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Review of Demand Responsive Transport in Scotland

**Transport Research
Planning Group**



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**REVIEW OF DEMAND RESPONSIVE TRANSPORT
IN SCOTLAND**

**Derek Halden Consultancy, the TAS Partnership
and the University of Aberdeen**

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CONTENTS

1.0	Introduction	1
	Approach to the Project	1
2.0	What is DRT and Where is it Needed?	3
	Markets for DRT	3
	Funding sources for DRT	5
	Operation of DRT	9
	Legislation and DRT	11
3.0	DRT Experience in Scotland	18
	How much DRT is out there?	18
	The pilot schemes	20
	Other case studies	22
	Results of User Surveys	22
	Lessons for DRT markets	23
	Funding and costs of DRT operation	26
	Operation	28
	Legislation	30
4.0	DRT Market Opportunities	32
	Premium Services	32
	Best Value Public Transport	33
	High Value to Agency Services	34
	High Care Needs Services	34
5.0	Conclusions	37
	Recommendations	37
6.0	References	39
A.0	Appendix A- Travel Despatch Centres: Costs and Benefits	42
B.0	Appendix B - Rural DRT Pilot Projects	44
	Aberdeenshire Council DRT Pilots	44
	Angus	45
	Fife	46
	Argyll and Bute	47
	Highland Council Access to Employment DRT Service	48
C.0	Appendix C - Urban Pilots	50
	Aberdeen	50
	Dundee	51

Edinburgh	52
Glasgow	53
D.0 Appendix D - Other DRT Schemes	55
Stagecoach Yellow Taxibus	55
SPT DRT Services	57
Handicabs Lothian	58
Fife Council Ring and Ride	59
Dumfries and Galloway Ring and Ride Services	59
Midlothian Council Dial a Journey 01 and 02	60
The Highland Council Taxi Feeder Services	61
Gaberlunzie (East Lothian)	61
North Lanarkshire Job Shuttle	62
E.0 Appendix E - Scottish Executive Funded Pilots	63
DRT Markets	63
Future development and long term sustainability	64
F.0 Appendix F - How much DRT is out there?	66
The Location and Characteristics of DRT Services in Scotland	66
The Data Collection Process	66
Overview of DRT Services	67
DRT Schemes by Local Authority Area	68
Organisational characteristics of DRT	68
DRT Service Designs	70
Operating Legislation	70
G.0 Appendix G - DRT Schemes Identified In Scotland	73

EXECUTIVE SUMMARY

Demand Responsive Transport (DRT), described most simply, is any form of transport where day to day service provision is influenced by the demands of users. This report describes the findings of research commissioned by the Scottish Executive to review evidence on DRT delivery to: consider the contribution that DRT can make to social inclusion and accessibility, explore the impact of pilot DRT schemes, make recommendations on how future DRT schemes could be developed in Scotland, and develop best practice guidance.

Although the concept of day to day transport provision being influenced by the demands of users is relatively simple, fitting this simple concept into public policy is much more complex. To do so requires a systematic examination of: markets for DRT, funding sources, different types of DRT operation and legislation for DRT delivery.

There are four main markets for DRT: premium value services, high value to agency services, high care needs, best value public transport. All these markets have grown in recent years but the high care needs market dominates DRT provision.

Funding for DRT comes from three main sources: national and local government discharging statutory duties to ensure that transport is available to meet all social and economic needs, transport users through fares, and purchasers acting on behalf of users to purchase trips in line with need.

Despite the apparent complexity of DRT, all operations can be defined in terms of the routes, stopping points and service types. Many DRT schemes operate as area wide services with few or no defined stopping points, resulting in maximum flexibility. However, in order to ensure particular destinations are served, to link in with other elements of the transport network, or to closely resemble conventional bus services, varying degrees of fixity in route design and stopping points can be applied.

Most DRT services are on a small scale, or targeted at specific categories of people in the community, and require little or no information technology support. Communications technologies only become important when DRT projects begin to involve vehicle brokerage and multiple resource allocation to allow route scheduling for large passenger numbers and real-time booking capabilities.

There is no single legislative niche for DRT services and three main options are currently used: Public Service Vehicles (PSVs), Taxis and private hire cars, and community operations. There are some important issues that arise from this complex mix of legislation that actively constrain the development or potential cost savings/efficiencies of DRT services including the inability to claim BSOG (Bus Service Operators Grant) for any flexible sections of route.

To identify the lessons learned from innovative practice in DRT delivery a survey of all local authorities was undertaken, complemented with literature and web-based research, and an in-depth review of current DRT pilot projects and other longer established Scottish DRT schemes.

User surveys were also undertaken to identify the features of DRT operation that were confusing and were most in need of improvement including: flexibility and reducing advance booking times, expectations of DRT and the need to market new approaches better, and the need to engage with users of fixed services prior to “taking their bus service away” to replace it with a DRT approach.

Overall the review concluded that DRT cannot be planned in isolation from other transport. DRT development should form an essential part of an overall transport and accessibility plan, showing how each market including commercial taxis is being developed. DRT markets overlap, so the strengthening of one market may transfer trips away from others. This process needs to be managed explicitly to ensure that costs and benefits are allocated correctly to public agencies and that there are opportunities for all types of operator.

There are particular market niches, which cannot be served without the ability to provide a flexible transport solution. In particular, some user groups require door-to-door DRT provision to access the services that they require. Overall, expansion of DRT provision is an essential aspect of improving accessibility in Scotland.

Patient transport is presenting particular problems, and there are several possible ways to structure this in the future to ensure that people are not excluded from health care due to poor accessibility. To create a clear structure for DRT delivery by PTS, CT, and commercial services including taxis, it will be important to improve: procurement, definitions and classifications of need, co-ordination of funding, integration between patient and other transport needs, and to develop a charging structure within which some users can pay for transport within the patient transport service to avoid having to drive.

Overall conclusions are that:

- There are many opportunities to enhance provision through joint working and delivery.
- All DRT services need to define clearly for whom and why the services are being funded and delivered.
- Action by local authorities to plan for developing DRT markets needs to be set out in local transport strategies and monitored in best value reviews.
- Best value public transport in most parts of the country can be expected to include DRT.
- The long term sustainability of most of the pilot DRT projects set up by the Scottish Executive is uncertain. There is a heavy reliance on the Scottish Executive funding, and for most pilots, DRT would probably not be prioritised highly enough by the councils to obtain funding within mainstream budgets.

Guidance prepared as part of this review should help to inform relevant authorities and groups on how new services can be delivered, but to secure the sustainability and growth of DRT there needs to be:

- Clear accountability on who pays for what user needs.
- Amended rules for BSOG eligibility to include more DRT operations.
- A managed approach to culture change amongst providers and users of transport.
- Funding and auditing incentives for best value delivery.
- A clear plan for future patient transport.
- A clearer view of the impacts of the free national concessionary fares scheme on DRT.
- Increased support for community transport.

1.0 INTRODUCTION

1.1 Demand Responsive Transport (DRT), described most simply, is any form of transport where day to day service provision is influenced by the demands of users. DRT planning can therefore involve: taxis; shared taxi/taxibus; community car schemes; non-emergency patient transport; ‘joblink’ services; ring-and-ride; social services transport; education services transport; dial-a-ride, community buses, and many other related services.

1.2 This report describes the findings of research commissioned by the Scottish Executive to review evidence on DRT delivery in rural and urban settings in Scotland. Specific objectives of the research were to:

- Consider the contribution that DRT can make to social inclusion and accessibility in rural and urban settings
- Explore the impact of the current DRT pilots in both rural and urban settings, particularly focusing on users and communities and the extent to which the Scottish Executive’s existing and planned pilots meet policy objectives.
- Make recommendations on how future DRT schemes could be developed in Scotland including piloting of new approaches in urban and rural areas.
- Develop Best Practice Guidance for those wanting to take forward innovations in DRT in both urban and rural settings and recommend how stakeholders can work together to deliver schemes including appropriate levels and mechanisms for investment by the Scottish Executive.

1.3 The recent Transport White Paper ‘Scotland’s Transport Future’ (2004) identified demand responsive services as a solution to overcome the difficulties in providing services in rural areas or less well served urban districts. This reflects the experiences of successful DRT development in the light of:

- Growing car ownership and the need for a form of public transport to serve lower demand routes and areas.
- The need to provide transport services to parts of the country that have never been served with public transport.
- The rapid growth of the community sector in transport delivery which has a strong track record in demand responsive services.
- The need for public transport to capture more of the growing market for bespoke minibus services.
- Advances in technology which have seen more dynamic booking systems improving vehicle utilisation.

Approach to the Project

1.4 The research was approached through four main work packages:

- What is DRT and where is it needed - Scoping, definitions, literature review and overview of existing types of scheme.
- How much DRT has already been developed in Scotland.

- What can be learned from Scottish Executive funded pilot schemes.
- Review of lessons, recommendations and development of best practice guidance.

2.0 WHAT IS DRT AND WHERE IS IT NEEDED?

2.1 Although the concept of day to day transport provision being influenced by the demands of users is relatively simple, fitting this simple concept into public policy is much more complex. To do so requires a systematic examination of:

- Markets for DRT
- Funding sources
- Different types of DRT operation
- Legislation for DRT delivery

2.2 This chapter discusses each of these in turn based mainly on a desk based review but supplemented by data from surveys where appropriate.

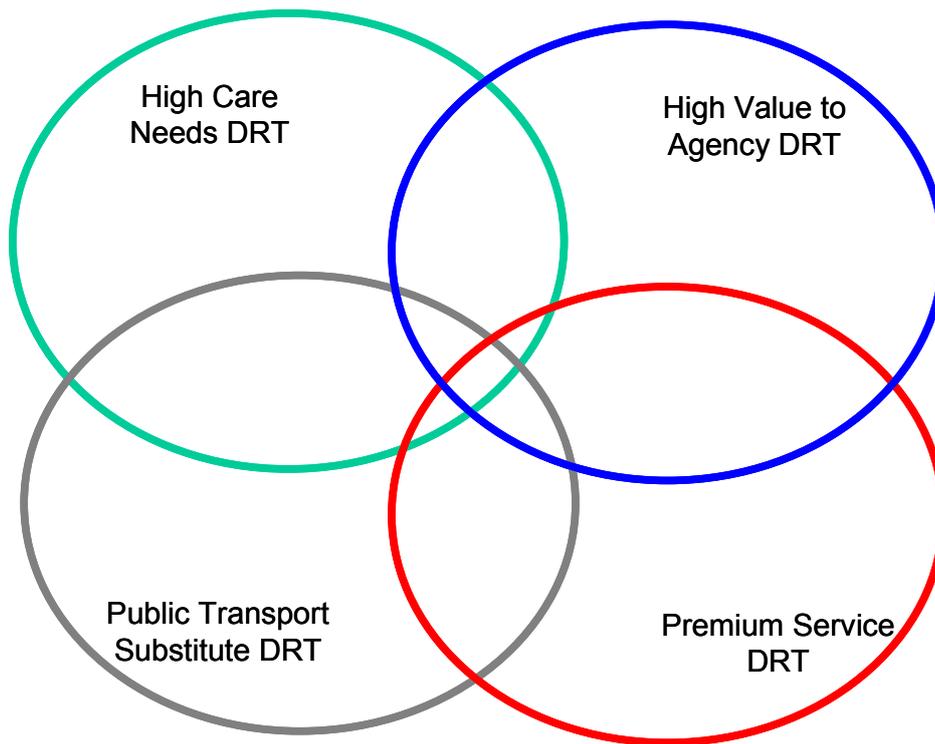
Markets for DRT

2.3 Four main markets for DRT define its current delivery:

- Premium value services – These high value services are defined by the need to reduce travel times, receive a higher degree of customer care and are often door-to-door. These have grown significantly for niche markets such as airport transfer services.
- High value to agency services – These are needed where services are tailored to particular needs of public agencies. These include some patient transport, school transport, joblink services.
- High care needs – This market is quite diverse to cater for the different care needs of travellers. It includes services for people with disabilities such as dial-a-ride and some non emergency patient transport, social services transport, and community transport.
- Best value public transport – Where demand is low, greater flexibility in the locations for picking up and dropping off passengers can ensure better value services and wider network coverage. Rural DRT services, sometimes called Ring-and-Ride, are examples of this.

2.4 Figure 2.1 shows that, although distinct markets are identified, there are overlaps, e.g. a best value public transport solution using DRT in a rural area may also allow people with mobility impairments to use public transport supporting the high care needs market. There are no direct overlaps identified between high care needs and premium service markets based on current provision, although a sub-section of the premium service market could potentially involve high care in addition to comfort, travel time and other benefits.

Figure 2.1 Markets for DRT



Premium Service DRT

2.5 These services have shown strengths for commuting, leisure and business related travel. Conventional taxis and private hire vehicles serve relatively stable markets but there may be significant potential for growing shared taxi and taxi-bus service provision. Although reducing cost when compared with single user vehicles defines the shared vehicle market, the overall experience of the traveller needs to be close to that of a single user market, putting speed, convenience and comfort at a premium.

2.6 Recent experiments by the Stagecoach bus company in this market (Stagecoach 2005) have helped to clarify the boundaries and opportunities for further developments in the future. Ingredients for success are:

- Small vehicles, with limited diversions for passengers from the most direct routes ensuring fast journey times.
- High quality / high status image to persuade people that DRT is a viable and attractive alternative to car travel
- Door-to-door a high priority as the deterrence factor of walking and waiting at stops will be significant.

High Value to Agency DRT

2.7 The value of this market is captured where a public agency has particular transport needs which cannot be met by public transport so funds services to meet these specific needs. For example there may well be public transport available from a deprived area to a workplace but ‘Joblink’ DRT services can provide additional support and assistance which makes it more likely the traveller will attend and retain work. Although the user generally pays a low fare (or sometimes travels for free), for what is usually an expensive service, the value to the sponsoring agency is high because of the

opportunity cost that would derive from failure to make the trip. Either the trip meets a statutory duty, or the possible benefits (taking someone off benefit receipt and putting them into tax generating employment) are significant.

2.8 The Scottish Ambulance Service is planning to progressively withdraw from this market to concentrate on high care needs, more closely reflecting its core mission. However this raises questions about how the displaced trips are to be delivered and paid for, if the NHS requires more DRT provision to improve patient attendance levels.

2.9 Many local authority education services are provided within this market. Also many day care, domiciliary and residential service providers rely heavily on DRT to cater for the varied demands of their service users.

High Care Needs DRT

2.10 The personal level of care required by many older people, disabled people and families with young children can often be met better by DRT. These services include those run by CT groups, local authority social services, special needs education, and patient transport services.

2.11 These services are typically delivered by minibus sized vehicles and represent a fast growing market. The moves toward more centralised service provision such as hospitals and supermarkets alongside an increase in care in the community developments as services become less centralised, result in a situation where the optimal vehicle size will be dependent on particular user and provider characteristics and trip needs.

2.12 The health sector is responsible for ensuring that patients generally can access health care and has a statutory responsibility to provide ambulance services, including non-emergency Patient Transport Services (PTS). In delivering this service, the principle currently applied is that PTS is only provided to those who have a medical need for transport and no other means of travel. Medical need has not however been defined consistently and transport provision has not reflected the needs of patients (SAS 2001).

2.13 Patient transport is not available to access primary care (GPs, opticians, dentists, pharmacists) but some health agencies use NHS funds to support public transport (e.g. as part of a travel plan).

Best Value Public Transport DRT

2.14 In comparison to conventional fixed route bus services, DRT public transport services have the potential to improve network coverage at lower cost in areas of low demand or for users with particularly dispersed mobility needs. In particular, there may be scope for DRT services to reduce costs by replacing conventional fixed route services in areas or times where patronage is low.

2.15 DRT can also improve value from the fixed network by providing feeder services into mainline bus and rail services.

Funding sources for DRT

2.16 Whilst markets and funding sources are closely related it is helpful to look more closely at who pays for what services. This helps to illustrate gaps in provision relative to the marketplace. For example low income groups are amongst the heaviest users of premium services, since they need to rely on them for trips when they have goods to carry e.g. food shopping at the supermarket.

2.17 Table 2.1 shows the range of funding sources being used to provide services in each of the market places.

Table 2.1: Types of DRT and market

Market	DRT service	Funding Sources	Examples
High Care Needs (in principle, but not always in practice)	Non emergency patient transport (medical grounds)	NHS Community / charity / fundraising	Ambulance Service Voluntary Car schemes (e.g. Red Cross, WRVS etc.)
	Older persons / Disabled persons – general	Local Authority (transport / non transport) Community / charity / fundraising	Dial-a-ride services (LA, Commercial and CT provision)
High Value to Agency	Access to Work	Local Authority Transport Employment agencies Employers Central government grants	'Job Links' services Deeside Shuttle (Nth Wales)
	Social Work transport (<i>often also high care needs</i>)	Local Authority (non transport)	Local Authority Provision
	Education (low volume or special needs)	Local Authority (non transport)	Local Authority Provision
Premium Service	Commercial DRT	Users	Airport Shuttles (USA) Taxis, private hire, Yellow Taxibus
Best Value Public Transport	Subsidised general public DRT / subsidised fixed bus replacement	Local Authority Transport Central government grants	Wiltshire Wigglybus Bicester taxibus Corlink
	DRT feeder services	Local Authority Transport Central government grants	Lincolnshire Interconnect

2.18 Funding for DRT therefore comes from three main sources:

- Government transport funding – national and local government discharging statutory duties to ensure that transport is available to meet all social and economic needs. This includes concessionary fares and Taxicards which leave the discretion with users about how and when they travel.
- Users – the fares or other funding contributions paid by passengers in line with their use of transport.
- Purchasers acting on behalf of users – usually public bodies such as health or education authorities purchasing transport for students, patients, staff etc. but sometimes commercial companies purchasing services for staff, clients, and visitors.

2.19 Traditional approaches to transport funding have concentrated on the first two of these, but government policy (Audit Commission 2001) is seeking greater integration. Under best practice approaches, the separate public funding sources fund joint delivery of services. The flexibility of DRT services allows them to achieve this integration at the delivery level with each purchaser paying for the services which meet their needs.

2.20 However progress with this integration agenda has been slow. One major problem has been that current funding is not explicitly linked to people's needs (SEU 2003) but instead to types of service delivery. Clearer accountability for accessibility and best value audits are being used to encourage more rapid change. Nevertheless, delivering better value through joint delivery is complex. Well established staff skills within a single sector (e.g. patient transport, social work transport, dial-a-ride) have not always been well tailored to joint working. Anomalies in employment conditions between drivers in different sectors have created employee relations problems.

2.21 However despite these problems significant progress has been made in some areas (DHC 2004). Incremental progress is needed allowing DRT to be progressively integrated into wider provision (FAMS 2004). The degree of integration possible between the needs of funders of bespoke services and public DRT services will heavily influence the future potential growth of public transport provision by DRT.

Costs of DRT operation in different markets

2.22 Although public DRT services are typically more expensive than conventional fixed route bus services per passenger trip, they are usually far less expensive than bespoke education, social service and health transport services (Enoch et al, 2003). However, this may well reflect lesser provision of care and a reduced requirement for peak provision.

2.23 Information on the costs and subsidies of operating DRT services is different in each market and for each type of service, so comparisons between markets are not straightforward. The factors that need to be included are:

- Vehicle type: Operating and start-up costs vary between the full range of vehicles currently used in DRT operation from taxi-based DRT schemes to large bus operations.
- Staffing levels / requirements: DRT services designed for users with particular needs (e.g. in the high care needs market) may require drivers to have additional skills, or passenger assistants, increasing the cost of operation
- Technology / Despatch centre costs: The latest IT technology solutions for booking, despatch and vehicle control are both expensive to install and maintain – particularly if in-vehicle technology is used.
- Users: Different users are likely to be associated with particular fare paying levels (e.g. DRT targeted at commuters (premium services) may charge a premium, those for persons with mobility impairments may be free / concession / low cost) and as a result the target users and their ability to pay will have a direct influence on costs / subsidy / levels of operation.

2.24 Despite these variations it is possible to outline typical costs of DRT systems as shown in Table 2.2. The table uses figures from the Audit Commission (2001), national patient transport modernisation review and other recent research (Enoch et al 2003).

Table 2.2 - Public Subsidy Costs per Trip

MARKET	SUBSIDY COSTS PER TRIP (£)			
	0-2	2-5	5-10	10-20
Premium Service	Target for Commuter service (e.g. Yellow Taxibus)			
High Value to Agency				Joblink Social and geographical Ambulance Service PTS
High Care Needs			Typical dial-a-ride / dial-a-bus LA Social Work / Education services	Medical Ambulance Service PTS
Best Value Public Transport		Typical shared taxi – based bus replacement		

2.25 Note that although the averages may come into these cost bands, this covers a wide range of costs even within each grouping. For example, it is sometimes suggested that DRT or dial-a-ride could save the health service money by running PTS because they are cheaper to run than non-emergency ambulance service costs. However the NHS has a statutory duty to ensure a full range of PTS is provided. Consequently, the £10 - £20 PTS cost band reflects a significant amount of low cost provision offset by some extremely expensive provision. Transfer of the lower cost journeys from the Ambulance Service to another provider would not, therefore, necessarily save the NHS money.

2.26 Other problems in making such comparisons are that:

- Radically different approaches are taken to capital and revenue splits, particularly where vehicles are grant aided.
- Inclusiveness – It is not always clear what costs are included e.g. the cost of running a separate Travel Despatch Centre. TDC costs can be a significant proportion of overall service delivery (see Appendix A)
- Costs depend on patronage - Operating costs increase as patronage increases due to the increase in mileage although the relationship is not linear and depends on the diversity of origins and destinations being served. This phenomenon is completely opposite to what happens on fixed services as operating costs are fairly static, irrespective of passenger numbers.

2.27 In practice, service provision needs to be managed within a budget, so the challenge for DRT scheme design is to prioritise needs effectively and maximise provision which is complementary to fixed services.

Operation of DRT

Service, Design and Routing

2.28 Despite the apparent complexity of DRT, all operations can be defined in terms of the routes, stopping points and service types as summarised in Table 2.3 (SAMPLUS 1999, VIRGIL 2000, INTERMODE 2003).

Table 2.3 DRT Route Options

Fixed routes	Service journey departing from an end stopping point (terminal) at prescribed times. This is effectively a regular bus route.
Semi-fixed routes	Depart from an end stopping point (terminal) at prescribed times. Stops at any fixed intermediate stopping points at prescribed times. Deviations to other stopping points upon request.
Flexible routes	Depart from an end stopping point (terminal) at prescribed times. The vehicle only calls at stopping points upon request.
Area-wide services	No fixed end or intermediate stopping points. No scheduled departure times from any stopping point. Limited by operational hours and area limit. Only calls upon request.

2.29 For each of the routing options different types of stopping points can be considered including: fixed end points; fixed intermediate points; predefined stopping points to be used on request; and non-predefined stopping points (such as a user's home) again used on request only.

2.30 Many DRT schemes operate as area wide services with few or no defined stopping points, resulting in maximum flexibility (e.g. most dial-a-ride services). However, in order to ensure particular destinations are served, to link in with other elements of the transport network, or to closely resemble conventional bus services, varying degrees of fixity in route design and stopping points can be applied.

