

Patient Transport

Disability Equality Scotland

briefing paper



Overview

Disability Equality Scotland is a national charity working to achieve full access and inclusion for disabled people in Scotland.

We promote access in its widest sense. This includes access to the built and natural environment and access to the same opportunities as are enjoyed by others in our communities thus promoting a life of dignity, respect and independence. This extends beyond physical access to include access to information, access to inclusive communication and inclusion in decision-making, whether with planners over inclusive design or transport providers about accessible travel.

Our aim is for every disabled person to have the opportunity to participate in a fulfilling life and for their voice(s) to be heard.

We represent the views of individuals with any type of impairment, as well as disability organisations and groups who share our values.

We are a membership organisation and as such listen to the views of disabled people and champion on their behalf. We work to influence the policies of the Scottish Government, which affect how disabled people live, and work to encourage others to be inclusive and informed in their attitudes towards disabled people.

We are also the umbrella organisation for all disability Access Panels in Scotland and the principal provider of support and guidance to the Access Panels presently representing disabled persons at a local level throughout Scotland. Access Panels are committed to improving access and equality in its widest form, which means access to the physical

environment, Education, Housing, Health, Transport, Leisure & Recreation and Social Justice amongst other areas.

Patient Transport

In November 2018, Disability Equality Scotland ran a weekly poll of its members on the topic of patient transport and access to transport for healthcare and medical appointments.

The results of this survey from November 2018, indicated that 66% of respondents (25 people) had experienced problems when booking transport for medical or health care appointments. The results of this survey were shared with the Mobility and Access Committee for Scotland.

In August 2019, Disability Equality Scotland received a request from MACS to follow up on this topic with its members. This was to assist them in gathering evidence on transport to health. It is the intention of MACS to host a multi-organisational roundtable discussion on this topic later in 2019. The discussion will include representatives from the Scottish Ambulance Service, NHS Boards, local authorities, Regional Transport Partnerships, and other statutory bodies and DPOs.

For the week commencing Monday 5 August 2019, Disability Equality Scotland posed the question:

“Have you had problems booking or getting transport to medical/healthcare appointments?”

We received an overwhelming response, with our highest ever number of respondents to a poll (848 respondents) demonstrating how much of an emotive subject this is for our membership. The results were as follows:

- YES – 98% (829 respondents)
- NO – 2% (19 respondents)

In summary

Overwhelmingly, our members had experienced problems with the patient transport service and with transport to medical appointments in general. Some of the key points raised through the poll included:

- Examples where disabled people were told their carer could not accompany them in the patient transport and would have to make their way separately to the hospital or appointment.
- Examples where wheelchair and powerchair users were told they could not be transported in their chair.
- That bookings for patient transport could only be made up to three-weeks in advance, and several people were told the services were full. There are also 'eligibility criteria' that are employed by some services.
- A consensus that patient transport services are over-subscribed and current resources cannot meet demand.
- Examples of people being refused patient transport and subsequently being unable to afford the taxi journey required to get to their appointment.
- A general experience that hospital car parks were difficult to navigate, and spaces were rarely available. In this instance, some respondents chose to travel by patient transport to avoid the need to park.
- Respondents in rural or island communities commented on how difficult it can be to coordinate transport, particularly when traveling from island communities and where coaches have replaced public buses in some rural areas.
- Incidents of patient transport bookings being cancelled at short notice, meaning missed appointments and re-joining the waiting list.
- Disabled people have to commonly rely on friends and family to transport them to and from hospital in the absence of patient transport.

Key Themes

Eligibility for Patient Transport/Booking Patient Transport

Below are comments from our members about their experiences of trying to book patient transport, and the criteria employed to determine their eligibility.

“I am grateful for the opportunity to comment on this as there are so many failures from booking transport, knowing if you remain eligible with the criteria and what to do when your transport is running late, and the clinic won't see you. I talk to other patients when I am waiting for my transport home and we all have the same problems.”

“I try to book transport for my dad as I work and can't take him all the time. The ambulance service is very unhelpful and change the eligibility depending on who is at the other end of the phone. It should be the same all the time. I don't answer any of their questions different and sometimes get told yes and sometimes no.”

“Only need transport back from hospital as my treatment makes me feel quite unwell but the ambulance service has refused this because I made my own way in.”

“Always problems trying to book and normally have to get my doctor to step in.”

“I have a spinal cord injury and use a wheelchair. I don't do much independently but according to the ambulance service I don't qualify for their transport.”

“The ambulance booking system is all wrong and too time consuming. needs simplified and also need to be consistent re criteria and application.”

“I work in a health centre and spend most of my time trying to book transport for patients to get to hospital appointments for referrals. It is very inefficient and poor use of my time as I am on the phone while I should be welcoming and helping patients.”

“Because I can walk a short distance on a good day, I am not allowed an ambulance even though I have no other way of getting to the hospital on my own.”

“Too many horror stories. My family take time off work now to take me to save me all the stress.”

“I am disabled and need transport to hospital but don’t think I should have to show the receptionists my PIP letter as proof every time. Would be nice if they just took my word and treated me with some dignity. Life is hard enough.”

“I note that an ambulance if available “ if you have a medical condition that would put you at risk if you travel independently” but when you tell them you can’t travel on your own because of a lack of confidence or anxiety then this isn’t assessed as a medical condition. It is a hidden disability but they don’t recognise this because you can walk and because of this condition I don’t have confidence to use the bus.”

Delays and Cancellations

There were examples of patients relying on patient transport, which is often delayed or cancelled, which can exacerbate illness.

“Lengthy delays to return home by ambulance often means I am really unwell by the time I get home.”

“There is not enough ambulances to cope with the pressures. That’s why they are always late or cancelled and you wait hours to get home.”

Rural Areas

Patients in rural areas face difficulties accessing medical appointments due to distance and geography.

“I need to attend the SMART centre at the Ashley Ainslie as it is the only centre for driving assessments for disabled people in Scotland. I live in Inverness and it is a lengthy round trip of over 350 miles. The ambulance service won’t help with transport to get me there”

“I live north of Inverness and have regular appointments at Raigmore. Around a year ago our bus was replaced by a coach (Stagecoach) and the steps on the coach are too high for people with mobility impairments

such as myself. We now can't use the bus service to get to Raigmore and this is the only bus on the route. Being rural we have no train service. Community transport has also been depleted. The ambulance service does not have enough crews and vehicles to meet this extra demand now that people can't get a bus to Raigmore so many medical appointments are going unattended and cancelled which I am sure is wasteful to the NHS."

Carers

There were examples of patients being told their carers could not accompany them in the ambulance and had to travel separately. This caused stress and extra expense for many.

"I really need my carer to attend the hospital with me but the ambulance service no longer allows this so I can't use ambulance transport and have to pay for taxis that I can't afford. I wouldn't manage by bus."

"It's helpful and less stressful if your carer or companion can travel with you. There never used to be an issue with this, but the ambulance service doesn't allow a carer now and this policy needs reviewed."

"I want to be able to travel in the ambulance with the carer as I need their help at hospital, but this isn't allowed anymore, and I often don't go because of this. I can afford to pay for my carer to travel separately to meet me at the hospital as they suggest. This is ludicrous as there are normally empty seats in the ambulance."

Public Transport - Accessibility

Public transport often was not a viable alternative to those trying to access medical appointments as their transport was not accessible for their needs.

"Public transport needs sorted and needs to be more accessible. Currently hit and miss."

"My bus service changes and doesn't go near the hospital or a stop where I can change over. I can't get an ambulance as I don't need care during the journeys."

"Bus stops are too far away from main outpatients to walk from the stop. The accessible travel framework talks about door to door journeys and

this can't be achieved as long as busy stops as outside the hospitals and too far away from the clinics.”

“The buses to the Royal Infirmary Edinburgh stop further away from the hospital than they used to, and it is no longer within walking distance for lots of people.”

“I have problems in the summer months for short notice appointments as I live on Arran and the ferries are normally full of tourists and hauliers. There should be a system that prioritises crossings for islanders medical and urgent appointments.”

Public Transport - Cost

The cost of travelling by public transport was also a factor in making it difficult to travel independently to medical appointments, with many patients having to use taxis or else the frequency of journeys made the cost untenable. In one example, a patient was forced to skip meals to afford the travel to hospital.

“I normally end up taking a taxi as I can't manage on the bus, but taxis are expensive, and I can't always afford it.”

“Public transport is not adequate or affordable and the ambulance service don't have enough resources. These things need to be looked at.”

“People don't consider the cost of getting to your appointments. Accessing healthcare should not be unaffordable at it currently is.”

“Cumbernauld to GRI is hard and expensive by bus but I am expected to do this as apparently I don't qualify for ambulance transport and GRI is easier to get to than Monklands for treatment.”

