

Travel with care

What to do when regular transport can no longer be used?

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The ageing society



Vulnerable people need travel with care



Dedicated transport in The Netherlands:



- Travel to special schools
- Travel to special work places
- Social/recreational travel
- Travel to daycare
- Travel to hospital
- Long journeys

Lessons learned

Minimalize the necessity of special services

Costs in total adding up to more then € 1.000.000.000 !



	<i>Cost (x 1 mln.)</i>		
	2006	2008	2010
Socio/recrea	€ 251,9	€ 221,7	€ 327,6
Long trips	?	€ 35	€ 62,4
Hospital	€ 76,7	€ 81,7	€ 109,2
Day activities	€ 164,3	€ 198,4	€ 280,8
School	€ 164,3	€ 186,7	€ 249,6

Source: NEA for Social fund Taxi)

Use the value of accessible public transport to the maximum



‘Hard’ and ‘soft’
measures

To tackle potential social safety and travel information barriers additional bespoke measures for older and disabled people are required.

- OV-Ambassador (Zwolle)
- OV-buddy (Stichting MEE)

- Smart Mobile Senior Citizens (Flanders)
- M-Punkt (Stuttgart)

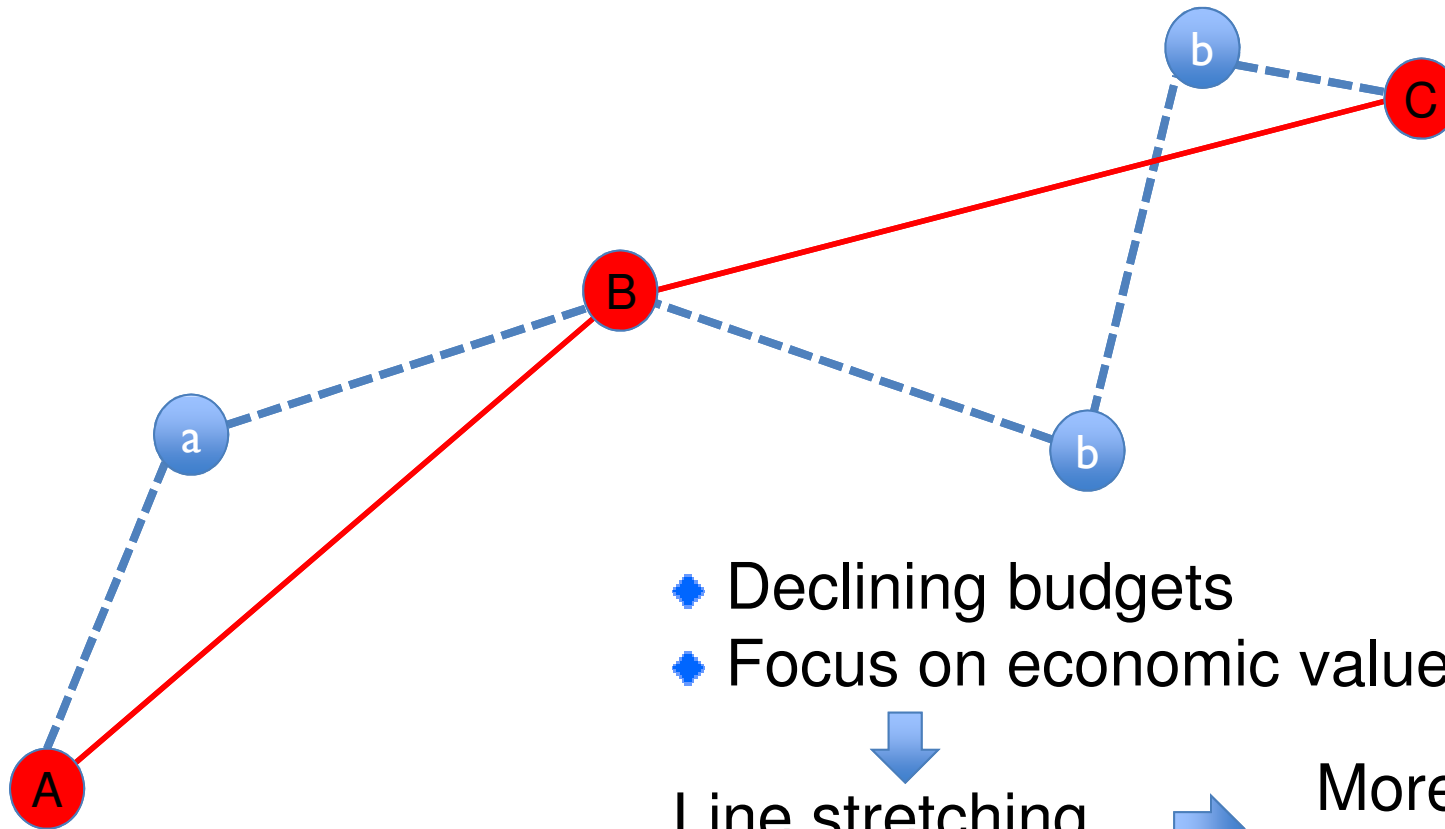
Adapt assessment

The rapid pace of development of accessibility of PT is not followed by regulation and policy for transport of vulnerable groups.

- Indicators for older or disabled people to be able to use regular transport have not changed since public transport has become more accessible;
- Some travellers see special services as a born right, while they are able to use regular public transport services.



Trends in public transport



- ◆ Declining budgets
- ◆ Focus on economic value



Line stretching



More difficult to use for target group

Tailor made public transport

Public transport lines tailor made for elderly and disabled people are well used and highly appreciated.

“Neighborhood bus”



“Elderly bus”



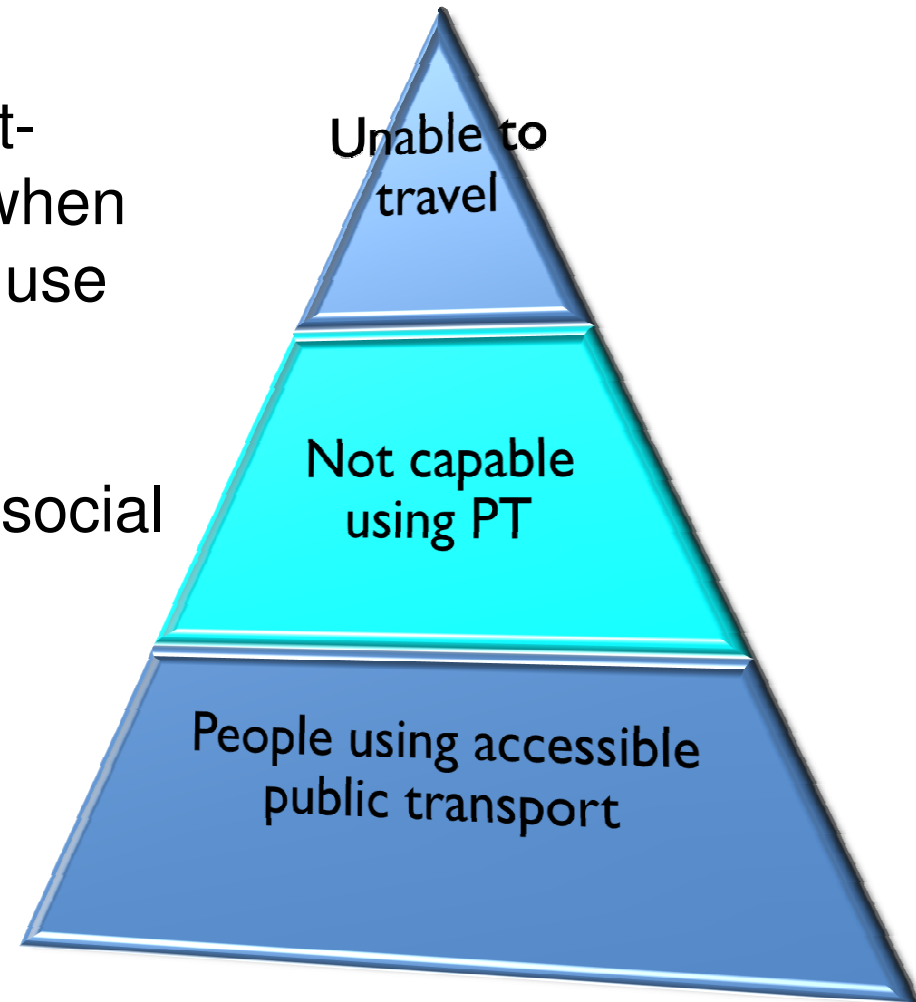
“Call bus”



