

**SCRUTINY PANEL REVIEW PANEL 2
'TRANSPORT'**

MINUTES

Tuesday 11 February 2014

PRESENT: Councillors: Swaran Padda (Chair), Nigel Bakhai (Substituting for Gary Malcolm), Tejinder Singh Dhama, Susan Emmet (Vice-Chair), Mohinder Midha, Ian Potts, Philip Taylor, Lauren Wall and Ray Wall

Co-Optees:

John Beeston - Ealing Passenger Transport Users Group.
Malcolm Claridge - London United Busways.
Colin Mann - Transport for London.

Also Present:

Robert Blitz - Network Planning Manager, Transport for London.
Keith Fraser - Head of Scrutiny and Committees, LBE.
John Gashion - Ealing Passenger Transport Users Group.
Dwight McKenzie - Scrutiny Review Officer, LBE.
Daniel Nichols - Transport Planner, Transport for London.
Nick O'Donnell - Assistant Director of Strategic Transport, LBE.
Andrew Pike - Head of Communications, Ealing CCG
Lee Teasdale - Democratic Services Officer, LBE.

1. Apologies for Absence
(Agenda Item 1)

Apologies for absence were given for Councillor Brooks.

2. Urgent Matters
(Agenda Item 2)

There were none.

3. Matters to be considered in Private
(Agenda Item 3)

There were none.

4. Declarations of Interest
(Agenda Item 4)

Councillor Swaran Padda and co-optee Malcolm Claridge both declared a general personal interest, by virtue of their current employment with local bus companies.

5. Minutes (03.12.13)
(Agenda Item 5)

Councillor Dhama stated that his apologies for the previous meeting had not been noted.

Colin Mann noted that the attendance list on the Minutes appeared to reflect the attendance from the October meeting and would need amending.

Resolved: That following the above amendments, the Minutes of the previous meeting of the Panel held on 3 December 2013 be agreed as a true and correct record.

6. Matters Arising
(Agenda Item 6)

There were none.

7. Considering Access to Healthcare Services – Bus Planning
(Agenda Item 7)

Robert Blitz, Network Planning Manager, and Daniel Nichols, Transport Planner, both of Transport for London (TfL) attended the Panel and gave a presentation which detailed future bus network plans to ensure adequate access to healthcare services for the borough's residents.

The NHS 'Shaping a Healthier Future' (SaHF) initiative would significantly impact on hospital service provision throughout North West London, and as a consequence, provision of an appropriate level of public transport access would be of critical importance.

TfL and the NHS had a responsibility to ensure that there was adequate bus service provision to hospitals, adapted where necessary to accommodate usage demand owing to specific NHS services only being available at or having been transferred to, particular hospitals. The overall objective being that those who needed health care would not be inconvenienced or have their health problems compounded by stressful and long journeys.

It was advised that proposed changes were analysed to estimate the benefits (or disbenefits) to passengers in terms of waiting and travel times. This took into account knowledge of the way demand varies, in time and in location. These benefits were then set against the cost of provision, in a social benefit and cost framework. The aim was to secure the best overall value within available funding.

Some proposals increased benefits but also increased net costs. These would be tested by calculating the ratio of benefits to net costs. Proposals which did not attain the necessary threshold would not normally be taken any further. Those which reached the threshold could then be considered for introduction if funding was available. The current threshold for spending proposals was set at 2:1.

Typically, the number of new passengers required for a new TfL service proposal to meet the threshold was in the many hundreds per weekday. Using the provided data from SaHF for patients displaced from Central Middlesex and Ealing Hospitals, TfL had undertaken an assessment of the figures provided by the NHS to assess a requested new TfL service to West Middlesex Hospital.

The data provided within the SaHF's travel analysis had shown that a number of patients displaced from Central Middlesex and Ealing Hospital reconfigurations would travel to West Middlesex Hospital. The travel analysis had shown that an estimated 2,260 would travel from Central Middlesex Hospital and 41,280 would travel from Ealing Hospital to West Middlesex Hospital annually. A total of 43,540 patients per year or approximately 175 per weekday were estimated, which would equate to 350 daily trips assuming that journeys were 2-ways.

A number of requests had been received for a new direct bus link between Ealing and West Middlesex, namely, for an extension of route E2 or E8 which currently terminated in Brentford. Both routes were therefore assessed for extension to West Middlesex Hospital.

It was found that extending either E2 or E8's routes whilst leaving frequency unchanged would require three additional vehicles per route which would have added around £550,000 to £700,000 per annum to the cost of running each route. For one of the extensions to meet TfL's current threshold for implementation it would have required at least 1,250 additional trips per weekday, considerably more than the previous analysis had predicted.

It was advised that TfL did not look at the routes in isolation, and it was noted that many patients living near to railway stations on the Great Western mainline in Ealing who had a choice of hospital, may instead opt to travel to St Mary's Hospital located next to Paddington Station, which could be accessed from Ealing Broadway Station in around 8-10 minutes. It was also noted that the frequency at many stations in Ealing would increase once Crossrail services began in 2019.