“The cost of getting to medical appointments for people on low incomes needs to also be considered.”

“I have a very low income and it would help if they sent a free travel pass with the appointment. I don't mind being means tested to qualify for this and it would help a lot.”

“On the days I have to travel to hospital I have to skip a meal to afford the travel. I don’t mind doing this because I need to see the nurses and doctors, but should this really be the choice?”

“It’s a shame on our nation that in this day and age I can’t afford the fares to get to a medical appointment be it the hospital or my GP at the medical centre. There needs to be an acknowledgement that it costs more to travel in rural Scotland as we have to go further to access services.”

Hospital Parking

Taking private cars to hospital appointments was also not viable because of the difficulty in parking at hospitals.

“Parking is terrible at hospitals or not affordable. Everybody uses the blue badge spaces without a badge, and nobody enforces this. I know I shouldn’t, but I just book an ambulance now to save me the stress and cost of getting parked. I’m sure others do this too and it is probably why the ambulance service can’t cope and are always cancelling or running late.”

“They need to have adequate blue badge parking at hospitals and health centres that you don’t need to pay for to keep it affordable”

How improvements can be made to Patient Transport

There were several suggestions as to how improvements could be made to transport for medical appointments.

“There needs to be sustainable investment in local community transport schemes as they can help especially in rural areas.”

“You need to involve the patients in designing the services like they are doing with social security”

“The powers that be need to get more people involved in planning transport to medical appointments to better understand what they need and plan to meet this.”

“There have been long standing issues with transport to healthcare. Can the governments experience panels or citizens panel help with this and make sure the services are designed by the people who will use them?”

“There needs to be a national database with numbers for organisations that can help you get to hospital”

“If the ambulance service can’t cope invest in community transport or volunteer drivers. They provide the best service.”

“There needs to be overall accountability from one organisation to manage transport to medical Appointments whether it’s the health board or ambulance service. The current system is not joined up makes it hard for people as no one is willing to accept responsibility of help”.

“Sharing resources between the ambulance service, hospitals and local councils is the way forward. Make them share budgets too and that will get them working and planning together. This has worked for transport pilots.”

In conclusion

Overall our members felt that more had to be done to shake up the planning and organisation of patient transport as it plays such an important part in ensuring patients receive the treatment and consultations they need. Some patients chose not to travel to appointments at all, citing that the process was too stressful while others prepare for appointments, to have to cancel them when their transport does not appear. This in turn has an impact on NHS resources and waiting times.

Disability Equality Scotland would like to see better processes and systems in place to ensure those who require transport to appointments are catered for in a timely and appropriate manner.

Appendix 1: Full comments from weekly poll question

The following shows the verbatim comments from 300 of the respondents who chose to qualify their response with a comment.

‘Have you had problems booking or getting transport to medical/healthcare appointments?’

YES – 98% (829 respondents)

I gave up trying with ambulance transport. Too time consuming and inconsistent.

Ambulance booking needs major improvements in time it takes to book.

I normally end up taking a taxi as I can't manage on the bus but taxis are expensive and I can't always afford it.

I try to book transport for my dad as I work and can't take him all the time. The ambulance service is very unhelpful and change the eligibility depending on who is at the other end of the phone. It should be the same all the time. I don't answer any of their question different and sometimes get told yes and sometimes no.

I try to make my own arrangements for transport to healthcare appointments as I cannot rely on patient transport to get me there on time. I understand that transport patients jump the queue but one cannot fail to realise the impact this has on clinic staff and other patients that have to wait because I have arrived late. I am also quite deaf and find it hard to hear what is being said on the phone.

I only need transport back from hospital as my treatment makes me feel quite unwell but the ambulance service has refused this because I made my own way in.

There needs to be sustainable investment in local community transport schemes as they can help especially in rural areas.

Public transport is not adequate or affordable and the ambulance service don't have enough resources. These things need to be looked at.

Booking is the problem.

Public transport needs sorted and needs to be more accessible.
Currently hit and miss.

My bus service changes and doesn't go near the hospital or a stop where I can change over. I can't get an ambulance as I don't need care during the journeys.

Booking transport is the stressful part and the criteria for acceptance is inconsistently applied.

I am a member of DES and I would like them to make this their main campaign to address the barriers for disabled people accessing healthcare. It is a basic human right to be able to access healthcare and transport is a barrier that needs to be removed to achieve full access and inclusion for all.

People don't consider the cost of getting to your appointments.
Accessing healthcare should not be unaffordable at it currently is.

If the Mobility and Access Committee have asked for this poll are they going to do something about the problems?

Mainly problems ambulance transport but the public transport wouldn't get me to the hospital so I need to use ambulance.

Yes there are problems with public transport and ambulance transport.

Always problems trying to book and normally have to get my doctor to step in.

The ambulance booking system is all wrong and too time consuming.
Needs simplified and also need to be consistent re criteria and application.

Cumbernauld to GRI is hard and expensive by bus but I am expected to do this as apparently I don't qualify for ambulance transport and GRI is easier to get to than Monklands for treatment.

The system is too heavily reliant on individuals having to work transport out.

The Poverty and Inequality Commission in Scotland have just done some work of transport poverty. The cost of getting to medical appointments for people on low incomes needs to also be considered.

I need to attend the SMART centre at the Ashley Ainsle as it is the only centre for driving assessments for disabled people in Scotland. I live in Inverness and it is a lengthy round trip of over 350 miles. The ambulance service won't help with transport to get me there.

I work in a health centre and spend most of my time trying to book transport for patients to get to hospital appointments for referrals. It is very inefficient and poor use of my time as I am on the phone while I should be welcoming and helping patients.

Needs vast improvement to be fit for purpose.

You need to involve the patients in designing the services like they are doing with social security.

I have shared this poll as I know many people have an interest and want to see improvements. They feel helpless and as if nobody is listening to their problems.

Transport doesn't respond to patients' needs.

Always have problems booking transport and getting through to the call centre and long waits for transport home after clinic.

I think the receptionists at hospital are the gatekeepers to the ambulance service and they do a good job as they are always obstructive and tell you that you can't get transport even when you have before. Very inconsistent.

A friend has just shared this poll with me as I am not a members of disability equality Scotland. I am glad someone is looking at this and will sign as a member to get my say.

My GP normally has to intervene to get me transport as the ambulance service don't seem to believe me. This is not a good use of my GP's time.

The problem is that public transport isn't good enough and the ambulance service don't have enough staff to fill the gap.

I was talking about this poll yesterday at hospital in the waiting area for transport home and many people didn't know about it. Presumably not on line or not a member but we all agreed you should go to the main outpatients and waiting areas of the hospital and ask people as everyone feels the same that the most stressful part of the appointment is getting to the hospital and home again.

To better understand what they need and plan to meet this.

The booking is very difficult as it's hard to get through to the ambulance service and they normally are full on the day you need them.

I think the ambulance service needs help. It is under too much pressure. Most times when you try to book they are full.

Because I can walk a short distance on a good day I am not allowed an ambulance even though I have no other way of getting to the hospital on my own.

I am grateful for the opportunity to comment on this as there are so many failures from booking transport, knowing if you remain eligible with the criteria and what to do when your transport is running late and the clinic won't see you. I talk to other patients when I am waiting for my transport home and we all have the same problems.

The whole system needs an overhaul. It's broke.

There has been long standing issues with transport to healthcare. Can the governments experience panels or citizens panel help with this and make sure the services are designed by the people who will use them?

Too many horror stories. My family take time off work now to take me to save me all the stress.

GP surgeries are no help.

I have had to complain about ambulance transport a few times and always get promised the world for next time but every time is just as bad.

The ambulance service never take account of people with learning difficulties and that they need ambulance transport.

I am disabled and need transport to hospital but don't think I should have to show the receptionists my PIP letter as proof every time. Would be nice if they just took my word and treated me with some dignity. Life is hard enough.

There needs to be a national database with numbers for organisations that can help you get to hospital.

If the ambulance service can't cope invest in community transport or volunteer drivers. They provide the best service.

I have a spinal cord injury and use a wheelchair. I don't do much independently but according to the ambulance service I don't qualify for their transport.

Lengthy delays to return home by ambulance often means I am really unwell by the time I get home.

My family have to take time off work to take me to hospital. There is no other way.

I have a very low income and it would help if they sent a free travel pass with the appointment. I don't mind being means tested to qualify for this and it would help a lot.

I have missed several appointments now because of ambulance transport failures and can only imagine how much this is costing the NHS in inefficiencies.

The hospital and ambulance service need to talk to each other if things are to improve.

I always find getting transport the most stressful part.

It should be made easier and cheaper to get to hospitals using public transport and the transport should be available when clinics are running.

There are not enough ambulances to cope with the pressures. That's why they are always late or cancelled and you wait hours to get home.

