



# THE FUTURE OF COMMUNITY TRANSPORT

## A CASE STUDY OF INNOVATION

**Transit***Care*



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## Overview

Community transport is essential for a range of people to be connected to their communities. This includes people without access to public transport, those socially isolated, or dealing with mental health challenges, people with disability and the elderly.

The not-for-profit community transport provider, TransitCare, offers door-to-door services, helping people connect to their community, whether it's attending medical appointments, going shopping or to the library, gym, hairdresser, or social and recreational outings.

TransitCare Branch Manager in Cairns Ms Anna Harrison, believes one of the keys to their success when opening a second office in FNQ is having a Reconciliation Action Plan in place.

*"All our staff have been through cultural awareness training to make them conscious of cultural differences and requirements of our First Nations customers," she said. "In Cairns, we have several Indigenous staff working with us and that has really helped break down cultural barriers."*

**There are many stories of community transport making a positive contribution to people's lives. Here we share just a few of these stories.**

**Millie** was having difficulty walking to and from the bus stop due to her asthma. Now, she uses the TransitCare service to take her to and from medical appointments and to pick up groceries. "TransitCare comes right to my door and the drivers always offer to carry my groceries inside and put them on the kitchen bench," Millie said. "Everything is so easy now; I can get from A to Z and I don't have to rely on other people." "If I haven't called for a pick-up for a few days, Anna will call me and check to see if I'm ok or if I need to go anywhere."

For Cairns local **Wayne**, who is legally blind and unable to drive, TransitCare's service has changed his life. As a single father of two young children, living in an area without public transport, Wayne was spending most of his pension on taxis to take his youngest son to and from school. "I was forced to get emergency assistance to get by because most of my pension was going on taxi fares," he said. "When I first discovered TransitCare, I thought they were angels in disguise. "They fit me in and make things happen for me no matter what, and it's also made a difference to my children's lives, because during school holidays, I can put their bikes in the back of the TransitCare van and go to the local skate park. I'm so thankful and the drivers are nice and very friendly."

Trust is a key value embedded in the culture and practice of the TransitCare team. This is best illustrated by the trust the most vulnerable and marginalised amongst us place with TransitCare, enabling them to gain support and interact with services.

Some of our clients live with a mental health problem, learning disability, speech, sight, or hearing difficulty, which prevents the use of public transport. Community transport and public transport have different features, different users with different challenges.

**Sheryl**, a young Aboriginal woman was referred to community transport from a domestic violence service. She was alone, pregnant, and needed reliable and safe transport to attend the antenatal clinic at the hospital. She was unable to afford to contribute to the cost of her travel. Initially she was reluctant to go in the vehicle and would send the driver away. Working closely with the hospital, the transport provider continued to schedule her pick up. Eventually she engaged with the service and an ongoing relationship was formed. Being helped by a small group of familiar drivers that she could trust ultimately allowed her to embed regular appointments. She has since given birth and we now take her and her daughter for regular check-ups. Collaborating with the young woman's health provider, Aboriginal liaison officers at her clinic, and her shelter was determined at the point of intake. A multidisciplinary approach yielded positive outcomes and ensured cultural considerations were observed.

Recently, **Sue** a mother of two teenage boys with permanent disabilities that significantly affect their ability to take part in everyday activities, contacted our organisation to discuss transport. They are both participants of the NDIS. One of the young adults has provisions in his plan to access transport training; essentially to learn how to use public transport. Following one on one training from a support worker, he now walks to the bus stop and takes the bus to his work programme independently. His brother has more significant impairment and requires a door-to-door option with a 'hand over' at his destination. This participant cannot be left alone in the community as he would be at risk. The parent has seen both sons build capacity in their own way which has allowed her to secure part time paid employment. Many disability programmes provided transport pre-NDIS, but with pricing built around workers' time plus cost per km, this resource is much less available and quite costly.

Many refugee and humanitarian entrants to Australia are encouraged to live in regional areas as housing is more affordable. As they navigate their local areas to access health services, employment, and education opportunities, they are often disadvantaged due to language barriers.

