



Devon Access to Services
“Improving access to information, services,
representation and training”



Social Kindness and Community Car Schemes in Devon: 2022-23. Recovery and Organised Chaos.



Devon Access to Services
Tim Lamerton, Project Manager
Claire Stevenson, Project Administrator

July 2024



A project Funded by Devon County Council, hosted by NDVS. Charity No: 1133707 and managed by Devon Access to Services.
All material © NDVS 2024 and please share widely.

Contents

A year in review: Covid, the Recovery and Beyond?	3
A Summary of Activity 2022 - 23	3
Issues faced by Community Car Schemes	8
How complicated can it be to arrange a car journey?	9
Fuel Prices and Cost of Living	10
Numbers of Drivers	11
National Volunteering Trends – In decline since 2013	11
Local (Non-Digital) Motivations of Volunteers	12
The Volunteer Driver Hospital Parking Permit Scheme	12
Pathfinder Project and the Patient Transport and Advice and Service (PTAS)	13
PTAS and Car Schemes - Who is Unsafe to Transport?	14
Cash and the Healthcare Travel Costs Scheme (HTCS)	15
Connecting You. Department for Transport Pilot Project	16
UK Community Renewal Fund - Stronger Together	17
Training Provided by Devon Access to Services via NDVS	18
Mutual Support and cooperation with Health Service Providers	19
Financial Benefits to the NHS	19
Funding applications	19
Partnership Working - Transport - the Forgotten Link	20
Conclusion	21
Appendix 1 Statistics – Activity, income, spending 2022–2023	23
Appendix 2 Financial Saving to the NHS – Detail	25
Appendix 2 Devon Access to Services (DAS)	26
Appendix 3 Methodology	26
Appendix 4 What is a Community Car Scheme?	27
Financial realities of Community Car Schemes (Not for Profit)	27
Appendix 5 Who is a Car Scheme Passenger?	27
Appendix 6 Devon Community Car Forum	28
Appendix 7 – Devon Community Car Forum Members	29
North Devon & Torridge Car Forum	29
Exeter, East and Mid Devon Car Forum	29
Southern Area Car Forum	30
Contact Devon Access to Services	30

A year in review: Covid, the Recovery and Beyond?

Welcome to the review of the Devon Community Car Forums activity April 2022 to March 2023 where we will highlight key achievements, challenges, and concerns of the sector.

The year was challenging as we all navigated our way to a new normal. The day to day running of schemes was still challenging, and the descriptive word that came up several times during the year was 'chaotic'. We started the year hoping drivers would return to meet the increasing demand for journeys to health appointments, and that services would be able to meet the growing need for social activities. And with a great deal of effort, often, they did. Unfortunately, the regional deficit also returned, and funding was harder to find.

A noticeable increase during the year was the time spent by schemes managing cancellations and rebooking of journeys. This was a combination of the NHS moving appointments, often at short notice, and passengers feeling unwell on the day and rebooking another appointment.

There is a growing realisation that as large organisations turn to digital solutions to improve their productivity, workload is transferred to organisations helping people who do not or cannot use digital technology. This may be a relatively small number of people across society but represents many of the users of community car schemes and other voluntary organisations.

Devon Access to Services became increasingly involved as a training provider. We were delighted to be involved in two significant government grant programs involving Community Transport groups across Devon; The Stronger Together Fund managed by Mid Devon Mobility and Connecting You managed by Devon County Council. These successful funds showed an appetite for training that funding can unlock.

This report demonstrates that Community Car Schemes continued to be exemplars of community support as they responded to the needs of vulnerable people in their communities. As a result, people facing increased isolation and deteriorating health made worse by the pandemic, were able to attend vital appointments and, we hope, began to live fuller lives again.

A Summary of Activity 2022 - 23

Devon Access to Services worked with 60 community car schemes (of all shapes and sizes) across Devon during the year.

The statistics and information were provided by the 51 Full Members of the Devon County Car Forum (DCCF) and collected and collated by Devon Access to Services (DAS).

In Devon during 2022-23:

- The Car Schemes told us they provided 115,521 journeys.
 - 88,319 (76%) journeys were to health appointments.
 - 27, 202 (24%) were to social welfare activities.
- 1581 of these were to covid -19 vaccinations.
- 1206 drivers travelled 1,382,925 miles delivering those journeys.

Delivery of their services required considerable resources:

- 133,935 volunteer hours
- 43,078 paid staff hours
- £704,806 cost (overheads additional to mileage expenses) to provide their services

Passengers gave £693,403 towards this cost and schemes generated a further £361,529 by fundraising.

Cancellations, unmet requests, and mileage

- 12,813 previously booked journeys, mostly to health appointments had to be cancelled and/or rearranged, often at very short notice. The schemes spent £78,174 in unrecoverable costs to manage this process, a 48.3% increase from £53,405 for 2021-22.
- 3,034 requests could not be met, a 67% increase from 1,809 for 2021-22

Schemes saved the NHS an estimated £3,604,630 million.

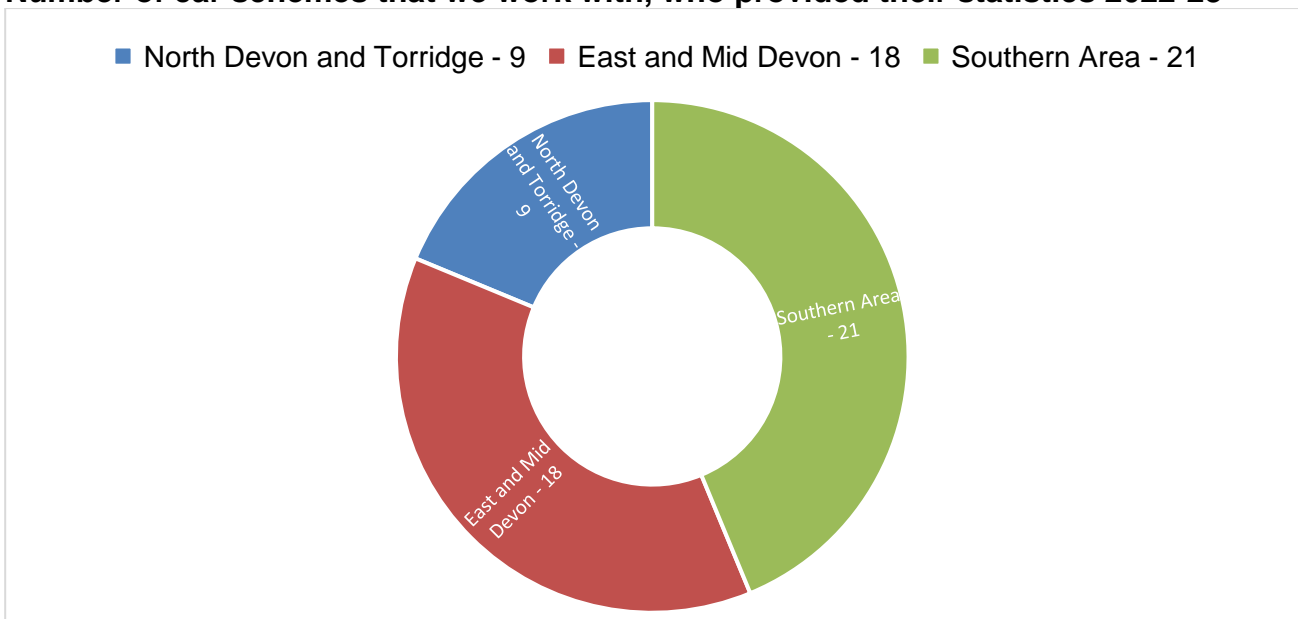
- £3,604,630 million saved from “Did Not Attend” costs by patients not missing appointments.
- £93,950 saved by the Healthcare Travel Costs Scheme (HTCS)
- The NHS provided £17,896 in direct funding. A welcome increase from £4,274 in 2021-22

Devon County Council supported car schemes with their annual grant to the car forum of £35,593 and schemes reported their total support for the sector was £98,198.

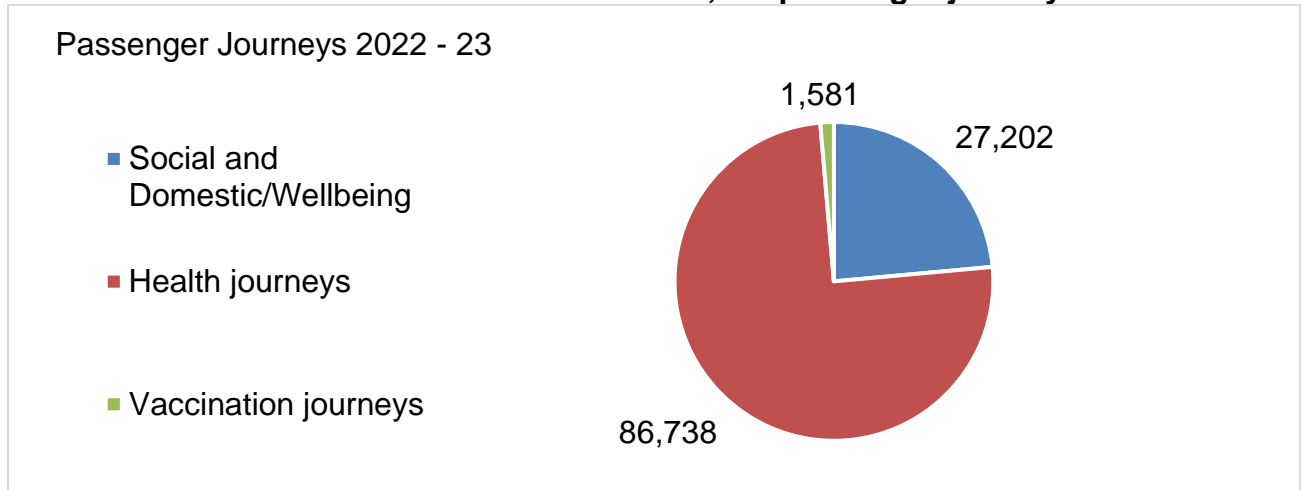
The deficit across Devon was -£130,845, however, although schemes continued to demonstrate resilience to financial pressures, some are becoming worried about their continued financial viability.