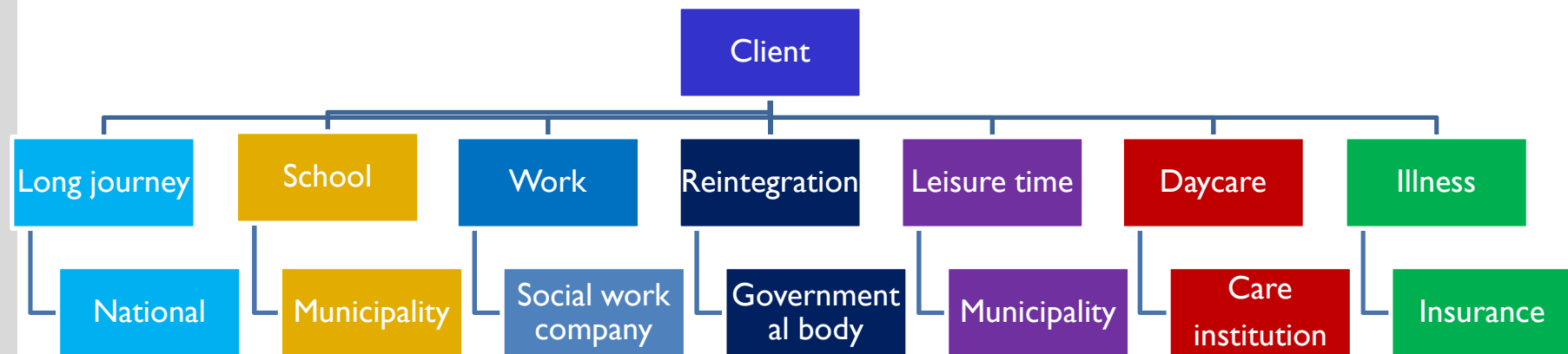
Still: extra care transport needed

Provide innovative and cost-effective mobility services when people can no longer even use accessible public transport.

To keep vulnerable groups social included.



Avoid fragmentation



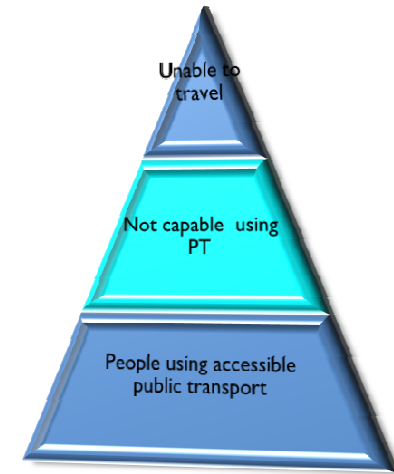
- ◆ Organisation of care related transport is fragmented, which leads to ineffectiveness and inefficiency.
- ◆ Mobility is not the core (policy) business within the care or education sector. This implies that mobility is not part of policy making, but seen as budgetary barrier.
- ◆ Authorities separate, but the market (transport companies) combine again.

Travel with care: recommendations

- ◆ Demand responsive transport systems are a good way to reduce costs. Besides DRT systems there is a demand for even extra care transport.
- ◆ Costs for personal travel budgets are in most cases higher than costs for the provision of the option to use the DRT system.
- ◆ Tendering is not only possibility to control costs, pay attention to organisation and control and to admission policy;
- ◆ A lot of journeys of target group are structural and repeating, they can be bought in for a lower price and require different agreements than accidental journeys;
- ◆ Take into account that the target group is vulnerable, journeys can be pre-scheduled, but 20% of schedule changes is not uncommon;
- ◆ Communication is essential: biggest dissatisfiers are stress and uncertainty.

TRAVELCARE: a new Eu initiative

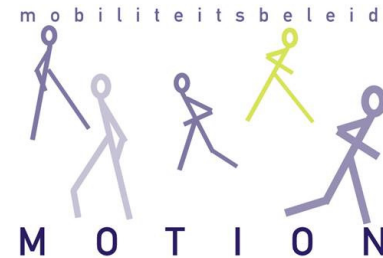
- ◆ A new EU project
- ◆ Aims to complement the regular PT system
- ◆ With adequate/efficient services and integrated approaches
- ◆ To fulfil the mobility demand of vulnerable groups
- ◆ TravelCare will
 - ◆ seek to develop and expand accessible and effective mobility solutions
 - ◆ increase knowledge and capacities
 - ◆ and exchange experiences and disseminate best practices.



Thank you for your attention!



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