**Tony**, a recently arrived refugee from east Africa struggled to get to his English language course at TAFE. His accommodation was a reasonable walk from the main road and as his course started outside of peak travel times, the bus service timetable did not align with him arriving on time for class. He either arrived too early or too late. When he was referred for community transport, an interpreter was organised to assist with intake and an explanation of booking process etc. This client has six children, and his wife lives with severe asthma and some mental health issues caused by isolation. The client advised that he could walk to the bus and arrive early for his class, but this would mean his wife would have more time on her own. We now pick up the client 20 mins before his start time, giving him an extra hour with his family in the morning. Our service also transports his wife to a Sudanese support group weekly.



Requiring mobility assistance is probably the most common reason for seniors to reach out to community transport providers. We often hear that 'being a burden' stops seniors from going out as much as they would like.

When 88-year-old **Sandra** was referred to community transport, she had tried a few different ways of getting around on her own rather than calling her son and his wife who lived 50 minutes away.

The bus used to be great, the driver was friendly, and she would sit at the front and have a chat with him about the comings and goings in the area. As her mobility declined and she started to use a walker, it would exhaust her to walk from her home to the bus stop. She then used taxis, but that habit became financially prohibitive. Her granddaughter showed her how to use Uber but with low technology proficiency, it caused her too much stress. Community transport allowed her to travel independently: the driver would collect her at her door and assist her with the wheelie walker and shopping bags. She got to know all the drivers well and felt safe. When she didn't answer her door on a regular pick up, procedures were in place that authorised the driver to call an ambulance when her whereabouts could not be determined. This lady had fallen whilst getting ready for her appointment. She was hospitalised for a week. Having a 'client not responding' protocol has literally saved lives!

Transport issues will not be resolved with a 'one size fits all' approach. Community transport is a crucial element of the transport mix. This service type is often less known and less visible to the general public. For community members with additional mobility needs or who are financially challenged, or for those living in areas with limited public transport networks, community transport becomes vital to ensuring that people stay healthy and inclusive in their communities. With restrictive eligibility for Queensland Ambulance patient transport, people often have to ask for help from family with medical related transport.

68-year-old **Bob** is a renal patient catching the public bus to the hospital three days each week and needing to walk for 15 mins to the bus stop. He was not eligible for QAS transport. Following his dialysis treatment, he has a range of side effects; he becomes very fatigued, feels dizzy and suffers with muscle cramps. He felt uncomfortable on the bus and then needed to walk from the bus stop to his home when he was feeling at his worst. The patient's daughter intervened and shuffled her work and family commitments to assist him. The arrangement worked well for a little while but could not be sustained due to increased demands at his daughter's workplace.

The hospital approached our community transport service for assistance. The patient now travels to his appointments with door-to-door transport. His co contribution is slightly more than the bus fare but there is no walking involved. He mentioned to the driver that he felt like he was a burden to his family and now has more independence. He also uses community transport to visit friends. He did not want to ask his daughter to take him for social outings as he felt like he was asking too much of her. When people are receiving assistance from family and friends, they often must prioritise the help they ask for.

*"To be viable as a provider, retain the values of a social enterprise and deliver the best services possible for clients – there needs to be change."*



## Introduction

In today's environment of uncertainty, and the many barriers individuals face to participate within their communities, it could be considered that transport is the 'glue' to society. Community transport could therefore be considered the 'tub of glue'.

Providers are becoming ever more sophisticated as the demands for community transport increase across every community in Australia.

The sector at large is dominated by social enterprises focusing on equity, accessibility, and sustainability.

However, to be viable as a provider, retain the values of a social enterprise and deliver the best services possible for clients – there needs to be change.

This case study reviews what principles need to be in place in a community to enable these changes.

Firstly there needs to be an appetite within the community, across providers and within government to make a change at a community level. For this community, there is poor public transport infrastructure and services, and taxi services that are expensive, reluctance to do short trips, and a shortage of vehicles and drivers to support clients with any mobility issue.

Further, the community was and continues to experience a severe shortage of workers in both the aged care and NDIS sector.

This community would be considered a typical regional area, experiencing both a population growth, and a rapidly growing demographic of over 65s.