I know there was an audit about 8 years ago, I think by Audit Scotland, but I haven't seen any changes since then. This audit looked at

integrating services and from what I know this still has not happened but needs to happen.

I have been told I can't get ambulance transport and I am finding it harder and harder to afford to get to my appointments as I have to take a taxi part of the way. The cost of getting to hospital if you are disabled needs to be considered.

Always have problems and hasn't got any better over the last 10 years. Just gets worse.

Bus stops are too far away from main outpatients to walk from the stop. The accessible travel framework talks about door to door journeys and this can't be achieved as long as bus stops are outside the hospitals and too far away from the clinics.

Parking is terrible at hospitals or not affordable. Everybody uses the blue badge spaces without a badge, and nobody enforces this. I know I shouldn't, but I just book an ambulance now to save me the stress and cost of getting parked. I'm sure others do this too and it is probably why the ambulance service can't cope and are always cancelling or running late.

I note that an ambulance is available "if you have a medical condition that would put you at risk if you travel independently" but when you tell them you can't travel on your own because of a lack of confidence or anxiety then this isn't assessed as a medical condition. It is a hidden disability, but they don't recognise this because you can walk and because of this condition I don't have confidence to use the bus.

Needs to be more patient centred.

I have been told that I no longer qualify for ambulance transport. I did until about 3 months ago and if anything, my condition and mobility has got worse since then. I asked where else I could get assistance if I could no longer get ambulance transport and was told they didn't have any numbers for other transport providers.

Bus services need improved and protected.

I really need my carer to attend the hospital with me but the ambulance service no longer allows this so I can't use ambulance transport and have to pay for taxis that I can't afford. I wouldn't manage by bus.

There needs to be partnership working between local authorities and the NHS.

Smaller timeframe for pick up would be appreciated. Would help with my care plan.

Nobody considers the cost of getting to hospital and this needs taken into consideration especially as they centralise specialist services and you have to travel further.

The health boards and local authorities need to prioritise fixing this as transport to hospitals and GPs is the main barrier to accessing healthcare.

Can never manage to get ambulance transport. A friend of relative takes time of work to take me.

It's time there was some leadership to sort the transport problem getting to medical appointments. This has been a long-standing issue.

When Edinburgh Royal moved to the new site at Little France they put on shuttle buses to help staff etc. These were stopped after a year or so and they should have remained to help people who could make it to the old royal but not the new site at Little France.

We need more shuttle buses from transport hubs.

Bus services need to improve as taxis are not affordable.

There needs to be overall accountability from one organisation to manage transport to medical Appointments whether it's the health board or ambulance service. The current system is not joined up makes it hard for people as no one is willing to accept responsibility of help.

I have a spinal injury and required weekly appointments at hospital and weekly physiotherapy appointments at a community-based centre. I was unable to drive and asked for patient transport but was declined.

Ambulance service are terrible now. They used to be better.

I attend the Ashley Ainslie and no buses go down the road towards the hospital. I have to take my car or get ambulance transport. There should be a bus service to the hospital.

The buses to the Royal Infirmary Edinburgh stop further away from the hospital than they used to and it is no longer within walking distance for lots of people.

More buses need to go to hospitals or the hospital should have a shuttle service from the bus station or bottom of the drive.

I am slow at getting to the door and a few times the ambulance has left before I could get to the door and then I get penalised for not using the ambulance. Please consider that some of us take a bit longer to get to the door.

I have to rely on family as can't be ready for 8am for a 11:30 appointment. The ambulance service tell you to be ready from 0800 although they never actually come that early and are normally late or don't come. There is no way I can be ready for that time as my carer doesn't come until 9am.

Traffic congestion is terrible and appointments are always made when you have to travel during rush hours. This doesn't help.

I always have a really long wait to get the ambulance home. I sometimes have to wait up to 2 hours after a ten minute appointment. The waiting area is cold and uncomfortable with no TV, no hot drinks and no comfy seats. It's always really cold, clinical and drafty. A nicer waiting area would help. GRI outpatients and discharge room.

Booking transport is really difficult and the qualifying (medical) criteria seems to change every time.

The problem is that the ambulance service and hospital don't plan and work together so things are not joined up. More partnership working is needed.

It's helpful and less stressful if your carer or companion can travel with you. There never used to be an issue with this but the ambulance service don't allow a carer now and this policy needs reviewed.

They need to have adequate blue badge parking at hospitals and health centres that you don't need to pay for to keep it affordable.

They need to plan the bus routes and times better.

It takes for every on the phone to book transport via the ambulance service. On-line booking would help and should be achievable in this day and age.

Every time I try to book ambulance transport it is never available. Always over booked.

I have problems in the summer months for short notice appointments as I live on Arran and the ferries are normally full with tourists and hauliers. There should be a system that prioritises crossings for islander's medical and urgent appointments.

Impossible to get a bus to the hospital now because of all the changes in routes and timetables.

On the days I have to travel to hospital I have to skip a meal to afford the travel. I don't mind doing this because I need to see the nurses and doctors but should this really be the choice?

It's a shame on our nation that in this day and age I can't afford the fares to get to a medical appointment be it the hospital or my GP at the medical centre. There needs to be an acknowledgement that it costs more to travel in rural Scotland as we have to go further to access services.

The bureaucracy around booking transport needs to be sorted. It's over complicated and time consuming.

I want to be able to travel in the ambulance with the carer as I need their help at hospital, but this isn't allowed anymore and I often don't go because of this. I can afford to pay for my carer to travel separately to meet me at the hospital as they suggest. This is ludicrous as there are normally empty seats in the ambulance.

Sharing resources between the ambulance service, hospitals and local councils is the way forward. Make them share budgets too and that will get them working and planning together. This has worked for transport pilots.

I have heard that if you are on a low income you can claim your travel cost back but nobody seems to be able to tell me how or where to do this. This could be deliberate to save the NHS on budgets. It is also a bit problematic because I understand you need to show receipt to make a claim and this means you need to pay up front, which many people can't do and don't have the money to buy return tickets up front. Also if they keep your ticket as evidence of your costs how do you get home? Could free travel passes be sent out with the appointment letters?

The ambulance service have cancelled my transport several times at short notice and I have not been able to make my appointment. There is obviously a cost for this on the NHS. I have had to wait ages for a new appointment. Addressing the transport issues would address ever growing waiting lists and treatment time targets. We need to understand the full impact of inadequate transport on NHS budgets and performance targets. The NHS should collect information to assess the overall impact of inadequate transport such as costs, level of care, wasted appointments, growing waiting lists, missed targets.

Why can't MyBus take me to medical appointments?

I stopped going for treatment because I could not deal with the hassle of transport.

The questions that had to be answered were ridiculous especially when I'm paraplegic.

There has been some really good pilots that have made it a lot easier to get to medical appointments but these are normally for a set period and then the funding stops and the service ends. Can the successful pilots be funded long term as this would help and no doubt in the long run save the NHS money?

I live north of Inverness and have regular appointments at Raigmore. Around a year ago our bus was replaced by a coach (stagecoach) and the steps on the coach are too high for people with mobility impairments such as myself. We now can't use the bus service to get to Raigmore and this is the only bus on the route. Being rural we have no train service. Community transport has also been depleted. The ambulance service does not have enough crews and vehicles to meet this extra demand now that people can't get a bus to Raigmore so many medical appointments are going unattended and cancelled which I am sure is wasteful to the NHS

I used to be able to get from Corstorphine to the old Royal in Edinburgh by bus but have absolutely no chance of getting to the new Royal by bus. Very poor planning and I can't ever remember a community meeting about it. If you plan without input from local residents your plans will fail and this has been proven.

The health boards need to remember that when they are devolving care and healthcare services back into communities that they need to speak with the local council to make sure that there are buses to take you to the new facilities. This frequently doesn't happen and it is a pretty basic part of the planning process.

People have been complaining about Accessible transport to get them to medical appointments for years, but nothing has ever been done to fix this. This is going to take a directive from government. Nothing less.

I am a wheelchair user and I am totally reliant on my chair, but it is always a struggle to get to take it with me when booking ambulance transport. It's a basic need and right and makes me so angry why people don't understand that being a full time wheelie, I need my chair with me at all times and hospital chairs are inadequate and take away your independence even more.

The ambulance service are trying to do a good job with very limited resources but the local authorities need to step up and do their bit too.

Our flagship NHS. Good if you can get to it!

I thought the ambulance service were responsible for transport to hospital then I was told it was a local authority responsibility then told it was the health board. This was when I was trying to book transport so no wonder the system is a mess. Nobody has the answers or cares.

There needs to be meaningful and sustainable investment in community transport projects.

I have to try and book transport for my 92 year old mother and she is treated like no more than a number and definitely not like a person.