Andrew Pike, the Head of Communications for the Ealing Clinical Commissioning Group (ECCG) then briefly updated the Panel on the work they were carrying out to strengthen patient transport in relation to primary and community care and summarised the SaHF Travel Advisory Group (TAG) work plan for 2014.

As part of the ECCG 'Out of Hospital Strategy' (OoHS), it was intended that a significant volume of activity would be shifted from hospital-based care to a range of additional settings in primary and community care, and patients' homes.

Many of the additional settings would be closer to patients' homes, which would lessen reliance on transport services to reach appointments with their local clinicians. Many patients though, had reported back to ECCG that they would face barriers to both community and primary care settings because of the lack of transport for people with mobility or other health problems. Therefore, ECCG had recognised that there may be a greater need in the borough for community-based transport as out of hospital activity increases.

It was advised that the TAG's remit included; identifying and mitigating travel and access issues during implementation of SaHF, advising on the management of the travel implications/opportunities and bringing together stakeholders to support and improve the experience of travel to health services.

The current priorities set out by the TAG included:

- Supporting the outline business case assurance process for major and local hospitals in relation to travel.
- Supporting the implementation of changes at Central Middlesex Hospital A&E and Hammersmith Hospital emergency department.
- Carrying out an analysis of patient travel patterns leading to recommendations for any changes to public and patient transport.

The Chair thanked the TfL and ECCG representatives for their reports, and advised that he would initially invite questions from the Panel Members.

Councillor Ray Wall considered that the approach being taken by TfL was the 'wrong way round' and that people would end up having to make more swaps on transport, that it appeared that nothing was being given to Ealing to help it cope, and that trains would not be able to take the extra 'strain' on the network.

Mr Blitz assured the Panel Members that the different types of trips that would be taken, and the changes that were being implemented would be monitored closely. He also stated that the estimated figures for extra strain on the network were far too low to be considered financially viable.

Councillor Sue Emmet expressed concern that the northern areas of the borough such as Northolt and Greenford did not appear to have received consideration within the plans, and that there was far too much of a central Ealing focus.

It was advised that the research was on-going, and that all areas of the borough would receive equal focus, what had been brought before the Panel was purely a set of early indicators regarding one of the key routes. Further accurate figures would be required from the NHS before a true final picture could begin to emerge.

Co-Optee Mr Beeston indicated that from some parts of the borough it would take in the region of two hours to get to West Middlesex hospital on buses. He felt that TfL were not listening to the concerns of local people.

Mr Blitz stated that TfL had been working closely with Ealing Council, and had been feeding back on comments from the public as part of this process.

The Chair then invited members of the public in attendance at the meeting to raise their concerns and ask questions regarding the report.

A representative of the West Ealing Centre Neighbourhood Forum advised that a letter had been distributed to TfL and the Council in 2013 to which they had never received a reply. He considered this indicative of the lack of communication between the public and the transport representatives acting in their interest. He felt that the 'high-level analysis' that had taken place was flawed and lacking in solid facts. It was contended that the issues could only be overcome with a focus on full public engagement.

Mr Blitz advised that he had never had sight of the letter referenced (copies of which were handed to those in attendance, with a copy on file), but would arrange for a

response to be drafted. He reiterated that TfL monitored rising demand levels closely and consulted with the public on this.

Nick O'Donnell, Assistant Director of Strategic Transport, also responded to the comments. He advised that he previously had sight of the letter but as it was only copied to him and contained queries that needed to be answered by TfL, he had forwarded it onto TfL requesting that they respond. He stated that the Council had been working closely with communities on a number of projects in the borough, and that he had written a paper for Cabinet only a few years ago that covered all local views and requests received for bus service changes in the Borough, which had been produced in close liaison with the Ealing Passenger Transport Users Group (EPTUG).

Councillor Gulaid was observing the meeting in his capacity as Chair of the Health and Adult Social Services Committee. He expressed concern that changes directly related to the SaHF proposals were not being given due consideration.

A member of the public queried how the figure of 175 extra trips per weekday had been calculated by TfL. It was explained that the figures had been acquired from research previously undertaken by the TAG.

Discussion then took place amongst those present regarding which local bus routes had the potential for expansion or diversion to allow for relevant hospitals to be included in their routes. Routes particularly highlighted include the 235, E2 and E8. It was explained that all of these potential diversions would be considered and full efforts would be made into looking at how to make them work, but again, it would require full research in order to ensure that they met the required thresholds.

Discussion also took place regarding the provision of a shuttle bus service for staff who would be affected by the SaHF proposals. A similar scheme had been inaugurated in Barnet, where a free shuttle bus service was provided between Barnet and Chase Farm Hospitals NHS Trusts, and was available to patients, staff and visitors during Monday to Friday daytimes.

There was disagreement between those present as to the effectiveness of offering a shuttle service, whilst some felt that such a service should be given consideration, others felt that the extra burden upon the taxpayer would not be welcomed. It was also stated that should further cuts be required, a shuttle service would likely be 'one of the first services to be cut' and therefore could not be seen as a long-term solution.

