

Community Transport Association

Introduction to the CTA

The Community Transport Association (CTA) is the national charity that represents and supports providers of community transport (CT) - thousands of local charities and community groups in all parts of the UK that provide transport services which fulfil a social purpose and community benefit.

Our vision is of a world where people can shape and create their own accessible and inclusive transport solutions and our mission is to achieve this through championing accessible and inclusive transport, connecting people and ideas, and by strengthening our members and raising standards.

We do this by contributing to the formation of public policy that affects our sector and their service users and showing how better outcomes are achieved for people and communities when they have access to community transport. We create partnerships with like-minded organisations across all sectors; manage a national programme of quality assured education and training; provide comprehensive advice and guidance to those delivering community transport; and we take every opportunity to champion the vital and indispensable work that our members do.

Community Transport Context

Rural Community Transport Partnerships (RCTPs) provide essential transport services across eleven towns and five council areas in Northern Ireland. These services cater to a diverse mix of urban and rural residents living in small towns, villages, and the countryside, ensuring vital connections are maintained. Each partnership offers fully accessible, demand-responsive transport within its designated area, collectively covering over 54% (7,645 km²) of Northern Ireland's total land area (14,150 km²) and serving 30% (562,342) of the population (1,898,610).¹²

Over 80% of Northern Ireland's landmass is classified as rural, with 36% of the population residing there. Rural areas are experiencing a population growth rate (20%) that significantly outpaces that of urban regions (7%).² However, these communities face unique challenges, including longer commutes. The 2021 Travel Survey for Northern Ireland revealed that rural workers travel over 600 additional miles annually compared to their urban counterparts.³ Additionally, approximately one in four people (24.3%) reported having a long-term health condition or disability. Those with mobility difficulties made significantly fewer annual journeys (519) compared to those without (929), a 44% reduction.⁴

¹ Key Rural Issues, Northern Ireland <https://www.daera-ni.gov.uk/publications/key-rural-issues>

² NISRA Mid-year Population Estimates 2021 <https://data.nisra.gov.uk/>

³ Travel Survey for Northern Ireland technical report 2021 <https://www.infrastructure-ni.gov.uk/publications/travel-survey-northern-ireland-technical-report-2021>

⁴ <https://www.northernireland.gov.uk/news/transport-accessibility-statistics-northern-ireland-report>

Rural pensioners and children are particularly vulnerable to poverty and face significant barriers in accessing public transport. Bus services, which play a critical role in rural connectivity, are increasingly at risk due to declining profitability and reduced subsidies, further compounding social and economic disadvantages in remote areas. According to NISRA's Multiple Deprivation Measure, some rural communities are more than an hour away from Belfast, with limited access to key services via public transport.

Community transport services are instrumental in filling these gaps and addressing the transportation inadequacies of rural areas. In 2023/24, RCTPs facilitated over 204,000 trips through their Dial-a-Lift and Disability Action Transport Scheme (DATS) services alone. These flexible and accessible services are tailored to meet the needs of individuals with mobility limitations and those living in areas without traditional public bus routes.

Northern Ireland's rural communities face challenges such as dispersed populations, insufficient transport options, and limited infrastructure. RCTPs are crucial in addressing these issues, ensuring access to essential services, healthcare, and transportation—particularly for older residents. By bridging accessibility gaps, these partnerships enhance the quality of life and foster community resilience.

While rural communities are an integral part of society, limited transportation options can isolate residents and hinder access to vital services. Community transport initiatives act as lifelines, connecting remote areas to healthcare, social services, and broader economic opportunities. The rural transport network is supported by the Department for Infrastructure's Rural Transport Fund. Additionally, RCTPs collaborate with Disability Action to provide the Disability Action Transport Scheme (DATS), offering tailored transport solutions for individuals with disabilities who face challenges using traditional public transport.

Northern Ireland's ageing population is growing faster than the rest of the UK. The 2021 census revealed a 24% increase in the population aged 65+ since 2011, with 56.8% of this group reporting a long-term health problem or disability. Projections suggest that, within a decade, there will be more people aged 65 and over than children aged 14 and younger. Age NI's 2023 Lived Experience Report emphasizes the vital role of affordable transportation in helping older individuals access essential services. Community transport, including non-emergency patient transport, plays a pivotal role in fostering healthy, age-friendly communities.⁵

There is increasing demand for out-of-area services, particularly from the most vulnerable, who rely on transport to access health and hospital appointments. This is driven by the centralisation and specialisation of elective procedures, day surgeries, and outpatient appointments at regional centres, as well as reduced availability of the Northern Ireland Non-Emergency Ambulance Service. Public transport options, particularly for those with disabilities, are limited due to vehicle design, availability, frequency, and rural route reductions.