If, for example, the NHS funded 76% of the deficit, representing the 88,319 health related journeys the £99,442 raised would help support the sectors resilience across the county.

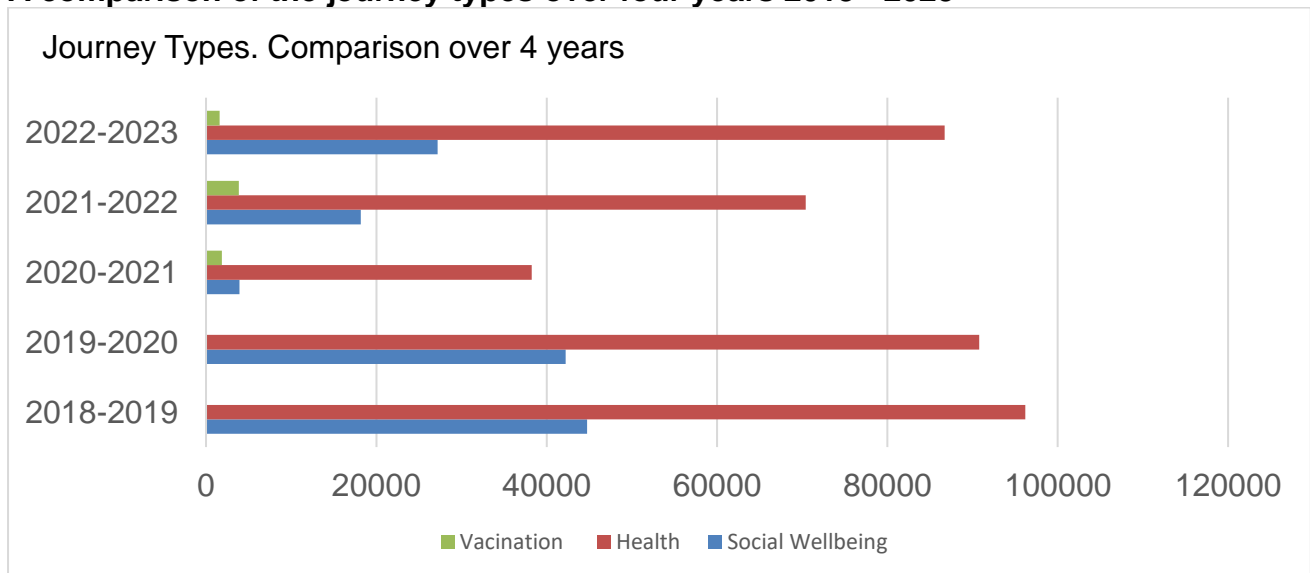
Number of car schemes that we work with, who provided their statistics 2022-23



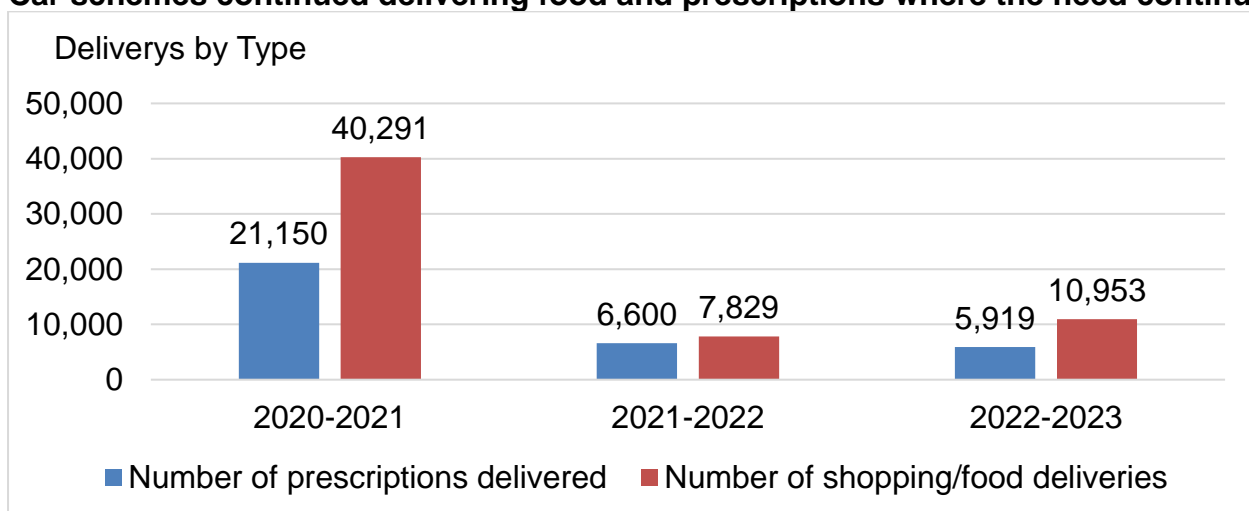
The schemes and their drivers carried out 115,521 passenger journeys in 2022 - 2023



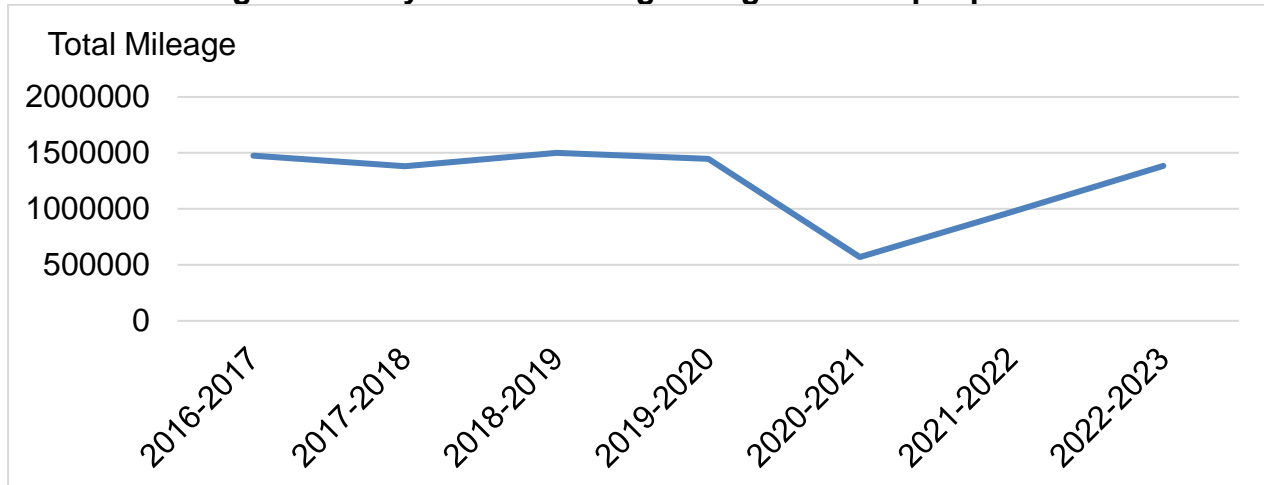
A comparison of the journey types over four years 2018 - 2023



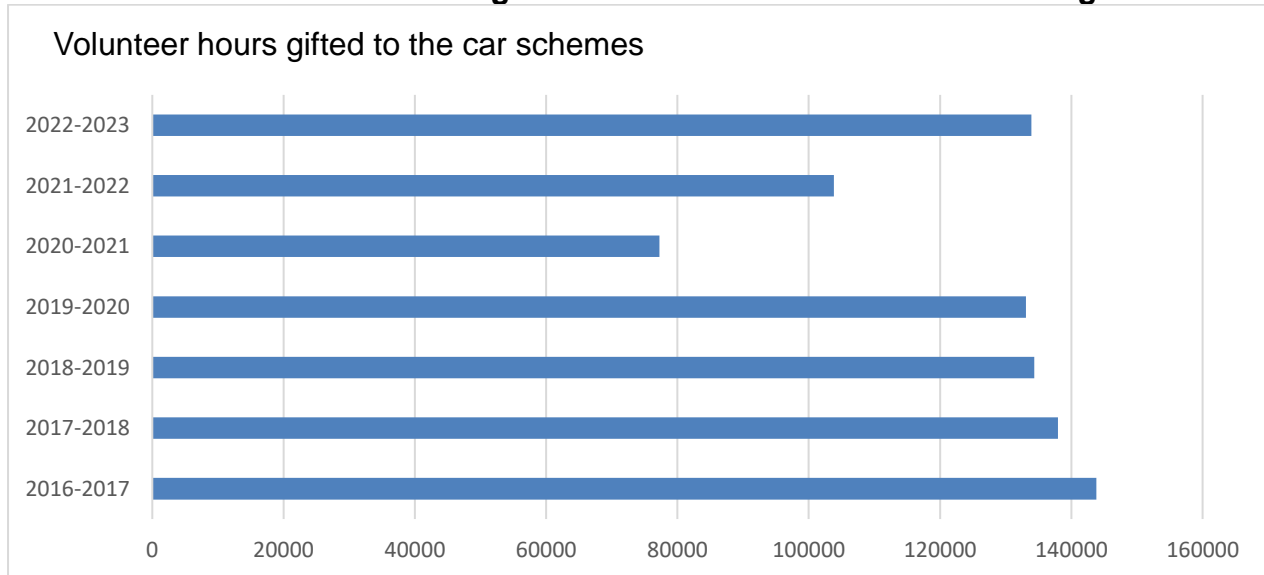
Car schemes continued delivering food and prescriptions where the need continued.



