. Or adjusting visitor times to meet available transport? Working together to get the best outcome
- **Please see National Voices and HealthWatch Communities**

Is it beyond the realms of possibility that we consider customer care, coproduction and person centred coordinated care to plan and provide effective transport and services to meet customer care needs at the hospitals?

It could improve levels of attendance and reduce costs of overheads and missed appointments.

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Perhaps we could use the new Better Bus Area initiative (published in February 2013) to work in partnership to get a better service for those with health needs?

Good basic services could be enhanced by listening to customers and potential customers and adjusting accordingly.

Private service provision of any kind offer quality services, adjust and respond to customer feedback and support customer need. Why not NHS services?

Whatever we do - please think outside the traditional answers and let's be innovative and inclusive for the benefit of service users and carers.