The community was serviced by an unsustainable array of providers creating overlap, inefficiencies and higher costs per trip. Thirty-three (33) transport options were on offer, delivered under 13 different brands and funded by multiple government programs. On many occasions, different transport providers would transfer 1-2 clients each to the same destination, at the same time, funded by the same government funding!

However, operating in and funded in silos meant that these community transport providers were facing cost barriers to achieving efficiencies including scheduling costs, dispatch of vehicles, training and skills of asset management team. With efficiency gains and improved service delivery as the focus, providers commenced a review to determine if partnering would make improvements. The groups at the table to consider change included large and small aged care providers, Indigenous health services, hospitals and specialist transport providers for NDIS participants.

## Previous review of market

### Findings

**The surveys, workshops and consultation with stakeholders identified the following issues:**

- A multitude of providers with little coordination or integration
- Duplication of services
- A resultant confused picture of provision for users
- An inefficient use of available resources
- Geographical areas and groups of people where little or no provision was provided, effectively isolating these individuals from everyday community life
- A growing demand from an ageing population
- A reluctance by providers to drive outside a 20km range

### Solutions

**The proposed Mobility Centre solution resulting from the consultations is summarised as follows:**

- Designed to meet individualised needs within a target group
- Utilising and coordinating existing transport infrastructure
- Provides transport disadvantaged customers with a single point of access to a suite of coordinated transport services (one call-one click service for transportation)
- A hierarchy of services to match the hierarchy of customers' needs
- Services are pre-booked, shared, scheduled, and personalised
- Provides access to current fixed route services and schedules
- Facilitates deviated route, point to point and first mile/last mile transport to and from fixed route services
- Scheduling software uses Geographic Information System (GIS) mapping, which groups people into vehicles automatically and creates shared 'runs'