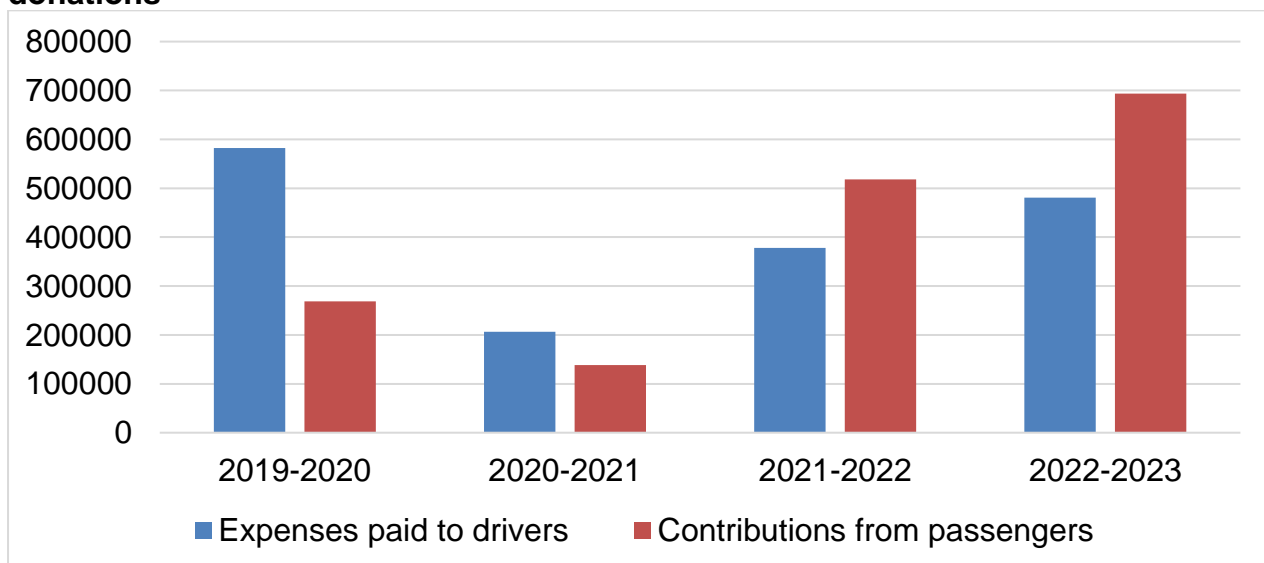
The total mileage driven by volunteers is growing closer to pre pandemic levels



The number of volunteer hours gifted to the schemes is also increasing



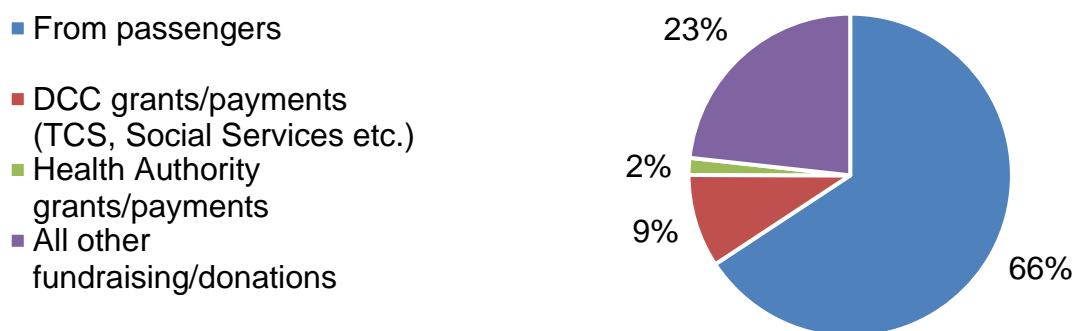
Passengers again showed their appreciation of the services with their generous donations



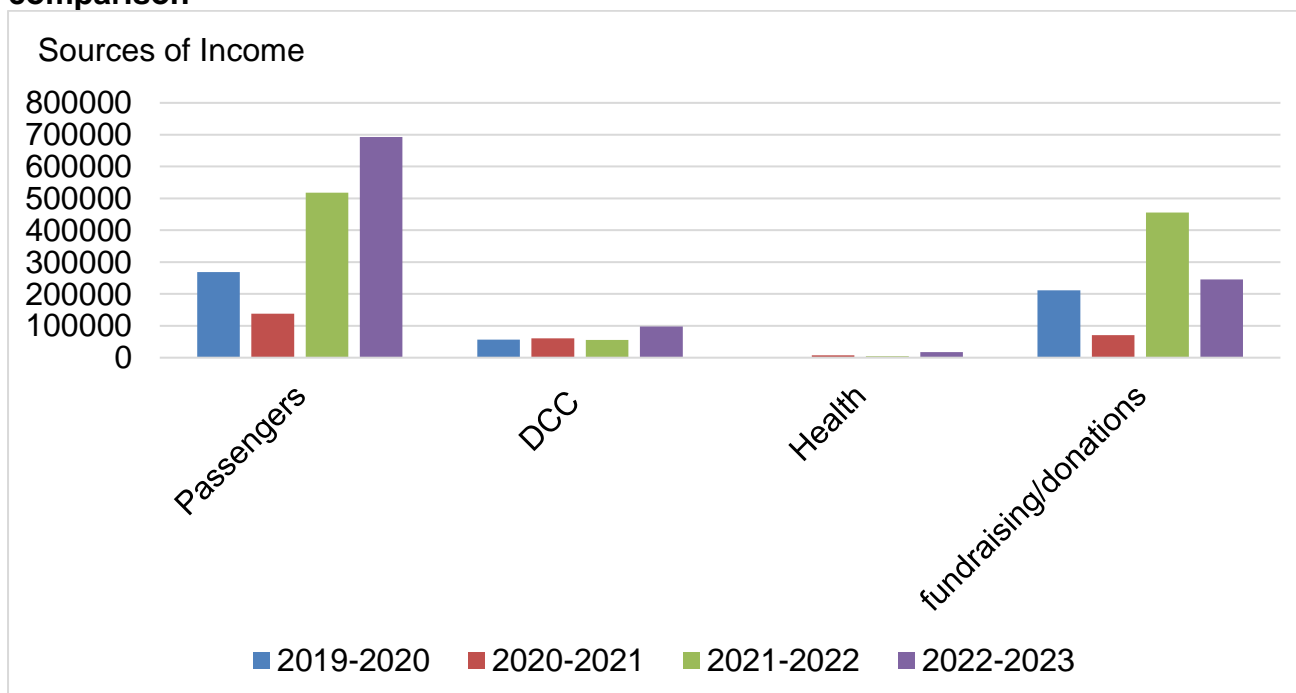
Sources of income 2022 - 23

From passengers	£ 693,403
DCC grants/payments (TCS, Social Services etc.)	£ 98,198
Health Authority grants/payments	£ 17,896
All other fundraising/donations	£ 245,435
Totals	£ 1,054,932

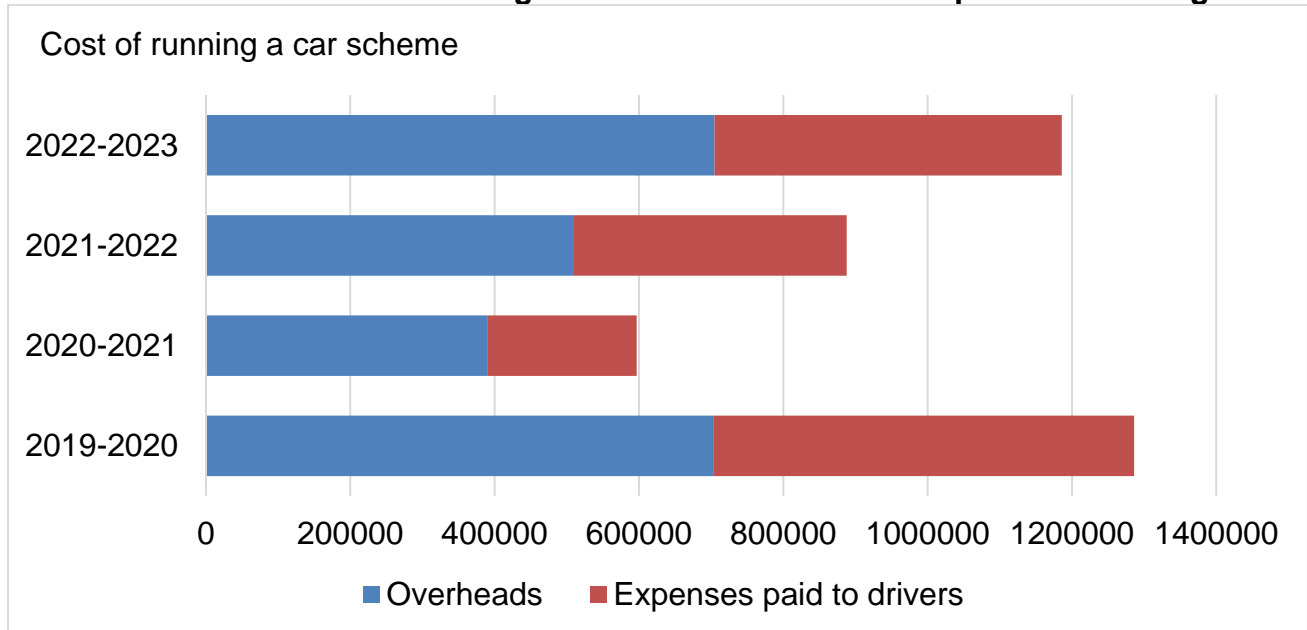
Sources of Income 2022 - 2023 by %



Where the car schemes get their money to cover operational costs. A four year comparison



The costs associated with running a car scheme continued to present challenges



See appendix 1 for more statistics.

Issues faced by Community Car Schemes

Our regular series of Car Forum meetings continued through the year. It is important to remember that with car schemes one size does not fit all and there a wide variation of situations across Devon. However common themes emerge.

