

TRC-47: Feasibility Study for Rural Renewable Energy Transport Solutions
(Bridgend)

KEY STAKEHOLDER AND COMMUNITY CONSULTATION REPORT

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1. Introduction

Gower Power Co-op CIC (GPCC) is contracted by Juno Energy to assist in the delivery of a feasibility study for Sustainable Wales that explores the opportunity for creating a community transport scheme in Bridgend's rural wards powered by renewable energy.

GPCC's role is to consult the key stakeholders that had already been identified by a local steering group and carry out wider community consultation.

2. The key stakeholders

The key stakeholder organisations and their representatives that were identified and subsequently consulted were as follows:

Bridgend Community Transport Association – Graham Cartwright (Operations Manager)

Bridgend County Borough Council – Kevin Sales (Public Transport Officer) and Kwaku Opoku-Addo (Head of Transport)

Porthcawl Surgery – Nicola Willis, Surgery Manager

Cenin Renewables – Martyn Popham, Chief Executive / owner

In addition, a discussion was carried out with Stuart Burge-Jones, Health and Well-being Officer at Bridgend Association of Voluntary Organisations about the consultation process and certain aspects of the scheme (namely attracting volunteers and engaging groups to use a future service)

3. The community

The community was defined as people who were having transport issues in the following wards:

- Cornelly
- Nottage
- Rest Bay
- Porthcawl
- Newton
- Bryntirion, Laleston and Merthyr Mawr

In addition the consultation had a more specific focus which was to understand, in order to address, the difficulties people were having getting to and from the new Porthcawl Surgery building in Newton.

4. Consultation methods

Key stakeholder consultation methods

Key stakeholders were initially approached on the phone and then the initial conversation was followed up by face to face meetings in Bridgend week beginning 4th March 2019.

The consultation methods involved a short presentation of an outline proposal of how in principle a pilot scheme could work that aimed at addressing some of the transport issues that existing around Porthcawl Surgery (Appendix 10a). This was followed by an informal conversation that explored:

- Demand for the proposed scheme
- Potential issues/challenges
- How to make it happen
- Wider opportunities

Community consultation methods

Community consultation took place between 23rd March and 24th April. It consisted of an online questionnaire which was open throughout period and a public event at Porthcawl YMCA on 18th April.

Both the questionnaire and the event were widely publicised through Sustainable Wales and the key stakeholders including BAVO (Appendix A). We anticipate that through BAVO's mailing list and social media activity alone this would have reached

XXXXXX awaiting data BAVO

The event was also published in the local newspaper.

5. Key stakeholder consultation results

Demand for the proposed scheme

All stakeholders that were consulted were well aware that significant cuts to public transport provision in Wales and more specifically in Bridgend had taken place over the last few years. They were also aware of the social and economic consequence that reduced mobility has on communities, particularly on those people that are disadvantaged, whether that be due to having a low income, poor health, aged or otherwise.

With regard to Bridgend, most expressed concern that because of Bridgend's rural nature, transport issues were becoming amplified. Bridgend's rural areas tended to have limited services already and now people were becoming increasingly isolated. All the stakeholders were aware of issues that existed for some of the patients who wished to get to and from

Porthcawl Surgery and welcomed any sort of proposal that begin to address some of these and wider transport issues.

Typical comments were as follows:

“Not many accessible taxis”

“Taxis are always way too expensive for some of our patients”

“Cost of transport is causing doctors to do extra home visits.”

This last comment, from Porthcawl Surgery manager was followed up by consultation with 10 of the the Doctors, who estimated that patients who could not get to the Surgery due to transport issues was causing on average 4 – 5 home visits per day that otherwise would not have happened had there been adequate transport provision in place.

In addition, it was felt that whilst any provision of better transport to the surgery was more than welcome, there existed a wide range of social isolation issues beyond the surgery to support other service users. Comments such as the following were typically expressed:

“As well as servicing Porthcawl Surgery there are lots of other places people find it impossible to get to, for example, North Cornelly wound clinic* or even the main hospitals are hard to access for some people.”

*Patients are being sent countywide to wound clinics instead of to their local surgery nurse which results in transport issues

“Lots of social groups could use the service outside surgery hours.”

“DanyGraig is particularly inaccessible.... Happy Valley also out the way and on route to Stormy Down*”

*where it is proposed the electric vehicle recharges its battery.

One stakeholder questioned whether the feasibility was primarily about providing a community transport service and meeting the obvious transport needs that existed or whether it was more about piloting the alternative uses for renewable energy.

Potential issues/challenges

The comments covered a variety of issues: legal, technical, financial and social.