A streamlined booking process would make things easier.

Booking is a nightmare and I have missed several appointments because of transport failures.

The ambulance service should reinstate being able to take your companion or carer with you. This really is needed.

Hospital parking for blue badge holders is very poor.

Buses to hospitals are very poorly planned and never actually get you near enough to where you have to attend. Hospitals used to have an internal ambulance that took you to various departments within the hospital site. Could they not provide a free shuttle service from main bus stations (thinking of Buchanan street in Glasgow and the Edinburgh bus station at York place) to the big hospitals. Also again thinking of where the bus stops for some hospitals like the GRI, Southern General and Western Infirmary in Glasgow could a shuttle bus not run from the nearest interchange bus stops and also stop at the main outpatient entrances within the hospitals? (there can be more than one for each hospital).

Always have problems booking ambulance transport. Mainly getting them to understand why I need to take my wheelchair why my carer needs to come with me. I have the same fight every time I book. Other departments hold information under You CHI number. Could the ambulance service do likewise to streamline the process and make booking transport less of a battle? I understand GDPR etc, but I would give consent and I am sure information is already stored securely and in compliance with information governance policies and standards.

Why can't the ambulance service understand that spinal cord injured patients need their carer to travel with them and have to travel on their powered chairs? My breathing equipment needs to be attached to my chair and the more I get transferred in and out the more likely I am to have breathing difficulties. Also my carer understands my needs but initially the ambulance service always refuse to allow my personal carer to travel with me. I have refused to go on occasions because of this and missed treatment and rehab.

Parking at hospitals is terrible for blue badge holders and I know many just book an ambulance. This has to be inefficient use of ambulance resources.

The call centre staff just don't understand your needs if you are a wheelchair user and need a carer to travel with you. It like the Spanish Inquisition.

I have a spinal cord injury and as a result I am full time wheelie. The bus service goes nowhere near the spinal unit entrance or Westmarc and as such I have to use ambulance transport. If bus services were better, I

could maybe travel by bus with a companion. It is terrible that this is a totally rebuilt and extended hospital and the bus services get you nowhere near the departments you need to attend.

There is not enough, free to park, blue badge spaces at hospitals

How the ambulance service expect you to go to WESTMARC for a wheelchair assessment without your chair is beyond me! This is basic needs and they are not understood.

Parking at the spinal unit has got worse so I take an ambulance now rather than get stressed about trying to get parked.

I have a powered chair and two carers and it is always a struggle to get ambulance transport booked. They must have my details on record but every time I have to explain that I can't manage without my powered chair and my level of disability requires two carers 24 hours a day. I have this fight every time I try and book.

I always have a fight with the ambulance service to take my wheelchair even though I am going for a wheelchair assessment. How outrageous is that? And the call centre staff just don't understand. They need training in understanding the needs of disabled people.

The spinal injuries unit at the southern has just undergone refurbishment work to the exterior but they don't enforce abuse of blue badge parking so you can never get parked anywhere near and as a wheelie having to park further away can mean not getting to my appointment.

Always have a fight to get them to take my wheelchair and let me travel in it.

The community transport volunteer drivers and system they use is the best. Better than the ambulances.

I attend the spinal unit in Glasgow and it's always problematic to park. I need to take my car as the ambulance service won't let me take my wheelchair or someone with me to help at my appointment. I need help with some intimate care needs at hospital and it's not comfy among a stranger to help with this and they don't know how I work with my bags and tubes.

They have stopped letting escorts travel and I can go by ambulance or to hospital without my carer. This means I have to use a private taxi that

is expensive and when I can't afford it, I cancel my appointment. It's very unfair and disabled people suffer most.

Catch 22. I can't ever book ambulance transport and have issues with them not wanting to take my wheelchair (my legs), the local bus doesn't go near hospitals (and only has 1 wheelchair space, normally occupied) and when I take my car I can ever get parked at the hospital. These are all barriers to me accessing healthcare and often results in me cancelling my appointment and missing needed treatment.

Hospital websites could and should give you information on how to book transport and a list of accessible transport providers with phone numbers.

Booking is always very problematic. Could there be an online booking process like you do to book in for flights?

Got told there wasn't enough transport available that day...

I think it would be better if one person was in charge of all the transport budget and paid for the amount of buses and ambulance that were needed to make sure everyone could get to hospital and their doctors.

Administrative staff questioning if transportation was really necessary, despite me having proof of higher rate PIP mobility & care, and ESA support group. Transport being late or not available, leading to me missing appointments.

There are very limited bus services in my area and only one wheelchair space on the bus, when it eventually turns up normally late or breaks down and doesn't turn up. You aren't allowed to pre book this so can turn up and not get on the bus with a 90 minute wait for the next one that you also might not get one so it is hard to get a bus if you use a wheelchair. The ambulance service is unreliable or you can't book because they are full. They have also cancelled the day before or morning of my appointment and I have missed my treatment. I have tried using my dial a bus but they have told me they have space and you can register, they will take you to shops etc but they are not allowed to take you to medical appointments. Given the barriers and problem getting transport to medical appointments why can't my community dial a bus take me to the doctors or hospital when they are available and can take me to the shops? This seems really strange and if they could go to hospitals and doctors it would give us an option to get to our appointments.

Follow up poll - will there be follow up actions? That's what's needed. Everyone knows the problems but nobody is fixing them. Someone needs to lead and organisations need to truly work together to fix this.

I don't use the ambulance service now because I can't take my carer and I am too scared to go on my own so I have to book a taxi even though I can't afford it. I can't manage by bus. Carers need to be allowed to travel with patients who are vulnerable. I need a hand with my toilet needs and the ambulance crew is normally male. I would not let a male and particularly a male I didn't know help me with some of my intimate needs. There is no thought given to patient's care needs. We are now just faceless numbers being moved about like cattle. Where is the care and compassion in that? Care and compassion used to be at the heart of our NHS. Now it's statistics, rules and shifting the blame. I am lucky enough that my grandson shared these issues with me as he knows the problems I have getting to my appointments and he has taken time of work on occasions to ensure I can get my treatments. Our NHS is a wonderful thing but we need to be able to get to it to use it. "If you build it they will come", so let us come!

I just seen an article in my local paper advertising for taxi drivers to service NHS contracts and take people to appointments. This is in Aberdeen. Why is this money not being invested in the ambulance service or community transport, which would probably be more efficient rather than to taxi companies that will make huge profits from tax payers and NHS budgets. It should be kept in house.

Nothing is going to get better unless someone drives this agenda. DES should do this as a priority for its members. You have reported that you now have meetings with Scottish Ministers so please raise this issue as an inequality and unfairness for disabled people. Poor transport to medical facilities has a bigger impact on disabled people and older people as we use these services more so please push to get something done for your members.

There are real problems with Transport to healthcare facilities. We do know the answers but frustratingly there is no willingness to introduce the solutions. There have been several pilots in Lothian, Grampian and Highland that delivered improvements and projected longer term saving to the NHS but funding was stopped after a year and the pilots, even though delivering many benefits, were disbanded. These pilots need to be resurrected and introduced as good practice initiatives and

them rolled out across Scotland in bigger scales. We also need the health boards, local authorities and ambulance service to plan and work together sharing ring fenced transport budgets and transport coordination. The integrated joint board was seen as an answer to this and catalyst for change but in terms of transport planning and provision to health services the integration joint board have failed. They need to focus on this area and ensure collaborative planning and working to improve transport to healthcare facilities. If we continue to work and find into silos we will never fix this problems and it needs fixed as getting to healthcare facilities is the first basic and key step to being able to access treatment. This failure impacts so much greater on disabled people and older people who find it very difficult to get to hospitals, GPs and health centres without help..

Impossible to get a bus that takes you to the hospital in time for your appointment. The local authorities, bus companies and hospitals need to talk about and agree how to fix this.

I haven't qualified for a bus pass yet and can't afford the fares to get to hospital and back. I had to borrow money the last time and went without to pay it back. My friend said you can claim back your bus fare but I don't know how to do that and the receptionist at the hospital and doctors didn't know how to do this either and told me to phone medical records. They didn't know.

It's getting harder and harder to book transport and public transport isn't planned (routes and times) to get you to hospitals including at the main out patients appointment times.

Always have problems booking transport. I takes ages to get through and the you get a Spanish Inquisition. If you manage to pass the test you are normally then told sorry we are full that day. What's the point ?

Our buses have been replaced by coaches and myself and many others can't use the coaches because the steps are too high. These is only one bus service so no alternative and no trains in my area as it is rural. This has meant that many of the people in the village can't get to their hospital appointments and the ambulance service can't help as they don't have the resources. We use community transport (volunteer drivers) but they aren't always available and it also cost as we pay a contribution per mile. I know many people who just don't go for their treatment and screening now so will probably end up being unable to get

treatment for a condition that will go undiagnosed due to no screening. It is all very unfair. I would suggest that they need to put the buses back on and move the coaches to a bus route where there are more services and people have the option of more than one bus a day.