- The availability of drivers is only just matching the need for people to go to hospital.
- Volunteers are returning after Covid, but slowly and many have permanently retired.
- Increasing fuel prices and the unchanged mileage rate may be putting off new and returning volunteers.
- Large increase in next day or on the day booking requests to health services and an increase in the number of last-minute cancellations.
- Calls from hospitals to help with patient discharge are increasing.
- Passenger confusion, stress and anxiety is increasing (especially if they have multiple appointments). This takes more coordinator time to work things out.
- Availability of grant funding is declining, and harder to get. However, there were considerable sums available for larger projects promoting return to work and volunteering activity and to the buses.
- Infection control remained in place if the medical or care setting required it. DAS felt it wise to consider the car journey to be part of that setting and schemes and drivers should follow those rules.
- Face masks. Covid numbers were high at the beginning of the year, however the need to wear masks began to decline, for which everyone was very grateful. However, all schemes insisted on masks if the passenger was particularly vulnerable.
- Parking at NHS Hospitals. As the number of appointments grew, finding parking space become more of an issue again. Derriford Hospital has ongoing problems for drivers dropping off and picking up passengers with disabilities from the main entrance. Some drivers struggled to renew their online permits at RD&E.

- There is a growing concern that development of services to improve productivity and reduce costs (digitisation for example) shifts the expense to community groups. They would like some of the savings redistributed to them to help manage the additional workload.

If, for example, the NHS funded 76% of the Devon wide deficit, representing the 88,319 health related journeys, the £99,442 raised would help support the sectors resilience across the county.

How complicated can it be to arrange a car journey?

The following is an example of the efforts involved arranging a journey for a first-time passenger who has never heard of community transport and in this case is also not online.

One person in a time of great stress after a bereavement needed to attend group support. They were not online, live off a bus route, were living in a new location, had very little spare cash and at this time of crises had no idea how to get to the help they desperately needed.

At a **local drop-in session**, the person managed to talk with the **Community Flow Coordinator, One Northern Devon**.

They emailed the **Communities Support and Development Manager One Northern Devon** who sent out a group email asking for help.

The **Community Developer, One Barnstaple**, responded, asked for more information, and forwarded on the reply to us at **Devon Access to Services**.

We recommended a local **Community Car Scheme** who at a recent **North Devon and Torridge Car Forum** meeting had said they had just started covering the village concerned.

Various messages passed between the people directly involved (including identifying a fault with a phone line!), was solved with a key phone call and eventually the person got the regular lift they needed!

This took 15 days of messaging, involved 4 organisations, 2 forums and 7 people including the voluntary driver and their passenger (who as it happened lived in the same street).

This is exactly what Devon Access to Services was set up to achieve and though we take no credit for the other systems being set up, it is great to see partnerships working. We are rarely able to detail how the process worked, but we know these things happen all the time.

I am personally delighted for this person.

Fuel Prices and Cost of Living

Fuel prices began to fall, but to nowhere near 2020 levels and was a continued cause of concern to coordinators. Many volunteer drivers feel it's insufficient to cover the costs of volunteering and coordinators suspect increased costs are putting off new volunteers.

In response many car schemes continued paying drivers the additional 5 pence per passenger mile as allowed by the Inland Revenue (HMRC) approved mileage allowance payments (AMAP).

Comparison of fuel prices over four years

Date	Petrol (pence per litre)	Diesel (pence per litre)
08/02/2023	148.89	169.89
23/03/2022	167.28	179.72
21/04/2021	126.28	129.07
11/06/2020	107.67	112.50

Source <https://www.racfoundation.org/data/uk-pump-prices-over-time>

The reduction in fuel prices was welcomed but lost in other expenses as inflation rose and vehicle insurance renewals increased (21% increase Q2 2022 – Q2 2023)

Source <https://www.abi.org.uk/news/news-articles/2024/1/motor-insurance-premiums-continue-to-rise-as-insurers-battle-costs/>

Vehicle maintenance costs increased by 9.1% over the last 12 months.

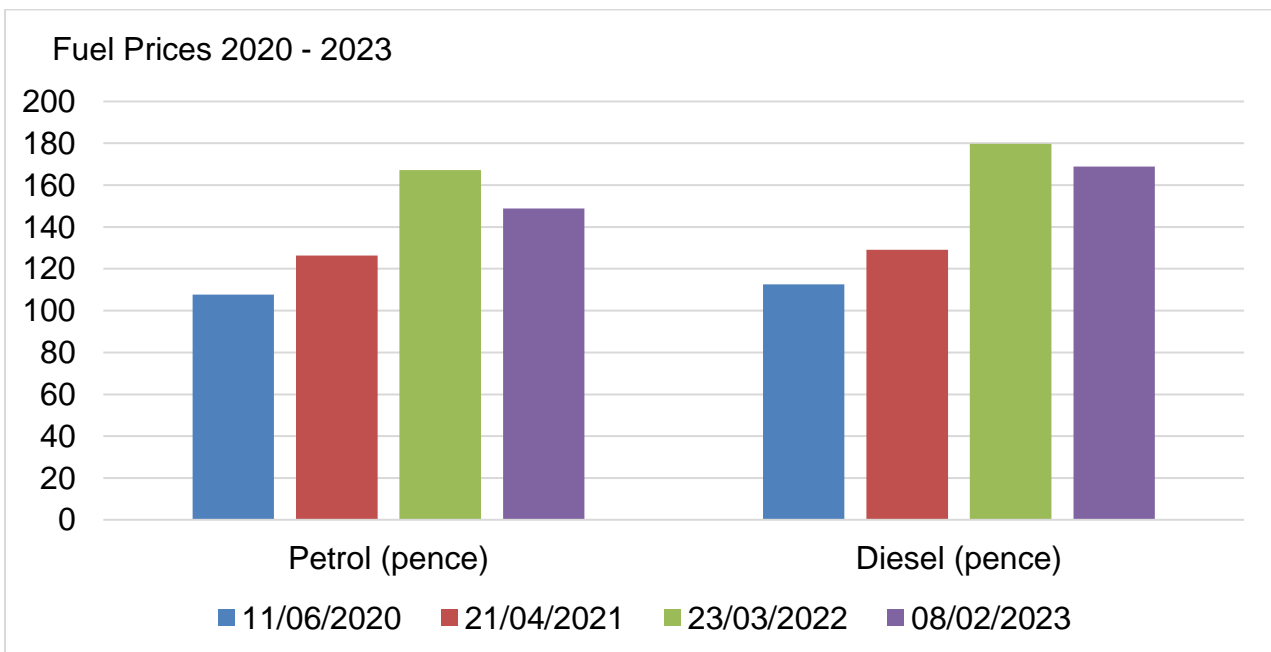
Source Office for National Statistics <https://www.ons.gov.uk/economy/inflationandpriceindices/timeseries/czea/mm23>

The Annual rate of inflation peaked at 11.1% in October 2022 (a 41-year high).

Source House of Commons Library <https://commonslibrary.parliament.uk/cost-of-living-and-inflation/>

The Community Transport Association began an ongoing campaign to increase the Inland Revenue's Approved Mileage Allowance Payments (AMAP) to compensate for this.

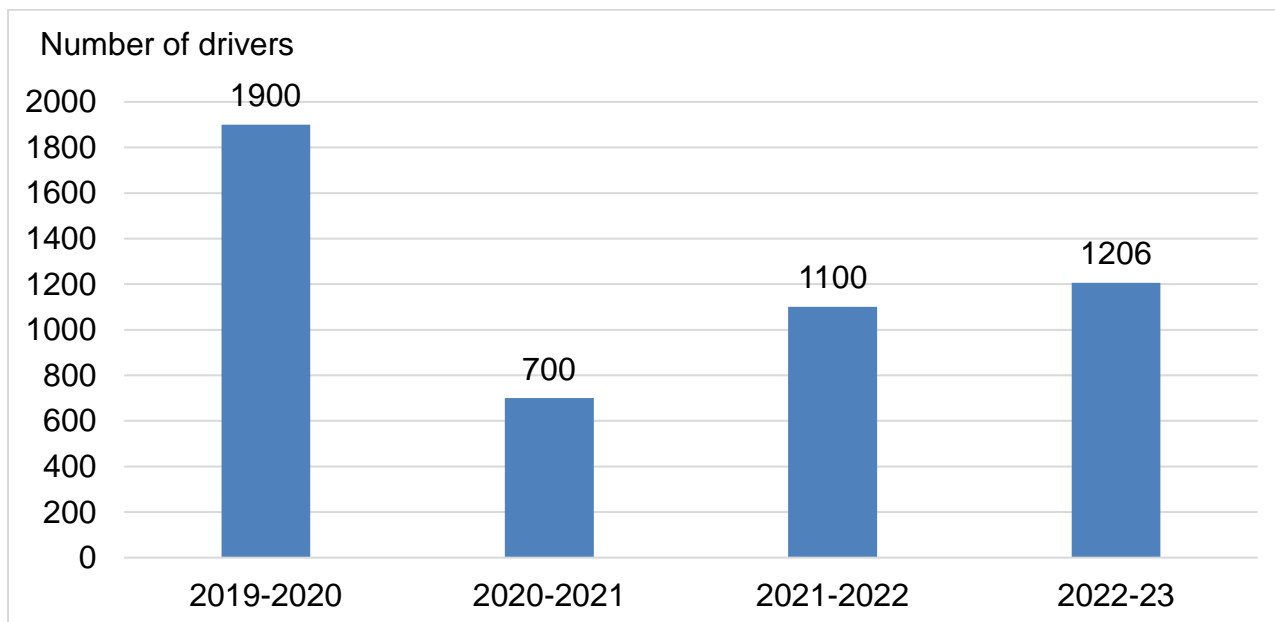
<https://ctauk.org/cta-statement-of-amap-rates-and-volunteers/>



Source <https://www.racfoundation.org/data/uk-pump-prices-over-time>

Numbers of Drivers

The number of drivers slowly continued to increase as confidence returned. The 2019-20 figure was an estimate and during the pandemic we were able to develop a system for a more accurate number, although these are still snapshot figures taken at a single point in the year. They are indicative of the situation and are causing concern especially as demand for volunteers is increasing for all kinds of community activity.