⁵ <https://www.nisra.gov.uk/system/files/statistics/census-2021-main-statistics-for-northern-ireland>

Community transport is key to connecting individuals to essential services, promoting health, well-being, and independence. However, this critical sector faces significant challenges due to chronic funding instability. Inadequate and short-term funding hampers transport operators' ability to meet rising demand and to plan, develop, and improve services. To ensure sustainability and service continuity, government departments must commit to multi-year funding that reflects inflation and the true cost of service delivery. Collaboration between community transport operators, health, and social care trusts will be vital in advocating for long-term financial commitments to meet the growing need within local communities for patient and family access to palliative/ end of life care.

For many, especially older adults and people with disabilities, community transport is often the only means of accessing healthcare, local amenities, and other essential services. However, reductions in public transport routes, particularly in rural areas, along with ongoing funding cuts, have left operators struggling to meet the growing demand. Insufficient public transport service hours, limited resources, and reduced transport availability have exacerbated existing inequalities, isolating vulnerable groups with fewer options for essential travel.

These challenges are particularly pertinent to The Health Committees Review of Access to Palliative Care Services in NI. For rural patients and their families, reaching specialist centres can be a significant challenge. Inadequate transport options, long distances, and the financial burden of travel can delay and indeed deny access to life-saving, life prolonging or palliative care, worsening health disparities in terms of length and quality of life lived within these regions. Rural Community Transport Partnerships are deeply embedded in local communities and serve an essential role in providing accessible and affordable transport services. These partnerships are crucial for enabling access to transport, particularly for rural residents and those with restricted mobility, facilitating access to vital services like healthcare and palliative care. Their integration within communities ensures that even the most remote residents can access the care and support they need, reducing social isolation and increasing independence. Through these services, RCTPs play an instrumental role in ensuring all individuals, regardless of location or mobility, can receive the care they deserve, in so far as this is within their respective existing operational areas.

Are palliative care services equally accessible to all who need them?

No, palliative care services are not equally accessible to everyone, and one of the most overlooked barriers is transportation. For many patients, particularly those in rural areas, reaching appointments can be just as difficult as accessing the care itself. In areas where Rural Community Transport Partnerships are providing transport to patients and families, there has been a noticeable increase in demand for transport related to palliative and end-of-life care, especially from rural regions that are farthest from regional specialist palliative care centres and services. Unfortunately, transportation is often not adequately planned or funded as part of the overall palliative care pathway. It is crucial that transportation needs be addressed from the beginning, integrated into care planning, and funded appropriately. This

ensures that patients and their families can access the care they need without facing additional barriers.

From your experience, where are the gaps in the provision of service?

From the perspective of Rural Community Transport Partnership (RCTP) managers, several critical gaps in the system hinder access to palliative care:

- **Lack of Transport Planning:** Transportation is often not integrated into the overall care planning for palliative patients. Rather than being seen as an essential component of service delivery, it is treated as a supplementary issue. This results in fragmented and unreliable access to vital healthcare services. Travel should be considered a fundamental aspect of palliative care from the outset, not an afterthought.
- **Rural Accessibility:** In regions like Fermanagh and Causeway Coast and Glens, rural communities face substantial barriers to accessing specialist palliative care. Many areas lack adequate public transport infrastructure. For example, patients may need to take multiple bus connections, such as four buses to travel from Roslea to Derry, to reach treatment. Travel in one direction will take a minimum of 4.5 hours. This creates a significant obstacle to timely care, particularly for those with complex medical and mobility needs. For many passengers using Community Transport, the situation is even more challenging, as accessing out-of-area hospital appointments through available public bus routes becomes nearly impossible—especially considering their mobility and health needs.
- **Growing Demand for Transport:** The demand for transport services related to palliative and end-of-life care has increased markedly, particularly from remote rural areas far from regional specialist palliative centres. Passengers anticipate that this trend will continue, particularly as many would prefer care closer to home. When that is not an option, the added burden of travel should be alleviated to reduce stress for both patients and their families.
- **Reliance on Voluntary and Charitable Support:** Many community transport and volunteer services play a crucial role in providing transport for patients and their families. For instance, the Out-of-Area Transport to Hospital and Health Scheme delivered by a number of the RCTPs, funded by The Motability Foundation and other charitable contributions, helps cover the transportation costs for patients. However, these services are largely reliant on donations and charitable support, which are increasingly unreliable.
- **Public and Trust Transportation Issues:** Patients who rely on public or Trust-provided transport often encounter last-minute cancellations, unreliable schedules, and long delays, which add unnecessary stress and discomfort to an already difficult and exhausting process.

- Health and Social Care Trusts and the Hospital Travel Cost Scheme:** Health and Social Care (HSC) Trusts administer the Hospital Travel Cost Scheme, which is funded through their overall budget allocation. This scheme covers the costs of travel for eligible patients, including refunds for travel expenses. However, Community Transport services are not included in the funding allocation for this scheme, despite providing a significant number of health-related trips to hospital and specialist appointments. Further, The Hospital Travel Cost Scheme is one of the most well-kept secrets from patients and their families. This is especially so for vulnerable and less confident patients and families. Some patients and families have reported to RCTP Managers that they have been compelled to take out Credit Union loans to assist with travel costs. This is an additional worry and stress at a time when many patients and their families will already be experiencing heightened anxiety and stress in relation to their financial situation as a result of having to leave work, reduce hours and take time off etc.