The ambulance service used let me take my carer with me but they don't now. My carer has to make their own way to the hospital and meet me there to help me. I don't know why because when I get the ambulance there are always empty seats so there is no logic to this.

I have cancelled several appointments because of transport.

Getting transport to hospital is far more stressful than the treatment itself. We used to have a bus service that went quite close to the hospital but due to council cut-backs this service was withdrawn and now the only way to get to an appointment is to be taken by a friend or to book an ambulance. I was on an ambulance a couple of weeks ago and the driver apologised for running late and said they could no longer cope with demand and were constantly over booked. I waited over an hour to get picked up after my appointment and everyone was moaning about the same thing. The poor ambulance driver was getting it in the neck. The ambulance service needs more resources if the councils are going to keep cutting back on bus services.

Booking and getting transport to medical appointments is a long standing problem that is only getting worse. Someone needs to hold the government and health service to account on this to get it fixed and now is a good time with an election not that far off.

I have tried to book medical transport but depending on who you get at the ambulance service depends if you are allowed transport or not. Some of the staff say yes and some say no. When they say no they can't give you alternative numbers to call and I would have thought they would at least know who else can take you if they refuse.

I have had substantial problems regarding booking patient transport for my severely disabled husband's medical appointments. So much so, I had to make a formal complaint against both Patient Transport and the call handler. At the formal complaint, I was contacted by a manager who said I would not have a problem again. She said this would be on my husband's record. I then phoned the next occasion and have had problems every single time I have called. There has never been an

occasion when I have not encountered difficulty in getting patient transport.

Bus services are crap and the ambulance service are hopeless. You're left to fend for yourself and it can be an expensive and stressful day. Improve bus services and ambulance services.

A member of my family normally needs to take time off work to take me to my appointment and that can also be problematic because it is normally impossible to get parked anywhere near where you need to go and finding a wheelchair at the hospital to get me in from where we get parked is practically impossible. I try not to use ambulances as they have cancelled several times at short notice and I have missed my appointment. Public transport needs to be better and buses need to stop closer to hospitals and outpatient departments.

I don't take my car because you either can't get parked at hospitals or parking is too expensive. My buses aren't regular enough and I would need to take two or three connections to get there and I wouldn't manage that. I would manage a direct bus route if it was available and that would also help the pressures on the ambulances.

One of the National DPOs needs to be the organisation that pushes for change so disabled people can get to medical appointments without the current barriers. As full access and inclusion for disabled people in Scotland is Disability Equality Scotland's vision should they not tackle this for their members?

It seems the ambulance service can't cope with increasing demand which will only continue. Part of the problem is that people who don't need ambulance transport use it because the public transport is so poor and inaccessible. If we fix the public transport and make sure it is realisable, accessible and more affordable then this will take the pressure of the ambulance service.

I have to book ambulance transport because my local bus service only runs twice a day and if I used it I would need to have at least one stay overnight. This adds a lot to the cost of attending hospital. Either the bus service should be improved or she should be reimbursed for having to stay overnight because we can't get a bus back. I don't meet the criteria for an ambulance as I can walk slowly with my stick and don't need care during the journey.

All evidence shows that there is a problem with booking and getting transport to medical appointment. It is time this was addressed rather than just confirming that there is still a problem and it will get worse with an ageing and more unhealthy nation.

Trying to book and get transport is so stressful and time consuming. The hospital units used to have their own dedicated ambulances (physio, x-Ray, day care, outpatient, admissions and discharges, transfers). I don't think they have this anymore but this system worked better. You also just confirmed your ambulance booking with the receptionists after each appointment and for the next appointment. This was so much easier and worked better and you didn't get as many short notice phone calls to say your ambulance could no longer pick you up. In fact this never used to happen in the last bit short notice cancellation happen frequently now and must cost a fortune in missed appointments.

I live in a remote area of Scotland and use community or volunteer transport to get me to the Belford Hospital. They provide a great service but need more funding to help with running costs and it does rely on people volunteering their time but they are fantastic and so helpful.

Trying to get through to the ambulance service is as bad as trying to get through to the DWP. Both call centres need an overhaul.

I normally have to ask family or a friend to take me and they have to take time off work. They can't always do this and they normally lose money or a days holiday so I hate asking. We need a better bus service and transport for patients who don't meet the ambulance service medical quiz.

When you phone the ambulance service you are always on hold for ages to then be told they have no seats left for the day you need. Is there a way on moving to on-line booking to save the lengthy waits on the phone normally for nothing.

Follow up poll? Has there been any actions from the initial poll as trying to book and get transport is still a disgrace and need fixed!

I can never get ambulance transport to take me to hospital as they are always too busy. It takes me two buses and a 10-15 minute walk from the nearest bus stop to the main outpatients at Glasgow Royal and sometimes I can't manage this walk and have to flag down a taxi. I have a very low income and can't afford this and the receptionist at the outpatient department has told me I can claim back my travel costs due

to my low income, but I can't find the cashiers office. I have asked a few people and when they give directions it seems to be within the hospital, as far away from the outpatients as possible and not well sign posted. I wonder if this is deliberate so nobody can claim back their bus fares etc? Although I only live in Baillieston I really can't afford to be out close to £10 or over that if I need a taxi from the bus stop, every time I have an appointment and this is quite regular. I have missed two appointments because the ambulance service couldn't take me and I could afford the fares.

If you brought back in the escorts/companion policy it would make things less stressful and save time for hospital staff who have to push me about and take me to the toilet. False economy as the escorts/companions were doing this and not detracting NHS staff from their key roles. When booking you are not allowed escorts of companions to travel with you and I can't afford to pay someone to follow in a taxi. Bus service is crap.

The ambulance service always seems to be over capacity. I understand that they only have a certain number of resources so maybe they need more staff to make sure we can get to our appointments.

Nothing has changed! Are GP Surgeries aware of these arrangements? I don't think mine is! Communication is VERY good but alas it remains an alien concept!

The service you get when the charity volunteer drivers take you is much better than what the ambulance service provide and for many cars are better than the minibuses the ambulance service use. It would be better if we had more of the smaller car or cross over vehicles instead of the minibus type vehicles that can pick up 9 people and takes hours to travel about 5 miles to my local hospital in Glasgow due to the number of people to get and traffic. My morning appointments always seem to clash with rush hour. Could appointments be made for a bit later to miss rush hour traffic.

I had an ambulance booked for day surgery and had waited about a year on the waiting list. On the morning of my day surgery the ambulance cancelled due to staff shortages and they didn't have another to send. I missed my theatre slot and I am still on the waiting list to be rescheduled. This must have cost the NHS money as the theatre slot would have been wasted and the surgeons time and I had a few

sleepless and worrying nights preparing myself for an operation I didn't get because my transport was cancelled.

I would like to know the cost of wasted appointment in the NHS due to transport failures as this happens frequently.

The worst part of the appointment is always trying to get there and home. I can be out for 6-8 hours for a 20 minute appointment and I am only going from Barnton in Edinburgh to Edinburgh Royal.

It should go back to carers/family being able to go with you to help. I always stress that I will need to go tongue toilet and have to ask a stranger to help me as I can't manage on my own.

It would be good if they could try and on-line booking process as you have to wait ages on the phone to frequently be told they are full and can't take you.

I was at a meeting of my access Panel tonight and we discussed this topic and agreed we all had difficulties booking and getting transport to healthcare appointments. We agreed that this was because the health board, local Authorities and Scottish Ambulance Service do not talk to and plan together. In our discussion we thought this could be part overcome by going back to ring fencing budgets that could be shared and used solely for transport. We also thought the loss of the transport Coordinators has resulted in the issue getting worse and that equality leads should be dealing with this within each of the organisations as there is an equality and human rights issue here. There was also a suggestion that the EHRC could look at this in more depth under the Equality banner and human right banner and put pressure on organisation to comply with their PSED and ensure disable people can access health services as they are more likely to need them for their general health and wellbeing not to mention fending off loneliness and social isolation. Many disabled people and older people enjoy meeting people and socialising when visiting healthcare facilities and it may be the only time they are out that month. We also thought that discharge lounges could be set up more like social hubs and people wouldn't notice the time they were waiting for ambulance transport home and would benefit from this social interaction as discharge areas can be cold and lonely places

Bus services are terrible and being a wheelie makes it even worse. You set out on your journey and often can't get on because someone else is

in the wheelchair space or a pram or buggy is using it. Off back home again then!