National Volunteering Trends – In decline since 2013

There are huge changes taking place in society with fewer people volunteering than before the pandemic. Though there was a rise in volunteering during the pandemic what we are seeing is part of a longer-term decline.

According to the Office of National Statistics, their Community Life Survey showed that formal volunteering had dropped from 27% of the population in 2013/14 to 16% 2021/22.

<https://www.gov.uk/government/statistics/community-life-survey-202122/community-life-survey-202122-volunteering-and-charitable-giving#:~:text=In%202021%2F22%2C%2027%25,between%2036%25%20to%2045%25>

There was a rise to 23% in 2019/22 in response to the Pandemic, which was very noticeable and may have raised expectations as to what might be possible in government and large organisations such as the NHS. A much-reported success was the GoodSams Micro Volunteer App which recruited and managed 800,00 volunteers during the Pandemic 397,940 of whom put themselves on duty. Over a million actions were achieved.

<https://healthinnovationnetwork.com/wp-content/uploads/2021/12/Micro-volunteering-evaluation.pdf>

I have not yet found statistics for current levels of volunteering via the app, though an article on LinkedIn suggested 35,000 had stood up to support the NHS this winter (2023)

<https://www.linkedin.com/pulse/35000-volunteers-stand-up-support-nhs-winter-could-help-donnelly-vpkqe/>

For anyone interested in App Based Volunteering for the NHS the link is here

<https://nhscarevolunteerresponders.org/i-want-to-volunteer>

Local (Non-Digital) Motivations of Volunteers

When asked about why they volunteer, drivers say they like the personal contact with the schemes and their passengers, and though many have no objection to using technology, it's the local and personal aspect of giving back that attracts them the most.

Considering the national decline, recording an increase in volunteer numbers is good news and a testimony to the time and hard work schemes dedicate to recruitment.

The Volunteer Driver Hospital Parking Permit Scheme

The numbers of appointments rose, and hospital parking continued to present its own challenges, however the Permit Scheme continued to work well across the county and provides considerable support to drivers helping NHS patients.

1,929 permits were issued to 57 participating car schemes, and we are grateful to Devon County Council and the NHS Trusts for the help and cooperation volunteer drivers receive.

DAS noticed an increase in workload managing the Devon Community Car Forums Volunteer Driver Hospital Parking Permit Scheme as each NHS Trust develops their own Automatic Number Plate Recognition system.

Royal Devon and Exeter

The Automatic Number Plate Recognition (ANPR) system at Royal Devon and Exeter had its first anniversary. Most drivers managed to renew their online permits, some had issues and there was a period where drivers received automatic parking fines.

Although this created extra work for coordinators and feelings of frustration for the drivers the Parking Team at RD&E also worked hard and were always understanding and helpful, and most fines were rescinded. We also worked with the team to revise the information sent to drivers and the situation improved.

Derriford and Automatic Number Plate Recognition

Derriford Hospital introduced an Automatic Number Plate Recognition System. They already had an onsite system for validating volunteer drivers parking and were able to carry this forward when the new system was introduced. This greatly eased implementation.

There are other issues with Derriford, especially for disabled access to the main entrance and we will work with Derriford to try and solve these problems.

Nightingale Hospital (Exeter)

Built to manage Covid cases, dropping off patients had not needed to be considered. When it was repurposed, problems for the drivers arose. Though it took a long time to find the right people to talk with, once we had made contact, a solution has been agreed and shared with the car schemes. Thank you to the team at the Nightingale for their willingness to help and thank you again to the Comms team at North Devon District Hospital for linking us up.

Pathfinder Project and the Patient Transport and Advice and Service (PTAS)

The Patient Transport Advice service (PTAS) offers a central phone number for people to access non-emergency patient transport services in Devon. The service is funded by the Integrated Care Board (ICB) and provided by Devon County Council.

Patients are encouraged to make their own way to NHS appointments wherever possible. However, if they are too unwell to travel by car, taxi, public transport, or community transport, they can contact the Devon Patient Transport Advice Service (PTAS) to see if they are eligible for non-emergency patient transport. Those who normally use the service and have already been assessed should also use this number. Eligibility is based on clinical need, not affordability.

<https://www.devonservices.org.uk/service/patient-transport-services/>

PTAS has for many years been referring patients who do not meet the eligibility criteria to Community Transport for help and support getting to their secondary care appointments. Since the pandemic car schemes have noticed that some passengers are too frail for car transport and need to refer them to PTAS. It was good to finish work stated last year.

The NHS Pathfinder Project – Selected National Targets

1. Improving the accessibility and timeliness of the Healthcare Travel Costs Scheme (HTCS)
2. Strengthening the role of community transport in patient transport (Non Emergency Passenger Transport Services and wider transport options) particularly through improving the recruitment (and retention) of volunteer drivers and integrating community transport better into local coordination platforms
3. Exploring ways to better signpost people to transport options

Over the year and as a part of the NHS Pathfinder Project the Devon Community Car Forum worked with PTAS:

- To highlight the need to continue and if possible, improve access to cash offices at hospitals as part of the Healthcare Travel Costs Scheme. <https://www.nhs.uk/nhs-services/help-with-health-costs/healthcare-travel-costs-scheme-htcs/>
- PTAS provided funding support to Mid Devon Mobility to create and share volunteer driver recruitment posters
- Working with PTAS and a small group of car schemes, we developed a system and criteria for referring passenger **‘who are no longer safe to be transported by the scheme’** to PTAS. This has also been designed to help people who may not be able to self-refer and need the help of the coordinator to be an advocate on their behalf

PTAS and Car Schemes - Who is Unsafe to Transport?

Working with PTAS we were able to agree generic examples of who may be considered unsafe for car scheme transport based on both physical and mental issues.

However, as previously noted, one size does not fit all for car schemes and each case would require an individual assessment based on the service(s) offered by the car scheme.

For example:

- 'Non-compliant' dementia
 - When a carer or escort is required but not available
- Needs more than a steadying arm. For example:
 - they can't stand or walk alone
 - needs substantial physical help to get in and out of the car and cannot do so without pain
 - cannot self-transfer from wheelchair to seat (see below)
- Clinically obese patients unable to get into a normal car or fit seatbelts
- Issues of self-care- e.g., passengers who soil themselves
- Oncology patients (some schemes provide this service)
- End of life (some schemes already manage this)
- Oxygen needed on the journey by the passenger (and cant be self-administered by the passenger)

Wheelchair users.

- **Non wheelchair accessible vehicle –**
 - passenger unable to self-transfer to car seat and back to a wheelchair (they must be able to do this safely, without assistance from the driver)
- **Wheelchair accessible vehicle**
 - Steps from property
 - Wheelchair and passenger too big/heavy for ramp or lift or safe manoeuvre

We do not think the referral system will be used for many passengers, but it is good to know that it is in place, and we will see how well it works going forward.

Safeguarding Concerns

Some issues with mental capacity e.g. answer the door in their underwear or half-dressed, signs of neglect or abuse, is not a PTAS issue and may need to be reported as a Safeguarding concern.

Please see below for more information.

<https://www.devon.gov.uk/adult-social-care/safeguarding/>

Cash and the Healthcare Travel Costs Scheme (HTCS)

4,360 journeys took place where passengers were planning to claim under HTCS. Many passengers, especially those on low incomes, still use cash to pay for journeys and it is vital that cash offices in hospitals remain open to help passengers manage their cash flow.

We would like to encourage a greater take up of HTCS.

Volunteer drivers often provide frail passengers with help reclaiming the costs of their journeys. As part of the Pathfinder Project, we asked car schemes for feedback from the drivers and below are some of their responses.

RD&E..Always helpful. Especially the cashier on the left..sometimes clients don't have the correct paperwork, but she usually makes a plan

At RD&E there is one excellent officer (first window) who goes above and beyond. Her colleague is officious but, correct. The cashier at Wonford is excellent. As long as you have a name badge and the client's paperwork it takes a couple of minutes of nice banter to collect the money.

Derriford - office is one floor up from the main entrance. Opens at 10am, no problems in getting payment.

I have had nothing but good experiences with the cashiers office. The other Friday I went in early as my client was worried the office would be closing early because it was Friday. Chatting to the staff they told me they do not close early, unless they are ill. They also told me that if I rang if, for instance, I got held up in traffic and thought I would be late they would wait for me! Lovely friendly staff.

The ladies at the RD&E especially have often impressed. On one occasion they checked with the DWP and the relevant hospital clinic when a patient had neither proof of entitlement nor an appointment letter!

RD&E and NDDH offices I have found generally helpful and efficient. The only occasional difficulty patients have had relates to the hours these offices are open.

Barnstaple is the only one I have experience of. It's close to the main entrance door which is useful, they are often closed (for Covid previously) especially at week ends or out of office hours.

Exeter is very good, South Molton haven't got any way of paying you have said you got to Go to Barnstaple.

Always straightforward at Wonford, shame there's no office at Heavitree!

Connecting You. Department for Transport Pilot Project

The Department for Transport provided a share of £5 million across 12 Tackling Loneliness with Transport pilot projects to explore how future transport schemes could contribute to reducing loneliness and isolation.

- DCC's Connecting You (CY) pilot, one of 12 Tackling Loneliness with Transport projects funded by DfT from June 2022 until May 2023.
- The Devon project focussed on two beneficiary groups: The Over 55s and Young People aged 16 – 24.
- A range of transport projects were trialled including Chatty Buses and Trains, Travel Training, Social Prescribing.
- Driver Awareness Training was included as it was recognised as essential to contributing to address passenger anxiety about bus travel, supporting travel by passengers with a variety of disabilities including hidden disabilities.