These gaps highlight the need for a more integrated, reliable, and sustainable transport solution that is fully considered in palliative care planning to ensure all patients have access to the care they need at the time they need it.

Do you believe barriers exist that prevent equitable access to these services? If yes, please provide examples.

It is important to note and acknowledge that ‘equitable access’ does not equate to ‘equal access’ and thus starting from this position and understanding it is evident that access to palliative support and services differs by place, geography, demography and economy.

Yes, several significant barriers impede equitable access to palliative care, particularly concerning transport:

Financial Barriers: Travel-related costs, such as fuel, taxis, and parking fees, can quickly add up, creating a significant financial strain for patients, particularly those in rural areas. Many cannot afford additional expenses, such as accommodation near treatment centres, further burdening families already grappling with the emotional, financial and physical challenges of serious illness.

Lack of Sustainable Transport Services: Community Transport services, such as those provided by RCTPs, are crucial but often depend on short-term charitable funding. This lack of consistent, long-term funding undermines the ability to plan and deliver services effectively, making it difficult to meet the growing demand for palliative transport.

Volunteer Service Strain: Volunteer transport services are underfunded and overstretched. While they play an essential role, their heavy reliance on donations makes them increasingly unsustainable, particularly as the need for transport to palliative and end-of-life appointments continues to grow.

Rural Disparities: Patients in rural areas are disproportionately affected by the lack of accessible transport options. With infrequent buses and no direct public transport routes such as between Fermanagh and Derry—rural patients and their families face long and

arduous journeys if indeed not impossible journeys. This is particularly taxing for those in or seeking access to palliative care, for whom such travel can be both physically and emotionally draining.

These barriers underscore the urgent need for more reliable, sustainable, and affordable transport solutions to ensure that all patients, regardless of their location, can access the care they require.

What additional services could/should be provided?

To address the transportation challenges faced by patients, several critical services should be prioritised:

- **Integrated Transport Planning:** Transportation needs must be considered and incorporated into palliative care planning from the outset. This ensures that transport services are aligned with the care pathway, preventing patients from having to arrange last-minute travel under stressful circumstances.
- **Sustainable Funding for Community Transport:** Strengthening and expanding Rural Community Transport Partnerships (RCTPs), such as Easilink, Fermanagh Community Transport, and DART, is essential to ensure rural patients have timely access to medical appointments. Long-term, sustainable funding is needed to guarantee these services operate consistently and provide the reliability patients require.
- **Increased Support for Volunteer Services:** Stable, long-term funding should be provided for volunteer-based services like Care for Cancer, enabling them to meet the growing demand for transport. These services are indispensable for many families, but they must be adequately resourced to sustain their operations effectively.
- **Dedicated Medical Transport Services:** Establish dedicated transport services specifically for palliative and end-of-life care patients. These should be professionally managed to ensure safety, comfort, and reliability. Designed to meet the unique needs of palliative care patients, such services should offer flexible scheduling and accommodate specific medical requirements.
- **Flexible Appointment Scheduling:** Greater flexibility in appointment scheduling is crucial, particularly for rural patients who face lengthy and challenging journeys to healthcare facilities. Options such as later appointments or schedules that prioritise travel considerations can significantly ease the strain on patients.
- **Infrastructure Improvements:** Address critical gaps in transport infrastructure by creating direct links between underserved areas, such as

Fermanagh and Derry. Simplifying routes and reducing travel complexity can alleviate the burden of long and convoluted journeys.

These measures are essential to ensure more equitable access to care, improve patient experiences, and provide practical support for individuals navigating palliative and end-of-life care.

Do you think the current funding for palliative care is sufficient? Please outline your reasons.

No, the current funding for palliative care is insufficient. The transportation element, in particular, is underfunded and often neglected in the broader funding structure. Specific issues include:

- **Reliance on Charitable and Short-Term Funding:** Transport services, especially volunteer-based services, depend too heavily on charitable donations and temporary and short-term funding, which makes it difficult to provide consistent, reliable, and professional services.
- **Limited Investment in Rural Transport Infrastructure:** Rural patients, in particular, are left with limited access to transport options, and these services do not receive the funding necessary to meet the current and rising demand.
- **No Comprehensive Funding Strategy:** There is a lack of coordinated funding and long-term planning for the transport needs of palliative care patients. This leaves patients in limbo and often results in disjointed, unreliable service delivery.

Any other comments

Access to transportation is a vital yet often overlooked aspect of the palliative care system. Without reliable, coordinated transport options, patients, particularly in rural areas, are denied equitable access to care compared to their more urban counterparts. It is imperative that transport services be integrated into the healthcare system from the outset, ensuring that patients can reach the services they need without additional barriers or financial strain. The growing demand for palliative and end-of-life care transport, particularly in rural areas, underscores the urgent need for a systemic approach that provides sustainable, professional, and reliable transportation for all patients.