I am looking to respond to the consultation on the national transport strategy for the next 20 Years and it talks about “we all need to work together across boundaries to add value and ensure its success, including involving people in our society in decision making and empowering communities to play a vital role in the delivery process”. Local Authorities and the NHS need to start doing this now!

I have missed a few appointments this year already because of transport.

I think things could be better if there was one Centre that coordinated all the transport from health, local authorities, social care and education.

Public transport needs to be improved to make sure it is accessible and the routes take you to the hospitals not only as patients but also when you need to visit someone.

Ambulances are always full and not taking anymore bookings. Maybe the ambulance service needs more money as more people need to use them.

I used to be able to get the bus to hospital but they have replaced this with a coach that I can't get onto. Steps are too high. I now have to ask the ambulance service to take me but they can't always manage and depending who I get when I phone they sometimes say I don't meet the test for an ambulance.

Always have problems trying to work out how to get to my appointment system and the buses to the hospital aren't regular, often just don't turn up and the bus stop is still about a 10 minute walk to the hospital. I try this in the nicer months but can't manage in the winter months.

Trying to book transport is terrible. I regularly attend the Beatson. The Beatson nurses are fine but other than that they don't understand how stressful your treatment is and how unwell I feel after it. I don't need to added complications that trying to get transport bring. I thank god for the volunteer drivers and don't know what I would do without them.

Volunteer drivers need greater recognition for what they do. They don't just drive you there and back but they put you at ease and provide a really personal service.

I normally drive but always have problems trying to get parked. Twice this year I have come back home without going in as I couldn't get parked and missed my appointments.

I attend Glasgow Royal and many buses go past but they don't stop close enough to the main out patients as I can't walk very far.

The ambulance service have stopped allowing carers to travel with me and I feel very vulnerable on my own and most time choose not to go and cancel my appointment. I understand that there has been an increase in people needing ambulance transport as we are all getting older but there needs to be a balance with patient care and realise how vulnerable disabled people and older people feel without the assistance of their carers that instinctively know their needs and can put me at ease.

I live on Islay and when I get my appointment letter, if it is short notice and especially in the tourist months, I often have to cancel my appointment because I can't get a ferry crossing as they are fully booked. It would be beneficial if CalMac could introduce some type of priority medical system for islanders to make sure we can get booked on and get across for our appointments.

I attend the spinal injury unit in Glasgow and always try to get my carer, family or a friend to take me because when I have used an ambulance they are always late and I sometimes miss my appointment. I always have to wait over an hour and sometimes up to two-three hours to get taken back home and it makes it a very long day for a 15 minute appointment. When I do get people to take me they can never find a place to park and the blue badge Spaces outside the unit are always taken with people not displaying blue badges.

My local doctors' surgery is now only open on Monday mornings, Wednesday afternoons and Friday mornings. If I need to see a doctor out with these times I need to go to their partner surgery, 8 miles away. There is no direct bus service and I can't afford a taxi even if one was available but never is as I need an accessible taxi and the nearest local taxi company is again 8 miles away and only has one of their taxis that are accessible. They charge as soon as they get the call so it is really expensive. I am left not knowing how to get to the other doctor surgery when my local one is closed. I phoned the ambulance service as I needed an urgent doctor's appointment but the ambulance service told me they don't take people to see doctors at GP surgeries.

I can't get an ambulance to hospital as I am not allowed my carer to travel me. I asked who else could take me and the ambulance service didn't know. I phoned the hospital and asked, and they said it wasn't up to them. I then phone my local council and social services and they didn't have a clue and referred me back to the ambulance service. Again they said they didn't know. I phoned NHS24 and they said it was the ambulance service. I have been taken on a merry little dance for nothing! Somebody should be overseeing this shambles. I understand that the ambulance service don't have enough resources but if we can get very mobile kids to school 5 days a week surely we can get disabled people to hospital twice a year.

There is no bus that takes me to my GP and local health centre and the ambulance service have said that they don't take people to GP appointments so who does?

Every time I get to book transport the ambulance service are always full for that day.

More services are now being made available in communities, but bus routes don't take you there. It would be good if the people who provide these services talk to the bus people and get buses to go to the new treatment centres.

I phoned the ambulance service and they told me I didn't meet the criteria for transport. I asked if they could give me the numbers of organisations that could help me and I was told they didn't have any numbers. I thought they would at least be able to offer alternatives.

If you're disabled and a wheelchair user it is practically impossible to get breast screening locally as the mobile vans are only accessible when the driver decides to clamp the lift on. You get offered Glasgow or Edinburgh but the ambulance service won't take you to the breast screening units in either city so you have to try and work something out yourself. Very unfair.

I tried to book transport for my dad and eventually gave up and took him to hospital even though it costs me a day off my work. He had been waiting for his appointment for over 4 months and we were told if he didn't go he would go back to the end of the waiting list.

My understanding was that integration joint boards would make sure that health boards, local authorities and the ambulance service planned together and worked more collaboratively. I haven't seen any evidence

of this which begs the question: what do integrated joints boards do and why don't they address the failing in transport to healthcare and social care facilities?

I use ambulance transport to get to the hospital because the bus services are so poor. I live in Lanarkshire and trying to get to the new Wishaw General from south Lanarkshire just isn't doable by public transport. NHS Lanarkshire should have planned all this out during the picture of health consultation and changes about 8 years ago. They are talking about moving Monklands hospital too now and I hope they do better with this move and making sure public transport can get you to hospital.

This is a minefield area. No one wants to accept responsibility for booking or providing transport to get to appointment and it is left to family and friends to work something out.

Nothing ever changes. Trying to get transport to hospital or book an ambulance is always a nightmare and so stressful. Everyone knows the system is on its knees and failing but no one does anything about it.

I live in Glasgow and every time I try to book Ambulance transport I am told that they have reached their quota for the day so can't take my booking. I can't manage on the bus and can't afford a taxi so more cancelled appointments and back to the waiting list to be seen.

Why are you not allowed a carer to travel with you anymore when you need them to help at hospital?

Everyone always blames the ambulance service when they can't get to hospital, but they can't cope and don't have enough resources. The government needs to ensure our buses are accessible and run to hospitals. Public transport is the problem not the ambulance service.

Too much hassle to try and get transport so I stopped going for my check-ups.

I always have problems with Transport to my medical appointment and have had to cancel some and go back to the end of the waiting list because I couldn't get transport to the appointment. This is very stressful.

I walk very slowly with the aid of a Zimmer frame and had to take a taxi from Linlithgow to Bathgate health centre as patient transport don't take you to health centres. The same taxi firm would not come back for me as

Bathgate was 'out of their area'. The nurse was very kind and managed to get me a local taxi and took me outside in a wheelchair to wait. She also arranged for me to be seen at St John's hospital next time as I would be able to use patient transport. It would have been helpful if I had known that I could have been seen at St John's instead. It was a very costly and tiring experience for somebody who does not have a lot to spare financially.

I was picked up by ambulance in my wheelchair to attend an appointment at Dumbarton Health Centre. I was taken for my appointment quickly but my appointment took longer than most people as I needed to be given additional medication. The ambulance crew disturbed the staff on several occasions to ask how long I would be. They eventually said they could only wait another 10 minutes. I was ready to leave within the 10 minutes given but the ambulance was driving away. I had to wait for another ambulance to come and had to ask for help from health centre staff to use the toilet.

The ambulance could not take my powerchair and this took away what little independence I still have. I feel very vulnerable when I have to rely on others as staff are often very busy and don't have time to run around after me.

I am very elderly (89) and I am quite frail, it is difficult for me to get to a hospital which is about 40 miles away. I can't travel by bus, as I can no longer climb the steps of the bus. I don't have any relatives living here, how am I supposed to get to the hospital. Taxi fares would be over £100 for the return journey, I only have a pension and can't afford that.

We're not entitled to patient transport even though my husband has complex needs. We have real issues getting parked at a number of hospital sites in/around Glasgow and have been stranded twice at RAH because we could not get an accessible taxi. Taxis are costly...yet we often cannot use the Motability car because parking at hospital is often impossible.

Going to a medical appointment is really stressful and I need a friend or carer to come with me. However the ambulance service don't allow this and I have to go on my own. I'm not very good at speaking up for myself and don't get things right. I always feel so vulnerable until I get back home and then I can't remember what was even said because I was so anxious at the appointment. People need to look at the bigger picture

including the support people need when going to medical appointments. It's a very stressful event.

Booking transport has always been a problem and has got worse more recently with the ambulance service turning into the transport police!

I work in a hospital and I spend hours every day trying to book ambulance transport. That's not my job and it takes me away from caring for my patients, but someone needs to do it as many patients don't manage this booking without help.

I used to be a volunteer driver and hated having to take money to cover my fuel as I knew the people I was taking to hospital couldn't afford the money but I couldn't afford not to be paid for my petrol.