The DCC CY team contacted some of the local small/medium bus companies to ask their views on a Driver Training proposal. The offer was extended to CT providers. The offer was to all staff and volunteers in these organisations, not just drivers, recognising that culture to adopt new ways of working runs through a whole organisation.

- 1st Oct 22: DCC emailed DAS to gauge interest in involvement with collaborating with us and other local community training providers on some in-person Disability Awareness Training Sessions for Drivers.
- 6th Oct 22: Inaugural meeting (on-line) with DCC, Devon In Sight, Living Options Devon and DAS to start discussions on content and structure of training sessions.
- 10th Nov 22: Planning meeting with training providers. DAS became involved with developing content and liaising with the other training partners.
- 12th Dec 22: Further planning meeting. Also in Dec, DAS took on some of the admin tasks including room bookings and liaising with the venues. DAS provided a template feedback and evaluation form for all participants to complete after each session.

Training Sessions took place at Clyst St George, Exeter; Newton Abbot; Barnstaple and later in Tavistock

Some of the feedback we received on the evaluation forms:

'An excellent course' *'Very good and Informative'* *'Very useful and good time duration'* *'I feel everyone should take part in this course'*

- 8th June 23: Review session and evaluation with Devon Communities Together at Devon In Sight offices, Kennford
- Project extension announced and a further training session was added: 6th July: Tavistock
- After this time, DAS continued to assist Devon In Sight who then became the lead partner in compiling a Drivers Training Manual following on from the in-person training sessions. DAS helped with content and draft editing/review.
- August 23: The Training Manual achieved CPD Group Accreditation and can contribute towards bus drivers ongoing CPC professional development training.
- <https://devoninsight.org.uk/professionals/bus-driver-disability-awareness-training>

Karen Rose

Community Transport Advisor, Transport Co-ordination Service, Devon County Council.

UK Community Renewal Fund - Stronger Together

Mid Devon Mobility's successful bid into the Government's Stronger Together Fund continued to provide training opportunities helping people return to work or volunteering. DAS were delighted to be a part of this as providers of driver training.

Stronger Together Collaboration Project Overview:

The project as a whole was incredibly successful, engaging and helping a total of **15,934** beneficiaries within Devon. The main aims of the collaborative Stronger Together Project were to set up and launch Volunteer Recruitment & Training Programmes - to engage and recruit volunteers of all ages to help with existing Community Transport, Community Car Schemes and other local organisations which focus on helping frail, older, disabled, young, unemployed and rurally isolated people. Alongside the Recruitment & Training Programme the project provided a new 'Give Back Scheme' enabling both long- and short-term volunteering opportunities focusing on re-employability across Devon.

The other aspect of the project was to provide a huge variety of Training Opportunities for the people of Devon, with a particular focus on upskilling people to enable them to gain the skills needed to return into employment.

Volunteer Co-ordinators, Trainers & out-of-house professional Trainers delivered short & long courses for accreditation which enhanced beneficiary's employability, developed further skills, raised their aspirations and benefitted the wider community in a variety of different ways.

The courses completed included Driver Training Qualifications, such as:

- Driver Training – specifically designed to aid employability
- MIDAS Training for Minibus/MPV Drivers
- PATs (Passenger Assistant Training) for all volunteer drivers/minibus drivers
- D1 Minibus Training Opportunities for young people
- Vehicle Emergency Evacuation Training For Trainers
- Driving Safer For Longer Courses for older volunteer drivers.

Examples of Life-Skill Training Courses Completed include:

- Level 2 Food Hygiene & Safety for Catering
- NDVS Dealing with Mobility Aids
- Defibrillator & Resuscitation Training Courses
- Working with Vulnerable People
- iPad Usage & Basic Operation Training
- First Aid At Work Courses

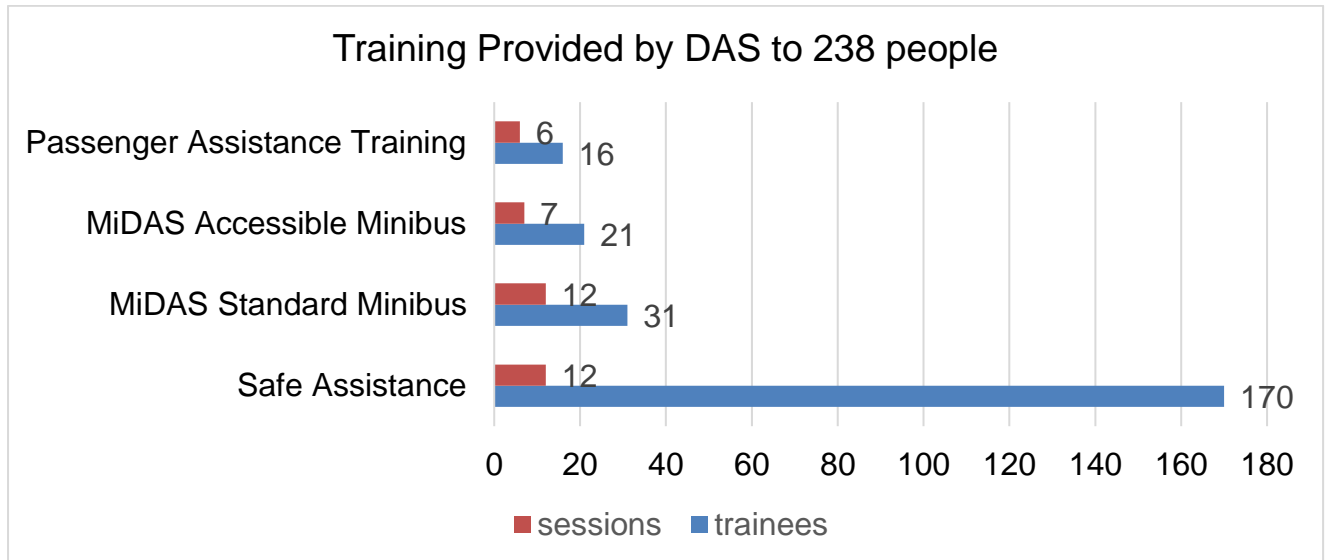
Above is a very small snip-it of courses taken throughout the term of the project. Additional details & statistics of courses undertaken are detailed in the full report.

To read the full report please contact <https://www.middevonmobility.org.uk/>

Training Provided by Devon Access to Services via NDVS


DAS were delighted to provide 37 sessions to 238 trainees most of whom were funded by the Stronger Together Project.

When organisations face a financial squeeze, training and staffing budgets suffer and when funding for training is available it absolutely encourages participation.



The Safe Assistance for Volunteer Car Schemes training is available to members, is continuously developed with the Devon Community Car Forum and concentrates on the basics of providing high quality, safe, legal and enjoyable journeys to car scheme passengers.

DAS via NDVS, provides accredited training via the Community Transport Association MiDAS training programme.

	<ul style="list-style-type: none"> • Minibus, Standard and Accessible • Passenger Assistance Training • Car and MPV including Accessible vehicles. <p>https://ctauk.org/training/midas/</p>
---	--

North Devon Voluntary Services (NDVS)
<https://ndvs.org.uk/>

To find out more about our training offers please contact dasadmin@ndvs.org.uk

Mutual Support and cooperation with Health Service Providers

There has been continued close cooperation between DAS, Community Car Schemes and health service providers:

- Car Schemes and their local GP practice (some, though not all)
- DAS, Car Schemes and the **Patient Transport Advice Service (PTAS)**:
 - Active involvement with the national Non-Emergency Patient Transport (NEPTS) review and solving transport issues for patients with more complicated mobility needs than is safe for CT groups to transport. Thank you to Lynn Thornton, Manager of PTAS, for your help with this challenging piece of work
 - Updating the parish list which PTAS staff use to refer passengers to their local Car scheme
- DAS, Car Schemes, NHS Facility Teams (car parks) and Devon County Council: An exemplar of co-production of Volunteer Driver Hospital Parking Permits especially this year with the Royal Devon and Exeter Hospital introducing ANPR systems
- DAS and Council for Voluntary Services (CVS): participation in the
 - North Devon Healthcare Trust **Involving People Steering Group**. This is a great group to be involved with as they are always so helpful solving problems
 - CCG Northern Locality Patient Stakeholder Network (winding down as new Integrated Care Boards are being introduced)
- DAS, Car Schemes and the **Devon County Council Transport Co-ordination Service**. Their ongoing support and funding enabled the production of this report and has encouraged many of the developments in Car Schemes over the past few years. Thank you to Karen Rose, Community Transport Advisor for your continued support

Financial Benefits to the NHS

The NHS in Devon saved at least £3,510,680 because of Community Car Schemes' activity.

- £596,153 preventing Did Not Attends to Primary Health Care
- £2,914,527 preventing Did Not Attends to Secondary Care
- £219,216 of savings to the Healthcare Travel Costs Scheme (HTCS)

In return car schemes received £17,896 in funding from the NHS

Funding applications

Car schemes have said that the simpler can-do attitude adopted by grant funders during the pandemic has generally not carried over to the recovery phase. It's perhaps understandable as funders have their own objectives and money is tight, but the increased element of trust and immediacy of action will be missed, especially for relatively small amounts of money.

The continued reluctance of many funds to pay staff costs does create a bit of mind fog when applying as people feel they are reinventing the wheel and making up projects that will take away resources from their existing services. This can be overcome by training and creative thinking but does slow down and put off people applying. Especially when they are tired and heads down doing day to day service provision.

Partnership Working - Transport - the Forgotten Link

Transport is the often-forgotten essential link to health and social care. There is a growing need to support preventative healthcare initiatives and wellbeing, both for individuals and communities, not just for the transport but for the human links it creates and help maintain.

We suspect that there is a great deal already happening under the radar and in the future, with the members of the Devon Community Car Forum, we will explore the diversity of car schemes' contributions to life in Devon.