Legal

A concern was expressed with regard to the legal implications of displacing the public bus service or local taxi services. In particular, any new provision needed to avoid any criticism

of duplication of the bus route that is part-subsidised by ABMU (#61 – Jones Street – Nottage)

Though avoidable if the service was designed appropriately, it was also highlighted that a taxi license would be required if certain services were to be provided.

Technical

Aside from needing to ensure that the vehicle could operate regularly and as proposed (i.e. offer the same service in cold weather),

“Would an EV service be able to cover the valleys or work in poor cold weather?”

there were a variety of other technical factors that need to be considered. For example: It was highlighted drivers need training how to use the car, how to carry out safety checks and keep regular records in a log book; they also need basic first aid and safeguard training so they know how to deal with incidents of abuse or illness, and they would also need CRB checks.

Financial

Aside from financial implications of any legal and technical issues raised, it was brought into question whether the feasibility study was taking into account “return load”?

“Would it be possible that patients get stranded... how do we propose managing the economics of that?”

It was also highlighted that less able patients have carers and that this needs to be taken into consideration when calculating any revenue (or lack of) from users of the service.

Social

Whilst it was acknowledged that BCTA were already providing a successful volunteer car scheme, BCTA themselves highlighted:

“We are seeing an increase in demand for our services **but it is often hard to find drivers**”

Another social factor highlighted that was highlighted:

“Townrider bus service providing free transport to OAPs so need to manage people’s expectations”

A question was asked whether the local authority could pay for OAPs?

How to make it happen

From the conversations that were carried out with the key stakeholders, what stood out more than anything else was a real appetite to help make a pilot scheme happen. The key stakeholders clearly had different insights and expertise and between them it was easy to take confidence that a suitable service could be designed and delivered if they were brought together into a project team.

There was a clear understanding that provision needed to be differentiated and that this could be quite easily achieved. This included suggestions for ways to avoid competition:

“a membership scheme with key criteria for using service: affordability, ability/capability and availability”

“make it accessible... not many accessible taxis”

There were also suggestions of a need to be strategic in how the service was planned:

“The surgery needs to be involved to timetable appointments according to zones”

“Important to dovetail with larger vehicle provision because social groups often groups of 15 or more”

All the stakeholders (including BCTA) agreed that BCTA would be well-positioned to run the service. One of the many reasons given for this is that it had to be run “professionally and according to proper operating standards”

Although BCTA did expressed concerns about attracting and retaining drivers, they were confident that they could run the service as an agent (for a management fee). They were confident that they could recruit people in Porthcawl for a pilot and could see the logic in using Stormy Down as a control centre (i.e. leaving the key and vehicle for charging when not in use) and have 5 – 6 volunteers on shifts.

BCTA also highlighted that the study needed to take into consideration that Operations and Maintenance of community vehicles is higher than normal, and that we could expect having to carry out basic maintenance every 6 weeks.

Some useful suggestions were made with regard to volunteer recruitment. Firstly, to work closely with BAVO, linking with U3A, the Masons, Lions and the Bridges to Work scheme

Cenin Renewables confirmed its eagerness to provide clean electricity (at no cost) for a community transport scheme and also offered an EV vehicle as back up or more regularly if required.

Overall, the key stakeholders were very supportive and want to be involved in development of service.

Wider opportunities

The biggest and most evident opportunity that was highlighted by a number of stakeholders revolved around using the vehicle(s) for a variety of purposes outside of the needs of taking patients to and from Porthcawl Surgery. Aside from the opportunity to schedule appointments for patients reliant on the new transport scheme within given parts of the day, there were many more hours in the day and evening outside of surgery hours when the vehicle could be used for and by a number of other social groups with transport needs. A good example of this was the suggestion that the vehicle (and driver) be offered to Latch Caravan (cancer support at Treco Bay). Another example was taking one partner of an elderly couple to visit their partner if they gets taken into hospital. In addition, sports clubs were suggested for weekend use that would a) solve a transport problem b) mean less fumes from cars on the road by virtue of the community vehicle being electric. It was also suggested that the vehicle could be used for private hire, provided it had appropriate licensing.

It was recommended that manufacturers were approached in case they wanted to support the scheme.

Martyn Popham from Cenin Renewables stated that he was inspired by Austrian model where “co-location and clustering of energy assets lead to regeneration of an area”. From the conversations with all the key stakeholders it is clear that this certainly could be the case.