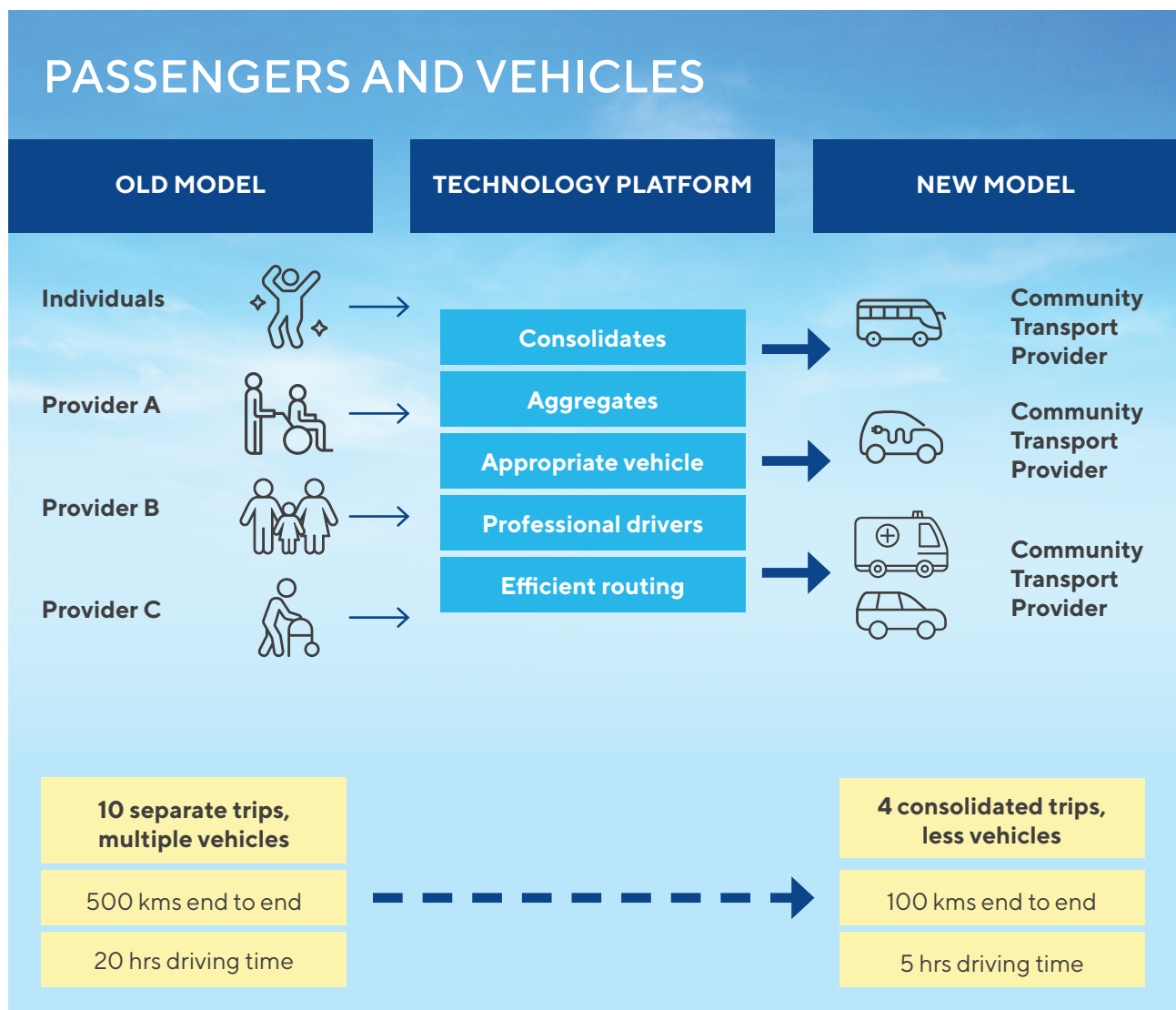


## 1. Understanding needs

Using a technology platform to schedule, roster, and coordinate people, passengers and vehicles - has resulted in increased utilisation and the ability to report on data trends and provide data driven insights. This information includes the evidence on transport disadvantage at a community level and a cohort level, as well as offering insights into changing needs.

These data driven insights and evidence is presented in comprehensive reports as well as dashboards that provides the necessary summaries and trend analysis to inform decision makers in real time. This information can be aligned to strategic opportunities and decision making frameworks as required. This data also includes social return on investment analysis that has been conducted at a community level.