With effective partnership work there is more that could be achieved with senior managers in the NHS, Primary Care Networks and Integrated Care Boards collaborating with Community Transport to create and sustain mutually beneficial relationships.

Digital exclusion may have a significant impact on the future development of car schemes workload, and we would like to explore ways this can be mitigated. For example, the development of video appointments by GPs and consultants may help reduce the number of journeys required for a passenger to complete a course of treatment.

For an idea of the scale of the issue please see the House of Lords. Communications and Digital Committee. 3rd Report of Session 2022-23

<https://committees.parliament.uk/publications/40662/documents/198365/default/>

The main financial needs of the schemes are contributions to the running costs of the schemes who are £130,845 in deficit.

The existing collaboration and co production would be greatly helped by funding from the NHS who benefit a great deal from the service of Community Car Schemes. This opportunity continues to be overlooked. The financial support provided by the NHS, Primary Care providers or Clinical Commissioning Groups to Car Schemes in 2022-2023 was £17,896, compared to nearly £24,000 in the financial year 2014-15.

Devon County Council, however, with total funding of £98,198 to Community Transport has demonstrated that ongoing support has encouraged many of the positive developments in Car Schemes in recent years. We look forward to a similar approach from the NHS.

We look forward to finding out how well the new Integrated Care Boards and Local Health Care Systems announced in the Government's Policy Paper, updated on the 10th March 2022, will replace the Clinical Commissioning Groups.

Conclusion

In February 2020, few people would have predicted how much would change and how much continues to change.

The impact of adapting to these changes has led to increased costs for car schemes.

However, pre-existing issues are reasserting themselves as services and passenger/patient confidence recover from the impact of Covid-19.

These issues continue to be:

- Increased frailty of passengers (immediately much worse than before Covid)
- The need for more volunteers who are also trained to meet the above needs
- Coordinator and driver stress
- Congestion at hospitals
- Funding pressures, especially the need to cover operating costs

Issues compounded by the cost-of-living crises:

- Loneliness and isolation of passengers
- New volunteers put off by the cost of running their vehicles
- An urgent need to catch up with outpatient appointments and much delayed treatment
- There is a sense of fatigue in many areas, just as the demand for services is increasing

Personal contact

Passengers are often not active users of the internet and are the people most likely to stop using technology. They rely on personal contact to access health and wellbeing which is often provided by Car Scheme Coordinators and Drivers. Coordinators are noticing booking calls are taking longer and people also want to chat on the phone. Luckily one of the main motivators for drivers are the conversations they have in the car. This all helps to alleviate feelings of loneliness and promotes better recovery.

It is important that the phone remains a first point of contact for community transport organisations.

Digitisation and ongoing support for people who cannot be involved

When planning to use digital solutions to increase efficiency, save money and resources, it is important to consider the small, but significant numbers of people who will not benefit from this and will find themselves suddenly reliant on others.

Helping these people creates a drain on supporting organisations' resources and moves the costs from large organisation to smaller ones. That does not mean the changes should take place, however targeted support should be made to these organisations.

Partnership Work

There are many opportunities for partnership work to be taken advantage of if people are not to be excluded from accessing services many of us take for granted. With sufficient co-operation and funding this is possible.

Community Transport is more than just a journey and we will explore the opportunities in more detail in our 2023-24 Social Kindness Report.

Formal Volunteering in decline and the resilience of the local touch

The national trend for Formal Volunteering is reducing when there is increasing need for their help. Formal Volunteering is required because structures need to be in place to help protect vulnerable passengers, the drivers and the car schemes themselves.

Thankfully the decline is less in rural areas and car schemes provide a unique offer for on-request volunteering with their vehicle cost being covered. The volunteer offer must fit their needs if it is going to continue at the levels required into the future and it needs to be as safe and stress free as possible. A unique advantage of car schemes is that it is often on request and volunteers do not have to make a regular commitment.

The car schemes are doing well to increase the numbers of volunteers. They use a mix of recruitment methods, including word of mouth and volunteers step forward. When funded training is also on offer, car schemes can afford to take part and new volunteers are keen to join in.

Finally

I am heartened by the continuing support shown to the sector by Devon County Council and the Facilities and Parking Teams of the NHS across Devon, including the Comms team at Northern Devon Healthcare Trust (soon to become the Royal Devon University Healthcare NHS Foundation Trust).

I believe that the Community Transport sector has shown remarkable resilience over the past three years, and I continue to be impressed by the good humour and practical attitude they show towards problem solving.

Quite simply, they are positive, proactive, and determined to continue helping their passengers and clients in increasingly challenging circumstances.

What they do is so much more than transport and it is a pleasure to work with them.

Appendix 1 Statistics – Activity, income, spending 2022–2023

During 2022-23 there were:

- 61 members of the Devon Community Car Forum (DCCF)
- 51 Full Members of the DCCF provided these statistics as part of their annual funding agreement with Devon County Council.
- 10 were Associate Members who do not provide statistical information or receive funding from DCC via the Car Forum. These figures are therefore an underestimate of activity and costs.

All members can be part of the **Volunteer Driver Hospital Parking Scheme**, which is managed by DAS in cooperation with Community Car Schemes, Acute Hospital Trusts, Devon County Council, and the Devon Community Car Forum.

Vol Driver Hospital Parking Permit Scheme	2019-20	2020-21	2021-22	2022-23
Number of CCS participating in the scheme	59	60	62	57
Number of permits issued	2222	2298	2154	1929

Journeys	2019-20	2020-21	2021-22	2022-23
All health-related journeys (% of all journeys)	90,778 (68%)	38,234 (91%)	70,410 (79%)	86,738
Social welfare purposes (% of all journeys)	42,220 (32%)	3,916 (9%)	18,188 (21%)	27,202
Number of vaccination journeys (% of all journeys)	n/a	1,861 (0%)	3,869 (0%)	1,581
Total of all passenger journeys Including journeys for people who travelled in their wheelchairs.	132,998 5,435	42,150 1,633	88,598 1,873	115,521 2,766

Deliveries	2019-20	2020-21	2021-22	2022-23
Total number of prescriptions delivered	n/a	21,150	6,600	5,919
Total number of shopping/food deliveries	n/a	40,291	7,829	10,953

Journeys cancelled or not placed	2019-20	2020-21	2021-22	2022-23
Journeys cancelled	14,493	9,535	9,279	12,813
Journey requests not able to be placed	3,027	744	1,809	3,034

Income	2019-20	2020-21	2021-22	2022-23
Passenger contributions	£772,103	£262,728	£517,861	£693,403
DCC Car Forum funding, social services etc.	£56,724	£60,251	£55,211	£98,198
Health funding	£0	£7,006	£4,274	£17,896
Other fundraising	£211,934	£70,887	£492,710	£245,435
Total income generated by car schemes	£1,040,761	£400,872	£1,070,056	£1,054,932

Spend	2019-20	2020-21	2021-22	2022-23
Cost of organising these journeys (overheads)	£703,703	£390,628	£509,920	£704,806
Reimbursing drivers' vehicle mileage costs	£582,471	£206,172	£377,813	£480,971
Total spent by schemes providing their services	£1,286,174	£596,800	£887,733	£1,185,777

Deficit or surplus	2019-20	2020-21	2021-22	2022-23
Total income less total spend *Two schemes had large bequests skewing the situation	-£245,413	-£195,928	+182,323*	-£130,845

	2019-20	2020-21	2021-22	2022-23
Total miles travelled	1,446,161	569,763	972,703	1,382,925

Volunteer hours and contribution	2019-20	2020-21	2021-22	2022-23
Number of volunteer hours gifted to the car schemes	133,076	77,261	103,813	133,935
Notional value at National Minimum wage (2022/23 £10.42 National Living wage 23 +)	£1,092,554	£673,716	£924,974	1,395,603

Average journey distance	2019-20	2020-21	2021-22	2022-23
Average return journey (miles)	21.75	27.04	21.96	23.95

Average passengers spend on journeys	2019-20	2020-21	2021-22	2022-23
Average return journey x 45 pence per mile	£9.79	£12.17	£9.88	£10.77

Average cost to organise a journey	2019-20	2020-21	2021-22	2022-23
Overheads divided by total no of journeys	£5.29	£9.27	£5.76	£6.10

Staff hours	2019-20	2020-21	2021-22	2022-23
Number of paid staff hours	43,732	32,081	33,140	43,078

Cost of managing cancellations/rebookings	2019-20	2020-21	2021-22	2022-23
Number of cancellations and rebookings	14,493	9,535	9,279	12,813
cancellations x cost per journey (Most cancellations are rebooked)	£76,668	£88,389	£53,405	78,174
% of operating costs	10.9%	22.63%	6.02%	6.59%
Number of cancellations associated with health transport	9,891	8,649	7,374	9,796
% of rebooking's that were health related	68.25%	90.71%	79.47%	76.45%
Cost of managing NHS rebooking's	£52,323	£80,176	£42,441	£59,766

Healthcare Travel Costs Scheme	2019-20	2020-21	2021-22	2022-23
Number of eligible HTCS journey requests	5,447	2,121	3,948	4,360

Appendix 2 Financial Saving to the NHS – Detail

Because they have no other options Car Scheme passengers/patients rely on their drivers to help them safely access vital health appointments. This is to planned GP and outpatient care, keeping them out of hospital, reducing GP home visits, urgent and unplanned emergency care. A key motivation for CCS is that everyone in their communities should have access to a good quality of life and is the essence of social kindness in action.

It is challenging to give a financial value to voluntary effort when there is no direct reporting to the effort and the result. For example, the driver takes a passenger to their medical appointment and home again afterwards.

Though there may be considerable knowledge and support within the Car Scheme and community, there is no official information on the treatments provided to the patient or their outcomes. Considering the importance of patient confidentiality, this is as it should be.

The following figures are indicative of the scale of financial savings to the NHS and are based on the only quantifiable figures that can be directly related to Community Car Scheme activity or, more importantly, its absence– Did Not Attends and the HTCS.