When is this issue ever going to be tackled?

Where to start - I was receiving treatment for cancer and pretty frail especially after chemo. I was told that my escort/carer could no longer travel with me to the appointments unless I made my own way there and back which is physically and financially impossible. After many battles to try and get allowed a carer or escort to come with me I gave up the fight and decided just to stop my treatment and opt for palliative care. I don't know how much longer I would get with more treatment but I couldn't take the stress and anxiety or trying to fight for my carer to be allowed to come with me, so I won't know. At least the time I have left will be less stressful getting palliative care at home and I can retain some self-respect and dignity. People (decision makers) just don't understand the anxiety and stress of being ill and the support you need and hassles you don't need during treatment.

I noticed this is a follow up poll to last years. Nothing has changed and nothing has been done differently so you surely can't be expecting a different result. Trying to book and get transport to medical appointments is a shambles and public transport provision lies at the heart of this shambles.

I have just read the consultation on the national transport strategy and their aim of a transport system that is based on accessibility, equality and affordable. This is admirable but it really needs to cover transport to healthcare facilities as no organisation is doing what is needed here.

I spoke to my local MSP about these problems and he advised me to write to the Mobility and Access Committee for Scotland and the Equality

and Human Rights Commission. Are things really that bad that local authorities and the NHS won't deal with transport issue unless forced to legally. It's a basic human right to be able to access healthcare facilities and I am being denied this right because I am disabled.

It is always the Ambulance service that gets the blame for poor transport options to get to medical appointments but local authorities and NHS Boars have to comply with their public sector equality duty and equality outcomes and this should measure what they do to make sure disabled people can access health services.

Working out how to get to my appointment is always the hardest part.

When you eventually manage to get an ambulance booked they frequently cancel at short notice then I get a rollicking from the hospital for having to cancel my appointment as it is too late for them to put someone else in at short notice. This isn't my fault but I do understand that it is a waste of resources and missed appointments cost the NHS on average if £120-£150 per appointments.

Our buses have just been replaced by Stagecoach and they are now using coaches that I can't get on as the steps are too high. To get to my medical appointment I phoned the ambulance service because I could no longer use the bus and they told me I didn't qualify for medical transport as I could walk to the bus stop on my own so I now have no way of getting to the hospital because I can manage to the bus stop albeit I can't get up the steps into the coach.

I am a wheelchair user and need assistance to get to dental appointment as the nearest dentists to my home are not accessible. The ambulance service won't take me because although the dentist is a NHS dentist they are saying the NHS Board don't contract them to take people to dentists. I have to get a taxi and it costs me £25 each way and I really can't afford £50 for taxis every time I need to go to the dentists. I can't rely on the buses as they often don't turn up but if someone is using the wheelchair space (another wheeler or person with a buggy) then I can't get on and buses are only every hours or 90 minutes.

I always have problem booking transport to ale me to the hospital as the ambulance service don't want me to take my own wheelchair and I can't travel without it.

I had to go into appeal as they refused me firstly before asking about my health.

I recently had problems getting to breast screening. Because I am a wheelchair user there was very limited opportunities to get screened locally as the mobile screening units would require the driver to attach the lift and he wasn't always available. They also couldn't plan this in advance as it depended on the driver's availability week on week so it was hard to arrange my carer around this. As such I couldn't be screened locally like everyone else and had to go to a breast screening centre some miles away and at my own expense. On trying to book ambulance transport I was told I did qualify but they did not take people by ambulance to the breast screening centre as services were provided locally. Seems I was stuck in the middle of a political row between the NHS and ambulance service with neither willing to budge. I had to pay a carer for a full day to accompany me to the breast screening unit as well as incur the additional travel costs while everyone else got screened locally. This just isn't fair or equal treatment.

Often, there's too little notice given of appointment dates and times, to organise transport to and fro. At other times, the date is given months in advance, whilst Scottish Ambulance won't accept bookings more than three weeks prior to the appointment date. This means that confused or unorganised people forgot to book transport, in accordance with the three-week rule. Often leaving them transport-less and unable to attend their given clinic or medical appointment, or, to the mercy of Dial a Ride services (often dreadfully oversubscribed), where available. One other factor is, the patient being asked what kind of ambulance transport they require ... Often impossible to answer for a first-time user.

Trying to book transport is so complicated and you get treated like a second-class citizen by the ambulance people on the phone.

The problem is particularly bad for those who live in remote areas of Highlands & Islands. There is no Red Cross or dial-a-journey service in my area. It often requires three nights in a hotel to get to hospital in Glasgow because NHS will not supply helicopters for appointments to see specialists in Glasgow and the specialists no longer travel to local hospitals. Islanders who are given Monday appointments may have to go to Glasgow on a Saturday (some islands have no Sunday ferries) and return on a Tuesday.

I take ambulance transport to hospital as I can't get parked and can only walk short distances with my crutches. There are no public transport options that I could use to get to hospital. The bus service and

timetables are terrible and they don't go direct to the hospital. I wouldn't be able to manage to get from one bus to the other. If I could get a bus direct that I could get on with my poor mobility then I would use the bus but that's not an option where I live.

I have had to cancel five appointments because the ambulance service agreed to take me then cancelled the day before and I couldn't find anyone else that could take me to the clinic. I also got a hard time from the hospital staff for wasting appointments when it wasn't my fault.

People normally lay the blame for poor transport options to get to the hospital on the ambulance service but local councils and hospitals need to plan better and provide better public transport options to take some of the pressure of the ambulance service.

The government and minister need to understand that as well as around 30% of the population being disabled, people are living longer and becoming more frail with complicated medical conditions needing treated at hospital. There need to be financial investment to meet this demand and the Health Minister needs to make this a priority.

The ambulance service normally get the brunt of people not being able to access transport to get to medical appointments but the local authority and health boards are the main problem as they never plan for or meet people's transport needs and how disabled people can get to treatment centres.

Trying to book transport for medical problems is very stressful. When you phone the ambulance service they are rude and abrupt and make you feel that you shouldn't even be asking for transport. Some disability awareness training is definitely needed as the way they talk to you on the phone is terrible.

I think it would work better if all the money for transport was in the one pot and arranged by one contact centre.

It is hard to get through the ambulance call centres staff to get an ambulance but when you do the staff are great and very helpful. The booking needs to be easier and less repetitive. Why not just use our CHI numbers to call up our details rather than keep asking the same questions everything you need to book?

I have been to several Accessible Travel events and I keep raising the problems with getting transport to medical appointments but nobody

seems to have the answers and nobody want to tackle the problem to fix it or at least make some things better. I have heard of several good pilots (Grampian and Highlands) but these normally stop when funding stops regardless of the benefits that have been evidenced. This area needs funding to make improvements and these improvements would reduce wasted and cancelled appointments and hence inefficiencies within the NHS. People need to think more holistically about the overall benefits from investing in transport to medical appointments.

My poor mum who suffers from dementia was left waiting hours after her hospital appointment for her return journey. Because this was an outpatient appointment there was nobody available to take care of her whilst she waited. By the time she got home she had soiled herself. Perhaps more attention could be given to prioritising vulnerable patients.

Scottish Ministers are investing in our NHS to make it more sustainable and provide better treatment but that's no use if you are disabled and can't get to the hospital, health centre or doctors surgery.

The NHS need to get this sorted, even if it means sharing budgets with local authorities and community transport providers.

The ambulance service could not take my wheelchair so took me to my eye appointment on a bed. The hospital could not check my eyes as I could not sit up. This happened after a failed test at my local hospital. I was told they would have to use different equipment that was not available locally. I just want to be able to get the same treatment as everybody else.

I live in an area that has a poor bus service and no accessible taxis. Our local community do fundraisers to collect money to pay for accessible taxis to come in (at quite a cost) to take our older members of the community to hospital for treatment. I don't think this is right and think that the local authority of NHS has a duty to ensure they can get to hospital for treatment.

I remember Audit Scotland reviewed transport to health in 2011 and made recommendations for improvement including organisations working and planning collaboratively. I haven't seen any improvements and would say things have got worse. Organisation need to work together to fix this because everyone know the transport system as it is isn't working and unless the local authorities, health board, hospitals and

ambulance service start to work together then we won't see any improvements.

I have stopped attending appointments because I can't be bothered with the hassle of trying to book it. Nobody takes responsibility GP's blame the ambulance service, ambulance service blame the hospitals. They are going round in circles and if they keep doing the same thing they will get the same result. Time to break the cycle.

I live in one of the islands and the Ferries and buses don't link up and my appointment times don't link with transport time tables so I normally have to have at least one overnight stay close to the hospital or ferry terminal and it can be expensive especially in the summer and tourist months.