TDCs and DRT operation

2.31 To receive, process and manage passenger requests for travel, DRT services need to be controlled and managed by a travel despatch centre (TDC). The TDC collates these requests, and other travel information (such as interconnection times), to produce a schedule for the service, and despatches this to the driver prior to (or in more advanced systems through the use of information and communication technologies, during) the journey.

2.32 Travel booking can occur through a range of methods, with telephone, email, web-based, and text message all now possible through the development of new ICTs.

2.33 Table 2.4 sets out the stages in the development of DRT TDC operation (FAMS, 2004).

Table 2.4 - TDC operation

Layer	Category	Description
1	Basic	Dial/write-in DRT, all bookings and assignment manual – no ITS support.
2	Stand alone	Real world commercial system with ITS supported services. Ranges from one to many services through a single TDC.
3	Expanded agency	Collaboration of multiple service providers to provide integrated services from users' viewpoint. Reduces tasks and overheads for operators. Exploits synergies and optimises resource utilisation. Business and organisational models still being tested and developed.

2.34 Most DRT services are on a small scale or targeted at specific categories of people in the community. As a result, they operate at the basic 'Layer One' category with no or little IT support. Indeed, although there is much discussion in the research literature, and many pilot trials of new IT and communication technologies to operate and schedule DRT services, for many low use operations in rural areas, and specialist services such as home to hospital transport there is no need for high levels of IT support.

2.35 IT and communications technologies only become important when DRT projects begin to involve vehicle brokerage and multiple resource allocation (as identified in 'Layer 3'), route scheduling for large passenger numbers and real-time booking capabilities. The key benefits of using modern ICT systems for DRT services are that higher numbers of journey requests, and short or real time requests can be made direct to vehicles. The software systems manage and process requests, and can stay in communication with vehicles through special on board units using GPS (Global Positioning Systems) and the use of the 'mobile phone' network to transfer data and journey requests.

2.36 This has the potential to create a service that can constantly adapt to the needs of users, and avoids the restrictions placed upon services that have to be booked before the vehicle has left its base. Additional benefits such as route planning assistance through GIS systems, records of journeys, the streamlining of requests from internet, text etc., and the production of reports and invoices are also added benefits to these systems.

Operating considerations and travel needs

2.37 DRT aimed at disabled people or older people is used for multiple trip purposes such as shopping and visiting. They are commonly operated by Community Transport providers or transport operators under contract to the local authority. This type of transport often requires pre-registration (membership), which is determined by criteria such as degree of disability or age, and normally requires advanced booking.

2.38 Non-emergency medical transport and social work transport are both highly specialised forms of transport generally operated by public or quasi-public agencies (or by contractors to them) for specific purposes. These are not freely available to the public and are used to transport clients to/from home to a healthcare or therapeutic site, or between two such sites.

2.39 Commercial DRT (outside conventional taxi use) is more common overseas than in Scotland, but includes airport shuttle services. These have developed in recent years but tend to compete with taxi operators rather than be provided by traditional airport

taxi operators. Inter city/rural connection services operated by minibus/van type vehicles (e.g. in New Zealand and Newfoundland) complement or compete with traditional longer distance bus services and offer both door to door service for users as well as lower operating costs. The South Fife to Edinburgh trial which was run by Stagecoach is the nearest service to this type of market to emerge in Scotland.

Legislation and DRT

2.40 The 1985 Transport Act did not anticipate the development of flexible services, and the regulatory framework primarily depends on the size of vehicle. Consequently there is no single legislative niche for DRT services. Table 2.5 summarises the legislation by DRT market. The legislative provisions used are:

- S19 – Section 19 permits issued under the 1985 Transport Act can be issued to organisations concerned with education, religion, recreation, social welfare and other activities of community benefit but only entitles them to carry a defined population (not the general public). The defined population can include those in a geographical area who do not have access to their own private transport.
- S22 – Section 22 permits issued under the 1985 Transport Act are granted for non-profit groups that use unpaid volunteer drivers, to enable them to operate registered bus services for the public, using a minibus.
- S1(4) car sharing – Section 1(4) of the 1981 Public Passenger Vehicles Act 1981 allows not for profit contributions to vehicle running costs to be accepted by drivers without bringing this within PSV or taxi licensing. This is the legal basis for social car schemes, ambulance car services, some other community transport activities and is the common basis for small vehicle dial-a-ride operations for people with disabilities.
- Taxi and private hire car sharing – Provisions in the Transport Act 1985 allow operators to offer sharing of private hire cars and taxis licensed by local authorities under the Civic Government (Scotland) Act 1982, at the time of advance booking.
- PSV “O” Licence - Public Service Vehicle (PSV) Operator Licences can be issued to authorise the operation of regular services on fixed routes with flexible sections as well as totally demand responsive services. Less onerous restricted and special restricted licences can be issued to certain minibus and taxi operators.
- Unlicensed operation – this would apply where no charge is made, directly or indirectly, for the service and therefore no ‘hire or reward’ exists, which is the criterion that triggers regulation under the systems in operation within the UK. In addition, local authorities can use their own school buses to operate ‘local services’ (i.e. registered local bus services) without a licence under S46 of the 1981 Public Passenger Vehicles Act 1981.

Table 2.5 - DRT Markets and Legislation

Market	Type of Operation	Types of Operator	Types of Licence
High Care Needs	Non emergency medical	Ambulance Trust, Hospital Trust or Primary Care Trust	None usually needed; some have Section 19, some use car-sharing
		Private contractor (not usually scheduled service operator)	PSV 'O' Licence, Hackney, Private Hire
		Community transport	Section 19, car-sharing, some PSV
	Social work transport; Disabled Persons Older Persons	Local council	Licence only needed if charges made or work for other authority, then Section 19
		Private contractor (not usually scheduled service operator)	PSV, Hackney, Private Hire
		Community transport / Age Concern / Disability Organisation or similar	PSV or Section 19, car-sharing
		Individual volunteers managed by the council	Car-sharing
High Value to Agency	'JobLink' services	Bus operator	PSV
		Taxi or Private Hire operator	Hackney, Private Hire
		Community transport	PSV, Section 19
Premium Service	Commercial DRT	Bus operator	PSV
		Taxi operator	Special Restricted PSV, Hackney
Best Value Public Transport	General public DRT	Bus operator	PSV
		Taxi operator	Special Restricted PSV, Hackney
		Community transport	Section 22 (some utilising Section 19 to maximum potential)

2.41 There are therefore three main legislative options for DRT services:

- Public Service Vehicles (PSVs)
- Taxis and private hire cars
- Community operations

PSVs

2.42 Route registration can be rather complex due to the huge range of DRT options potentially available to an operator. As a result the registration of services with Traffic Commissioners proved a barrier to the development of DRT in the early years of its growth (Grosso et al, 2002), particularly as a result of differing interpretations of the regulations between different Traffic Area Offices (TAOs) and Commissioners.

2.43 Public Service Vehicle (PSV) Operator Licences can be issued to authorise the operation of vehicles of any size (but normally over 8 passenger capacity). Subject to

registration of the service, this enables a PSV Operator to run vehicles on regular services with a fixed route and a series of fixed stopping points. However, PSV licences can also be used to operate fixed routes with flexible sections as well as totally demand responsive services. However, at the present time there is no provision for specific registration of demand responsive bus services in Scotland, though these can and have been approved on a case-by-case basis.

Taxis and Hire Cars

2.44 The “taxibus” concept for operating DRT services introduced by the Transport Act 1985 allows a taxi operator, who must be the holder of a Hackney Carriage licence issued by their local authority, to obtain automatically from the Traffic Commissioner a Special Restricted PSV Operator’s Licence, which then entitles them to register a local bus service, using their taxi. They must comply with the standard bus service registration requirements but, as with PSV services, this can be specified on a DRT basis.

2.45 Restricted PSV licences enable an organisation which is not primarily a PSV operator to run up to two minibuses without a professionally qualified transport manager. This is mostly used by e.g. hotels to operate shuttle minibuses, but is used by taxi or private hire operators to enable them to operate one or two larger vehicles in their fleet.

2.46 Private hire cars and taxis are subject to local authority licensing under the Civic Government (Scotland) Act 1982 and possibly any relevant local by-laws and regulation. Sharing when booked in advance is allowed for both types of vehicle. This cannot be used to operate a local bus service, but it is the basis for many sharing schemes promoted by local authorities. These services all require advance booking, have a fixed fare schedule, and the local authority makes up the difference between the fare and the mileage tariff agreed with the operator. The services do not run if no bookings are received. This approach is the legal basis for most of the commuter taxibus systems in operation in Great Britain.

Community Operations

2.47 The community sector can operate DRT services under Sections 19 and 22 of the Transport Act 1985. These exempt the operator from having to comply fully with the more onerous requirements of PSV Operator licensing.

2.48 Section 19 Permits can be issued to organisations concerned with education, religion, recreation, social welfare and other activities of community benefit. However, such services cannot be open to the general public and a restricted sub-set of the population needs to be defined. Although this may seem restrictive, DfT provided advice in March 2003 encouraging a usefully broad interpretation of “defined populations” covering those in a defined geographical area who did not have access to their own private transport. It has been shown that the parameters can be drawn generally enough so that, for example all residents in certain deprived areas may be eligible. However, the restrictions would tend to limit any inward trips (into the area from outside) and as a result, operation under Section 19 permits would not be an ideal mechanism for bus replacement DRT services

2.49 S22 Community Bus Permits are granted for non-profit groups that use unpaid volunteer drivers, to enable them to operate registered bus services for the public using a minibus. Registration arrangements are the same as for PSVs i.e. they can be on a fixed route or a DRT basis.

2.50 Social car schemes and some other community transport activities operate under the car-sharing provisions of the 1981 Public Passenger Vehicles Act. This is the common legal basis for dial-a-ride operations for people with disabilities using vehicles with fewer than 9 passenger capacity. Drivers may be paid, provided the aggregate of the fares collected is less than the running costs of the vehicle for the journey. Given that these are not-for-profit services this is almost always the case.

Statutory Authority Operations

2.51 Where no charge is made for the service, then there is no requirement for licensing, as 'hire or reward' does not exist. This applies commonly to social work and home to school transport operated by the authority itself and to non-emergency transport operated by the Scottish Ambulance Service. Note that other operators providing the same service on contract to a statutory authority would require a licence, as they would be a 'hire or reward' operator. Some social work authorities have introduced charges in respect of home to day centre journeys, and have needed to acquire S19 Permits to enable this to be done legally. The absence of any licence has been one of the barriers preventing the introduction of charging for ambulance journeys provided on social grounds.

2.52 S46 (1)(b) of the 1981 Public Passenger Vehicles Act 1981 allows an education authority to use a school bus belonging to the authority, when it is not being used to provide free school transport, to provide a local service, without requiring the authority to hold a PSV 'O' licence or the vehicle to be a certified PSV, tested as such and so on. This section of the legislation was designed to promote coordination between home to school transport and mainstream conventional bus transport, particularly in rural areas. However, given that many authorities' school bus fleets are not conventional buses or coaches, but are primarily accessible minibuses designed for children with special educational needs, it provided an opportunity for authorities to develop wheelchair accessible bus services on a scheduled or DRT basis, at marginal cost using the downtime of existing vehicles. Unfortunately, this was an opportunity that most authorities missed, with some notable exceptions such as Grampian's initial development of the '65 Special' accessible DRT service on Deeside. In England, it is used by, for example, Telford & Wrekin Council to operate their Wrekin Rider service.

DRT legislation in Scotland

2.53 Table 2.6 summarises the potential legislative routes for DRT operation in Scotland.

Table 2.6 - Summary of DRT Licensing in Scotland

Type of operation	Fixed Route + Operates on Demand	Semi-Fixed Route	Full DRT	Operating Licences
PSV (Registered + Open to Public)	N ¹	Y	Possibly ²	PSV
Taxibus (Registered + Open to Public)	N ¹	Y	Possibly ²	Taxi + Special Restricted PSV
Shared Taxi	Advance Booking only	Advance Booking only	Advance Booking only	Taxi
Shared Private Hire	Advance Booking only	Advance Booking only	Advance Booking only	Private Hire
Community Bus - Section 22	Y ³	Y	Possibly ²	s22 Permit
Section 19 (non public) ⁴	Y	Y	Y	s19 Permit
Car Sharing (not for profit)	N	N	Y	None
Statutory Authority Unlicensed	Y	Y	Y	None
Education Authority S46 PPVA 1981	N ¹	Y	Possibly ²	None

1. There are many examples of registered local bus services which operate extensions on demand, but none that do not operate if not requested

2. The Flexible Registration arrangements introduced in England and Wales do not apply in Scotland. However, the Scottish Traffic Commissioner has traditionally taken a more pragmatic approach to service registration, and allowed flexible services to be registered under the original arrangements. For the same reason, although in principle BSOG is not claimable on the flexible elements of the route, we suspect that such claims are in fact made and accepted by DfT on the basis that there is in principle no 'flexible registration' in Scotland.

3. See discussion of S22 services below

4. To be eligible for BSOG, s19 services must be restricted to certain passenger groups. Consequently, a service that is open to the widest group of passengers may not be able to claim BSOG

Bus Service Operators Grant (BSOG)

2.54 There are some anomalies in the application of BSOG (formerly fuel duty rebate) which can be disincentives or barriers to DRT. For PSV based DRT operations (including registered taxi based services operating under Special Restricted PSV licences), BSOG is not available for 'flexible' sections of route. Denying this mileage-based support has inhibited the development of 'area-wide' DRT services which could be particularly beneficial in some parts of Scotland. Recent Regulations in England and Wales only (DfT 2004) have extended BSOG to flexible sections of route.

2.55 Shared hire car or taxi services are also not eligible for BSOG. BSOG was extended to Section 19 services in Scotland, England and Wales in 2002 to stimulate the development of community transport services. This was highlighted as important for the development of social inclusion policy and the changes in England were partly driven by a Social Exclusion Unit review (SEU 2003). This was done by enabling Section 19 permit holders to claim BSOG when operating services that mainly carried:

- people aged 60 or over
- disabled people
- people on income support

- people in receipt of jobseeker’s allowance
- people socially excluded by reason of poverty, unemployment, homelessness, geographical isolation, ill health, religious or cultural mores
- people with a fear of using public passenger transport services
- carers or children under 16 accompanying the above.

2.56 The eligible services would generally not include what would be classified as ‘excursions’, which would cover infrequent group transport from one location to another. However, many to one DRT as well as DRT for excluded groups (outlined above) would be eligible for BSOG.

2.57 The registered service part of Community Bus (S22) operations is eligible for BSOG. In practice, because such services are often deeply rural and embedded in one or two local communities, a pragmatic amount of leeway has been allowed as regards route detail and timetable detail. Like PSV local bus service operation, the demand responsive part of a community bus should in principle not be eligible for BSOG.

2.58 Table 2.7 shows the DRT services eligible for BSOG.

2.59 The only DRT services currently eligible for BSOG in Scotland therefore are those where the service is operated for specific groups under Section 19 permits. This limits claiming of BSOG to non-profit groups operating DRT for non-public, excluded groups.

Table 2.7 - BSOG Eligibility in Scotland

Type of service provided	Eligible for BSOG?	Notes
Non emergency medical	No	
Social service / Special Education transport	No	A
Non public DRT – community (s19)	Yes	
Non public DRT – commercial operator under contract	No	
Flexible route services	Partially	B
Commercial DRT	No	C
General public DRT (including bus replacement)	No	
Notes		
A – Some local councils have now applied for Section 19 permits and the services operated would normally be eligible for BSOG if the conditions were met.		
B – The fixed route section of a flexible route is eligible for BSOG.		
C - Unless fixed route sections were operated.		

VAT and DRT services

2.60 The VAT legislation offers a potential barrier to the development of best value DRT in cases where taxis or smaller vehicles are used. VAT is currently zero rated for the transport of passengers in any vehicle designed or adapted to carry 9 passengers or more (in addition to the driver). Smaller capacity may be accepted where an eligible vehicle has had seats removed temporarily to enable the carriage of disabled persons (HMRC 2002).

2.61 In many cases DRT services do not require large vehicles to operate, and taxi-based DRT schemes are never likely to fall into this category due to the typical size of

taxi vehicles, and the fact that the largest capacity that can be licensed by a local authority under the Civic Government (Scotland) Act is for 8 seats plus the driver. It is interesting to note that the VAT legislation does take into account the need for the Royal Mail to run small vehicles for their Post Bus provision, but no amendment is presently available for other small scale public transport equivalent provision – even for taxibuses running local bus services under special restricted PSV ‘O’ licences. Discussions in the past with Customs & Excise suggest that any extension of zero-rating is unlikely given the need to harmonise within Europe.

2.62 The VAT legislation results in a situation where the ability to operate commercial DRT services that use small vehicles is constrained by the need to charge VAT at the full rate to users. Local Authorities and operators of supported services should allow for VAT on fares when tendering or negotiating a contract price.

Legislative anomalies

2.63 There are some important issues that arise from this complex mix of legislation that actively constrain the development or potential cost savings/efficiencies of DRT services. These are outlined as follows, and particularly limit the development of best value DRT solutions which could be used to replace or be set up as an alternative to fixed bus routes:

- Current legislation in Scotland does not formally allow the registration of fully flexible (area wide) bus services
- BSOG cannot be claimed for any flexible sections of route (this is not the case in England)
- Restricted PSV licensing limits the number of vehicles to two – constraining the development of taxi-firm based DRT initiatives with minibuses to very small operations.
- VAT has to be charged at the standard rate for passenger transport in vehicles of less than 9 passenger seats – constraining the development of MPV, Car or Taxi vehicle use in DRT services.

2.64 Setting up best value DRT to replace fixed route services can offer greatly enhanced accessibility for users as services are not restricted to fixed timetables or routes. However, current legislation results in a situation within which an operator, in switching from a conventional bus route to a fully flexible DRT service using small vehicles has to both lose the BSOG income (between 80%-100% of duty paid on fuel) and increase fares by 17.5% (VAT), potentially reducing patronage, or simply pass on 14.9% (17.5/117.5) of fares income to Customs & Excise, or in the case of small operations, not register for VAT and forgo the ability to reclaim the input tax paid on fuel and other costs.

2.65 There is also a potential problem with loopholes created in the interface between PSV and taxi/private hire car licensing. If a small vehicle operator wishes to avoid particular requirements of the local authority (e.g. mandatory wheelchair accessibility) they can potentially try an alternative route via the Traffic Commissioner under PSV legislation. This is not an efficient or satisfactory way to protect consumers, so greater harmonisation is needed between these legislative routes as has now been done in England under the 2000 Transport Act.

3.0 DRT EXPERIENCE IN SCOTLAND

3.1 This chapter reviews what is known about current DRT schemes operating in Scotland and the lessons which have been learned from innovative practice. The work was undertaken with:

- A mapping and appraisal of schemes in Scotland, undertaken through a survey of all local authorities, literature and web-based research. This enabled a broad picture of the level of DRT existent in Scotland in terms of locations of schemes, markets served, operating legislation, and the operators and commissioners of schemes.
- An in-depth review of DRT pilot projects funded by the Scottish Executive, and other longer established Scottish DRT schemes. This was undertaken through consultation with key stakeholders involved in DRT projects including users. This compared and contrasted experiences within pilots, between areas and with other schemes across the country.

3.2 The lessons learned are summarised in relation to: markets, funding, costs, operation and legislation.

How much DRT is out there?

3.3 The purpose of this work was to identify the scope for DRT development into new markets. The surveys therefore concentrate on these new markets including:

- Operation and management by commercial (bus and taxi firms) operators, the public sector (Local Authorities) and voluntary / community transport groups
- User types, including both public DRT and specialist transport for people with impaired mobility, elderly people etc.
- Legislative and vehicle types including car sharing schemes; S19, S22 and PSV bus operations; taxi operations etc.
- Operational models including area wide, flexible routes, flexible stops etc.

3.4 A full review of taxi services, patient transport, education and other established DRT delivery was beyond the scope of this review so, to keep the exercise manageable, conventional taxi and hire car operations were not included. Taxicard schemes were also not included as these were considered to be a fall back mechanism for funding conventional taxi travel. However, although not included as DRT schemes, the existence of taxicard schemes was noted to explain why authorities did not have dial-a-ride services for disabled users.

3.5 The starting point was to prepare a database of all known schemes from lists provided by funders and published research. Details of the relevant schemes in any local area were then sent to the local authority with a request for them to correct any errors, such as schemes that were no longer in operation, and add missing details about DRT provision including:

- Service operator & contact details
- Service route or area
- Type of DRT operation
- User characteristics
- Vehicle type

- Organisation commissioning / managing service
- Travel despatch centre location and arrangements
- Operating legislation
- Funding Source(s) and user charges
- User Numbers (per week)

3.6 The DRT schemes identified through this stage of the research are shown in detail in Appendix G.

Table 3.1 DRT schemes by Local Authority Area

Local Authority	TOTAL	User Restrictions		
		Elderly and Mobility Impaired	Health	Public
Highland	20	9	1	10
Aberdeenshire	17	11	5	1
Argyll and Bute	10	4	1	5
Comhairle nan Eilean Siar	9	7		1
Dumfries and Galloway	9	4	1	4
Angus	8	4	2	2
Fife	8	5		3
Scottish Borders	8	8		
Shetland Islands	7	1	1	5
SPT (managed services)	7	1		6
City of Edinburgh	6	5	1	
East Lothian	6	5		1
Perth and Kinross	6	4		2
Midlothian	5	3		2
Moray	4	4		
Orkney Islands	3	1		2
Falkirk	2	2	1	
Glasgow City	2	2	1	
Stirling	2	2		
West Lothian	2	2		
Aberdeen City	1	1		
Dundee City	1	1		
North Lanarkshire	2	1	1	1
South Ayrshire	1	1	1	

3.7 The community sector operates and commissions over half of the DRT schemes identified (approximately 50 of which are car sharing schemes). However it should be noted that these 79 community schemes will only represent a fraction of the total CT supply. For every scheme that is identified, there will be several that have been missed. This was apparent when assembling the list. Several relatively high profile publicly funded CT schemes were not identified in the first sift and only picked up through stakeholder interviews later. There is a need for a more systematic approach to managing information on CT provision in the future. This is the subject of a parallel review, but for the purposes of this research the 79 schemes provide a picture of the role of the sector for CT provision in Scotland.

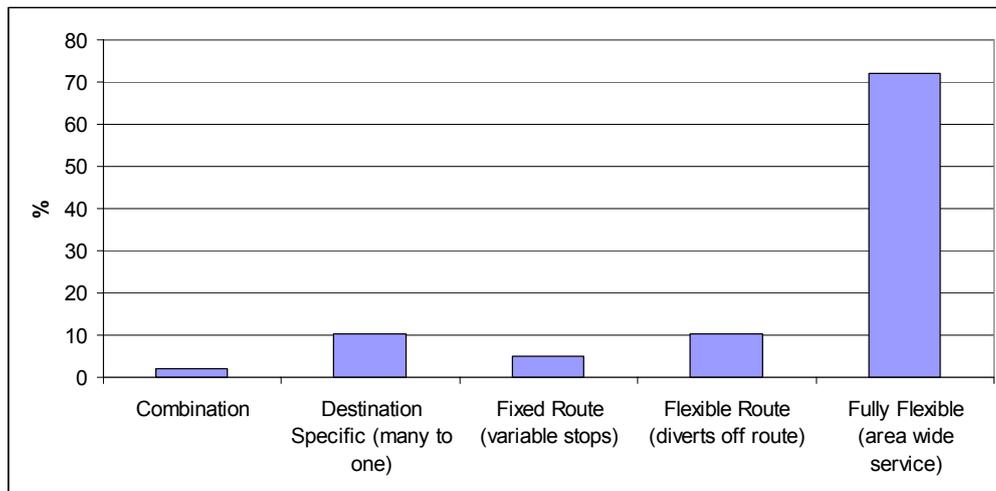
3.8 Commercially operated services commissioned by local authorities are the second largest group as shown in Table 3.2. This reflects the long established use of DRT in meeting specific needs of people who have mobility difficulties, or live in remote areas where conventional bus services are not sustainable.