Preventing missed appointments or Did not Attends (DNA's)

Primary Care (mainly GP services)

39,744 journeys were to and from primary health care (minimum 19,872 (appointments). If we assume these appointments were missed with no cancellation, the cost at £30 per appointment* would be £596,160.00.

*Primary Care NHS England updated 8th February 2019

<https://www.england.nhs.uk/2019/01/missed-gp-appointments-costing-nhs-millions/>

Secondary Care

48,575 journeys were to and from secondary health care, normally hospitals (minimum 24,287 appointments). If these were missed with no cancellation, the cost would be £2,914,500 at £120 per missed appointment*

*Secondary Care NHS England Last updated 22nd October 2018

<https://www.england.nhs.uk/2018/10/nhs-to-trial-tech-to-cut-missed-appointments-and-save-up-to-20-million/>

Healthcare Travel Costs Scheme (HTCS) - further savings to the NHS

Community Car Schemes provide 4,360 qualifying journeys at a considerable saving of £219,216 (estimated) to the NHS HTCS budget.

The cost of a Community Car Scheme is approximately three times less than the cost of a booked on the day taxi journey (the closest allowable journey type for HTCS).

<https://www.nhs.uk/nhs-services/help-with-health-costs/healthcare-travel-costs-scheme-htcs/>

In addition, Car Schemes are spending more money supporting the continuing efficiency of the NHS, mostly via cancelled and rebooked short notice appointments.

Appendix 2 Devon Access to Services (DAS)

Connecting People to Services

The purpose of DAS is to research, develop and help to deliver affordable and practical solutions that enable especially vulnerable and isolated people to access appropriate services across Devon.

DAS develops and promotes partnership working among service providers to benefit isolated and hard-to-reach individuals and communities.

DAS works to achieve its aims by providing infrastructure support, guidance and other practical help to Community Car Schemes and other local groups across Devon by:

- Developing partnerships, cooperation and co-production between public and third sector service providers to improve access to services for those in greatest need; e.g. disabled, older and/or isolated people, carers and young people.
- Working to develop trust between these often-disparate groups; developing a safe environment to meet and acting as an honest broker.
- Working with all its partnerships to develop consistent evaluation and measurement systems that enable the development and implementation of a strategic overview.
- Ensuring the development and sharing of best practice within the groups it supports.
- Identifying and promoting funding opportunities for the work and groups it supports.
- Supporting with the recruitment, training, and ongoing development of the role of volunteers.
- Provides training.

DAS is a project hosted by NDVS North Devon Voluntary Services, funded by Devon County Council and started in 2008.

Appendix 3 Methodology

DAS collect and collate the data cited in this paper via:

- Standard quarterly returns submitted by all the participating Schemes.
- Feedback collected during regular Car Forums meetings.
- One-off questionnaires to the Devon County Car Forum.
- Research projects carried out with the Devon County Car Forum.
- One-to-one support work with individual Car Schemes.

They give a good representation of the activity of member Schemes. Due to the diverse nature of the sector, however, the figures used must be considered indicative.

Voluntary work, by its very nature, is often under-reported and it is likely that the figures are low in respect of:

- actual work carried out,
- hours given by volunteers
- costs incurred

Journeys are defined as a single journey to an appointment, and a single journey returning from an appointment. This is the lowest non-divisible common denominator.

Appendix 4 What is a Community Car Scheme?

Community Car Schemes come in many shapes and sizes and work in different ways depending on local circumstances, their founding purpose, and levels of funding available. They are groups of people who have come together to solve a particular problem in their local community.

- For a Community Car scheme or larger Community Transport organisation that need is local people getting where they need to go, and the solution is giving them a lift.
- With other community support groups, perhaps based around a local GP practice or community centre. They run a range of services and found the need to form a Car Scheme to help people attend their activities, e.g. memory café, lunch club etc.

Over time they can grow to be quite sizeable organisations and cover large areas (perhaps with 80 or more drivers, paid coordinators, premises, and scheme-owned vehicles). Equally they may decide to stay local, small, and easily manageable. Both approaches are equally valid as they meet the needs of the people who use the scheme and match the abilities, motivations and aspirations of the people who run them.

Financial realities of Community Car Schemes (Not for Profit)

It is highly unlikely that any car scheme can be fully self-sustaining on passenger contributions alone. Travel expenses are covered by the passenger, but back-office costs are not. External funding will always be required to keep the organisation alive.

Car schemes using drivers and privately owned vehicles are limited to charging no more than the driver will receive in expenses for that journey (1981 Passenger Transport Act).

Car schemes who use their own vehicles under a Section 19 or 22 Community Bus Licence can charge fares to cover the full operating costs but cannot generate surpluses to support other services.

Appendix 5 Who is a Car Scheme Passenger?

A Car Scheme passenger can be anyone who is unable to provide their own transport or make use of public transport or taxis. They need to be in a place at a certain time and increasingly need a little extra help on the journey. They benefit from staying healthy, independent and well at home rather than having their condition deteriorate and be admitted to hospital.

In Devon most Car Scheme passengers are older people who, in line with the wider population, are becoming older and frailer.. Most community car journeys are health-related, and passengers often need assistance navigating hospitals, for example. This can include remembering where they need to be. The remaining journeys are for social welfare activities including trips to lunch clubs, memory cafes and local events.

They are more likely to not be active users of the internet and rely on personal contact for their health and wellbeing. This is often provided by Car Scheme Coordinators and drivers.

Appendix 6 Devon Community Car Forum

The Forum is a network of independent community organisations who provide thousands of journeys each year, mostly, but not exclusively, to health appointments.

All schemes in Devon are welcome to join the Forum provided they are a constituted organisation, have basic policies in place, and all drivers undertake a satisfactory Enhanced Disclosure and Barring Service (DBS) check.

The Forum provides an insight into the astonishing amount of help that a diverse range of independent charities provide to their passengers. Is an opportunity to collect and share statistics and stories and provide mutual support. It provides a unique opportunity to ask questions and share best practice in a safe space and has helped reduce the sense of isolation felt by many groups.

There are two levels of membership:

- **Associate membership** gives access to:
 - Volunteer Driver Hospital Parking Permit Scheme.
 - Forum meetings.
 - Information sharing and mutual peer support.
 - DAS infrastructure support and advice.
- **Full membership** gives all the above, plus funding from Devon County Council in exchange for common statistics on their activity.

Reasons for Schemes not being full members include:

- They are outside the DCC area and cannot receive DCC funding (Plymouth and Torbay unitary areas for example).
- They do not have the capacity or desire to complete the Car Forum data returns.
- They do not need to receive extra funding from DCC.

This report has only been possible because of everyone's active participation, regardless of membership level, and Devon Access to Services gratefully acknowledges their contribution.

Appendix 7 – Devon Community Car Forum Members

Members for the Devon Community Car Forum who shared their statistics are listed below by region.

For more (and updated) information about community transport in your area please go to www.devonservices.org.uk and look for Community Transport – community Car Schemes

North Devon & Torrington Car Forum

1. Age Concern Barnstaple & District
2. Braunton Volunteers
3. Combe Martin & Berrynarbor Car Scheme
4. Cancer Care Car (Go North Devon Ltd)
5. Holsworthy Rural Community Transport
6. Ilfracombe Community Car Service
7. South Molton Volunteer Bureau
8. Torrington Volunteer Cars
9. Wooda Plus (Bideford)

Exeter, East and Mid Devon Car Forum

1. Blackdown Support Group
2. Budleigh Salterton and District Voluntary Car Scheme (now called Seachange)
3. Clyst Caring Friends (Pinhoe and Broadclyst Surgeries, Exeter)
4. Colyton Link
5. Mid Devon Mobility (Crediton)
6. Culm Voluntary Car Scheme (Cullompton)
7. ELF (Exeter Leukaemia Fund)
8. Estuary League of Friends (Topsham)
9. ECCS (Exmouth Community Car Service)
10. Heavitree Health Centre - Friends of
11. Ide Lane Surgery - Friends of
12. Ottery Help Scheme
13. Sampford Peverell Caring Friends
14. Sidmouth Hospiscare Trust
15. Sidmouth Voluntary Services
16. Silverton Link Up
17. Mid Devon Mobility (Tiverton)
18. TRIP Community Transport Honiton
19. TRIP Lower Axe Valley

Southern Area Car Forum

1. Access Plymouth
2. Acorn Community Support (Christow and surrounding area)
3. Buckland Surgery Support Group (BUSS)
4. Dartmouth Caring
5. DASH
6. Dawlish Community Transport (East Teignbridge CTA)
7. Ivybridge & District Community Transport
8. Kings Care League of Friends (Newton Abbott and Kingsteignton)
9. Modbury Caring
10. Morecare Chagford
11. Morecare Moretonhampstead
12. Newton Abbot Community Transport Association
13. Norton Brook Patient Transport Service
14. Okehampton & District Community Transport Group
15. Redfern - Friends of
16. Riverside Surgery Befrienders - Bovey Tracy
17. South Brent & District Caring
18. South Hams Community Transport
19. TASS (Tavistock Area Support Services)
20. Tedburn Outreach (Tedburn St Mary)
21. Totnes Caring
22. Volunteering in Health (Teignmouth)
23. Yelvercare (Yelverton)

Contact Devon Access to Services

For more information about this report, the work of DAS, or if you would like to know more about volunteering for a Car Scheme please contact:

Tim Lamerton and Claire Stevenson
Devon Access to Services
NDVS
Suite 205 Queens House
Queens Street
Barnstaple
EX32 8HJ

dasadmin@ndvs.org.uk

01271 859261 (answer phone when we are not there)

07840 452147 (Tim)

07542 000027 (Claire)

<https://ndvs.org.uk/services/devon-access-to-services/>

<https://www.devonservices.org.uk/>

<https://www.facebook.com/devonaccesstoservices>