Figure 1. A typical day in the community transport market



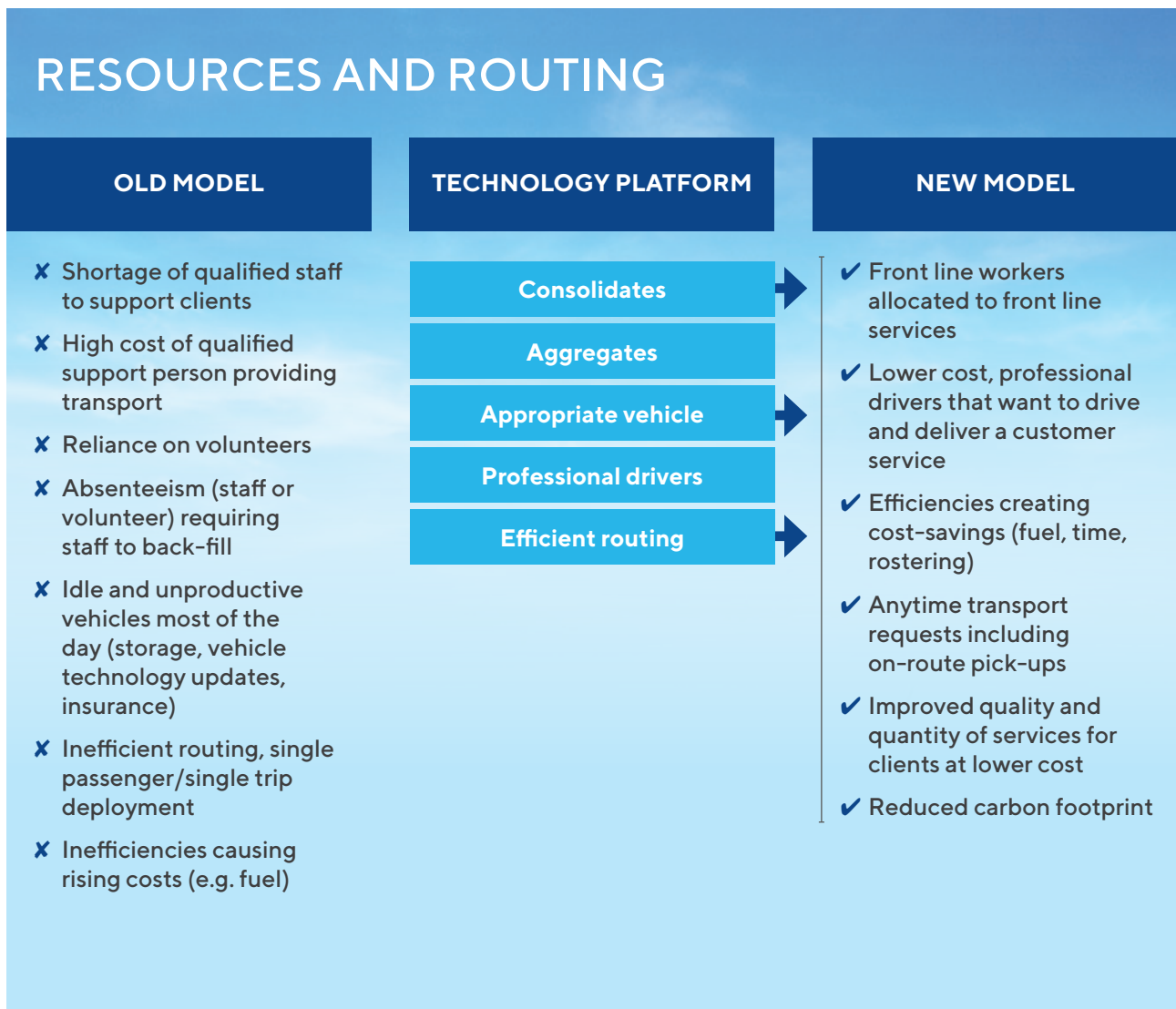
## 2. Policy coordination

Currently working across three states, the technology platform provides a rich source of data that can be used to analyse trends, changes and differences across jurisdictions and within jurisdictions. All data can be de-identified and used at a high level for this purpose.

A holistic policy platform would benefit from a holistic technology platform. The technology platform supports coordination and integration of mobility across multiple sectors, and across multiple providers, thereby sharing resources as a result of shared technology.

The development of a standardised framework would benefit from a standardised technology platform. This technology platform would ensure consistency of terminology including users, different user types, different transport services and types, mobility needs as well as track performance issues and regulatory requirements.

**Figure 2. A typical day in the community transport market**



### 3. Governance

Using a technology platform to schedule, roster, coordinate people, passengers and vehicles – has resulted in increased utilisation and the ability to report on data trends and provide data driven insights. This information includes the evidence on transport disadvantage at a community level and a cohort level, as well as offering insights into changing needs.

It is with this data that will enable jurisdictions to examine a broad range of data-informed trends.

Workforce challenges are being experienced in both community transport and crucially the human services and care industries. The ability to share resources through a consistent technology platform will reduce demand on the workforce of both industries and the community transport assets.

### 4. Inclusive approaches to integrated transport

By providing a consistent technology platform across providers, this will enable consistent data to provide clarity on individual customer users and trends. Transport customers that are people experiencing transport disadvantage and complex needs will be able to be identified within the data – providing clear facts to inform transport policy and planning responses. This can be achieved prior to investment – because the platform can be used for modelling prior to implementation. Modelling also enables providers to use the most efficient mix of vehicle types, and ensure rostering of resources meets demand. It is this ‘just in time’ approach to fleet and rostering that creates efficiencies and cost savings for the community transport sector.

The AI functionality of the technology platform informs the forecasting of trends within a jurisdiction – based on previous experiences of similar jurisdictions and responses. This will better inform how to improve regional and local place-based planning of transport.

Some community transport providers will be coming from a low base of technology sophistication and data utilisation. However the technology platform has been utilised by a range of providers from low technology adopters to highly advanced providers.

The design of the platform allows users to adopt a phased approach to maximising the functionality of the system, noting that the minimum functionality to ensure benefits across the sector has been designed for easy take up of all providers (including providers at a low level of technology sophistication). Therefore the extent to which, individually and collectively, service providers can achieve a sufficient level of digital maturity and data availability to enable their integration is feasible.