Table 3.2 DRT Operators and Organisations Commissioning these Services

		SERVICE OPERATOR		
		Local Authority	Volunteer /Community	Commercial
SERVICE COMMISSIONER	Local Authority	12	8	38
	Volunteer /Community	0	79	4
	Commercial	0	0	1

3.9 The service operation varied considerably but Figure 3.2 shows that area wide services made up by far the greatest number.

Figure 3.2 – Type of Service



The pilot schemes

3.10 To identify the process, challenges and issues involved in promoting DRT in Scotland the Scottish Executive funded nine pilot schemes.

3.11 Table 3.3 summarises the nine schemes and the main lessons learned. Further detail is shown in Appendix E.

Table 3.3 - Overview of Pilot Schemes

Pilot	Market	Scheme	Service Operator	Key Lessons Learned / Benefits
Edinburgh	N/A	<i>Community Transport Development</i>	Edinburgh Community Transport Operators Group	<ul style="list-style-type: none"> Experiment with smaller vehicles has added flexibility Extra funding facilitated support across / between operators and enhanced service development and sustainability Building / supporting from established partnerships successful
Glasgow	N/A	<i>Community Transport Development</i>	Community Transport Glasgow	<ul style="list-style-type: none"> Funding has facilitated capacity building / general CT service development 'Growing pains' experienced in developing joint working across groups with little previous contact
	Best Value / Premium Service	Hospital Visiting Service	Community Transport Glasgow	<ul style="list-style-type: none"> Hospital visiting service market difficult to build
Aberdeen	High Care Needs	Urban dial-a-ride	Stagecoach Bluebird	<ul style="list-style-type: none"> Taxi call centre / bus operation problematic due to ownership / control issues Concerns over future capacity of one vehicle / one city operation
Dundee	High Care Needs	Shopper Service for elderly	Strathtay Scottish / DATAG	<ul style="list-style-type: none"> Expansion of shopper service
	N/A	<i>Community Transport Development</i>	CT Dundee	<ul style="list-style-type: none"> CT officer highlighting & implementing co-ordination and cost saving opportunities within Council CT presence as a result of leadership from CT Officer
Angus	Best Value	Flexible Transport Agency / <i>Community Transport Development</i>	Angus Transport Forum	<ul style="list-style-type: none"> Central agency valuable in identifying transport needs and solutions Operational barriers to fully integrated flexible operation Development of CT Solutions a key outcome of identified needs
Aberdeenshire	Best Value / High Care needs	3 S19 DRT services	Aberdeenshire Council / Buchan Dial a Community Bus	<ul style="list-style-type: none"> Overlaps between high care needs and best value DRT Successful Education / Social Work/ CT sector joint delivery Trial of centralised TDC booking demonstrating strengths of IT in forging joint working but weaknesses of centralised approach in responsiveness and flexibility.
	Best Value	Subsidised service with diversions	Stagecoach	
	Best Value	Area wide fixed bus replacement taxi DRT	Kininmonth Cabs	
North East Fife	Best Value	Subsidised service with diversions	Stagecoach	<ul style="list-style-type: none"> Overlaps between high care needs and best value DRT

Pilot	Market	Scheme	Service Operator	Key Lessons Learned / Benefits
		Area wide taxi DRT	Town and Country Taxis	<ul style="list-style-type: none"> Strong 'community' element in taxi DRT delivery
Argyll and Bute	Best Value / High Care needs	Enhanced DRT bus service on Tiree	Local PSV operator	<ul style="list-style-type: none"> Overlaps between high care needs and best value DRT Social work / Local operator co-ordinated delivery
		Social Work / Public DRT in Campbeltown	West Coast Motors	
		Lomond area SPT Ring 'n' Ride	SPT / First	
Highland	High Value to Agency	Network of taxis offering access to work DRT	Range of local taxi firms	<ul style="list-style-type: none"> Clear aims for service and plan for sustainability Co-ordination and joint resourcing between key agencies – LA, Jobcentre, employers

Other case studies

3.12 In addition to the general surveys of DRT schemes, and the detailed monitoring of progress in the pilots, a number of other identified schemes were investigated in more detail as summarised in Appendix D. These were:

- The Stagecoach Taxibus from south Fife to Edinburgh – an experiment in commercial DRT
- Strathclyde Passenger Transport DRT services – Large scale operation of Dial-a-Bus and Ring'n'Ride services.
- Handicabs Lothian – The leading Scottish urban DRT operation.
- Various examples of Council Dial-a-Bus and Ring-and-Ride services including services in Fife, Dumfries and Galloway and Midlothian.
- Highland Council Taxi Feeder Services – Designed to link passengers into the fixed public transport network at Portree, Glenelg, Kinlochbervie and Assynt.
- Gaberlunzie in East Lothian – Funded under the Rural Transport Fund to widen rural public transport coverage.
- North Lanarkshire Job Shuttle – Funded using social inclusion, working for families, resources as a leading example of a high value to agency service.

Results of User Surveys

3.13 Selected user surveys were undertaken on some of the pilot schemes to identify the features of the services which users appreciated or found difficult. Key points identified were:

- Flexibility and reducing advance booking times - Some interesting differences between centralised and operator-run TDCs were highlighted from user interviews. Central Buchan Service taxi DRT trip requests are encouraged at least a week in advance, and generally no later than a day before travel, although some flexibility non this can be offered. This is partly due to a centralised TDC, with pick up timings fixed to enable an efficient routing / schedule to be developed for the vehicles. User / operator consultation has suggested that the less flexible the booking approach, the more users expect the vehicles to run exactly to the pre-

determined time, and this is not always easy with variable conditions on the roads. Conversely, trip requests on the East Fife service are managed directly by the taxi firm, and as a result the service has the ability to be very flexible and meet requests for trips at very short notice. Scheduling is, therefore, very dynamic and the direct contact with the operator meant that users appeared to understand that the service has to be flexible, and were more tolerant to ‘delays’ or less precise pick up times.

- Expectations - On Aberdeenshire Council DRT services predominantly serving elderly people, the users had come to expect that services always served the same (e.g. shopping) locations and had not considered that the services could be used for other purposes and locations, and therefore always booked the same trips.
- Ownership - Having a non-local number for the call centre is considered by some to act as a barrier as users perceive remote TDCs as having a lack of local understanding. However others did not perceive remote TDCs to be a problem.
- Threat - Direct transfer from fixed route bus services to DRT provision (e.g. in Central Buchan) resulted in perceptions that the bus service ‘was being taken away’ despite a direct replacement, providing more flexible provision, being introduced. Aberdeenshire Council had to manage this negative feedback through enhanced publicity and direct user engagement

3.14 These findings highlight the importance of the impact of user-provider interactions in DRT delivery, and the impact that booking procedures can have on user understanding and acceptance. Users may be slow to understand how to access DRT, or adjust to a situation where they can use a service to take them anywhere they want so this process of change needs to be managed.

Lessons for DRT markets

Best Value DRT in Scotland

3.15 Much of the best value DRT service developments have been as a response to calls from the local community through bus forums and community councils etc, for an increase in the bus service provision. This, along with Public Transport Officers’ knowledge of gaps in the public transport network coverage, has been the main tool used to design the areas served by the DRT projects (e.g. Fife Go-Flexi Pilot, Highland Taxis feeder services, Midlothian Dial a Journey, Gaberlunzie (East Lothian)).

3.16 SPT provide seven (two jointly funded with Local Authorities) best value rural DRT solutions using minibuses operated by the commercial bus sector serving the Glasgow hinterlands. These were set up to fill gaps in the Public Transport networks, with the capacity of the service (i.e. number of vehicles / hours of operation) dictated by the level of funding that can be sourced for each area. In contrast the Highland Council operates its DRT services using taxi operators reflecting the lower passenger volumes in remoter areas.

3.17 In a small number of cases DRT projects have been used to directly replace high-subsidy fixed bus routes to offer better value for money and increased accessibility. Examples include the Aberdeenshire Central Buchan pilot service, and some of the SPT Ring’n’Ride services (although in most cases services were not direct replacements, but general area-wide services).

3.18 The data on costs for these schemes is limited, but the benefits appear to have derived from wider network coverage than would have been affordable with fixed route

services. However, by providing many more expensive trips the overall subsidy per passenger has increased.

3.19 This evidence also highlights that developing DRT in one market can have benefits in other markets. Services such as the Scottish Executive pilots in Aberdeenshire, the Fife taxi based Go Flexi service, and the pilot services in Argyll and Bute all have patronage by users who would not normally be able to use conventional bus services. Therefore, even though these other schemes are designed as best value public transport, they have significant benefits in the high care needs market, being physically accessible door-to-door services.

3.20 Since the door-to-door provision results in users with high care needs being able to use public transport, this relieves the demand on other providers of door-to-door services such as social work departments. It is therefore important to ensure that these costs and benefits are fully recognised in fund assembly and management of best value DRT.

3.21 One noticeable gap in DRT development in Scotland, both in Best Value Public Transport DRT and in Premium Service DRT, has been in shared taxi rail feeder services. These are common on the continent, with the Dutch TreinTaxi system particularly well known. In contrast to Scotland, there are some examples of this approach in England, operated for reasons of: traveller convenience (Virgin car service); shortage of car parking space at stations (Bicester taxibus); rural access (Twyford); and personal security (London Underground). There is even a DRT feeder to a motorway stop on the Oxford to London high frequency coach service. All these needs are of increasing importance in Scotland, so the existence of these successful services in England, points the way to how these issues might be tackled in the future.

High Care Needs DRT

3.22 High care needs services make up over 70% of the DRT services operating in Scotland, reflecting the long established need for door-to-door services for persons with mobility impairments. There are a variety of routes though which this type of service is delivered and some examples of this are shown in Table 3.4.

3.23 In addition to the wide range of operators identified in the table, other national services which are not included in the analysis offer DRT services to the high care needs sector, particularly: the Scottish Ambulance Service's non-emergency patient transport service and statutory local authority education and social work provision.

3.24 The high care needs market is not only the largest in terms of volume but accounts for the most expensive services in terms of cost per passenger. Within the scope of this work it has not been possible to undertake a review of the efficiency of this market overall. However the concerns of the Audit Commission (2001) that there may be potential for improved value through better integration of services can be reinforced based on the evidence in this review suggesting underutilised social services vehicles, patient transport and dial-a-ride undertaking similar roles and multiple TDCs for very similar trips.

Table 3.4 - Examples of High Care Needs Services in Scotland

Scheme	Operator Type	Funders
Handicabs dial-a-ride	Community Transport group	Lothian / Edinburgh Councils (Non-transport). Charitable donations / fundraising Scottish Executive RCTI / Pilot funding
Fife ring'n'ride	Fife Council	Fife Council (transport)
SPT dial-a-ride network	Range of Commercial Operators	SPT
WRVS Voluntary Car Scheme (various locations)	Community group, private cars	Donations Scottish Executive RCTI
Aberdeen City dial-a-ride	Commercial Operator	Scottish Executive Pilot funding
Dundee City friendly-bus	Commercial Operator	Scottish Executive Pilot funding
Buchan Dial-a-Community Bus	CT scheme	Scottish Executive Rural Community Transport Initiative. Charitable donations / fundraising

High Value to Agency

3.25 The Highland Council access to employment taxi based DRT service demonstrates partnership funding with services being paid for by users, employers, the Highland Council, Scottish Executive and Jobcentre Plus. The project is planning for long term sustainability and has explored targets and aims to become sustainable in the medium term through contributions from all stakeholders. Although at this early stage in the project it is difficult to conclude that this approach will work, the commitment to constantly develop services and improve vehicle utilisation should ensure long term sustainability.

3.26 The North Lanarkshire Job Shuttle demonstrates that funding can be achieved entirely through the non-transport sector. The Greater Easterhouse Development Company patient transport works project has also relied entirely on social inclusion, lottery and patient transport funding. Both projects demonstrate that complementary aims can be used to develop practical services tailored to the needs of particular groups.

3.27 However delivery outside the mainstream transport mechanisms means that awareness of services will be lower than for most DRT. Successful marketing and information therefore needs to be managed through the project delivery arrangements. In both the above cases this was achieved by targeting services directly at the client groups of the agencies.

3.28 There are likely to be many other similar schemes across the country but it was beyond the scope of the work to undertake a national review of all public sector agencies and businesses to identify services of which the local authorities had no knowledge.

Premium Service DRT

3.29 The highly publicised Stagecoach Yellow Taxibus demonstrates that the gap in the market between fixed bus provision and single user taxis is small. There are therefore unlikely to be many fully commercial shared vehicle solutions unless the vehicles can be deployed on higher revenue earning activities outside the peak periods

for the shared vehicle market: late evenings, and morning and evening commuter markets.

3.30 In the case of the Stagecoach scheme load factors were reported as 25% in off peak times, 50 to 75% in peak times, and 100% late nights. The availability of taxis late at night can be more of a problem so development of shared taxi markets for these periods could help to meet the substantial need for such services. Despite the identification of a market at certain times of day, the service is scheduled to cease operation in November 2005.

Funding and costs of DRT operation

3.31 Table 3.5 summarises some example costs of supporting various DRT services. Whilst these costs might at first seem high, it is important to review best value in relation to other public transport subsidies such as for supported public transport and railways.

3.32 Benefits and funding potential also need to consider non transport benefits. In addition to the major social inclusion benefits from excluded people being able to play a greater role in society there can be direct financial benefits such as reducing costs from patient non attendance at clinics, and supporting people into employment.

3.33 The short lifespan of the Scottish Executive pilots means that patronage is still building but key points of note are:

- The quality and availability of data is extremely poor. If DRT is to be rolled out more generally much better records need to be kept of all costs including TDC and user costs. The increased complexity of this process in comparison with the monitoring of conventional fixed route services means that this task requires particular consideration for those administering and commissioning services.
- Not all schemes reviewed have a viable future. Some will need to evolve considerably before they could be viewed as good value.
- Subsidies per passenger can be considerably less than fixed route alternatives, but at the upper end subsidies can be very large and well in excess of taxi fares for the same journeys. Where DRT subsidy exceeds single user taxi fares there must be clear care needs or other benefits to justify the higher costs. Otherwise the agency procuring the service is not securing value for money since they could purchase the trips from a taxi provider.
- DRT costs will be higher than fixed service costs due to the cost of the TDC but this is offset by wider network coverage which can lead to increased passenger numbers. However smaller vehicles such as minibuses have a higher labour component in their overall costs and TDCs are also labour intensive. Since labour and fuel costs are rising faster than other transport costs the competitive position of DRT may decline relative to fixed services.
- Services for people with mobility difficulties and remote rural services will always be more expensive.
- The introduction of the Urban Community Transport Initiative has facilitated the development of CT operation and demonstrated the potential for CT in urban areas. In each of the Edinburgh, Dundee and Glasgow pilots, progress has been commensurate with the existing CT provision in the area, strength of pre-existing joint-working practices, and the level of community capacity. That the CT schemes

involved in the pilots have been able to expand, indicates a clear role for CT in urban settings in complementing the existing public and bespoke transport services.

Table 3.5 – Funding and Subsidy Levels for Scottish DRT Services

DRT Market	DRT Scheme	Operator	TDC	Fares/Subsidy (per trip)	Funding
Best Value	Fife Go Flexi 1	Stagecoach (PSV)	Manual, at operator depot	£4.00	Scottish Executive Pilot
	Fife Go Flexi 3-8	Town and Country Taxis (SR-PSV)	Manual, through operator	Approx £7.20 (costs increased when service hours expanded)	Scottish Executive Pilot
	Aberdeenshire Central Buchan	Kininmonth Cabs (SR-PSV)	Central Council TDC (with Trapeze)	Approx £6.50 (not including TDC costs)	Scottish Executive Pilot / Council Funds
	Aberdeenshire Fraserburgh	Aberdeenshire Council Social Work / Education/ Buchan CT	Central Council TDC (with Trapeze)	Approx £6.50 (not including any BSOG claims and TDC costs)	Scottish Executive Pilot / Council Funds
	Lomond Ring'n'Ride	SPT / First	SPT central TDC	Approx £4.60 (not including TDC costs)	Scottish Executive Pilot / Council Funds
	Tiree Ring and ride	John Kennedy (Local PSV operator)	Manual, through operator	Approx £13.50	Scottish Executive Pilot / Council Funds
	Gaberlunzie, East Lothian	Eve Cars and Coaches	Pre 2001: Council TDC, Specialist software	Approx £15.70 (fully flexible)	RPPG Funding
2001 on: Manual, through operator			Approx £9.56 (fixed routes with diversions)	Council	
Premium Service	Yellow Taxibus	Stagecoach (PSV)	Manual through operator	80p per mile operating costs	
High Value to Agency	Highland T2E	Local taxi firms (Shared Taxis)	Manual, through agency	Long term plan to be self funding subject to patronage	Scottish Executive Pilot / Council Funds / Jobcentre Plus

Operation

Design, Implementation and Monitoring

3.34 Throughout the DRT schemes explored for the purposes of this review (with the notable exception of the Highland access to employment service), there has been very little advanced analysis of the potential user base, destinations and trip purposes of the DRT projects. As a result there have been no targets from which to assess whether services have met their design aims.

3.35 Routes to designing services have typically been more dependent upon: ‘intuition’ and area knowledge of service commissioners; resource levels (i.e. available funding levels); and noise (calls from local bus fora / community councils) than they have been on detailed analysis of potential users through in depth plans to enhance accessibility for users.

3.36 In most cases the implementation of the project was itself the research into whether there was sufficient demand. This is a very expensive and disruptive way to test the feasibility of schemes unless particularly novel approaches are being tested or new markets are being explored - e.g. the early stages of the Angus pilot helped to identify the service and highlighted the need for more accessible vehicles in the area.

3.37 A wide variety of datasets are available (e.g. Census, Scottish Household Survey etc.) that can be used to identify potential markets for services to inform their development and design services with appropriate resources. Further and continual detailed consultation with local groups and representatives from key destinations may also help to identify more detailed aims and targets for services.

3.38 There needs to be a much clearer assessment of the reasons why services are being introduced to ensure value for money is to be obtained from future DRT provision. Costs per passenger and patronage figures typically used to assess conventional bus routes have been used in this review in the absence of more useful information and are not necessarily the most appropriate methods for identifying successful DRT.

Flexibility and service design

3.39 Many of the DRT schemes offer a fully flexible service across a given area. However, in practice, routing and trips requests have been shown to ‘settle down’ to regular journey patterns. This has occurred to differing extents in different schemes but the types of response to this effect are particularly important and are summarised in Table 3.6.

3.40 It should be noted that area-based DRT is often operated on a first-come first-served basis (e.g. SPT Dial-a-Ride, Ring-n-Ride) and will therefore experience a tendency towards regular routes. This occurs because of the way probability works on the bookings, particularly where resources are limited resulting in some trip refusals, and also when services need to be booked longer in advance. For example, the first call might be taken from the north for a journey at peak time which means that people wanting a trip from the south at peak time will be refused, but anyone subsequently ringing in on the north-to-centre corridor will get a booking. The following day the same process starts again, but because of trip refusals, the people from south are less likely to bother to book, whereas the people in the north corridor are more likely to book. It does not matter which one of the north corridor passengers gets in first, once a booking is accepted from anyone in the corridor it guarantees that all on the corridor

will travel up to the vehicle capacity. Regular routes are therefore a natural mechanism unless action is taken to manage this.

3.41 One of the longer established Scottish best value market DRT schemes is the ‘Gaberlunzie’ service in East Lothian. This has undergone some revisions to its route and operations since its inception. Initially operating as a ‘different zones on different days’ service with a small number of fixed points, rationalisation occurred in 2001 as a result of high costs and low patronage (subsidies were approximately £12 per passenger). Services now run on new fixed routes with diversions on demand.

Figure 3.6 DRT Service Design Issues and Responses

Scheme	Initial Design	Issues	Response
Gaberlunzie, East Lothian	Area based with fixed points (different areas different days)	Regular trips and low patronage	Redesigned to deliver fixed routes with diversions on request
Central Buchan taxi DRT (Aberdeenshire Council)	Fully flexible area based service	Regular trips on particular days	Desire from some users to ‘block book’
Yellow Taxibus	Limited area of fully flexible service, then fixed route	Users unhappy with multiple pick ups	Number of pick ups limited to prevent loss of patronage
Peterhead / Fraserburgh DRT (Aberdeenshire Council)	Area based (different areas different days) to single destination	Regular users / route on each day	Frustration with requirement to book ‘the same’ trip each time

3.42 Early on in the development of the Yellow Taxibus service, Stagecoach became aware of frustration by users in the time it took for large numbers of individual pick ups to occur in advance of the fixed route section of the trip. To encourage users to stay with the service, the number of pick ups was reduced to a maximum of three. This limited the patronage of the vehicles, affecting the long term viability. The experience shows that in the premium market the tolerance to longer / extended journey times is low, and this is a key factor when considering the scope for development of this market.

3.43 In some high care needs market DRT schemes (e.g. Peterhead and Fraserburgh services within the Aberdeenshire pilot offering services to different areas on different days) the routes tend to become very regular as users choose to take the same shopping/ social trip every week. What is key for many of the users of these services is the access to a door-to-door service, to provide a shopping service, rather than the provision of a fully flexible transport option, and the requirement to call each time the same trip is required can be a source of frustration for users.

3.44 Evidence from pilot services that operate within the best value DRT markets (e.g. Fife Go-Flexi and Aberdeenshire Central Buchan) have demonstrated that regular trips are requested for individuals, but that the flexibility in the system has not yet resulted in any particular ‘fixed sections’ of route. This reflects the relatively sparse population and the limited need to turn down requests from less frequent users.

3.45 Experience therefore suggests that advice on the design of DRT services cannot be prescriptive, and that a clear understanding of user needs, existing transport activity and expectations, and service locations and usage may only come after a period of experimentation. As a result the experience suggests that managers of DRT services may need to adopt a flexible approach to the design and development of DRT to ensure that delivery is optimised for the market response.

3.46 There are no examples of complete re-evaluation of fixed subsidised services to explore how DRT schemes can be incorporated into, or develop from a network. Experience elsewhere in Europe shows that rather than leaving DRT to be used to ‘fill the gaps’, better value can be obtained from more substantial network re-design.

TDCs

3.47 For the majority of DRT schemes in Scotland, the TDC is run by the vehicle operator. In some instances the public agencies have chosen to operate the TDC themselves to prioritise trips in accordance with their needs. This requires close joint working between the operators and the public agency and the agency must be able to correctly estimate the operating capabilities of the vehicle operators.