6. Community consultation results

Numbers of participants

72 people filled in the questionnaire, with 37 of those self-selecting as falling into one of the following categories:

1. I have transport needs that are not being met by existing provision
2. I am a carer and support someone or people whose transport needs are not being met by existing provision
3. I represent an organisation that supports potential service users with significant transport requirements that are not being met by the existing provision

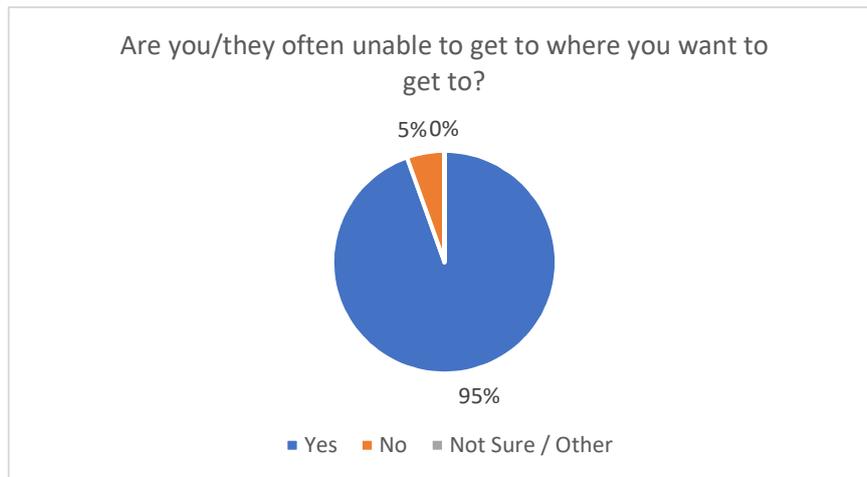
The event was attended by 11 people local to Bridgend and 1 person who regularly stayed at a local caravan park and who was adversely affected by the lack of transport. The event was facilitated by Ant Flanagan from Gower Power Co-op CIC, with the support of Jon Bailey from Down to Earth (who run their own EV community transport initiative).

Key findings

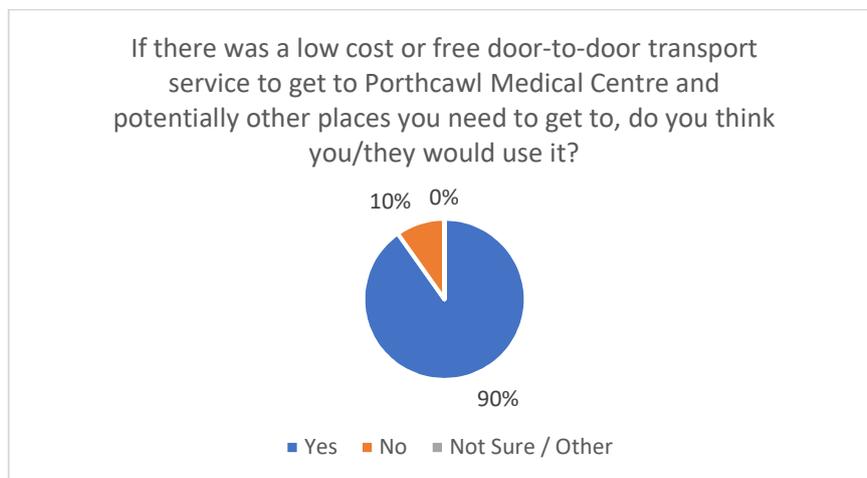
Online questionnaire

Key findings extrapolated from the online consultation exercise (Appendix B) were as follows:

- All respondents reported:



- More specifically, 100% of those consulted who were, or supported someone who was, registered users of Porthcawl Surgery had difficulties getting to and from the Surgery.
- In addition, all respondents confirmed the following