I used to get the bus to Raigmore but can't now as I can't make it onto the coach that has replaced the bus so don't know what to do as I don't think I need an ambulance just Public transport.

I have had to cancel numerous appointments due to lack of transport.

I keep getting told that I am not eligible for ambulance transport even though I have been eligible many times and normally have to fight to get an ambulance and have my doctor intervene which isn't good use of my doctor's time at all.

This is an area of the NHS that really needs looked at.

We use a voluntary driver scheme in my area but it is still too expensive at 40p per mile.

The ambulance is always late and I sometimes don't get taken at my appointment. A wasted and stressful journey and waste of NHS staff time and money.

Always have problems with booking transport. Nobody helps or is interested and then you get penalised for not being able to attend appointments.

Bus timetables and routes don't take account of hospital sites and main clinic times. When hospital clinics move into the community or to specialist centres it can be harder to get there as the bus timetable and routes don't change. Can the health boards, bus services and hospitals plan this together to make sure transport is available to get to hospitals at the times needed? I thought they would plan this together.

My mother has regular appointment and I often have to take time of work to take her. I am lucky my employer is quite flexible and I can make the time back but not everyone can do this.

The problem is that our public transport system isn't accessible and there aren't good enough bus links to hospitals meaning that people have to rely on an over stretched ambulance service.

I live in rural Scotland and used to get the bus to my hospital appointment. But stagecoach have put coaches on the route instead of buses and I can't get onto the coach so have had to cancel appointment on the day which is a waste in NHS resources. I can't afford the mileage rate for Community Transport drivers due to the distances.

The booking systems and who provides what are a nightmare. Why can't we have a joint contact centre for transport (like NHS 24) that manages all the requests and have up to date data on people who provide transport.

Because of the problems getting transport to hospital I have asked friends and relatives to help me but there is never anywhere to park and at some hospitals I can't afford the cost of parking so have to rely on the ambulance service when I could maybe manage with friends if I didn't need to find the money to park or if there was more disabled parking bays. Disabled parking bays are also a problem at hospital as the spaces are always used by people who don't have blue badges. I have seen hospital staff parking in the bays (in uniform) and blocking the bay for their full shift duration.

I am a wheelchair user and always have problems with the ambulance service as they refuse to take my own wheelchair with me to hospital. Given my reliance on my wheelchair, I should be able to take it with me to get about at the hospital.

I have missed or had to cancel several appointments because I couldn't get transport.

Getting to hospitals and community treatment centre has got worse. I had heard of projects and work going on to make it better but it has got worse over the last few years.

I live in a rural area of Scotland. There is very limited public transport and I wouldn't need to a couple of buses to get to the hospital. Where buses are available some buses aren't accessible and the bus time

tables don't link meaning a lot of waiting about. I tried using Community Transport but can't afford the price per mile as the journeys are long. The ambulance service has said I meet the criteria for transport twice and then cancelled at short notice and I had to cancel my appointment at short notice and wait weeks for another one. On other occasions the ambulance service have said I don't qualify for transport. I suppose it depends who you get on the other end of the phone but they don't half give you a grilling! We need something like a control centre that manages all the different transport providers and decides (and provides) what is best for your needs and where you live.

Booking transport is a nightmare. So many questions and interrogation. I get the feeling that the operators don't believe that I can't manage on public transport and need ambulance transport.

I need assistance from my carer at appointments but the ambulance service mostly refuse to take my carer and they have to make their own way there at additional expense, which I cover. The ambulance service need to understand that some people need a carer to travel with them and they also need to understand that disabled people can't afford to pay for carers to travel by taxis to meet them at hospital to give the assistance needed.

Staff are pleasant but I feel uncomfortable about the amount of questions I am asked every time I call - this puts me off using the service. Could this be streamlined for repeat users? Might save some time. I need to attend various appointments at Edinburgh Royal Infirmary - I always get taken quickly for my appointments but don't know why you insist putting this pressure on to clinics as I normally have to wait a long time to be taken home despite being able to see ambulances and personnel sitting outside for long periods of time. I know people have to get a break but the reason I use the service is because I suffer from chronic pain which is much easier for me to manage at home rather than waiting in a hospital for patient transport.

Service does not cover local locations such as health centres for screening appointments so I have to attend hospital for this which is a lot further - I have to be ready very early and usually have to wait a long time to return home.

Always have problems and it is so stressful. I have cancelled so many appointments because I can't get transport.

The problems with getting transport is long standing and never been improved. In fact things are getting worse rather than better. The ambulance service and hospitals just don't want to address these problems.

Everything I try to book I have a problem.

I was flat out refused transport because I had a car. I explained that it was eye surgery and I could not drive myself back. Still refused. Discrimination? Yes, of course!

Annual hospital check-up due early Jan. Booked transport before Christmas for transport in chair. When it arrived 'in chair' had not been recorded and space was already occupied. Re-arranged, but not due to happen until tomorrow (mid-August).

This was 4 years ago I was left for over 5 hours waiting for a return journey home. Thankfully I was discharged that day too! I have had no further incidents of this sort. I travel by ambulance about 2 or 3 times a year.

Trying to get transport to an appointment is a joke. The amount of questions and interrogation is terrible, even when you have previously been told you qualify for ambulance transport. This certainly doesn't fit with a human rights based approach and putting the patient first. The Ambulance service are like the gestapo and then when they are finished with all their questions the inform you that they are fully booked for that day but don't provide any alternatives. It's a disgrace.

When you phone Patient Transport Service, someone in the central belt answers and they are unaware of the distances involved or that local staff work shifts. They may have to pick up several people across a wide remote rural area before picking me up and then the hospital we go to is about a 2.5-3 hour journey. If your appointment is not after 11am and hasn't finished by 2pm then you can get left behind to make your own way home, as happened to my 84 year old friend. Patient Transport Staff do not appear to get the full details of a patients address until they start shift that morning. The afternoon before they are told they need to pick someone up in this village or that village but whoever is telling them this (central belt staff again) is unaware that the patient's actual address may contain that village name but the patient can live 17 miles or so beyond that village, down a single track road, so the Patient transport staff find they have to drive an additional 34 miles (to the home of the patient and

back to the village they were told they live in) before making their way to the hospital which often means that the patient is late for their appointment or misses it. What a waste of 8+ hours and Patient Transport resources that is.

If you have a vehicle it doesn't matter if the person who has it is unable to drive and can't get a driver, because you have that vehicle it is a nasty barrier even if you desperately need help. Apparently you should pay for a taxi. I had this experience.

When the appointment letter drops through the door it fills me with dread. Not because of the appointment but the loops I will need to go through to try and get help with transport to get to the hospital. It is a nightmare and I get bounced between the hospital, the ambulance service and my GP while they all say it is each other responsibility but meantime I don't know how to get to my appointment and no one helps, they just blame each other. I often just cancel my appointment rather than try to find someone to help me get there. Surely someone should take overall responsibility for making sure disabled people can get transport to the hospital. Public transport is a joke and even buses that are supposed to connect to the hospitals drop you off too far away from where you need to go and certainly not walking distance. I have had to get a taxi from the bus stop at the hospital to the department I am attending. This isn't right. Please someone fix this!

Patient transport refused as I live too close to the hospital. Not priority. My conditions are: Cellulites both legs, diabetes (2), COPD. I can walk 15 metres max.

My problem was when I cut my foot at home and needed an ambulance to take me to A and E. They sent a "non-accessible" one, despite knowing my requirements. They wanted me to be transferred on to a stretcher and leave my wheelchair at home, which I found unacceptable. It wasn't an emergency, so I waited for an accessible vehicle to be sent, an extra hour. The issue was that even if I'd gone on the stretcher, they said they couldn't safely carry my wheelchair in the ambulance, even with it folded down?!

NO –2% (19 respondents)

As I live on a main bus route I tend to use services buses but if the hospital I needed to go to ie. Falkirk community hospital I would have to get patient transport. In 2011 I had two inpatient stays and made my own way in but got patient transport to take me home. This was because I was not going to be turned down as I lived on the bus route.

I am a carer and the person for whom I provide care has a hidden disability. I have always taken them to hospital appointments myself. They meet the transport criteria, but I feel concerned about the current provision. From what I have witnessed, seeing other patients waiting for a long time for the transport, I would be concerned about the person for whom I provide care wandering and becoming disorientated whilst waiting for the transport. Staff at the hospital are hard pressed as it is, without having to supervise a patient waiting for transport.

I personally have had no problems because it was booked by the hospital, but I have known a number of people who have when they tried to book it themselves and they have had to get their GP/surgery to help.

I was unhappy about being questioned to see if there was a member of our family available to take the patient to hospital, 30 miles away, unable to walk more than a few steps and on oxygen 24/7. Surely it was obvious that this was a person who required the expertise of patient transport.

Patient transport is of no use to me.