3.48 SPT and Aberdeenshire both manage their DRT services from a centralised TDC using Trapeze scheduling software (with in-vehicle technologies planned). SPT’s service acts for an SPT wide Dial-a-bus provision (for persons with mobility impairments) and for their Ring’n’Ride network of public DRT services. Aberdeenshire’s TDC manages 5 DRT services, has recently taken on group hire management of 8 Education vehicles which is planned to be expanded to 18 in the new year, and is in consultation with a CT group in the area over the potential for managing their bookings. Fife’s ring and ride service also use similar software in their TDC and are seeking to explore how the use of this can be expanded to include a range of other services both within and outwith the Council services, including the Scottish Ambulance Service. Establishing the overhead of a centralised TDC therefore appears to be an incentive for joint agency working.

3.49 Most DRT services are however operated using paper based booking systems or generic software (e.g. Microsoft Excel), and in general, due to the low volume and rate of trip requests, there is little evidence that any advanced TDC is necessary.

3.50 This lack of need for advanced IT for small projects is highlighted by the fact that the Gaberlunzie service in East Lothian was initially managed by a Local Authority based call centre using specialist software, yet after rationalising the service in 2001, this was transferred to the operator who currently deploys a manual system.

3.51 Economies of scale can also be gained by co-ordinating transport resources (e.g. education, social work) without advanced technologies e.g. as seen in Dundee through the joint working initiated as part of the pilot.

Legislation

3.52 Reflecting the number of voluntary services identified, the majority of services operated under car sharing legislation. PSV and Section 19 regulations cover the majority of the rest of the DRT services, reflecting the involvement of commercial operators and both Local Authority and community based DRT.

3.53 It is interesting to note the number of schemes operating under taxi legislation (including Special Restricted PSV). Taxi firms can view DRT services as a threat to their business, but current provision shows that the taxi sector is amongst the main beneficiaries as DRT operators.

3.54 The Scottish Traffic Commissioner appears to have taken a flexible approach to registering services with flexible routes and there do not appear to have been any major problems with service registration of DRT services.

3.55 DRT services should not, in Scotland, be eligible for any BSOG for flexible section of route. However, a range of DRT services (e.g. Fife Go Flexi 1, Gaberlunzie, East Lothian) services have been registered and BSOG has been claimed by operators. This is probably in part due to the semi fixed nature of their routes. Stagecoach indicates that they have claimed BSOG on the fixed sections of the Yellow Taxibus service. Therefore it is possible to maximise the BSOG claimed by ensuring that fixed points are identified as extensively as possible.

3.56 Taxi operators that are running registered services under special restricted PSV licences (e.g. in Fife and Central Buchan) are not eligible for BSOG. VAT has also posed some problems for taxi based DRT, with both Fife and Aberdeenshire Council initially not being aware of the requirement to charge VAT on services run in vehicles of less than 10 seats. This legislation is relevant to the vehicle size, rather than the type of service offered and is therefore a problem for all DRT services operating with small vehicles, as these costs may have to be passed onto the user.

3.57 The existence of a broad variety of DRT schemes operating under the full range of DRT legislation in Scotland, suggests that, in general, the legislation is allowing DRT services to develop successfully. However, there are a few key areas that have been highlighted that suggest that there may be scope to enhance the opportunities for DRT through legislative changes or clarification as follows:

- Differing eligibilities for BSOG - This particularly relates to fully flexible DRT services that act as replacements or alternatives to conventional services and is a barrier to long term sustainability and transfer of fixed routes to DRT. In addition, there are ambiguities over eligibility of services that combine fixed route and flexible sections.
- The requirement to charge VAT (on vehicles of less than 9 passenger seats) has been shown to cause problems in terms of making DRT services a cost effective alternative to fixed-route services when using smaller vehicles.
- There is a need to clarify the limits of advanced sharing of taxis and, for PSV services for regular bookings and return journeys. One argument is that public DRT should not take people on diversionary routes unless they are pre-booked in order to protect the taxi trade. However if people are registered users of DRT they can be shown to be committed to the DRT services so registration as a flexible service can distinguish between the public DRT and private taxi markets in this way.
- It would be helpful to potential developers of DRT schemes, that are to become registered services, to clearly define how flexible services and semi-flexible services are treated in terms of would-be registrations.

4.0 DRT MARKET OPPORTUNITIES

4.1 DRT should form part of an overall transport and accessibility plan and the development of particular market niches should be defined clearly in transport planning e.g. the strategy for dial-a-ride services for persons with mobility impairments and conventional taxis for people who need a premium service.

4.2 DRT markets overlap so the development of one market may transfer trips away from others. This process needs to be managed explicitly to ensure that costs and benefits are allocated correctly to public agencies.

4.3 This chapter therefore looks at the future markets for:

- **Premium services in Scotland** - This includes conventional taxis, and premium taxi-bus style services, funded by users through premium cost fares.
- **Best value public transport** - This includes supported services funded through user fares and transport funding, and providing alternatives to conventional bus routes for different users and / or locations (e.g. dial-a-ride services)
- **High value to agency services** - This includes services purchased largely to meet some specific non transport aims.
- **High care needs services** – Particularly the relationship between patient transport, social services transport and other high care needs.

Premium Services

4.4 DRT is long established as a service through which users pay a premium for personal door-to-door travel through the conventional taxi and private hire market. There has been little diversification away from this core role yet there appears to be potential for the market to develop.

4.5 One successful area of growth has been for airport transfer services which appear to combine enough attributes to grow their market as a result of high quality door-to-door operation for people with luggage to carry. Further growth of this market can be expected.

4.6 Similarly, although to a lesser extent, there may be local markets for rail feeder services and even coach feeder services.

4.7 Commercial taxibus DRT has not been proven successful in any area where it has been tried in the UK and has only been profitable elsewhere when other forms of transport have been of limited availability e.g. where conventional taxi availability cannot cater for all of the demand. The lessons from the Stagecoach pilot in east central Scotland are that similar markets exist in Scotland, particularly late at night when taxi supply is limited.

4.8 To build on the Stagecoach trial there may be opportunities for commercial DRT development to be explored further through Bus Route Development Funding applications.

Stimulating the Taxi Market to innovate

4.9 It is surprising that despite having the option to deliver DRT services to offer competition to public transport this has not happened. It may be that there is no market but there are several factors which could have been restraining growth of this market:

- Local registrations for taxis within small local authority boundaries, combined with concern about cross-boundary operation
- Associated limitations placed on the number of licences issued
- Lack of co-ordination within the sector

4.10 One option to overcome these problems might be for taxi licensing to be transferred to regional authorities in the future. The benefits of restricting numbers of taxi licences continue to be reviewed. These issues would require a more detailed analysis of taxi provision and policy than has been undertaken for this study.

Best Value Public Transport

4.11 The option of developing rural DRT solutions as alternatives to increasingly unsustainable subsidies on poorly used rural services is appealing. The ability to compare costs of fixed and flexible services in rural locations as part of this review has been constrained by lack of data. However the pilots could not have been expected to provide much detail on the types of area where best value can be obtained and in principle there are major benefits to be secured with wider network coverage for lower funding.

4.12 The role of DRT in delivering a best value solution for local authority supported transport can only be fully understood and explored through a review of the local subsidised network and this should be an essential function within local transport strategies and best value reviews.

4.13 Local authorities often set limits, beyond which they will not fund, on the level of subsidy per passenger trip. However, it is important when supporting services to define ‘socially necessary’ in terms of *social need* as well as *financial cost*.

4.14 Public services operate on the basis of charging bus equivalent fares and concessionary fares. However an authority replacing many fixed services with DRT could face funding problems since re-imburement for concessionary fares for DRT will generally involve additional costs for the operators associated with the demand responsive mileage.

4.15 There is the related issue that free concessionary travel is being made available for fixed public transport and it would not be equitable if this were not to be available for those who cannot use fixed services and who use existing DRT services. There are therefore very substantial costs for funding DRT in Scotland associated with the roll out of the free concessionary travel scheme. In addition, it should be recognised that a large increase in funding for community transport operators will be needed to ensure that this sector can continue to thrive as the largest provider of Scottish DRT services.

4.16 Perhaps more serious is the issue of how much service provision should be provided to cope with the generated demand from free travel e.g. dial-a-ride for disabled people. The current proposals for the free concessionary travel scheme in Scotland identify that scheduled services will be eligible, but how the scheduling will be specified in relation to DRT network coverage by time of day and area is not yet clear. Specifically, if concessionary fare reimbursement covers the market cost, then there would be nothing to stop a DRT operator continuing to expand provision and sending the bill to the concessionary fares budget.

4.17 However to exclude DRT from free concessionary fares would not be equitable since fixed services neither have comprehensive coverage of geographical areas nor

provision for all levels of disability. Perhaps a taxicard type payment mechanism could be developed so that users can choose how they ration their DRT trips over the year. To ensure equity, the trip allowance would need to be shown to compare with the benefits being experienced by equivalent fixed service users.

High Value to Agency Services

4.18 Local authority provision of specialist DRT for the Education and Social Services markets is well established and currently utilises a wide range of providers including; internal provision; taxi sector; commercial bus operators; and the community transport sector.

4.19 Although it is established best practice (e.g. Audit Commission 2001) to promote co-ordination between the different provision, progress has been slow. Overcoming cultural and employment related barriers is a formidable challenge but one that needs to be tackled. It is clear that incentives are needed for staff to take on the difficulties associated with joint working. These could be both positive funding opportunities for best practice and a more cross sectoral approach in best value reviews.

4.20 It should rarely be necessary for non transport agencies to fund services in their entirety, as has happened in Lanarkshire, but funding contributions to recognise the value to other agencies of transport investment has the potential to significantly enhance the funds available for DRT development. There should be a general expectation that transport planners will be looking beyond transport funding to deliver DRT services.

High Care Needs Services

4.21 General public transport provision, to health and other services, is the statutory responsibility of local transport authorities. It covers fixed public transport and some DRT services. Authorities are required to have regard to the transport needs of members of the public who are elderly or disabled. Most of these services are working well but the choice of service provider is not necessarily optimising value for money. The total absence or presence of taxicard and dial-a-ride provision by local authority, rather than a social or geographical basis, indicates that procurement route depends more on the policy of the local authority than any more systematic analysis of best value.

4.22 In the future, local authorities should be much clearer how they are meeting the needs of all residents. The needs of some will best be met by dial-a-ride and for others by taxicards, but CT is the largest provider of high care needs DRT, and there is substantial scope for developing this sector through appropriate service procurement across more of the country. This review has indicated that CT providers will often be best value providers:

- Where there is a track record of high quality delivery - Note that areas with a weak community capacity will often be areas with the greatest social exclusion, and particular benefits can be gained from strengthening the CT sector in these areas. However it is important to ensure that the sector can develop steadily over a large number of years since taking on too much too early can be destabilising, not just for the CT sector, but also for commercial operators.
- Where contracts reflect community boundaries rather than administrative areas.
- Where there is strong management at the heart of the organisation including sufficient management capacity to avoid over reliance on any one individual.

Patient transport challenges

4.23 The current move towards fully accessible, door-to-door, demand-responsive, user-friendly service provision within public passenger transport, and the alignment of community transport within the public transport sector, has blurred the boundaries between patient transport and public transport. Within this context the PTS has been subject to review.

4.24 These transport issues are compounded by other changes within the NHS including:

- Restructuring - Centralisation of specialist services and decentralisation of less specialised care resulting in new travel patterns and needs and types of patient transport.
- Joint working - Health and social care partnerships increasing opportunities for better sharing of vehicle and staff resources including social services vehicles.
- Procurement - GP contracts mean that more out of hours care is being provided from centralised locations requiring transport provision at unsociable hours.
- Social inclusion - Policies to tackle health inequalities which are often access related.
- Efficiency - Increasing opportunities for booked appointments to ensure that patients can travel when it is most convenient.

4.25 Future DRT, including patient transport, needs to reflect this changing context. The strategy for the development of the non emergency patient transport service in Scotland (SAS 2001) identifies that the eligibility for patient transport is determined by medical, social and geographical criteria. With rising demand, the strategy identifies that “the Scottish Ambulance Service would specialise in medical need but would co-ordinate other agencies to provide local transport solutions.”

4.26 Work is underway to define medical need more clearly in relation to funding responsibilities, and determine how the joint working between the SAS and partner agencies might operate in practice. In particular, there is a need for clarity on how definitions of need (including social need) relate to funding responsibilities for the NHS.

4.27 Current NHS funding for DRT consists of:

- The budgets allocated to the SAS as a Special Health Board within NHS Scotland.
- The hospital travel costs scheme.
- Ad hoc taxi purchase from other hospital and GP budgets
- NHS funding for community transport
- Investment through hospital/site travel plans including planning gain associated with new build.

4.28 In practice these budgets are insufficient to fund all patient transport needs or provide services which meet patient wishes, such as to be accompanied. As a result there are many other approaches to funding patient DRT services such as local authority supported services, community transport funding, (informal use of) Dial-a-Bus, Taxicard, lottery, charities, etc.

4.29 There is little consistency across the country on which of these budgets funds which types of trip, and from which operator. Without clear eligibility criteria linked to available funding it is therefore difficult to introduce efficient, sustainable and complementary DRT provision.

4.30 It should also be noted that displaced trips from more tightly focused patient transport may well be made by car. However parking at many urban hospitals is a growing problem and in some cases parking charges are being used to manage demand. The revenue from this parking income should therefore be used to fund appropriate transport provision to help manage demand including for the various DRT solutions.

Ways forward for patient transport

4.31 There are several possible ways to structure patient transport in the future to ensure that people are not excluded from health care due to poor accessibility. Some issues need to be addressed nationally. Funding allocations for local authorities and the NHS need to reflect need and the funding formulae and grant funding should take account of demographic change and hospital and health centre configuration.

4.32 To create a clear structure for DRT delivery by PTS, CT, and commercial services including taxis, consideration should be given by transport authorities and their partner agencies to improving:

- Procurement - Decisions should deliver best value for each care level required, maximising use of resources and tailoring provision to care needs. To achieve this in England, commissioning of patient transport has recently been transferred to Primary Care Trusts encouraging integration of decision making on patient transport with partners and with other health transport funding at a local level. In Scotland the different Health Board structure requires a different approach, but the same principles of best value, integration and patient focus should be central to procurement approaches.
- Classifications of Need – Health needs are wider than just getting to the destination. People should feel happy about the whole care package including transport. The progress made defining medical need within the SAS needs to be discussed more widely with other partners in the NHS and expanded to include more transport service operations than those that the PTS manage.
- Funding – The many funding sources need to be co-ordinated more effectively and linked to the trips that are being funded. In particular community transport is currently picking up more of the gaps without the funding and support mechanisms needed.
- Integration between patient and other transport needs – Where vehicle capacity is not being fully used there will be benefits from more joint working.
- Charging – There are different markets for patient transport and some users may be willing to pay for transport within the patient transport service to avoid having to drive.
- Considering the potential for DRT as part of a programme to reduce parking and congestion on hospital sites, particularly by offering this service to staff when parking restrictions are introduced at hospitals.

5.0 CONCLUSIONS

5.1 DRT plays an important and growing role in the spectrum of transport provision. There are particular market niches, which cannot be served without the ability to provide a flexible transport solution, and particular user groups that require DRT provision to access the services that they require.

5.2 This review has considered the evidence from over a hundred DRT services in Scotland and set this within the context of best international practice. Overall conclusions are that:

- There are many opportunities to enhance provision through joint working and delivery.
- All DRT services need to define clearly for whom and why the services are being funded and delivered.
- Action by local authorities to plan for developing DRT markets needs to be set out in local transport strategies and monitored in best value reviews.
- Best value public transport in most parts of the country can be expected to include DRT.
- The long term sustainability of most of the pilot DRT projects set up by the Scottish Executive is uncertain. There is a heavy reliance on the Scottish Executive funding, and for most pilots, DRT would probably not be prioritised highly enough by the councils to obtain funding within mainstream budgets.

5.3 There is potential for growth in all four main DRT markets: high care needs, high value to agency, best value and premium services, but to achieve this growth will require better targeting of public funding, resolution of some regulatory issues and improved joint working across sectors.

5.4 The high incidence of CT managed and operated DRT services, and the progress made by CT groups involved in the pilot urban CT funding, demonstrates the importance of the CT sector to the development of DRT provision. National funding for CT needs to reflect this, perhaps with the development of the RCTI funding into a larger budget covering both urban and rural CT development.

Recommendations

5.5 To secure these changes, the guidance developed as part of this work can help to inform relevant authorities and groups on how new services can be delivered. However more needs to be done to create a conducive culture for DRT delivery, drawing from the many lessons identified in this research. Of particular importance will be:

- *Clear accountability on who pays for what user needs* - This requires a coherent approach at national, regional and local levels. Transport planning which meets the travel needs of all people, and closes opportunity gaps, is developing through accessibility auditing and planning agendas, and this needs to be built upon through DRT delivery.
- *Amending the rules for BSOG eligibility to include more DRT operations.*
- *Managing the culture change from expectations of fixed service delivery to more flexible provision* - Of particular importance in the short term will be supporting this change within the transport profession itself. Financial support for site specific

advice and training within all sectors is therefore needed. Transport providers will then be better placed to work with marketing professionals and other partners to develop the culture change more widely.

- *Introducing funding and auditing incentives to ensure that best value public transport delivery includes DRT options where appropriate* – Best value indicators need to include DRT options and funding applications for public transport improvements need to demonstrate that DRT options have been considered.
- *A clear plan for future patient transport* - This needs to recognise changing needs and the growing problems for many providers including the Scottish Ambulance Service.
- *The impacts of introducing the free national concessionary fares scheme on DRT need to be considered* - From April 2006, the scheme will have major impacts on DRT markets. Exploring these has been beyond the focus of this research. This needs detailed consideration – perhaps as part of the consultation started in December 2005.
- *Strengthening community transport* - Community transport groups are currently amongst the largest providers of DRT services, so funding decisions and procurement approaches need to recognise the close relationship between growth in DRT markets, and the needs of the CT sector in both urban and rural areas as potentially a best value provider.

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A.0 APPENDIX A- TRAVEL DESPATCH CENTRES: COSTS AND BENEFITS

A.1 The cost of providing the TDC function is often a major determination in the overall cost of providing the DRT service. Schemes with a dedicated high technology call centre where more than one person is employed will almost certainly cost more than a 'low tech' scheme using, for example, a taxi booking office.

A.2 As an example of the cost of a TDC, for the year 2000/01 the total cost of operating the Wiltshire Wigglybus services using three vehicles was £287,000 of which £31,500 (11%) was call centre costs. In another location a bid for Rural Bus Challenge funding in 2001 estimated the cost of a TDC to be around £8,000 per bus per year.

A.3 A key route to ensure the cost effectiveness of specialist TDCs is through the development of joint TDCs – operating a variety of different schemes through one call centre. This has occurred in the cases of the Wiltshire Wigglybus (initially through joint working with the Ambulance Service, and then with a neighbouring DRT scheme in Gloucester), and with the Nexus U-Call service in Newcastle, where the call centre managing Nexus' dial-a-ride service also manages the trip requests for an urban DRT scheme, and a rural scheme in Northumberland.

A.4 Another concern over the centralisation of TDCs is an emerging view that a remote call centre is unpopular with users. This was particularly noted in a review of the Wiltshire Wigglybus. The perceived lack of local knowledge and involvement when the Wiltshire service began to be scheduled from a site in Gloucestershire, was thought to be both unfriendly to the user and detrimental to the quality of service. Having said that, the scheduling function has now been relocated to a base in Exeter (Devon) and Wiltshire County Council reports a significant improvement in scheduling performance and user satisfaction. Furthermore, a local base is no guarantee of an acceptable service, as was shown by the need to switch Wigglybus scheduling away from Wiltshire Ambulance Service. It may be significant that the Exeter base is also responsible for operating the South West Traveline information service.

A.5 It is evident from previous experience that small numbers of vehicles and small levels of passenger volumes cannot support a dedicated TDC on their own. Small stand-alone operations that are not able to combine the TDC function with any other work are best operated on a 'low tech' (though often incorporating GIS functions) basis by a taxi operator or similar which has local experience and can use personnel that would already be present in any event for their commercial operations.

A.6 The key is to defray the fixed costs of the TDC over a wider operation. (Nexus has achieved this by virtue of the scale of its own services with 24 vehicles).

A.7 Elsewhere, Lincolnshire Council sells TDC resources to other authorities, on a similar basis to the use of the commercial centre based in Gloucester by Wiltshire. This does, however, raise issues of local knowledge.

A.8 Others have tried combining TDCs with other forms of transport, most notably the Ambulance Service. However some have experienced problems due to differences in technology, working practices and hours of operation between the two services. The Wigglybus experience noted above is a case in point.

A.9 It is clear therefore from experience elsewhere that a large operation is required to warrant a dedicated call centre / TDC, preferably incorporating a range of different services to offer economies of scale. Due to the limited evidence available and variety

of parameters upon which the financial sustainability of TDC depends (subsidy levels, patronage, number of services, methods of financing TDC etc) it is, however, impossible to offer any clear advice on the number of services required to be combined within a TDC to make it sustainable.

A.10 However, when centralising the TDC for any given DRT service, research and experience indicates that the consideration of the following key issues is essential:

- Centralised TDCs with advanced booking systems are expensive to install and maintain, and are unlikely to offer significant benefits for smaller or single operations.
- The joint working required to centralise the co-ordination of services often has to overcome significant cultural, institutional and legal barriers to ensure success.
- A dedicated TDC also provides the opportunity to undertake 'transport brokerage' activities in order to achieve more cost effective vehicle utilisation.
- Local knowledge (of routes, services, users and operators) can, in the perception of users and potentially in reality, play a key part in the ability to efficiently schedule services, and this may be lost in centralisation.
- The remoteness of a booking centre *can* act as a barrier to use for some users.

B.0 APPENDIX B - RURAL DRT PILOT PROJECTS

B.1 The rural pilots were funded directly to support the development of DRT and the joint working required to more effectively utilise transport resources and support DRT operation. This appendix describes the key features of the pilots based on interviewing and research currently undertaken.

Aberdeenshire Council DRT Pilots

Overview

B.2 The Aberdeenshire Pilot has involved the development of five different DRT services, all co-ordinated by a central TDC based at Aberdeenshire Council, and using Trapeze despatch software. The project will ultimately have the capability to operate on a real time basis through the use of in vehicle technology (this is currently still in the development and testing stage).

Design and development

B.3 The five services comprise:

- An Aberdeenshire Council operated S19 service based around Alford using an Education department vehicle (Optare Alero)
- Stagecoach Bluebird operated public service running in Strathdon
- Two S19 services operated in partnership between Social Work, Education and Buchan Dial-a-Community Bus in and around Peterhead and Fraserburgh – using Council Education and Social Work vehicles.
- A public service replacing an existing ‘circular’ bus route in Central Buchan operated by Kininmonth Cabs (taxi firm).

B.4 All services are booked at least a day in advance (up to one week) through the central TDC in the Council, with schedules despatched to drivers the evening before service run. Each service shall be described briefly in turn.

B.5 The Alford service is based in and around the village of Alford, operating on an area wide service, generally operating in different zones on different days, using a vehicle that undertakes home-to-school transport for special needs pupils. The service has been operating since July 2004 and is running an average of approximately 20 trips per week.