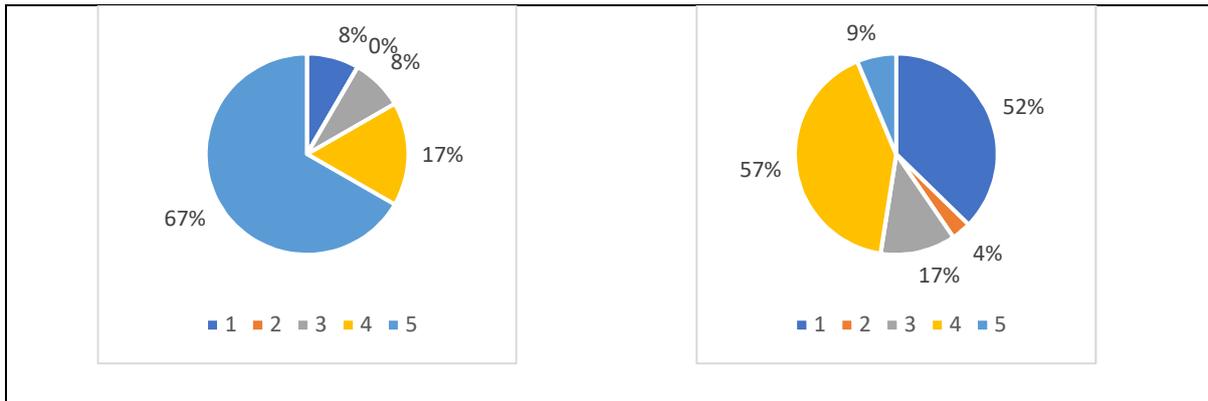


- Whilst people who supported people with access needs thought a new community transport service would make a moderate difference to user's lives, the users themselves thought it would make a substantial difference.

On a scale of 1 – 5 how much difference do you think it would it make to your/their life?

Service users' opinion

Support workers'/organisations' opinion



- When asked “what would you do without such a service, or, what would the people you support do without it?” responses were as follows:
 - Suffer myself DEAD
 - Ask Doctors to attend at home
 - Would be difficult getting to surgery, especially in bad weather
 - Carry on as normal
 - I wouldn't be able to get where I want to go
 - I would have to drive myself
 - My life finished when the council stopped the 63B bus. I can't get to my surgery, hospital, banks, or shopping. We pay through our rates for transport but we don't get any
 - Not a lot
 - Reduces access to health services.
 - Struggle ++ or request home visits
 - Taxi service
 - Request home calls at the surgery
 - Potentially not seek medical attention
 - Nothing
 - Family/ friends helping
 - It would mean home visits
 - Rely on lifts
 - Increased demand for home visits that aren't strictly necessary due to lack of transport currently
 - People would be unable to get to where they need to go
 - As they usually do. Suffer in silence!
 - Take more time to travel, thus impacting on their ability to complete daily tasks, also impacting on their physical and mental health and general ability to attend events/commitments.
 - Stay at home
 - Have to have home visits.
 - Housebound

- Other feedback included the following comments:

- As a senior with mobility problems currently entitled to a bus pass I would expect to be able to use it. The route would be important, the problem with the new location is that it is at the edge of town. All current services pass through the centre. If the new service did not pick up at all points and terminate at the health centre there would be little point. The vehicle must be disabled and push chair friendly.
 - I would love to see more electric vehicles on the road
 - I am currently registered with North Cornelly surgery, there is an hourly service on the 61 which goes there. I would like a service that goes to Pyle train station to coincide with commuter train service.
 - My surgery is in North Cornelly not Porthcawl. I have health problems, which mean I need transport. There isn't any.
 - I am unable to attend the meeting due to not having any transport, the last bus up to the top of Fulmar Road leaves town at 5.30pm, after that it stops so I am unable to go out, it is too far for me to walk to the Forge bus stop as I have breathing problems due to illness. So when the 61 stops I am housebound. I need the 61 bus to get to town and also the new surgery.
 - We are a local rural support service in Bridgend who struggles with transport issues for our vulnerable participants
 - reduced home visit requirements on the medical centre would allow more patients to be seen in a more timely manner and benefit the whole community as such
 - Sorry. Can't think of owt
 - it would greatly benefit our patients
- Although by no means the focus of the online questionnaire, participants also made the following suggestions with regard to groups that could benefit from access to a new community transport scheme:
 - Porthcawl stroke club
 - Kenfig Nature Reserve volunteers
 - The Sun Group
 - We don't have group names but as the representative body for community transport, we know there are groups everywhere that would benefit from this type of facility

Consultation event

The format for the consultation was a short presentation about how we thought a pilot scheme might work given the conversations that had been had with key stakeholders to date and preliminary technical research (Appendix C). This was followed by a Q&A sessions and then more detailed informal discussion exploring some of the issues.

The following questions raised about the feasibility study:

- Was the questionnaire focused at individuals or groups?
- What hours will the service be run?