## 5. Community transport technology and service innovation

The technology platform will enable a number of solutions to be implemented – whilst still retaining the consistency of data, consistency of reporting and AI functionality. Jurisdictions will not be restricted to a “one-size-fits-all” style of technology. And it is the sharing of technology and resources that becomes possible when providers are on the same platform.

The additional benefits of a consistent platform means jurisdictions can share and learn with other jurisdictions negating the need for trial and error and costly piloting.

There is potential for community transport focused services to provide a wider range of services to MaaS solution capacity. In addition, there is the opportunity for community transport services to gain more revenue by increasing the utilisation of their fleet.

The technology can be integrated into state or commonwealth funded platforms to create a combined transport solution.

**Figure 3. Current and emerging innovations relevant to community transport**

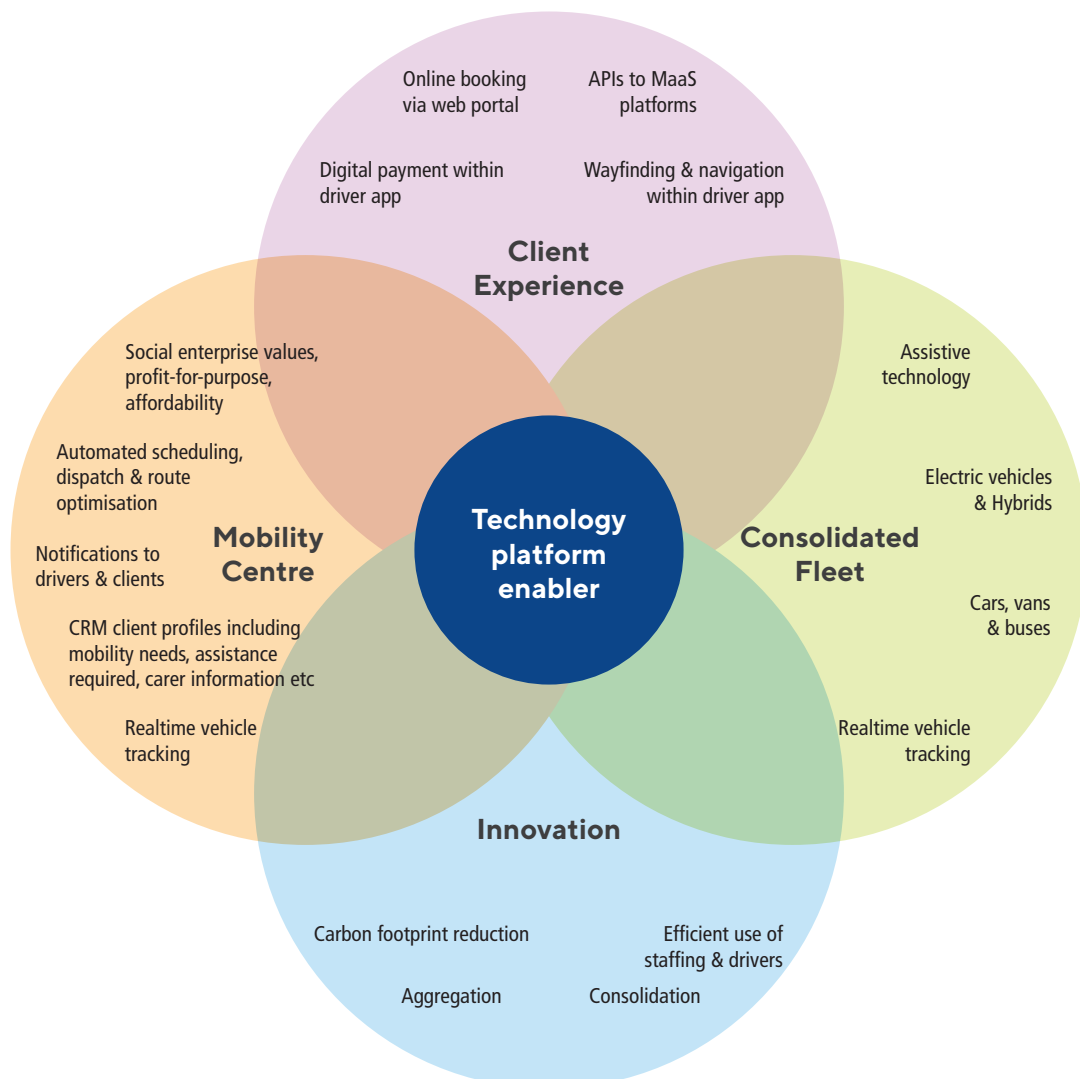




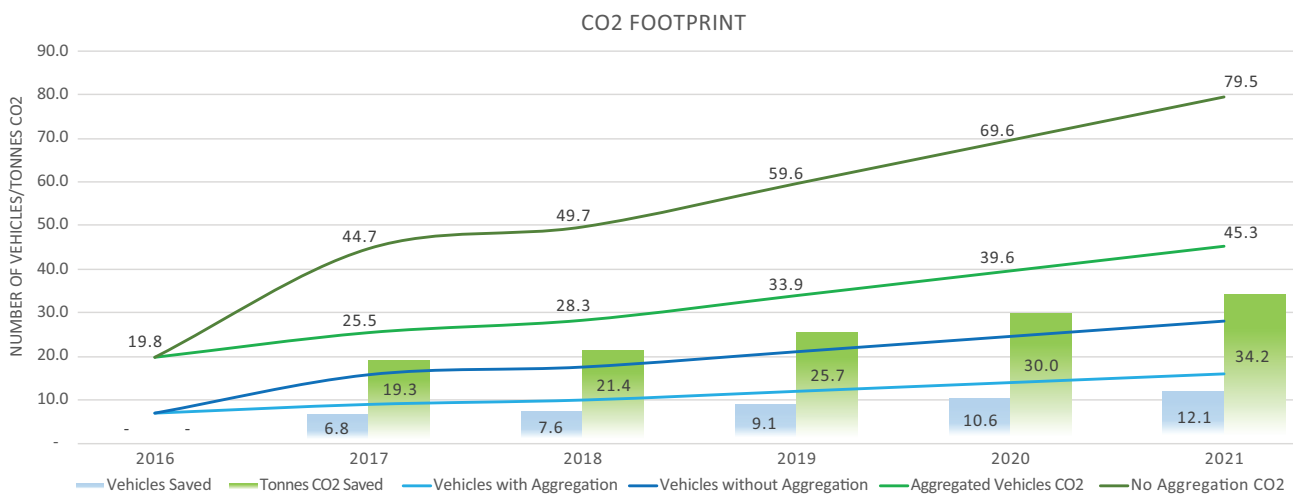
Figure 4. Regional case study

OLD MODEL	TECHNOLOGY PLATFORM	NEW MODEL
<ul style="list-style-type: none"> <li>✗ Silos of funding, scheduling and resources</li> <li>✗ Providers offering disparate services with no collaboration</li> <li>✗ Point to point transport with no aggregation</li> <li>✗ Limited services available (7.30am–5pm 5 days/wk) within limited range of 20km radius</li> <li>✗ Dedicated CTP + 2 providers delivering 4.3 trips/vehicle day (47 trips/day with 11 vehicles)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Brokerage Technology Platform</li> <li>✓ Bespoke Services</li> <li>✓ Consolidates the efforts of 19 providers and 2 government contracts</li> <li>✓ Aggregates (reduces) the 40+ vehicles down to 15</li> <li>✓ Appropriate vehicle including car, van, hoist etc</li> <li>✓ Professional drivers training that includes driver safety and passenger mobility and cultural competency + Blue and Yellow cards, and recruitment and training = retention</li> <li>✓ Efficient routing: on-route pick-ups, family members included</li> </ul>	<ul style="list-style-type: none"> <li>✓ Single integrated technology platform across all providers</li> <li>✓ Collaboration and aggregation creating efficiency gains</li> <li>✓ Expanded services to 6am–10pm 6 days/wk across a 250km radius</li> <li>✓ Scalable to accommodate forecast growth (total population + ageing demographic expected that by 2025 25% of population will be over 65)</li> <li>✓ Created more full-time and part-time jobs with fewer volunteers needed</li> <li>✓ Better financial investment and impact (for government, NGOs and clients)</li> <li>✓ More cost efficient use of provider employees for support</li> <li>✓ Less stress for frontline workers (providing client support and not having to drive)</li> <li>✓ 4 times more efficient use of resources with far fewer vehicles on the road</li> <li>✓ Reduced carbon footprint (less fuel, more efficient vehicles)</li> <li>✓ Dedicated CTP + 19 'providers'** delivering 15.4 trips/vehicle day (200 trips per day with 13 vehicles)</li> </ul>
 		<p>** 19 'providers' offer transport to their clients, but transport is delivered by the dedicated CTP, reducing their costs of fleet maintenance and improving their balance sheet whilst making the Community Transport provider sustainable.</p>