B.6 There were some initial problems with this service in relation to holiday relief for the regular driver which have now been resolved. The driver often has to offer assistance, however, passengers have been advised of what the driver can and cannot do to assist them so this is no longer an issue.

B.7 The Strathdon service operates on a fixed route with the option to deviate on request. This has replaced non-peak services in the valley, and is operated by Stagecoach, using a semi retired local bus driver. The service receives very few bookings to deviate from the route and patronage is low – any bookings that are received are telephoned to the driver in advance. There have been no major operational problems noted with this service at present. The Council are however not ruling out ways to combine the Alford and Strathdon services if patronage does not increase.

B.8 The Fraserburgh and Peterhead services serve the areas around and in the two towns, and are operated in partnership with Buchan Dial-a-Community Bus (DaB). The

Fraserburgh service runs two vehicles, one Education vehicle, operated by Buchan DaB, and the other Social work vehicle operated by a Council driver. The latter vehicle was already operating a similar service on two days a week before this pilot expanded this. Fraserburgh patronage is currently at approximately 78 trips per week, with Peterhead at 43 per week.

B.9 The Central Buchan service is operated as a registered service by a local taxi firm under a special PSV licence. It carries pre-booked passengers only and operates on an area wide basis using two vehicles, with a third vehicle on 'standby' if demand requires its use. The service has replaced a subsidised fixed route service. The service currently averages approximately 300 journeys per week, less than the previous fixed routes service. Although there are likely to be a range of factors that account for this 'loss of patronage' (including, for example the requirement to book a day in advance) passenger numbers are increasing steadily as awareness increases. As the service has only been operational for eight months it would be expected that this will continue to rise in the short to medium term.

Key Findings, Notes, Experience

B.10 The TDC and software appear to be operating successfully and no significant operational problems have been experienced by staff. However the reporting procedures and processes offered by the software are still not delivering the level of analysis required. Volume of trip requests is currently relatively low and the staff have no problems managing demand.

B.11 The Council has applied to claim BSOG for its section 19 services, but has yet to submit detailed claims. The Central Buchan service is ineligible for BSOG as it operates on an area wide basis – a type of service currently ineligible for BSOG in Scotland.

B.12 There has also been successful joint working in the delivery of DRT services. The Public Transport Unit have generated co-ordinated working practices with internal Social Work and Education transport departments and the CT sector through this pilot, showing evidence of maximising the use of resources, although not without some initial minor problems relating to staffing. The link with the CT sector through service level agreements to provide drivers has proved successful.

Angus

Overview

B.13 The Angus Transport Forum (ATF) was established by the local community to act as an agency promoting the transport needs in the area. The pilot project was developed to meet these needs through the development of a 'flexible agency' to act as a one stop shop for users' transport requests in the Angus Glens. The agency acts on behalf of a number of bus and taxi operators to direct the most appropriate transport provider to meet the needs of the users. The key strength of this approach is that the users only need to refer to one central contact to request their trips, and that the transport needs of these passengers are then co-ordinated by a central agency.

Design and development

B.14 The service operates in the Angus Glens where users are dispersed and trips relatively infrequent. The agency has been effective in identifying the needs for these users through and feeding these back to the operators for service enhancements – for

example demonstrating the market for accessible taxis in the area, and the need for group hire services to community groups in the area.

B.15 The service has not been able to expand as a local agency for two key reasons. First, the inability to offer a single pricing structure through the different operators involved in the scheme has meant that users did not necessarily have a constant price for a trip as they may be operated by different operators. In addition, as users were being taken on trips with individual operators, some chose to request subsequent trips directly with the operator, rather than through the ATF pilot.

B.16 The strength of the pilot, and in the agency approach in this case, has been in identifying the travel needs of an area and communicating this through to operators (including ATF itself) to deliver enhanced services.

Fife

Overview

B.17 The Fife pilot consists of two schemes: A taxi-based DRT service in a collection of small zones in south east Fife (services F3-F8) which are not served by conventional public transport. This service is run by a small local taxi operator – Town and Country (T&C) Taxis. The second service (F1) is a fixed route service with flexible zones available on request, running between Newburgh and Cupar via Ladybank, operated by Stagecoach.

Design and development

B.18 The Council developed the service design based on their local knowledge and a range of consultation activity over recent years (through Local Transport Fora), along with recent developments in the commercial networking in the area. The F1 service did not operate as a fixed route service previous to introduction. Service F8 part replaces a supported service within Cellardyke.

B.19 The taxi firm that operates the F3-F8 service (Town and Country Taxis) initially had some teething problems operating the service, as they had not previously undertaken a service of this kind. The service was costed to run with two vehicles although the contractor underestimated his running costs required to operate this type of service therefore the contract was renegotiated. The pilot scheme has resulted in the employment of three full time drivers (previously part-time).

B.20 The service was initially operating under shared taxi legislation, but steps are being made to transfer this to a special restricted PSV operation to allow for the continuation of the concessionary reimbursement to be paid to the operator under the new National Scheme.

Key Findings, Notes, Experience

B.21 Bookings are undertaken by the operators – with the T&C taxis calls diverting to drivers if the office is unmanned (a driver staffs the office and the cost of employing a TDC operative would be prohibitive). This has led to some problems regarding receiving calls due to areas of signal ‘blackout’ for the mobile phone networks in the area, although a change of service provider has now solved this problem. Stagecoach do not receive high call numbers, due to the nature of the on-demand areas, but these are taken in house in the St Andrews Depot.

B.22 T&C taxis are clearly invested in the scheme and believe that the service they are operating is of benefit to the local community – in particular to elderly persons

without access to a car. From interviews it would appear the service is primarily meeting the needs of those that would use a 'dial-a-ride' type service (elderly and mobility impaired users), with this in mind the Council designed the service to be available to all types of Public Transport user including concession card holders and fare payers. Fare payers currently contribute to 25% of the current trips, with trips linking to other PT services forming a small part of the patronage.

B.23 Current costs per passenger are approximately £7.40 for the F3-F8 service and £4.00 for the F1 service (excluding concessionary income). It is not expected that the costs will be greatly reduced for the F3-F8 service, but this compares favourably with similar services elsewhere.

B.24 It is clear that Town and Country Taxis and the PTU have a close working relationship and consult on a regular basis. When awarding the contracts Stagecoach contributed to the design of the route. This was helpful when registering the service with the Traffic Commissioner. The role of Stagecoach in St. Andrews is more of an operating role with the management within St Andrews contributing any suggested operational change.

B.25 At the time of awarding the contract the PTU did not involve their in house ring and ride service booking centre. This was primarily due to the operating hours differed from service to service and, at that time, the Ring & Ride booking service was in its infancy and it was felt that they would not have the capacity nor experience to deal with the 'Go-flexi' scheme. The PTU have since established that the software (which has gradually been developed since installation) – Trapeze – has benefits and are currently exploring potential links with both Go-flexi and Ring & Ride. However to establish this pilot project it was felt that maintaining the local ownership and flexibility of the taxi based service through using operator TDC was important for both the operators and the users as at present the current system allows booking up to 60 minutes ahead of travel.

B.26 Fife Council has also run a pilot DRT scheme in Kirkcaldy & Levenmouth to serve people with mobility impairments that normally cannot use conventional public transport. The Council has also taken the decision, in principle, subject to funding being made available, to gradually roll out DRT services Fife wide. To this end, the East Fife pilot will form part of this policy, and the principle of combining DRT for mobility impaired people with flexible public transport for the rural population at large is being adopted under the pilot guidelines. It is hoped that this approach will ensure the service becomes an integral part of the wider public transport network in rural areas. In urban areas it is expected that the DRT service dedicated to mobility impaired people (only like the Kirkcaldy and Levenmouth services) will most likely be the norm.

Argyll and Bute

B.27 Argyll and Bute have used the Scottish Executive pilot funding to develop and maintain three services. On the Island of Tiree, the funding is being used to continue and expand an existing dial-a-ride service run by a local PSV operator that has been operated for a number of years. The funding has allowed a minibus to be purchased to replace the taxi that was previously used on the service, and for the operating hours to be expanded. Patronage has increased since the introduction of the service and it is perceived by the Argyll and Bute Council that the introduction of the minibus has made the service more attractive to tourists. This is backed up by a significant increase in patronage over the summer months.

B.28 The Campbeltown Service is run by West Coast Motors (bus operator) and has been designed to ‘fill holes’ in the bus network that have arisen out of a rationalisation of local services. The service is of note as it incorporates social work transport provision into the operation of this public DRT services, and as a result seeks to integrate the transport provision in the area. The Social Work department of the Council use the service twice a week (and supply a passenger assistant) and reimburse the Transport Unit for each passenger carried. The operator is encouraged to take other passengers if possible during these periods. Both the Tiree and Campbeltown service bookings are undertaken by the operators.

B.29 The Lomond service has been developed jointly with SPT to offer an SPT-branded ring and ride service (operated by First) in the Lomond area. The service is run through the same methods and contracting processes as the other SPT ring and ride services, and bookings are taken through the SPT TDC. In effect, the Scottish Executive funding has been used to develop an additional SPT ring and ride service for the Lomond area that previously was not provided as a result of funding limitations. Patronage has been increasing but Argyll and Bute are yet to receive any detailed patronage figures from SPT to explore any particular trends and locations for trips.

Highland Council Access to Employment DRT Service

Overview

B.30 This service is a later addition to the Scottish Executive DRT pilot projects and is of particular note as it is focused on addressing the problem of access to employment. The Transport to Employment (T2E) service addresses the problem well known in rural communities of a lack of traditional public transport corresponding to work shifts. The service will provide local access to employment where traditional private and public transport options are not available, for new employees and those seeking employment in East and Central Sutherland.

Design and Development

B.31 The project has developed out of previous access to employment related research undertaken in the area by Napier University in partnership with local Jobcentre plus and the Highland Council.

B.32 Users or potential users are recommended through prospective employers or Jobcentre plus and make bookings through a dedicated call centre (based at Napier University).

B.33 The service is operated through conventional taxi operators, using shared taxi legislation. The Highland Council have developed specific contracts with registered taxi firms for this purpose, building from existing education-related contracts.

B.34 Patronage is currently low with 19 regular users, but is slowly developing.

Key Findings, Notes, Experiences

B.35 Although a very small scale project (in part due to the nature of the area served) the project is of particular note as it seeks to develop a business model that encourages contribution from users and employers to purchase the taxi trips to make the projects self-sustaining in the longer term.

B.36 The scheme provides subsidised transport for an initial period of use, currently set at six months, to remove the transport barrier to employment. Subsequently, users are expected to make full payment for the shared portion of their journey. Other users of

the same vehicle may not have used the service for the same length of time, and continue to be supported by the scheme until they have been in employment for six months.

B.37 Self sustainability should be possible if the service can continue to expand, and operate with vehicles that are at capacity. Evidence highlighting that employers have sought to alter shift times to facilitate shared taxi use are encouraging, and highlight the importance of involving all relevant stakeholders in transport developments.

C.0 APPENDIX C - URBAN PILOTS

C.1 This appendix describes the key features of the pilots funded as part of the Urban Community Transport Initiative, based on interviewing and research undertaken.

Aberdeen

Overview

C.2 The Aberdeen project has used the Scottish Executive funding to operate a fully accessible service catering for all residents and visitors to Aberdeen. The service was designed to operate 7 days a week, and hours are 0930 –2200 each day.

Design and development

C.3 The pilot project was based upon a proposal for a dial-a-ride service already in existence some months before the UCTI funding became available to allow this project to be undertaken.

C.4 The Council indicated that there was a reduction in subsidised services in 2003, resulting in certain areas losing bus services. As a result of this, consultation was held in these areas to assess needs. Key issues were for those with mobility difficulties, and although a taxicard scheme was in operation, clients found it difficult to book taxis due to the excess time these trips take (as a result of the use of ramps etc.). Although there were key areas of the city where need was identified, a service covering the whole city was chosen to ensure equal provision.

C.5 A dial a bus service was identified as a route to meeting these needs. There are no CT schemes operational in Aberdeen, and as a pilot, Aberdeen City Council thought it more value for money to contract the service using experienced operators in the initial period. The service is open to all people regardless of residence, age or disability. The dial-a-ride operates on a first come first served basis but has been revised to operate city wide at all times as it proved practical and possible. The contract specified that the service was to be for users with mobility impairments only.

C.6 Stagecoach Bluebird were the successful contractor and recruited drivers specifically with this ‘social service’ related experience, rather than using standard bus driver recruitment practices. The drivers completed training up to the CTA’s MiDAS (Minibus Drivers Assessment Scheme) standard and also undertook Passenger Assistant Training (PATs).

C.7 A new accessible minibus (Optare Alero) was purchased for use on the service. The service was initially designed as a ‘different areas on different days’ service, but due to low initial demand, is currently operating on an Aberdeen area wide basis. Booking was initially very low (approx 16 trips per day) but has recently increased to the point where the Council representative has described it as “very good” and passengers are now being turned down. This has created perceived need for an increase in the vehicle provision. The option to reduce the service to ‘different areas, different days’ has been considered, but there is now concern that this will prevent some trips that are currently provided to be undertaken.

Key Findings, Notes, Experience

C.8 The booking and scheduling, was initially based in a Stagecoach owned taxi firm in Banchory, but problems were reported booking the service – in particular at weekends. In practice, calls were being diverted to the drivers who had to take a message and call users back to confirm trip availability. This was clearly not an ideal

solution and the call centre has now been transferred to the Stagecoach Bluebird office in Guild St, Aberdeen.

C.9 The data collection process (trips, destinations, locations etc) is currently poorly detailed. There are steps being taken to explore the purchase of a trip scheduling software package to facilitate this process, in co-ordination with Education and Social Work in the Council.

C.10 The lack of available useful data on the service is a key problem as the service develops. Aberdeen Council had identified that there approx 50000 potential users, so this service clearly has potential to expand. Marketing has been undertaken through press, flyers, targeting at sites etc. at the outset of the service, but indications from the Council representative suggest that word-of-mouth has been the most effective method of increasing patronage. A key route to the increase in service use was perceived by the Council representative to be the networking and promotion of the service by the steering group.

C.11 The service operates as a stand alone contracted service, however there could be potential to link with Aberdeenshire Council over the use of their travel despatch centre as Aberdeen City explore purchasing trip scheduling software. There may also be a need to engage further with the community sector to increase patronage.

C.12 The Council had not identified any funding to continue this long term, but hoped that success of the project would lead to maintaining service at end of year.

Dundee

Overview

C.13 The Dundee pilot involved the purchase of a fully accessible vehicle, to be operated by Strathtay Scottish, and used initially to extend the scope, hours and geographical coverage of the current free “Sheltered” bus service operating in the SIP areas of the city.

C.14 The CT Officer was recruited in October 2004 as part of the project and has been developing his work remit through exploring unmet demand in Dundee. He indicated that there is very little scope to develop the sheltered bus service into a wider demand responsive transport service due to the limitations of the contract. In particular, the key focus of the officer’s work is in co-ordinating the current transport resources in the public and private sector and to move towards integration and exploration of options for co-ordinated transport brokerage, and towards the development of wider CT services in the city.

C.15 The CT Officer has drawn up a best value review of DRT provision both within and outwith the local authority to explore the options for joint working and centralisation of transport resources from the Education, Social Work, Public Transport and external sectors (such as the Scottish Ambulance Service). This has now been taken up as policy by the Council, but the officer indicated that progress in centralising resources has been slow due to resistance to breaking down of existing working practices. In addition the CT officer has received resistance to solutions that involve hiring out vehicles to CT groups as a result of insurance problems.

C.16 At present, education and public transport are administered from the same office and Shaunsoft CT management software has been purchased to streamline operation and to demonstrate savings that can be made through the centralisation of

administration and accounting. The officer is hoping that as a result of this, social work will be encouraged to become part of the joint working process.

C.17 In parallel the CT officer has facilitated the development of a CT group to deliver group hire to the Dundee area. Funding has been acquired from a range of sources to purchase a minibus for this group, and the scheme is now operational, albeit with only a small number of registered users.

C.18 In addition a business plan has been drawn up for the development of CT / DRT related provision across Dundee City, with a range of options and routes to assessing demand and need explored. This process has included exploring current supported bus network, looking at potential partners (such as Jobcentre plus) and exploring options for external delivery (such as the development of arms length or external TDC). However the officer has acknowledged the need for further expertise in undertaking accessibility planning and mapping tasks to highlight need and potential size of and DRT provision.

Edinburgh

Overview

C.19 The pilot funding is being used to support existing services provided by Edinburgh CT Operators Group (ECTOG). ECTOG is a city wide non-constituted CT partnership. The key objective is to secure a new framework of partnership working among Edinburgh's CT operators and with the Council to address social exclusion, extend current provision, improve quality standards and to provide a sustainable citywide transport service. Funding is also being used to supply MPV vehicles to allow the four members of ECTOG to develop their services

Design and Development

C.20 The pilot funding is not based around the development of a particular service – merely adding resource (both personnel and vehicle) to build on the partnership that has been developing over recent years between the CT operators and the Council. The Council is a key funder of the five operators involved (LCTS, SEAG, PEP, Dove and Handicabs – all with different timescales and history) and the groups have over recent years been working together to harmonise standards and operate in a non competitive, local-area focused way. The slow process of joint working has enabled trust to build up and groups to work together positively.

C.21 Key routes for joint working are co-ordinated bids for funding and developing options for brokerage / pooling of vehicles (although this is deemed a long term aim). Extra staff resource has allowed staff support to be offered between organisations during crisis periods – this is a key benefit of funding, and has allowed more time to be spent on strategic issues. The extra administration resource is in particular giving time to develop and foster joint working, and the additional funding has ensured that the CT sector in Edinburgh can grow incrementally and reinforce the long term sustainability of projects.

C.22 The relationship with the Edinburgh Council is very good and supportive (Handicabs and LCTS already lease vehicles from the Council). It is interesting to note that the Council is currently working towards full co-ordination of internal transport responsibilities, and the Council representative noted that if a DRT service were to be developed in Edinburgh the Corporate Transport Unit (as a co-ordinated body) is well placed to run this, as it already has schedulers, staff, hire desk and management experience in place and therefore going to the CT sector may not be the only option.

C.23 A range of different funding streams from the Council are going into transport – education, social work, city development (funding of Handicabs) etc. and the Council internally have extensive resources available (approx 80 vehicles not being used on evenings and at weekends) but further co-ordination and investment are needed to realise these opportunities.

Glasgow

C.24 The Glasgow pilot supports CT-Glasgow (formerly Glasgow Community Transport Operators Group) which consists of four of the major community transport providers in the SIP areas of Drumchapel, Greater Pollok, Castlemilk and Greater Easterhouse / NATA (North Area Transport Association). The pilot funds a patient visiting service to targeted major hospitals running from these SIP areas, excepting Castlemilk which provides, via the pilot funds, assistance and transport to eligible clients and their families in Castlemilk to attend general and specialist health appointments. The pilot also helps fund the development and operation of a vehicle brokerage system in Greater Pollok providing a range of CT services including the patient visiting service. All of the four CT operators in CTG provide a comprehensive CT service to community groups and the pilot also supports capacity building in this area. There was also provision in the initial bid for a full time development officer, for the duration of the pilot, to take this initiative forward in Glasgow and develop a sustainable CT.

C.25 The services in Glasgow have been very slow to develop, mainly as a result of extensive resources being expended on joint working and capacity building, rather than on developing services. The instigation of the pilot funding by a group in its infancy, although stimulating moves to work more closely together, appears to have been premature in terms of generating co-ordination and effective service delivery. Significant time is required to overcome the barriers of joint delivery, particularly in the CT sector where staff resources for these activities are often scarce.

C.26 The role of the development officer has therefore been crucial to broker solutions and co-ordinate activities. The group has progressed on a number of fronts and is working to develop further improvements. Progress with current priorities will determine the future sustainable operations through:

- Promoting the patient visiting service via a unified approach and regular liaison with targeted hospitals to promote the service at grass roots level.
- Engaging with relevant local and national stakeholders, e.g. Community Planning Partnerships and Community Health and Social Care Partnerships
- Interfacing with other community transport providers in Glasgow.
- Interfacing with communities with a view to identifying areas most needy of community transport services to be included in expansion plans.
- Implementation of a restructure plan of CTG's current management structure.
- Developing and evaluating a business plan for CTG
- Assisting each CTG member with fundraising and business planning.
- Identifying and developing plans to centralise tasks common to all member operators e.g. central booking, some admin functions, service promotion and advertising.

- Developing minimum standards of service provided to clients and vehicle condition and maintenance.
- Analysis of training needs for management, member operators' staff, and volunteers
- Working towards CTG obtaining charitable status
- Evaluating the feasibility of setting up a training agency.
- Financial management of monies available to CTG by developing funding allocations tied to objectives with statistical feedback to ensure efficiencies and best values by building in more accountability.
- Development of a more comprehensive and standardised statistical monitoring regime.

C.27 If these can be developed successfully then the pilot has a strong footing on which to build.

D.0 APPENDIX D - OTHER DRT SCHEMES

D.1 This appendix describes some examples of interesting schemes and best practice in DRT delivery.

Stagecoach Yellow Taxibus

Overview

D.2 The Yellow Taxibus is the only current application of commercial DRT in Scotland. This is operated by Stagecoach from their Dunfermline depot, but it is a separate operation from their main bus services in the area. It has been treated as an experimental business development to test the market.

D.3 The Yellow Taxibus service operates between Dunfermline, James Street (outside the bus station) and Edinburgh, Waterloo Place. It operates on a flexible route in Dunfermline covering a triangular area bounded by Halbeath Road (the main road to the east), Queensferry Road/Hospital Hill and the M90 motorway.

D.4 From the Carnegie Campus stop at the southeastern edge of Dunfermline, the Yellow Taxibus operates on a fixed route to Edinburgh via the Ferrytoll Park and Ride. Within Edinburgh a series of fixed stops are served.

D.5 Although there are now set departure times from Dunfermline for individual journeys, Stagecoach promise to operate at least every 15 minutes at peak times. The service operates from 0610 to 2030 on Mondays to Thursdays, with late evening departures on Friday until 0315 from Edinburgh. Saturday operation is from 0650 to 0315 while Sunday service operates from 1030 to 2030.

D.6 Pre-booking is required from the flexible route area, but walk up passengers can board at Dunfermline town centre or at the stops in Edinburgh. However, late evening (after 2030) departures require pre-booking in both directions.

D.7 Current fares are £5 single from Dunfermline to Edinburgh, with a return for £8, although this must be taken before midnight. Late evening fares between Dunfermline and Edinburgh are £10, return only. Fares within Dunfermline are £2 single. The Scottish concessionary free fare scheme does not apply on this service, but concessions are generally half fare, and this has been agreed with Fife Council, though the concession is provided commercially. There are no weekly or longer period passes available for travel on the Yellow Taxibus service, and the multi operator 'One Ticket', which covers Edinburgh and Fife (as well as other areas in east central Scotland) is not accepted on Yellow Taxibus.

Key findings, Notes, Experience

D.8 In comparison with bus fares the Yellow Taxibus fares are higher reflecting the premium status of the service. An off peak return is available on Stagecoach buses between Dunfermline and Edinburgh on Mondays to Fridays for £3.50 and the cheapest 7 day ticket available for a regular commuter is £23.50.