Co-optee Malcolm Claridge noted that Sky and the University of West London ran successful shuttle services and it would be 'missing a trick' to not look at how they ran their services.

Councillor Taylor expressed concerns regarding how much feedback stakeholders could provide going forward with the process. Nick O'Donnell advised that there was on-going conversation with all Ward Forums, and the public were provided with multiple ways to correspond and engage with the process.

Councillor Bakhai considered that there needed to be no less than direct routes from within the borough to all the major hospitals serving the borough. Nick O'Donnell

stated that recommendations relating to specific services would not be beneficial as without the data available, the recommendations would essentially be meaningless.

Karen Robinson, representing Age UK Ealing then spoke to the Panel. She stated that voluntary sector groups like themselves had been 'left out' on a lot of key engagement work, she considered this to be a misjudgement as they could help in engaging a lot of 'hard to reach' members of the community such as the elderly and the long-term ill.

Councillor Ray Wall stated that he would be more comfortable with TfL progressing with an in-house analysis rather than depending on third-party figures. He also wondered whether other bus services could be reduced to off-set the extra costs that would be involved in extending the previously mentioned routes.

Andrew Pike advised that the TAG would be instigating a comprehensive patient and user survey within the following six weeks, which would aid in providing more clarity and accuracy on the levels of users potentially affected. The survey would begin at Central and West Middlesex Hospitals and would broach a lot of the concerns raised at the meeting.

There were concerns about how accurate a picture the survey could provide over the few months it would be taking place. Councillor Taylor considered that an update at the next meeting of the Panel by the TAG explaining exactly what areas the survey would be covering and the hoped for outcomes would be helpful.

Councillor Ray Wall stated that a recommendation indicating that the Panel feels that no hospital services should be closed or moved before the transport situation has been fully resolved should be considered.

Councillor Lauren Wall felt that even once indicative data was in place, the service would still be a long way from what would even be considered adequate, and she considered that the Panel should acknowledge their feelings on the matter.

Councillor Ray Wall noted that the Scrutiny Review Panel was running out of time with only one more meeting scheduled in the calendar year, the scope of the exercise was too far ranging to be sufficiently concluded, he expressed concern about how the work could be further progressed. The Head of Scrutiny and Committees stated that Councillors could recommend it for inclusion on the work programme in 2014/2015. Nick O'Donnell stated that in due course a Cabinet report could be produced.

The Chair thanked all present for their contributions and advised of the initial recommendations coming out of the discussion.

Resolved: That

- (i) the report from Transport for London be received;
- (ii) the contributions made by members of the public in attendance at the meeting be acknowledged; and

the following recommendations be considered for inclusion in the final report

- (iii) the Panel recommend that no Accident and Emergency Services be moved from hospitals in North West London or reduced before all transportation provision issues have been resolved;
- (iv) the Panel be minded to express its dissatisfaction to Transport for London and the NHS with regards to the quality, reliability and adequacy of the data used in the Transport for London and NHS modelling for bus service provision to North West London Hospitals;
- (v) the Panel be minded to express to Transport for London that it considers the provision of service to be inadequate to the needs of the borough;
- (vi) the NHS Transport Advisory Group be requested to present a report in due course to the relevant Panel following the outcomes of the 2014/2015 Work Programme, on the outcomes of the survey of qualitative data on patient travel patterns and the specific proposals arising from the results;
- (vii) the CCG be requested to present a report in due course to the relevant Panel following the outcomes of the 2014/2015 Work Programme, on the actions that have been taken by the NHS to ensure adequate transport services to hospitals;
- (viii) Transport for London be requested to consider a bus route from an appropriate location in Ealing to Northwick Park Hospital;
- (ix) Transport for London be requested to reconsider relevant bus services and routes subject to the availability of greater NHS data;
- (x) the possibility of a shuttle service between relevant North West London Hospitals be explored by Transport for London and the NHS;
- (xi) the need for close partnership working be emphasised between the NHS and Transport for London in bus service planning to hospitals;
- (xii) the need for Transport for London and the NHS to engage with third parties such as voluntary organisations and representative groups on identifying transport needs be emphasised;
- (xiii) the Panel's views and recommendations for action be forwarded to the Mayor of London and Transport for London; and
- (xiv) the Overview and Scrutiny Committee be recommended to add 'Transport provision to Hospital's serving the borough' as a topic for consideration as part of the Scrutiny Work Programme for 2014/2015.

8. Panel Work Programme (Agenda Item 8)

The Scrutiny Review Officer provided an update on the Work Programme to the Panel. The update advised that no amendments had been made to the Programme

since the previous meeting, and the next meeting would focus on the Panel's final draft report.

Resolved: That the update on the Panel Work Programme be received.

9. Date of Next Meeting
(Agenda Item 9)

Resolved: That the next meeting of the Panel be agreed as Wednesday 9 April 2014.

Councillor Swaran Padda, Chair.

The meeting ended at 9.15pm.