## 6. Outcome in a regional city

With a focus on optimisation and aggregation, vehicles are routed for maximum utilisation. More trips per vehicle means less total kilometres travelled and therefore less CO2 emissions. Without aggregation in this example, an additional 12 vehicles would be required and nearly double the CO2 emissions would occur.

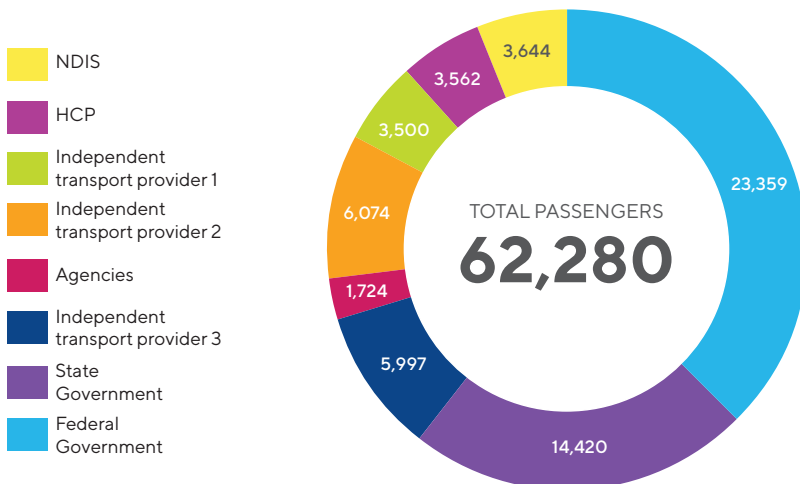
**Figure 5. Optimisation and aggregation**



**2015**  
**15,532 trips** delivered with **13 vehicles**  
= **1194 trips per vehicle/12 months**

**2021**  
**62,280 trips** delivered with **15 vehicles**  
= **4152 trips per vehicle/12 months**

**Figure 6. Mobility Centre clients**



# EXAMPLE OF OPTIMISATION AND AGGREGATION IN ONE

The 'new' way in comparison to the 'old' way means:

- ✓ One vehicle only in comparison to requiring three vehicles.
- ✓ Able to support accompanying family member.
- ✓ Client A experienced an extended trip of only 10mins, and arrived well within the scheduled weekly time request.
- ✓ Three client trips (tally of 90+ kms) were achieved in 31 kms of travel, reducing total emissions by two-thirds.



Client A is scheduled for a regular daily pickup at 10am.



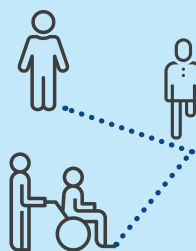
Whilst on-route, the professional driver of the Hybrid van receives instructions to pick-up Client B.



Client C (with mobility challenges) scheduled for a pick-up on-route, requests to be accompanied by a family member.



Driver confirms and picks-up Client C and family member.



Clients A, B & C are dropped-off at requested destinations – on-time, safely and in comfort.

	Initials of client	Communication	Time	Client location
	RW (Client A)	Pick up	10:00-10:12	Woodridge, Q
	ZG (Client B)	Pick up	10:30-10:42	Logan Central, Q
	ZG (Client B)	Drop off		Logan Central, Q
	WM (Client C)	Pick up	10:30-10:42	Beenleigh, Q
	RW (Client A)	Drop off	10.33-10:45	Beenleigh, Q
	WM (Client C)	Drop off		Waterford West, Q

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