D.9 8 seat people carriers are used on the service, which enables the drivers to drive the vehicles on an ordinary car licence. However, the fixed route section of the service is registered as a bus service and is eligible for BSOG. Although not all of Dunfermline is served, the area covered includes approximately 80% of the town's population, with only smaller areas to the north and west of the town unserved.

D.10 In terms of bus services, the demand responsive zone of the Taxibus in Dunfermline is mainly served by local services that operate to and from the town centre. The frequencies on the local services vary from every 10 minutes to every hour. Bus services between Dunfermline and Edinburgh operate every 20 minutes from Edinburgh (three buses per hour from Dunfermline), but via two different routes (with more at peak times) that have different running times. Evening and Sunday service is every hour on this link.

D.11 Rail service between Dunfermline to Edinburgh is every 30 minutes during the day, with additional trains at peak times. The travel time is 34 minutes, faster than that available by using bus services. However bus network coverage is much greater than for rail so the total travelling time from home for many Dunfermline to Edinburgh trips will be similar to rail particularly outside peak travel times, when travel to and using rail will be less affected by road congestion.

D.12 For passengers to reach Edinburgh by conventional bus services (or trains) from the majority of the demand responsive area a change of bus in Dunfermline town centre is required, and connections may not always be very good between the services, particularly during the evenings and on Sundays.

D.13 As a result the Yellow Taxibus offers a higher quality service between the main residential areas of Dunfermline and central Edinburgh than the conventional bus services can provide. However, there is a fare premium for this and as weekly and longer commuter tickets are not offered the price difference is particularly apparent for regular commuters.

D.14 The complete isolation of the Yellow Taxibus operation, in regards to the rest of the Stagecoach operations in the area is notable. Additionally Yellow Taxibus has no website and there is no mention of Yellow Taxibus on the Stagecoach site for Fife.

D.15 In September 2004, the Yellow Taxibus service was reported as carrying around 1,000 passengers per week, while the break even numbers were reported as approximately 1,500 per week. Load factors were reported as 25% in off peak times, 50 to 75% in peak times, and 100% late nights.

D.16 With these passenger volumes and the level of service provided Stagecoach has admitted that it would be difficult to make the existing service break even. In spite of this the company has considered the experience to be a useful pilot project and has used the information gained to pursue other projects. Examples cited were a possible service between Fife and Edinburgh Airport as well as demand responsive projects in Aberdeen and Aberdeenshire.

D.17 Stagecoach has also felt that the demographic information that they have been able to collect from the Yellow Taxibus project has been useful in developing future projects. While the groupings used by Stagecoach are primarily retail marketing categories, it would appear that unsurprisingly the Yellow Taxibus is mainly used by homeowners, with a lower concentration of council house tenants. Compared to conventional local bus services there would appear to be more users from 'professional' demographic groups. However, this situation may also be the case with conventional bus services between the area and Edinburgh. As a result it would be difficult to determine if the Yellow Taxibus service attracts a different clientele than, for example, express bus services from the area without additional data on bus use; and such data is commercially confidential and not available to the research team.

D.18 This was a pilot project so it was needed in order to ascertain how commercial DRT may work and if there were a future for it elsewhere. Stagecoach have indicated that there may be potential for a shorter taxibus service between the residential areas of Dunfermline and the Ferrytoll Park and Ride but this would require subsidy.

Lessons

D.19 Stagecoach indicated that they have learnt that they can operate a DRT service successfully on a low-tech basis with no complex scheduling software required. However, they have determined that the Yellow Taxibus will never be commercially viable, and consequently have no plans to introduce commercial DRT services on a large scale. However, they feel that there is some application of the concept to smaller niche market, perhaps serving particular sites or transport locations (e.g. rail stations). The service is set to cease operation in November 2005.

SPT DRT Services

Overview

D.20 SPT are the largest operator of DRT services in Scotland. They operate two parallel services: Dial-a-bus services throughout the SPT area for those who are unable to access conventional public transport for persons with a mobility impairment; and the seven Ring'n'ride services, which are public DRT services operating in the rural hinterlands of Glasgow. Two of the ring'n'ride services are operated in partnership with Local Authorities (South Ayrshire and Argyll and Bute Councils)

D.21 All services are operated by commercial operators, with trip requests managed by SPTs own Travel Despatch Centre (TDC). The SPT TDC uses Trapeze software to schedule trips, and it is expected that by July 2005 all vehicles will have the hardware installed to enable real-time bookings.

D.22 The Dial-a-Bus service is well established, and is now carrying approximately 340 000 trips per year with a fleet of 34 wheelchair accessible buses. The Ring and Ride services are expanding over time with the Lomond Ring'n'Ride service, part funded by the Scottish Executive Pilot Funding, the most recent introduction to the 'network'. The Ring n Ride fleet is estimated at approximately 16 vehicles at this time. The long term aim of SPT is to cover all rural areas around Glasgow with DRT services where conventional buses cannot meet travel requirements.

Design and Development

D.23 The design of the Ring and Ride services by SPT has been based on delivering a DRT resource around the financial resources available for particular areas – e.g. operating the number of vehicles that can be afforded within a budget for a particular area. This very pragmatic approach has proven to be successful, and the ability to deal with variable capacities at different times has been greatly assisted by SPTs decision to ensure that operational flexibility is built into the contracts for operating the ring-and-ride and dial-a-ride services. This flexibility ensures that there can be overlap both between the two services, and between adjacent operating areas to ensure that as many passengers as possible can be picked up. In addition the contracts for the services are tied into school contracts to ensure better value.

Key Findings, Notes, Experience

D.24 The TDC operates with approximately 7 staff to take bookings and one 'supervisor' to manage any problems. Bookings are taken on a 'first come first served'

basis, and therefore flexibility in the system is instantly constrained by the location of the first user whose request is not changed. After this user requests are then taken to fit in with previous bookings. If there are any problem trips that cannot be met, records of requests are taken and the booking supervisor then attempts to fit these into a schedule and passengers are called back.

D.25 This method allows the booking staff to process trips quickly to enhance the customer service. Yet, this process does mean that the first trip request strongly dictates the route / operating area of the vehicle, and if a number of subsequent requests are taken for a distant area, these cannot be managed. However, SPT indicate that this has not proved to be a major problem as yet.

D.26 All services operate on an area wide basis, although the trends in user use have resulted in some 'fixed route' sections developing on some services. SPT indicated that they do not consider that there is a large market for taxi-bus type vehicles at present as it would undermine the existing market.

D.27 All the services are operated by commercial bus operators and, although the option to include the taxi sector in the operation has been considered, SPT have made a decision to not at this time include taxis as part of the DRT system. A key reason for this was that in including taxis to cope with additional trips that could not be catered for by the DRT buses, there could be no way to refuse requests and manage capacity on the service.

D.28 SPT have undertaken some exploratory work in trying to work with employment sites to promote existing ring and ride services for particular trips (e.g. to deliver employees to work sites) but these have as yet been unsuccessful, even when initially offering free travel on the DRT vehicles for short periods. The reasons behind this failure have not been fully understood.

D.29 There has been a noticeable variation in the success and patronage of the different ring and ride services, with some becoming busy very quickly and others having relatively few bookings. SPT have as yet found it difficult to isolate reasons for this.

Handicabs Lothian

D.30 Formed in 1981 by "people of goodwill" (charitable groups and organisations) to meet the needs of those requiring door-to-door transport in and around the Edinburgh area. Initially with three years funding from the Manpower Services Commission as a pilot project, subsequent funding has come from Lothian Region Council and then City of Edinburgh, East, West and Midlothian Councils, to operate the Dial-a-Ride (fully flexible DRT) and the Dial-a-Bus (destination specific shopping service) for those with mobility difficulties. They are also involved in a number of other related projects in the area – one of which is the Edinburgh based Scottish Executive Urban Pilot project.

D.31 Handicabs is currently operating out of three offices (Edinburgh, Dalkeith and Bathgate) with 33 vehicles (26 owned), 31 drivers with 14 dispatchers. There are approximately 10 000 registered users, 36% of which use wheelchairs.

D.32 The key problem for the organisation has been the securing of long term funding throughout its existence. The majority comes via Service Level Agreements with the different local authorities, which are renewed at different times.

D.33 Staffing was also a key problem – particularly in the high employment area of Edinburgh. The change of entitlement of drivers to hold D1 licences for those passing

tests after has also affected their ability to employ younger people. The cost of qualifying drivers to this level was comparable to gaining a full PSV licence and is prohibitive. The organisation indicated that they did not use volunteer drivers as the management of these was a full time job for an additional member of staff and there were benefits from using regular drivers with vulnerable passengers.

D.34 Handicabs do not undertake extensive marketing beyond the issuing of leaflets and their website. A key concern would be how to cope with the potential increase in demand. The organisation already has a “healthy” turn down rate and have to ration services to one advanced booking per passenger to avoid monopolisation of the service by some users.

D.35 Handicabs use a relatively old software programme (a forerunner of Trapeze) to allocate trips to vehicles, which is useful, but limited. Its primary benefit is for the Dial-a-Bus due to the complexity of scheduling a fully flexible area wide service. The destination specific shopper service (dial-a-ride) is more straightforward but also uses the system.

Fife Council Ring and Ride

D.36 Fife Council’s Ring and Ride (Levenmouth and Kirkaldy) service was set up in March 2003 to offer door-to-door accessible transport for people with reduced mobility in the areas. The scheme operates 6 vehicles under S19 legislation with 12 drivers and 5 office staff. The scheme has attracted a large number of users and currently undertakes approximately 1000 passenger trips per week. The service is predominantly used for shopping (25%) and social visits (50%) for the registered members within the service areas.

D.37 Funding comes from the Council and is up for review at the end of the three year pilot. The ring and ride service has applied for further funding to expand the areas of operation, but this is yet to be assessed.

D.38 The service uses Trapeze software to schedule and control vehicle despatch.

D.39 The scheme has been successful with demand for the services stretching the resources of the DRT operation. Marketing was limited to leaflets in the service areas, and has not been expanded due to concern over coping with the expected increase in demand.

D.40 The Council representative reported extremely positive feedback from users, particularly from the majority of users for whom the service had freed from being housebound, as no alternative had previously existed for them to travel. This issue was highlighted as a key factor in assessing the value of operating such a service – i.e. assessing the social inclusion benefit of services and not just the cost per passenger trip.

D.41 The service has recently been given the go-ahead to expand Fife-wide over the next few years. This may have implications for the Scottish Executive funded pilots in the East Neuk of Fife and other DRT services in the area as Fife seek routes to expand and integrate services.

Dumfries and Galloway Ring and Ride Services

D.42 Dumfries and Galloway Council (DGC) have three public DRT services operating in their area: one operated by Stagecoach (service 115) under an ‘O’ Licence in the Dumfries area, and two other services (Services 557 and 555 - developed after initial success with the 115 service gave confidence that other DRT services could be

introduced) in more rural areas operated by DGC Education buses during non-peak periods when they are not required for school transport. In total the three services are undertaking approximately 110 trips per week.

D.43 The initial 115 service was developed as a route to find more effective use of transport resources in the Dumfries area. The service was designed as a result of combining expensive, but poorly used, subsidised conventional bus services and high cost specialist transport for those with mobility needs. This combined service is operating at half the cost, but taking the same passenger numbers.

D.44 Booking and control for the DRT services are operated in house by the Local Authority transport unit, without the use of any specific booking and control software.

D.45 There have been few major problems for the service. The combination of the two types of service for the 115 service has led to some issues relating to increased travel time and the need to phone in to book trips for passengers familiar with using conventional services.

D.46 The change of operator, enforced by a Stagecoach takeover of the local operator originally running the service, has led to the use of the same driver for the majority of trips, which has resulted in a better service for those with mobility difficulties, as they become familiar with the driver who may have to offer them assistance.

D.47 Of the two DGC run services, one has been slightly more successful, and this has been attributed to a more straightforward operation as it operates in a 'corridor' dictated by the local geography, and therefore is closer to a conventional service.

D.48 Extensive public consultation was undertaken prior to the introduction of the first service, and leaflets explaining operation were issued. There has been limited subsequent marketing.

D.49 There have been no problems registering services with the Traffic Commissioner, but DGC have experienced some problems in claiming BSOG for these services.

Midlothian Council Dial a Journey 01 and 02

D.50 Midlothian Council commissioned two taxi firm based public DRT services in March 2003 to serve a number of small settlements to the south of Edinburgh (Temple and Howgate) which had conventional subsidised bus services withdrawn due to increasing costs. Both services are focused on providing access to local services in town centres. There were also proposals for an additional 3 services along similar lines, but these were not developed due to financial constraints.

D.51 Two different local services are run by local taxi operators (under taxi legislation), with conventional bus fares charged to passengers. The difference between taxi and bus fares is topped up by the council to the taxi company. Taxi firms are under contract until March 2007.

D.52 Pressure from particular local Community Councils was key in selecting the particular routes to be chosen from possible five services offered. A key problem is with one service has been coping with the demand for the services. The 01 service from Temple is only available for two days per week (in line with the previous conventional bus service it replaced) and demand has far outstripped supply. To limit expenditure the costs have been limited by putting in place a maximum of 6 trips per day for this service.

D.53 The 02 service from Howgate runs daily and usage has stabilised after initial problems in meeting demand at times previously served by conventional buses.

D.54 The Council are keen to extend service but do not have the resources to do so. To develop services further within reasonable spending limits Midlothian Council are looking to link up with HandiCabs to assess their capability to run the services at less cost than a taxi firm, and under S19 legislation, taking advantage of the ability to offer S19 service to those with no access to PT as a result of lack of access to private transport.

The Highland Council Taxi Feeder Services

D.55 The Highland Council (THC) commission four “taxi feeder” DRT services in remote areas of the region (Portree, Glenelg, Kinlochbervie and Assynt). The first of these was set up in 1998 in response to withdrawal of Post Bus and regular bus services. One other was introduced for similar reasons and the remaining two were set up as a result of Community Council calls for new services.

D.56 All services provide trips on a pence per mile basis, with the difference subsidised by THC to the taxi operators. Taxi operators were chosen mainly because they had the flexibility and despatch centres in existence to operate these services, in addition to existent radio links to vehicles. Services are designed to link passengers into the conventional bus network.

D.57 Current feedback suggests that these services are working well with the majority of trips used for shopping purposes— although there have been differences in passenger understanding of the DRT concept in different areas. Marketing has been predominantly the responsibility of the operators of these services, and this difference in understanding may be a result of different levels of investment in this by different taxi firms. Marketing and disseminating knowledge to users of services has been acknowledged as a key issue by THC for future implementation.

D.58 An additional service is about to be set up by THC in Grantown on Spey along similar operation to the existing THC services. THC indicate that there have been some difficulties in local taxi firm perceptions of how services will operate, and as a result the first responses to tender of these services were three times the value that the Council had considered appropriate. THC are currently in close consultation with taxi and bus firms in the area to spread understanding of how the services could operate in advance of a second tendering process.

Gaberlunzie (East Lothian)

D.59 The Gaberlunzie bus service was inaugurated in January 1999 as a DRT linking rural settlements in East Lothian with the local towns of Haddington and Dunbar. The service was designed to complement the existing network of conventional bus service and rail service links in East Lothian. The rural parts of East Lothian were split into a number of different operational areas, each having a fixed identified start point. The Council initially used Rural Public Passenger Transport Grant funding to invest in appropriate software (ArcView GIS Version 3.0) to develop a route-planning package to determine the best route for the vehicle on any particular day of operation.

D.60 The introduction of the service had some impact on the local taxi operation, but as this was a subsidiary of the DRT operators this produced few problems, and the operator indicated that the service offered a more affordable service for the elderly in the area, so was little concerned.

D.61 However, after a review of all subsidised bus services in 2001, the design and operation of the Gaberlunzie services was revised and moved closer to a fixed route bus service. The key driver for this was the unit costs. The service was running at approximately £12 per passenger trip and this was deemed to be too high to be sustainable. As a result of this the services was redesigned as a fixed route Monday-Saturday service, operating different routes on different days, with the ability to divert on demand. Trip requests are now taken by the operator and on-bus.

D.62 The service now receives approximately 5 telephone bookings per week, but in general is very poorly used – particularly on the days that it centres on Dunbar, rather than Haddington.

D.63 The general impression of the operator was that the service was very expensive and “probably not offering value for money for the purchaser”, although with the fares and the subsidy the operator is still maintaining profitability. He also indicated that he felt that these sorts of market would be better served by a taxi style operation. However, it is important to note that the operator also indicated that it was a very small part of his operation, and that he did not have a day-to-day understanding of the service.

D.64 The service has claimed BSOG since its inception with no difficulties, and claims as if it was a conventional bus service, with the fixed route sections of the bus service stated as the estimate, and actual mileage used at end financial year for the claim.

North Lanarkshire Job Shuttle

D.65 North Lanarkshire Job shuttle is a service set up by CEiS (Community Enterprise in Strathclyde) under the umbrella of the Working for Families Funding programme. The Jobshuttle Initiative is essentially about providing an underpinning service to the childcare and employment projects/activities by providing a travel solution/planning service using both existing travel infrastructure and by directly providing transport services.

D.66 North Lanarkshire has committed funding from the Working for Families fund of £3 million for the two year period. The Jobshuttle funding is £285,484 to the period March 2006, with the potential for a further two years funding and development opportunities for additional services / income generation.

D.67 The service is not designed to duplicate any other transport services, and uses travel planning staff to recommend users to existing transport resources, but does provide a CT minibus service for those that have no alternative options. In the longer term it is hoped that a CT scheme may be developed out of the project, of which the job shuttle will form a key part.

E.0 APPENDIX E - SCOTTISH EXECUTIVE FUNDED PILOTS

E.1 This Appendix provides a summary of the nine Scottish Executive funded pilots identifying how well they have performed in their target markets and the potential for their future development.

DRT Markets

E.2 The pilot projects cover DRT operating in a range of different markets. However, the high value to user market is not represented, and the high value to agency market is only represented by the Highland pilot. Insights into DRT delivery in each market are outlined below.

Best Value DRT

E.3 In most cases, the pilot DRT service developments have been as a response to calls from the local community through bus forums and community councils etc, for an increase in the bus service provision (the complementary / best value DRT markets). This, along with Public Transport Officers' knowledge of gaps in the public transport network coverage, has been the main tool used to design the areas served by the DRT projects (e.g. Fife DRT). Many of the non-Scottish Executive pilot projects existing in Scotland have also been developed along the same lines (e.g. Midlothian Dial a Journey; Highland Council Taxi based DRT schemes).

E.4 The design of the Lomond service was informed by a transport study undertaken in the National Park, but the pilot goes beyond the park and was an area that Argyll and Bute Council had been seeking to link up with the SPT ring and ride service for some time.

E.5 In a small number of cases DRT projects have been used to directly replace high-subsidy fixed bus routes to offer better value for money and increased accessibility (e.g. Aberdeenshire Strathdon and Buchan services)

High Care Needs

E.6 The high care needs market is targeted in the Aberdeen City pilot and Dundee City and the S19 services operated by Aberdeenshire Council can be used by anyone who has "limited access to the public transport network", and could therefore be open to anyone living away from a bus route, but are almost exclusively used by those needing assistance to travel.

E.7 Of note is the high use of other services by 'high care needs' users. The Fife taxi based service, and the services in Argyll and Bute have high patronage by users who would not normally be able to use conventional bus services. Although accessible vehicles have been specified for all these services, the aim of these services in rural areas was to increase accessibility without necessarily being targeted at persons with mobility difficulties yet the usage by persons with these needs is significant.

E.8 This highlights the 'dovetailing' of best value / complementary DRT and high care needs in certain contexts. There are clear indications here that there are overlaps in the markets, and that these need to be considered when designing and sourcing budgets for such services.

High Value to Agency

E.9 The only pilot offering insights into how DRT can meet the high value to agency market is the Highland Council access to employment taxi based DRT service. The

project is noteworthy in that transport is paid for both by users, employers, the Council and Jobcentre plus. The project has explored targets and aims to become sustainable and is seeking to constantly develop services through reorganising shift patterns and trips to ensure that vehicles are well used.

Capacity Building: Urban CT Pilots

E.10 The main focus for the Edinburgh, Dundee and Glasgow pilots is in developing capacity to deliver transport services, rather than in the delivery of particular DRT schemes.

E.11 Central to Glasgow's proposal was the introduction of hospital visiting services operated by four separate CT groups, but the young age of the CT-Glasgow has meant that substantial resources have been, and are continuing to be, expended on setting up joint working protocols, resulting in delays in implementing the projects. The visiting schemes are now underway, but patronage is currently low.

E.12 In Edinburgh, the joint working was already established between CT groups, and the funding has allowed this process to continue and be enhanced.

E.13 The Dundee project funding has facilitated the employment of a CT officer who is exploring routes to joint working internally and with commercial operators. It is encouraging that the CT officer has undertaken the development of a best value review (which has recently become Council policy) highlighting the savings that can be made through internal transport co-ordination in the Council, and has also facilitated the development of and fundraising for a Dundee CT scheme offering groups hire services. Both these services will take time to become established, in particular breaking down cultural barriers to facilitate joint working within local Authorities can be problematic, but having a champion in place to lead these agendas forward is a key element in successful practice.

E.14 The Aberdeen pilot was designed to use a Stagecoach Bluebird owned taxi firm for the TDC in the Aberdeen City dial-a-ride. Although located out of the operating area (in Banchory), the use of this resource enabled the operator to cut costs significantly as no new booking staff had to be employed to run the project. This has unfortunately proven problematic as the communication between the taxi firm and drivers has not been successful, and a lack of local knowledge has also caused problems. The TDC has now been moved to the bus depot, but operational and reporting problems are still in existence.

E.15 It is interesting to note that the Aberdeen City pilot, funded as part of the Urban Community Transport Initiative, is the only pilot to have resulted in no funds or capacity building going into the community sector.

Future development and long term sustainability

E.16 There is a need to foster joint working in the delivery of DRT services to enhance the sustainability of services between a wide range of stakeholders involved in DRT including: Public Sector (Transport); Public Sector (Non-Transport related); Voluntary / Community Transport Groups; Commercial organisations; employers and other private organisations.

E.17 The rural DRT pilot projects were initially proposed to encourage and explore routes to maximise the use of existing transport resources through co-ordination and joint delivery.

E.18 There have been some examples of joint working, but in general, joint resourcing of services has not been demonstrated through the pilots. The vast majority of pilot services are straightforward ‘contracted’ services and do not demonstrate a wide range of experience in joint delivery.

E.19 Fife Council have an opportunity to develop joint working internally around DRT delivery as their Ring and Ride service (not part of the pilot) is rolled out to operate Fife-wide. It is likely that there may be overlap of the customers currently using the F3-F8 services and a locally based Ring and Ride service. This may act as a route to ensuring the long term sustainability of the pilot services and Fife are currently considering how the two services, and other key local services including the ambulance service non-emergency patient transport provision could be better co-ordinated in the medium to long term.

E.20 Angus Transport Forum (ATF) undertook some discussion and consultation over delivery with the local ambulance service in the early stages of their development, but unfortunately this has not developed into anything long term. Their multi operator agency approach has been successful in highlighting travel needs and opening up new markets for local operators, but due to the difficulties in offering uniform fares across operators, and the option for users to call operators directly when they become familiar with services, the demand for this service has reduced. However in highlighting other travel needs in the area the group has developed a group hire service for use with a wide variety of community groups – a resource that was not previously available.

