

## **Response to the Accessible Transport Strategy Action Plan 2007-09**

**December 2007**

This submission represents a common viewpoint from the Eastern Area Transport Forum. This Forum consists of key transport agencies in the area, and was established to lead and monitor actions on transport in the *Healthy Ageing:InterAction* plan launched by Belfast Healthy Cities in May 2006. The Forum is currently widening its remit to promoting older people's transport issues and needs more generally in the eastern area.

The response has been collated by Belfast Healthy Cities on behalf of the Forum.

We welcome the opportunity to comment on the *Accessible Transport Strategy Action Plan 2007-09*.

### **General comments**

We are pleased that the *Action Plan* is based on a review of the first action plan, as outlined in the strategy. It is also very helpful to include an overview of the review and progress of the first action plan to date, as this helps assess the starting point for this *Action Plan*.

We believe that the strategic objectives continue to address the key transport issues for older people and people with disabilities. We also believe that the strategy has made a notable contribution towards achieving the vision set out in the *Regional Transport Strategy* and *Regional Development Strategy*.

However, we note that the review measures success in terms of whether or not an action has been completed or is on track to meet the timescale target. While this is clearly an important aspect of success, it would be useful to also provide further evidence, such as changes in older people's travel patterns, their satisfaction with transport services, service providers' views etc. We note in particular that the review of the concessionary fare scheme was carried out without consulting current or potential users, or collating any evidence from user groups. This can be considered a significant shortcoming, as it precluded an understanding of how the scheme has impacted on people's daily lives and opportunities for social inclusion, or what the remaining barriers might be. We are, however, pleased to see that the draft Programme for Government includes a commitment to extend the scheme to everyone aged 60 and over.

Similarly, it would be helpful to include a rationale for why the highlighted achievements were the most notable. Although only limited change can be expected over such a short term, this would help build a picture of how the strategy has in practice impacted on transport services for older people and people with disabilities.

We would welcome a more intersectoral approach to delivering the strategy and *Action Plan*, as we believe transport is interrelated with several other key services, such as health and social care, community development and community safety. Whilst it is acknowledged that lmtac takes a partnership approach and an ongoing advisory role, we believe the *Action Plan* should have closer links for example to the DHSSPS strategy for health and social care transport, the health improvement plans within *Investing for Health* and the action plans of Community Safety Partnerships within District Councils. This would help place transport in its wider context, and also help deliver the strategic objectives in the most effective and efficient way.

In relation to the previous point, members of the Transport Forum have raised concerns that DRD dissuade community transport providers from allowing clients to use their services for hospital appointments. In our view, this counteracts the aim of the strategy, particularly as accessing healthcare services is a key need among more vulnerable older people. Access to transport in general is a key factor affecting the health and wellbeing of older people, and we believe the strategy and action plans should serve to improve this. In short, health is not the responsibility of DHSSPS alone, but all Departments and public agencies have a part to play. The public health strategy *Investing for Health* is a vehicle for facilitating such cross departmental collaboration, and also provides a way of seeking support with costs from other Departments.

More generally, we note that accessing hospitals in Belfast using public transport is not always straightforward, especially if the patient arrives in Belfast by train or bus. There are no seamless links from the stations in Belfast to the regional specialist hospitals, which is likely to both discourage people from using public transport and complicate journeys for those doing so. We believe the Accessible Transport Strategy should be utilised as a vehicle for addressing this barrier.

### **Comments on the *Action Plan***

We believe that the proposed focus on training and information over the period 2007-09 is appropriate, and will help tackle significant barriers to utilising public transport. However, we would stress that it is essential to maintain momentum on other areas of action, notably the provision of a supportive built environment, which constitutes another major barrier. We are pleased that this is recognised in the action plan, although we would welcome a wider range of action in this regard. There might be merit in exploring links with *Walking Northern Ireland – An Action Plan* and also the *Belfast Metropolitan Transport Plan* and *Sub Regional Transport Plan*, which both include action in relation to improving the pedestrian environment across Northern Ireland. Generally, we believe it is important that the strategy retains the link with the Regional Transport Strategy, to ensure that accessibility for older people and people with disabilities is central to all transport policy. Where actions relate directly to another strategy, this should be highlighted to help users make the linkages as well.

We note that many actions also are carried forward from the first action plan, and that a significant number of actions are due for completion by March 2008. While we understand that training and information will be the focus of action over the remaining action plan period, it would be helpful to get an indication of how these actions will be monitored and if appropriate developed further. Indeed, we would welcome a more detailed outline of the proposed approach to monitoring and evaluation, as many of the actions due for completion in the next few months aim to influence other actors and agencies and as such can only be considered successful when there is evidence of changes in policy and practice.

In terms of actions, we believe that further action may be required in providing support to older people and people with disabilities in gaining confidence to use public transport. An action within the *Healthy Ageing: InterAction* plan was to pilot a buddying scheme for older people, with funding from DRD. The pilot contract was awarded to Voluntary Service Belfast, which has worked in Ards and north and west Belfast, and recently secured additional funding until March 2008, with an extension to Dunmurry in Lisburn. This pilot has recently been evaluated, and we believe that learning from it should be used to further develop support services. We would also refer you to the evaluation report and an additional letter from the transport forum to the Mobility and Inclusion Unit, dated 13 December 2007.

We also note that the actions focus almost exclusively on public transport. However, there is significant evidence that older people and people with disabilities largely rely on private transport, and the number of older people who drive is increasing. In light of this, we believe it is essential that support services are provided to allow those older people and people with disabilities who choose to drive, to do so safely and with confidence. We would like to note that in autumn 2007, Belfast Healthy Cities prepared a report on support services for older drivers, on behalf of the Transport Forum. This report provides an overview of existing services elsewhere in the UK alongside academic research evidence on the role and effectiveness of such services, and it has been submitted to both DRD and DoE for consideration. A summary of the report is enclosed with this response, for information.

Overall, we are pleased to see a wide range of proposed action, but would welcome a clear and easy to follow outline of how priorities and actions have been agreed and arrived at. This would significantly assist end users of the action plan in understanding it and supporting its implementation.

Finally, we note that we support the response submitted by lmtac.