E.21 The UCTI funded pilots have demonstrated and highlighted the role that CT can play in an urban setting, and that benefits can be gained through supporting development and joint working in CT delivery. Ensuring that funding for CT facilitates joint working and communication between both CT operators and other key agencies will be central to ensuring a sustainable role for CT in all settings.

F.0 APPENDIX F - HOW MUCH DRT IS OUT THERE?

The Location and Characteristics of DRT Services in Scotland

F.1 A review was undertaken of recent relevant published information about DRT schemes in Scotland to enable a broad outline of DRT activity to be described and logged into a database. Local Authorities were then asked to verify the existence of the identified schemes, and to add details of further schemes on separate sheets. A total of 145 DRT schemes were identified by location, organisational characteristics, service designs, legislation and resourcing.

F.2 The DRT were used to classify the different legislative, operational and management characteristics of current schemes for the purposes of survey and analysis.

The Data Collection Process

F.3 Many key staff in Local Authorities and other organisations are subject to a large number of surveys and experience shows that better and more informative responses are given if surveys only ask for information not available by other means. In particular requests for data are more likely to be viewed favourably if there is a trade of information between the research team and the respondent. The methodology adopted therefore sought to extract as much information as possible from published sources before seeking responses from Local Authorities and others. This then meant that the Authorities could benefit from the information extracted by the research team and respond more constructively to the request for further information.

F.4 The first step was therefore to extract readily available information on DRT from published information including web based sources. The following key criteria were selected to define the location, characteristics and overview of the operation of each DRT scheme. These comprised:

- Scheme name
- Details of operator of service
- Details of organisation managing / commissioning the service
- Type of DRT operation (e.g. fully flexible, flexible stops etc.)
- User types eligible for service (e.g. public, mobility impaired only etc.)
- Vehicle type used
- Operational legislation used
- Funding sources
- User numbers and charges
- Location of Travel Despatch Centre
- Operational area

F.5 DRT services do not sit within any particular administrative or legislative framework, and as a result there are no central sources for the above data. For example, sources such as the records of S19 permits held by the Traffic Commissioner do not specify the nature of the service operating under the permit (and in addition are often out of date). Even within Local Authorities there are often several departments operating different DRT services and no central record of these.

F.6 As a result, a wide range of literature and web based sources were used to collect information on the DRT services. In many cases the information on schemes from the literature was in outline and merely signalled the existence of a scheme and its general purpose, rather than its locus of operation. To elicit as many schemes as possible the search used both individual Local Authority websites and generic web-wide search engines using keywords including:

- “dial a ride” / “dial-a-ride”
- “dial a bus” / “dial-a-bus”
- “ring and ride / ring-and-ride”
- “DRT / demand responsive”
- “community transport”
- “dedicated services”
- “car schemes”
- “car sharing”

F.7 In addition, key voluntary sector organisations were searched including the British Red Cross, WRVS etc. to assess the extent of their Demand Responsive operations.

F.8 This review identified 80 schemes which were classified according to the relevant local authorities and summarised on questionnaires issued to Local Authorities.

F.9 Although several departments could potentially be involved in DRT operations within Local Authorities, the transport representatives were targeted initially, as they were the most appropriate figures who would have knowledge of DRT services in their areas.

Overview of DRT Services

F.10 A total of 145 DRT schemes were identified. Although outwith the remit of the study and therefore not included in the type of scheme for which data was sought, many Local Authorities still chose to include for completeness community based group transport and taxicard schemes. This was perhaps because the authorities felt the need to explain why they did not have more DRT. Taxicards and community based group transport can be practical alternatives to DRT as conceived within this project, and it is interesting to note that some respondents therefore included them within the DRT classification.

F.11 The schemes identified are summarised below by:

- Local Authority area
- Organisational characteristics
- Service designs
- Legislation
- Resourcing

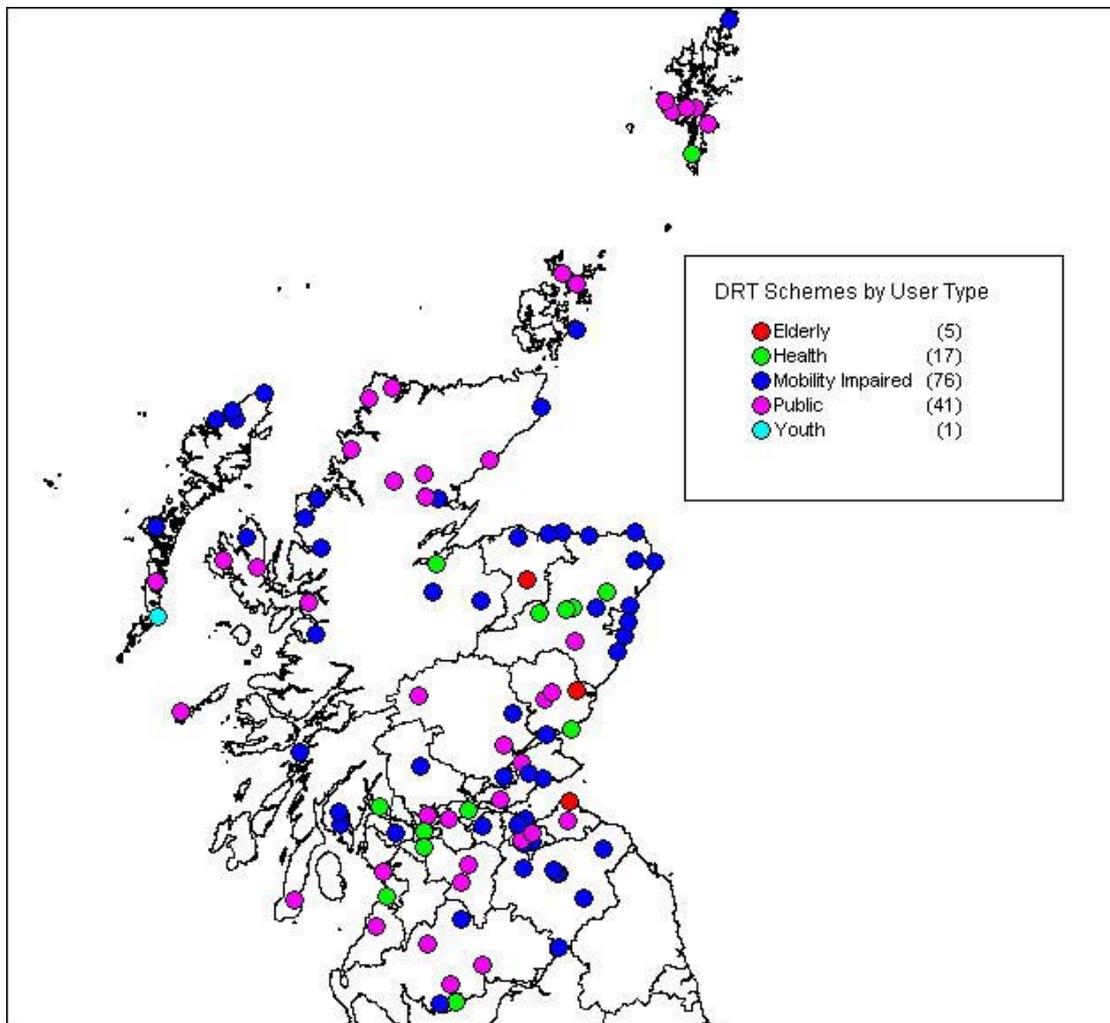
DRT Schemes by Local Authority Area

F.12 Figure F1 shows the spread of DRT operations across Scotland. The largest numbers of DRT schemes (when classified by local authority area) are operating in Highland, Aberdeenshire and Argyll and Bute, reflecting the rural nature of these areas.

F.13 The vast majority of DRT schemes identified are not available to the public being specialist services operating for elderly or mobility impaired people, reflecting the need to provide specialist transport for those with mobility difficulties.

F.14 However, the extreme rural areas of Highland, Argyll and Bute and the Shetlands have a high proportion of non-specialist DRT services, reflecting the need for these authorities to develop public transport solutions in areas where conventional services are not a sustainable transport option. Also of note are the six public DRT services in the SPT area. These are managed by SPT and have been developed to cover their rural operational area.

Figure F1 - DRT Services by User Type



Organisational characteristics of DRT

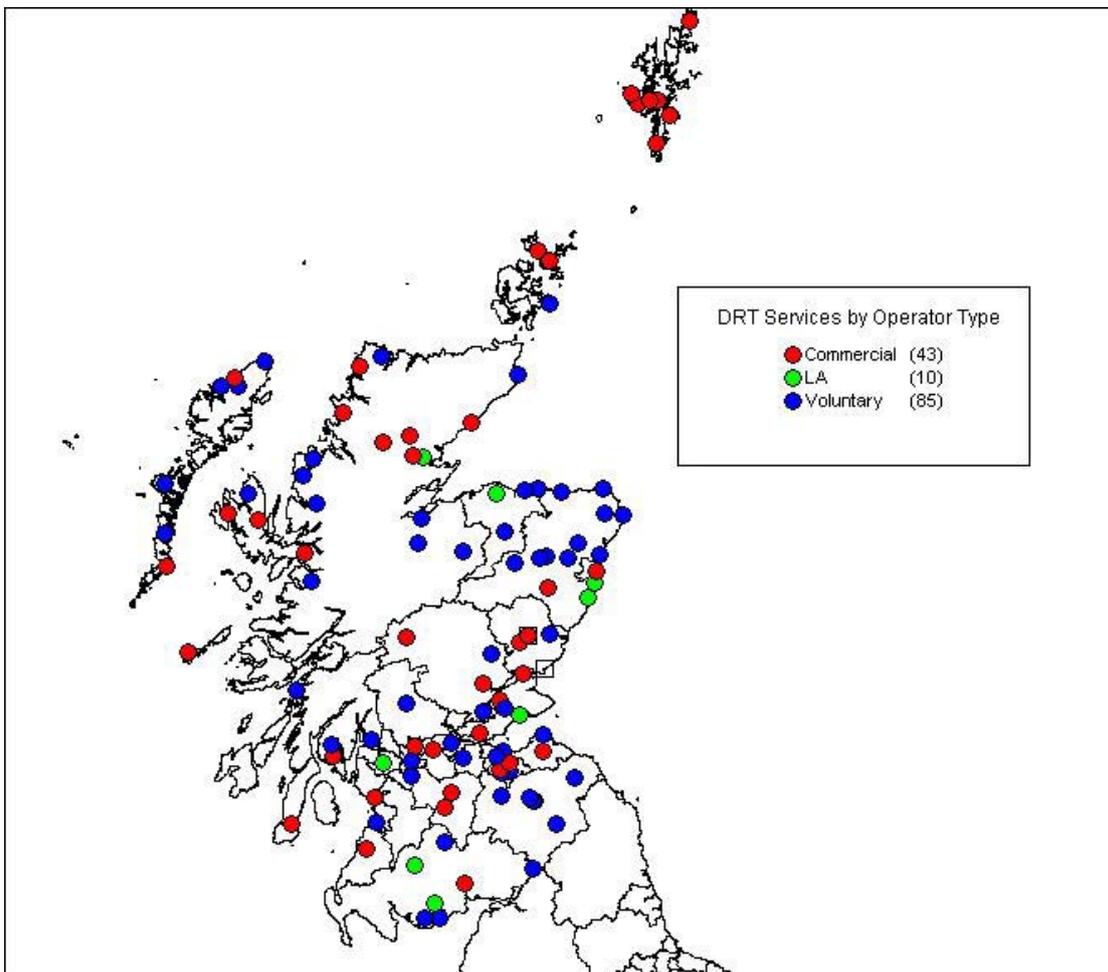
F.15 The schemes are operated/managed/commissioned by a range of different groups. Local Authorities, commercial operators and community/voluntary Groups are all active in both the commissioning and management of DRT services.

F.16 However, the distribution of services operated by these groups is not uniform. The volunteer / community sector operate and commission / manage over half of the DRT schemes identified (approximately 50 of which are car sharing schemes). The second largest group are commercially operated services commissioned by Local Authorities, followed by Local Authority managed and operated services.

F.17 These findings reflect the extensive (and long established) use of DRT in meeting specific needs (e.g. persons that have mobility difficulties, or live in remote areas where conventional bus services are not sustainable) where Local Authorities or voluntary organisations have either developed or supported services to provide access to services for these people groups.

F.18 The distribution of these services by operator is mapped in Figure F2.

Figure F2 - DRT Services by Operator Type



F.19 The voluntary sector DRT services are widespread across Scotland. It is interesting to note that in wealthy rural areas, such as the Scottish Borders and rural Aberdeenshire, there are strong concentrations of voluntary sector transport. This is unsurprising as these types of areas typically have a strong community capacity for this activity. This contrasts with the more remote areas of the Highlands, for example, where there is a more even spread of commercial and voluntary sector operated DRT services.

DRT Service Designs

F.20 The wide range of parameters of DRT service design, including route, operational area, and types of stopping points, mean that the description of service designs has to be simplified for the purposes of analysis, and to facilitate useful responses from the survey. Table F1 shows the spread of different types of service design. To fully represent each service an individual description would be required for each service.

F.21 As the majority of voluntary operated services are for those with specialist needs, offering door-to-door transport, most DRT schemes identified operate on an area wide, fully flexible basis. However 22 (approx 55%) of the DRT services operating for public use are also operating on an area wide fully flexible basis.

Table F1 Types of DRT Operation

Type of DRT Operation	Number of Instances
Combination	3
Destination Specific (many to one)	14
Fixed Route (variable stops)	7
Flexible Route (diverts off route)	14
Fully Flexible (area wide service)	98

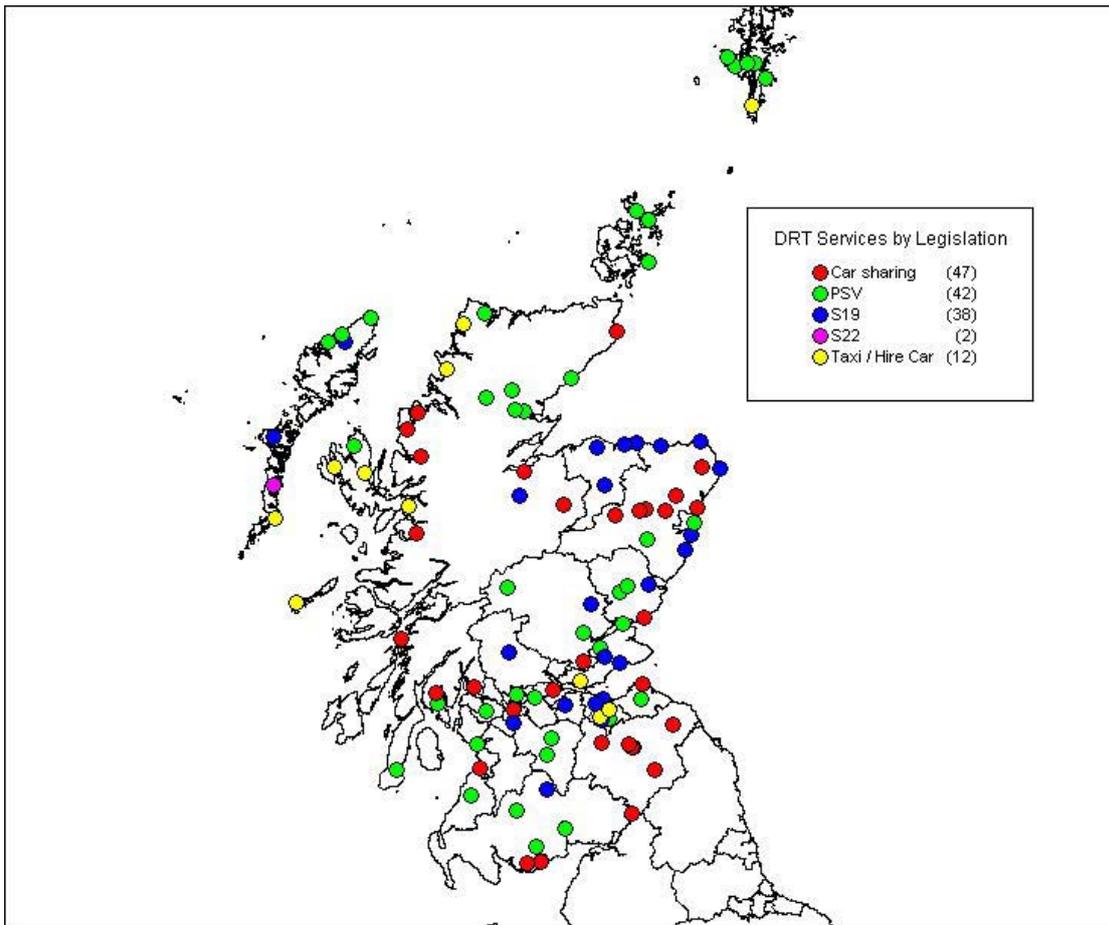
F.22 This method of description highlighted three ‘combination’ services operating on fixed routes for large sections of their journey with defined DRT elements. These services are:

- Stagecoach’s Yellow Taxi Bus Service (DRT in Dunfermline area and then fixed route to Edinburgh),
- Two services operated by Broons Buses and Taxis on behalf of Perth and Kinross Council. One of these operates a conventional bus timetabled service around Kinloch Rannoch with request stop at particular times. The second is a service from Kinloch Rannoch to Perth, which operates a conventional timetable to Perth, with a small scale DRT service within Perth to access key services (i.e. shops, infirmary, leisure centre)

Operating Legislation

F.23 Five main legislative classifications have been used to map the distribution of legislative routes for DRT services as shown in figure F3.

Figure F3 DRT Services by Operating Legislation



F.24 As a function of the number of voluntary services in this database, operating car sharing schemes, the majority of services are shown as operating under car sharing legislation. PSV and S19 regulations cover the majority of the rest of the DRT services, reflecting the involvement of commercial operators and both Local Authority and community based DRT.

F.25 It is interesting to note the number of schemes operating under taxi legislation. The services highlighted in the figure F3 in yellow describe the taxi based DRT schemes identified (12 in total). Taxi firms can view DRT services as a threat to their business, as DRT customers could be current or potential DRT customers. However the schemes demonstrate that the taxi sector can be successful operators of DRT so provided the markets can be grown conflicts should be avoidable. It is also important to note that most of these services have been contracted to taxi firms by local authorities who have identified the potential, and have not occurred as a result of taxi firm led initiatives.

F.26 The majority of the taxi based DRT services identified operate trips in which fares are charged at conventional bus rates, with the difference top-up funded by Local Authorities (e.g. Highland Council, and Midlothian Council).

F.27 The development of the guidelines for use of S19 legislation in March 2003 by DfT (from being restricted to certain groups to include operating services for those in a defined geographical area who did not have access to their own private transport) appears to have opened up new opportunities for operators to deliver services to remote

rural areas in particular. The survey identified 7 schemes in rural areas that explicitly indicated that they were operating S19 services in line with this change.

F.28 It was interesting to note that the two public DRT services operated by Dumfries and Galloway Council, operate under Section 42 of the Public Passenger Vehicle Act (1981) which allows Council owned education vehicles to be used for public services. This was the only example of the use of these regulations to develop a co-ordinated approach to service delivery.

G.0 APPENDIX G - DRT SCHEMES IDENTIFIED IN SCOTLAND

Aberdeen City

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Type	User Numbers per week	Funding Sources
Dial-a-ride Aberdeen	Local Authority / PTE Transport	Bluebird / Taxi firm for bookings	Commercial	Mobility Impaired	Minibus	PSV	Fully Flexible	Scottish exec Pilot

Aberdeenshire

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Type	User Numbers per week	Funding Sources
Silver Circle Community Transport	Community Group	The Silver Circle Support (019756) 51366	Voluntary Group	Elderly	Minibus	S19	Flexible Route	RCTI Fundraising Local contributions
Hospital Voluntary Driver Scheme	Community Group	The Silver Circle support Appointments made through Strathdon Medical Centre. Tel: (019756) 51209	Voluntary group	Health	Car Scheme		Destination Specific	RCTI Fundraising Contributions
Alford Transport Service	Car Voluntary Organisation	Alford Car Transport Service, 019755 64237	Voluntary	Health	Car Scheme		Fully Flexible	Fundraising
British Cross Transport and Escort Service	Red Voluntary Organisation	British Red Cross Transport and Escort Service Tel.(01224) 647741	Voluntary and	Health	Car Scheme		Fully Flexible	
Portlethen and District Community Ambulance	Community Group	John on 01569 731111	Voluntary	Health	Minibus	S19	Fully Flexible	
Oldmeldrum Hospital Visiting Service	Community Group	Church of Scotland Pastoral Committee, tel. 01467 620401.	Care Voluntary	Health	Car Scheme		Fully Flexible	
Buchan Dial-a-Community Bus	Voluntary Organisation	Buchan Dial-a-Community Bus 01771 613666 (Rachel Milne)	Voluntary Bus Tel.	Mobility Impaired	Minibus	S19	Destination Specific	RCTI Fundraising

The 65 Special Local Deaside Dial- Non Transport A-Trip	Authority Aberdeenshire Council's Social WorkLA Service :Tel: (01339) 887070	Mobility Minibus Impaired	S19	Flexible Route	260	Public Transport Unit Aberdeenshire Council
The 65 Special Local Kincardine & Non Transport Mearns Dial-A-Trip	Authority Aberdeenshire Council's Social WorkLA Service Tel: (01569) 765765	Mobility Minibus Impaired	S19	Flexible Route		Public Transport unit Aberdeenshire Council
Aberdeenshire DRT Pilot: PTE Transport Peterhead	Buchan Dial A Community Bus /Voluntary Aberdeenshire Council	Mobility Minibus Impaired	S19	Fully Flexible		RCTI Local Authority
Aberdeenshire DRT Pilot: PTE Transport Fraserburgh A2B	Buchan Dial A Community Bus /Voluntary Aberdeenshire Council	Mobility Minibus Impaired	S19	Fully Flexible	52	RCTI Local Authority
WRVS Good Voluntary Neighbours in Organisation Aberdeenshire	Women's Royal Voluntary Service Voluntary (WRVS); Alan Forrest, Project Manage Tel. 01358 725626, AberdeenshireCS.MGR@wrvs.org.uk	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	NK	Aberdeenshire Council Rural CT Initiative
Aberdeenshire DRT Pilot: AlfordA2B	Local Authority / Donside: Aberdeenshire Council	Mobility Minibus Impaired	S19	Fully Flexible	21	RCTI
Deveron A-Bus	Banffshire Partnership Ltd (01261) Voluntary 831773/774	Mobility Minibus Impaired	S19	Flexible Route	62	RCTI
WRVS Shopping Service: Inverurie	Alan Forrest, Project Manager. Tel: 01358 725626. Email: AberdeenshireCS.MGR@wrvs.org.uk	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	18	Aberdeenshire Council Social Rural CT Initiative eg tesco's Work Department
Volunteer Driver Project	Volunteer Driver Project Tel. 01771 624642 (Wednesdays and Fridays 9 a.m. - 5 p.m.) volunteerdriers@care4free.net	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	NK	
Deaside Community Transport Group	Mid Deaside Ltd 013398 85222	Commercial Public	Minibus PSV	Flexible Route	51	RTF

Angus

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Operation Numbers	User per week	Funding Sources
Montrose Day Voluntary Care Centre Organisation	Montrose Panmure Place, Cattigan 01674 672062	Day Care Limited, Community Elderly	Minibus	S19	Destination Specific			
Brechin Day Voluntary Care Centre Organisation	Brechin Day Care Limited, Street, Brechin Betty Cohen 01356 625501	102 High Community Elderly	Minibus	S19	Destination Specific			
Kirriemuir Day Voluntary Care Centre Organisation	Kirriemuir Day Care Centre, Glebe Court, Kirrie muir, Culross 01575 574057	30 Community Elderly	Minibus	S19	Destination Specific			
Carnoustie Community Organisation Helpline	01241 854886	Voluntary Health	Car Scheme		Fully Flexible NK			
British Cross	British Red Cross Dundee Office 01382 322296	District Voluntary Impaired Scheme	Mobility Car		Fully Flexible			
Strathmore Travel DRT	Local Authority / Strathmore travel, PTE Transport 645640	Commercial Public	Minibus	PSV	Fully Flexible Not operational	yet Angus Council		
Angus DRT Group	Angus Transport Forum, Hospital, Brechin	Commercial Public	Minibus	PSV	Fully Flexible	RCTI		

Argyll and Bute

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Operation Numbers	User per week	Funding Sources
British Cross Transport Service	Red Cross Helensburgh	Voluntary Health	Car Scheme		Fully Flexible			
Bute Bus	Dial-a-Local Authority / PTE Transport 01546 602869 public.transport@argyll-bute.gov.uk	Bute Council LA email ;	Mobility Minibus	PSV	Fully Flexible 21	A&B Council		
Seil Car Scheme	Voluntary Organisation	Margate Anfield 01852 300368	Voluntary Mobility Car	Impaired Scheme	Fully Flexible	Volunteer Development Scotland	Quarriers	Local Health Care operative

Cowal Bus	Dial-a-Local Authority / PTE Transport	Argyll and Bute Council 01546 602869 email : public.transport@argyll-bute.gov.uk	LA	Mobility Minibus Impaired	PSV	Fully Flexible 25	A&B Council
Mid Transport Volunteers	Argyll Voluntary Organisation	Shirley MacIver 01546 603488	Voluntary	Mobility Car Impaired Scheme	Car sharing	Fully Flexible 20	RCTI
Ford on request Taxi	Eredine Commercial request Operator	Mid Argyll Taxis	LA	Public Taxi	Taxi / Hire Car	Fully Flexible 11	Argyll and Bute Council
Offer Tighnabraich Shared Taxi	Ferry - Commercial Operator	Tighnabraich service Station	LA	Public MPV	Taxi / Hire Car	Fully Flexible 16	Argyll and Bute Council
Lomond and Ride	Ring Local Authority / PTE Transport	To Be Established	LA	Public Minibus	PSV	Fully Flexible Operational Jan 05	Argyll and Bute Council
Ring'n'ride Service Tiree	Local Authority for PTE Transport	/ Awaiting tender return	Commercial Public	Public Minibus	PSV	Fully Flexible Not operational	Argyll and Bute Council and SE Pilot
Ring'n'ride Service Campbeltown Area	Local Authority for PTE Transport	/ West Coast Motors	Commercial Public	Public Minibus	PSV	Fully Flexible	West Coast SE Pilot Motors

Edinburgh

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type	Legislation	DRT Operation Numbers	User per week	Funding Sources
Colinton Care Group	Community Group	Colinton Care: Co-Ordinator: Mrs Moyira Perry, Tel: 0131 441 1114. Chairman: John C Sutherland, 23 Woodhall Bank, Edinburgh EH13 OHL, Tel: 0131 441 1181	Mrs Voluntary	Health	Car Scheme	Car sharing	Fully Flexible		
Women's Royal Voluntary Service (WRVS)	Voluntary Organisation	WRVS Edinburgh Area Office, 44 Albany Street, Edinburgh EH1 3QR Tel: 0131 556 4284	44 Voluntary	Mobility Car Impaired Scheme	Car sharing	Car sharing	Fully Flexible		
Handicabs Dial-A-Bus	Voluntary Organisation	Dial-a-Bus, 58 Edinburgh EH10 Tel: 0131 447 1718	58 Lane, Voluntary 4SG	Mobility Minibus Impaired	S19	Destination Specific	2306 Lothian)	(all Edinburgh Council	

Driving Service Voluntary Organisation	British Red Cross, Training and Voluntary Community Services, Beaverhall House, 27 Beaverhall Road, Edinburgh, EH7 4JF. Head Office 0131 557 9898	Car sharing	Fully Flexible	Mobility Car Impaired Scheme	
Handicabs Dial-a-ride	Handicabs - Edinburgh, 58 Canaan Voluntary Lane, Edinburgh EH10 4SG Tel: 0131 447 9949	S19	Fully Flexible 2306 (all Lothian)	Mobility Minibus Impaired	Scottish Exec
Urban Community Transport Pilot	Local Authority /Edinburgh Community Operators Group (5 ops)	S19	Fully Flexible	Mobility MPV Impaired	

Comhairle nan Eilean Siar

Scheme Name	Management Operator and contact details	Operator Type	User Vehicle Legislation Type / Role	DRT Operation Numbers per week	User	Funding Sources
Disability Lewis Community - Dial-a-ride Group	Disability Lewis, Sara Thomas 01851 701105	Voluntary	Mobility Minibus Impaired	Fully Flexible	RCTI	Local Authority
UIG Cairdeas Community Group	Malcolm Morrison, Isle of Lewis, Voluntary 08851, 672285	Voluntary	Mobility Minibus Impaired	Fully Flexible 10	PSV	Local Authority
Bus Beag Na Loch Organisation	Bus Beag Na Loch, 01851 880236	Voluntary	Mobility Minibus Impaired	Fully Flexible	S19	Local Authority
Tagsa Uibhst Voluntary Dial A Bus Organisation	Tagsa Uibst 01870 602111	Voluntary	Mobility Minibus Impaired	Fully Flexible	S19	Local Authority
Carlway Community Group transport Scheme	Carlway CC, Henrietta 01851 770414	Community	Mobility Minibus Impaired	Fully Flexible 100	PSV	Local Authority
Shawbost Community Council transport Scheme	Glaston Motors 01859 840269	Commercial	Mobility Minibus Impaired	Fixed Route	PSV	Local Authority
Iomairt Nis	Iomairt Nis, Catriona MacLean 810800	Voluntary	Mobility Minibus Impaired	Fully Flexible	PSV	Local Authority
Eriskay Community Council transport	Eriskay CC, Mrs Neilina Macinnes 01878 720717	Community	Mobility Minibus Public	Fixed Route	S22	Local Authority

Scheme	Voluntary	Trosaraidh Taxis, 01878 700206	Commercial Youth	Taxi	Taxi / Hire Car	Fixed Route	RCTI	Local Authority
Southend Youth Forum	Organisation							

Dumfries and Galloway

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Type	User Operation Numbers per week	Funding Sources
Auchencairn Community Council Car Care Project	Community Group	Auchencairn Community Council	Community	Health	Car Scheme	Car sharing	Fully Flexible	Stewartry Council for Voluntary Services
Mid-Nithsdale Wheels Appeal	Voluntary Organisation	Mid-Nithsdale Wheels Appeal	Voluntary	Mobility Impaired	Minibus	S19	Flexible Route	Fund raising
Upper Nithsdale Wheels Appeal Bus - dial-a-ride	Voluntary Organisation	Upper Nithsdale Wheels Appeal	Voluntary	Mobility Impaired	Minibus	S19	Fully Flexible 2	
Red Cross Escort Service	-Voluntary Organisation	Red Cross Tel: 01576 204513	Voluntary	Mobility Impaired	Car	Car sharing	Fully Flexible	Dumfries and Galloway Council
WRVS Neighbours Voluntary Scheme	Good Voluntary Organisation	WRVS Ann Galt, coordinator, Tel: 01556-502708	Co-Voluntary	Mobility Impaired	Car	Car sharing	Fully Flexible 26	RCTI CHAPS
Cairn Valley Community Transport	Community Group	CVCT C MacAllan 01387 820877	Voluntary	Public	Minibus	S22	Fixed Route 65	RCTI Hugh Fraser Foundation
Ring and Ride 115	Local Authority / PTE Transport	Stagecoach western 01387253496	Commercial	Public	Large Bus	PSV	Fully Flexible 70	
Ring and Ride 555	Local Authority / PTE Transport	DGC Buses 10381 260124	LA	Public	Large Bus	PSV	Fully Flexible 40	
Ring and Ride 557	Local Authority / PTE Transport	DGC Buses 10381 260124	LA	Public	Large Bus	PSV	Fully Flexible 6	

Dundee

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type	Legislation	DRT	User Operation Numbers per week	Funding Sources
Sheltered service	Bus Local Authority / Strathray	Scottish / DATAG	Commercial	Mobility Impaired	Minibus	PSV	Fixed Route	50	Scottish Executive Urban Fund Social Partnership Inclusion

East Lothian

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type	Legislation	DRT	User Operation Numbers per week	Funding sources
North Berwick Voluntary Scheme	Local Authority	North Berwick Voluntary Car Scheme - co-ordinator Mrs Potter on 01620 892101	Voluntary	Elderly	Car	Car sharing	Fully Flexible		RCTI
Handicabs Dial-a-Bus	Local Authority / PTE	Handicabs / Lothian, Unit 4, Whitehill Business Centre, Dalkeith, EH22 2QD, Dial-a-Ride - 0131 663 5184	Voluntary	Mobility Impaired	Minibus	PSV	Destination Specific	45	Councils RCTI
Handicabs Dial-a-Ride	Local Authority / PTE	Handicabs / Lothian, Unit 4, Whitehill Business Centre, Dalkeith, EH22 2QD, Dial-a-Ride - 0131 663 0163	Voluntary	Mobility Impaired	Minibus	PSV	Fully Flexible	100	Councils RCTI
Transport and Escort Scheme	Local Authority / PTE	British Red Cross Lothian Branch, Voluntary East & Mid District Office, 131 High Street, Dalkeith, EH22 1BE Tel: 0131 654 0340	Voluntary	Mobility Impaired	Car	Car sharing	Fully Flexible		
WRVS Neighbours Scheme	Good Voluntary Organisation	The WRVS Good Neighbours Scheme helpline is 01620 829337	Voluntary	Mobility Impaired	Car	Car sharing	Fully Flexible		RCTI
Gaberlunzie	Local Authority / PTE	Eve Cars and Coaches	Commercial	Public	Minibus	PSV	Combination	65	RTF

Falkirk

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type	Legislation	DRT Operation	User Numbers per week	Funding Sources
British Cross Transport Service	Red Cross Falkirk Organisation	Red Cross Falkirk	Voluntary	Health	Car Scheme	Car sharing	Fully Flexible		
Dial-A-Journey	Voluntary Organisation	Dial - A - Journey, Unit 7, 9 Munro Road, STIRLING FK7 7XQ (01786) 465355	Voluntary	Mobility Impaired	Minibus	S19	Fully Flexible		

Fife

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type	Legislation	DRT Operation	User Numbers per week	Funding Sources
Dial-A-Ride	Local Authority / PTE Transport	Fife Council Transportation, 01592 LA 413290	LA	Mobility Impaired	Minibus	S19	Destination Specific	730	Fife Council
Ring & Ride Kirkcaldy and Levenmouth	Local Authority / PTE Transport	Fife Council Transportation, 01592 LA 760067	LA	Mobility Impaired	Minibus	S19	Fully Flexible	900	Fife Council
ENNTrans (East Neuk Neighbourhood Transport)	Voluntary Organisation	Sue Pryde, 2 Tollbooth CellarDyke, KY10 3BG, 01333 312370	Wynd, Voluntary	Mobility Impaired	Minibus	S19	Fully Flexible	45	RCTI Fife Council
WRVS Neighbours	Good Voluntary Organisation	WRVS West Bridge Mill, Street, Kirkcaldy	Bridge Voluntary	Mobility Impaired	Car	Car sharing	Fully Flexible	50	Fundraising
British Cross Transport	Red Voluntary Organisation	Richard Hyslop, West Bridge Street, Kirkcaldy	Mill, Voluntary	Mobility Impaired	Car	Car sharing	Fully Flexible	20	Fundraising
Flexi 3 & 4 into 6	Services Local Authority / PTE Transport	/Taxi operator	Commercial	Public	MPV	Taxi / Hire Car	Fully Flexible	95	RCTI
Yellow Taxi	Commercial Operator	Stagecoach Fife 01383432343	Commercial	Public	MPV	Taxi / Hire Car	Combination		
Flexi 1 & 2 1)	Services Local Authority / PTE Transport	/Stagecoach	Commercial	Public	Minibus	PSV	Flexible Route	500	RCTI

Glasgow

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type / Scheme	Legislation	DRT Operation	User Numbers per week	Funding Sources
British Cross Transport Service	Red Cross Organisation	Red Cross Glasgow	Voluntary	Health	Car Scheme	Car sharing	Fully Flexible		
Pilot Project for Local Glasgow City PTE	Authority / Transport Operators Group	Community Operators Group	Transport Voluntary	Health	Minibus (plus on car scheme)	S19	Fully Flexible		Urban Community Transport Initiative

Highland

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type / Scheme	Legislation	DRT Operation	User Numbers per week	Funding sources
British Cross Transport Service	Red Voluntary Organisation	Red Cross Inverness	Voluntary	Health	Car Scheme	Car sharing	Fully Flexible		
Lochaber Community Car Scheme	Community Group	Lochaber Community Care Benny MacDonald Community Car Scheme, Drochaid, Claggan, Fort William, Tel: 01397 701 222	Forum. Voluntary	Mobility Impaired	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	20	Highland Council
Badenoch and Strathspey Transport Company community car scheme	and Voluntary Organisation	Badenoch and Strathspey Company, VABS, Road, Aviemore PH22 1RH, Maggie Lawson 01479 810004	Transport Voluntary	Mobility Impaired	Mobility Car Impaired Scheme	Car sharing	Fully Flexible		Highland Area Committee RCTI Council Moray Badenoch & Strathspey Enterprise
Shopmobility	Voluntary Organisation	Duncan Hendry 01463 717624	Voluntary	Mobility Impaired	Mobility Minibus	S19	Fully Flexible		
Gairloch Community Car Scheme	Voluntary Organisation	Allan Jones – Co-ordinator 01445 712872 on Monday and Wednesday from 9.00 am – 3.00 pm. E-mail admin@gccs.freemove.co.uk	Voluntary	Mobility Impaired	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	24	RCTI The Highland Council

a bus	PTE Transport	New Street, Rothes, AB38 7BQ. Tel. 01340 831278. Co-Ordinator Jim Anderson	Impaired									
BABS Bus	Dial a Voluntary Organisation	BABS Dial a Bus, March Road, Buckie, 01542 835800	Mobility Impaired	Minibus	S19	Fully Flexible		NK				RCTI
Buckie District Fund	& Voluntary Trust Organisation	Mr Gordon Grant, Parklands Home, High Street, Buckie, 01542 836000	Mobility Impaired	Minibus	S19	Fully Flexible						

North Lanarkshire

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT	User Operation Numbers per week	Funding sources
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British Cross Transport Service	Red Voluntary Organisation	Red Cross Glasgow	Voluntary	Health	Car Scheme	Car sharing	Fully Flexible	
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Orkney Islands

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT	User Operation Numbers per week	Funding sources
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Dial-a-bus	Voluntary Organisation	Jack Moodie, Mackays Buildings, Junction Road, Kirkwall, Orkney (01856) 871515 odf@orkney.com	1 Voluntary	Mobility Impaired	Minibus	PSV	Fully Flexible	Orkney Council
Westray Bus	Local Authority / PTE Transport	M&J Harcus Meadowbank, Orkney, KW17 2BZ		Public	Minibus	PSV	Flexible Route	5 winter, 75 summer Orkney Council
Sunday ride	Dial-a-Local Authority / PTE Transport	Tina Flett, Marygarth Sanday. Tel: 01857 600 467		Public	Minibus	PSV	Flexible Route	30 Orkney Council

Perth and Kinross

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Operation Numbers	User per week	Funding sources
WRVS Perthshire Community Transport and Good Neighbours Scheme	Voluntary Organisation	As Above, 01738 63975	Voluntary	Mobility Car Impaired Scheme	Car sharing	Fully Flexible 211	RCTI	various
Blaigowrie Freedom Coach	Voluntary Organisation	Blaigowrie freedom district association, 01250 874246	Coach and Voluntary	Mobility Minibus Impaired	S19	Fully Flexible 110	Local Authority	
Perth Access Cars	Voluntary Organisation	As above, 01738 639134	Voluntary	Mobility Minibus Impaired	Car sharing	Fully Flexible		
Kinrossshire Volunteer Group and Rural Outreach Scheme	Voluntary Organisation	As above, 01577 840196	Voluntary	Mobility Car Impaired Scheme	Car sharing	Fully Flexible 33		
Bus Service 85 Local Authority / Broons Buses and Taxis / Postbus 223 PTE Transport			Commercial Public	Minibus	PSV	Fixed Route		
Bus Service 89 Local Authority / Broons Buses and Taxis PTE Transport			Commercial Public	Minibus	PSV	Fixed Route		

Scottish Borders

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Operation Numbers	User per week	Funding sources
Gala Wheels	Voluntary Organisation	Borders Disability forum	Voluntary	Mobility MPV Impaired	Car sharing	Fully Flexible		
Teviot Wheels	Voluntary Organisation	Roxburgh Assoc Vol Orgs	Voluntary	Mobility MPV Impaired	Car sharing	Fully Flexible	RCTI	
WRVS	Voluntary Organisation	WRVS	Voluntary	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	RCTI	
Berwickshire Wheels	Voluntary Organisation	Berwickshire Assoc for Vol Orgs	Voluntary	Mobility MPV Impaired	Car sharing	Fully Flexible	RCTI	

Newcastleton District Social Organisation Car Scheme	Voluntary	Newcastleton & District Welfare Committee	District	Welfare Voluntary	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	Fully Flexible
Central Borders Car Organisation	Voluntary	Central Borders Assoc Vol Service	Voluntary	Voluntary	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	Fully Flexible
British Cross	Red Voluntary Organisation	Red Cross	Voluntary	Voluntary	Mobility Car Impaired Scheme	Car sharing	Fully Flexible	Fully Flexible
Tweed Wheels	Voluntary Organisation	Tweedale Assoc Vol Orgs	Voluntary	Voluntary	Mobility MPV Impaired	Car sharing	Fully Flexible	RCTI

Shetland Isles

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type	Legislation	DRT	User Operation Numbers	Funding sources
Levenwick Surgery Run	Local Authority / PTE Transport	/ Boddam Cabs	Commercial	Health	Taxi	Taxi / Hire Car	Destination Specific	8	Shetland Council
Unst Shopper Service	Local Authority / PTE Transport	/ AW McLoed	Commercial	Mobility Impaired	Taxi	PSV	Flexible Route	10	Shetland Council
West Burralfirth Dial-a-ride	Local Authority / PTE Transport	/ Margaret Morrison Reawick	Commercial	Public	Minibus	PSV	Flexible Route	10	RTF
Ness Dial-a-ride	Local Authority / PTE Transport	/ John Leask and son	Commercial	Public	Minibus	PSV	Fully Flexible	6	RTF
Shannon-Lerwick Cunningsburgh	Local Authority / PTE Transport	/ Nicolson Bros, Shetland Islands , Tel 01950 477243	Commercial	Public	Minibus	PSV	Fully Flexible	8	RTF
Weisdale Shopper	Local Authority / PTE Transport	/ Robinson Transport	Commercial	Public	Minibus	PSV	Destination Specific	14	RTF
Sandness Shopper	Local Authority / PTE Transport	/ PW Isbister	Commercial	Public	Minibus	PSV	Destination Specific	10	RTF

South Ayrshire

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type	Legislation	DRT	User Operation Numbers	Funding sources
British Cross	Red Voluntary Organisation	Red Cross Ayr	Voluntary	Health	Car	Car sharing	Fully Flexible	Fully Flexible	

Transport Service

SPT Area

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Operation Numbers	User Operation Numbers per week	Funding sources
Dial-a-bus	Local Authority / PTE Transport	Dial-a-Bus Passenger House, 12 West George Street, Glasgow G2 1HN 0845 128 4025	Unit, Strathclyde LA Transport, Consort	Mobility Impaired	Minibus PSV	Fully Flexible	5800	SPT
Ring 'n' Ride Service 600	Local Authority / PTE Transport	First Glasgow on behalf of SPT.0845 128 4037.	Commercial Public	Minibus	PSV	Fully Flexible	106	SPT
North Lanarkshire Ring 'n' Ride 400	Local Authority / PTE Transport	FirstGlasgow on behalf of SPT.0845 123 5048	Commercial Public	Minibus	PSV	Fully Flexible	75	SPT
Three Valleys Ring'n'Ride Service 900	Local Authority / PTE Transport	Henderson Travel on behalf of SPT 0845 123 5046	Commercial Public	Minibus	PSV	Fully Flexible		
Lanark Ring'n'Ride Service 800	Local Authority / PTE Transport	Mickindless Coaches on behalf of SPT 0845 123 5047	Commercial Public	Minibus	PSV	Fully Flexible	110	SPT
Irvine Ring 'n' Ride Service 500	Local Authority / PTE Transport	Shuttlebuses Ltd on behalf of SPT 0845 128 4036	Commercial Public	Minibus	PSV	Fully Flexible	145	SPT
Carrick Connector Ring 'n' Ride Service 700	Local Authority / PTE Transport	Stagecoach Western Buses on behalf of South Ayrshire Council – managed by SPT 0845 123 5656	Commercial Public	Minibus	PSV	Fully Flexible	160	South Ayrshire Council

Stirling

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Legislation	DRT Operation Numbers	User Operation Numbers per week	Funding sources
Dial-a-Shopper Organisation	Voluntary	Dial a Journey Ltd 01786 465355 enquiries@dial-a-journey.org	Voluntary	Mobility Impaired	Minibus S19	Fully Flexible		Falkirk Council Clackmannanshire Stirling Council

Dial-a-Journey Ltd	Voluntary Organisation	01786 465355 journey.org	enquiries@dial-a-journey.org	Voluntary	Mobility Minibus S19 Impaired	Fully Flexible	Falkirk council	Clackmannanshire Stirling council
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West Lothian

Scheme Name	Management	Operator and contact details	Operator Type	User Type / Role	Vehicle Type	Legislation	DRT Operation Numbers	User per week	Funding sources
HandiCabs	Voluntary Organisation	Handicabs Whitehill Industrial Estate, Bathgate, tel. 01506 633953	Voluntary	Mobility Minibus S19 Impaired	Minibus	S19	Fully Flexible 2306	(all West Lothian)	Lothian NHS Council
Dial a Bus	Voluntary Organisation	Handicabs Whitehill Industrial Estate, Bathgate, tel. 01506 633953	Voluntary	Mobility Minibus S19 Impaired	Minibus	S19	Fully Flexible 2306	(all West Lothian)	Lothian NHS Council

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