- What areas will the service cover?
- Seems like the service is only for the surgery? Is that true?
- How can the spare capacity be used as a wider community resource?
- Aren't bus companies meant to run particular services?
- #63 bus has been removed, how will this benefit me?
- Very disappointed no councillors here tonight

Also the following comments were gathered:

- Kenfig bus service very poor
- Buses inconsistent
- From Kenfig – costs £5 to surgery, £10 to Porthcawl EACH WAY!
- No 61 bus often very empty
- No 61 finishes at 16.30 used to run to 23.05
- Commercial decision made by bus companies needs to take into account the time of year / seasonality / population
- Other side of the village gets 3 buses No 63
- Many people cant get to here because of no buses! So voices cant be heard at consultation
- Pensioners have a bus pass so service should be free
- Reliability is vital
- Surgery will only function if dedicated bus service... worse now moved
- This new service won't address all issues – moreover patch issues that should already be there
- Some people could afford some money to subsidise keeping a bus route open. 87 yr old lady will to pay £30 p.a.
- No point if having a bus pass if no bus
- Town CC says trade dropping off already
- Needs more political clout
- Council had multiple invites to this consultation. Council backed off to avoid confrontation
- Surgery is in wrong place
- This EV concept is very interesting
- Would like to try one
- Transport is a green issue as well as social issue
- Free electricity, need to make the most of that!

Participants were asked which places were difficult to get to. The following were highlighted:

- North Cornelly – no access to relatives in care home (Picton Court). This is a issue for staff too
- Young people cant access nature reserve
- Porthcawl to Morrision Hospital
- Porthcawl to Port Talbot Hospital
- Asda
- All has to be via Bridgend

Suggestions were made with regard to promoting the service:

- If service starts up word of mouth will spread / free publicity
- Needs an enthusiastic campaign to get people into Porthcawl
- Needs community members to get involved and push the service forward

Concerns and comments were raised about where drivers would come from and suggestions for their recruitment were made:

- V difficult to recruit drivers
- Most volunteer drivers are senior professionals. Had a good life, want to give something back. They like the personal contact and camaraderie. Enjoy getting to know their passengers. Can act as an alarm if passengers don't turn up
- How can we find retired professionals?
 - o Masons
 - o Professional orgs
 - o Institute of transport
 - o Armed service
 - o Vehicle adverts (back of vehicle)
 - o Internet
 - o Organisation called SHOUT
 - o BAVO

It was also highlighted by one of the participants familiar with community transport initiatives that volunteers go the extra mile and that commercial service is very different.

One big concern that was raised related to a concern whether there would only be an online booking system and the implications that would have for OAPs and any others with transport needs that aren't digitally included.

Throughout the evening the BCTA representative played a significant role explaining to other participants how a community transport scheme could help to address lots of local issues. It didn't come as a surprise that one key recommendation that came from the participants on the evening was that a pilot project should be run in conjunction with BCTA.

7. Conclusions

The stakeholder and community consultation was carried out over a six-week period and successfully engaged with a wide range of potential service users and people and organisations that support those users.

A wide range of issues that we were made aware of by key stakeholders were confirmed in our conversations with the wider community. These included:

- Many community members without their own transport find many important places and the new surgery very difficult to get to... and this was leading to numerous extra call outs by doctors (estimated at 4 -5 per day by the surgery)

- There is inadequate availability of public transport in the rural areas, in terms of a poor frequency of buses and particularly between certain places
- Timetabling is often poor, in particular outside of certain hours and connecting between different bus routes
- There is regular disruption to already poor bus services
- There is insufficient provision for wheelchair users with both the public and private transport options available
- Bus stops themselves are sometime inaccessible for people who have mobility issues
- There was a strong sense of injustice that OAPs in particular had spent their lives paying their taxes, now had a bus pass that they felt entitled to but that there was no adequate provision.
- A number of OAPs noted that they would be prepared to pay for a bus service instead of have it for free if it meant having decent provision
- Private transport options are very expensive and having to depend on them uses up a lot of community members' available resources or prevents them from going anywhere in the first place. In many reported instances this leads to significant isolation.

The service users we spoke felt that a new service would make a greater difference to their lives than support workers / organisations anticipated. This may have been because potential service users who were experiencing the greatest issues were more likely to take part in the consultation. Nevertheless, the consequences of rural isolation should not be underestimated.

It was widely agreed that any provision that tailored to meet the community's needs, provided it was affordable, would be well-received.

The use of EVs is very welcome but having any form of transport was a greater clear priority for the community.

Similarly, any technology to make the new transport booking system more efficient was welcome provided it did not exclude those who didn't have access to the internet or found it difficult using new technology.

It was generally understood that a new community transport initiative would begin to address some of the complex transport issues in the area and that it would provide some improvements but it wouldn't be able to resolve all the wide range of issues.

All key stakeholders and community members who attended the consultation event were in strong agreement that Bridgend Community Transport Association (BCTA) would be well placed to deliver a new service. BCTA agreed that they would be interested in taking on a new service and also exploring the benefits offered through EVs powered by local renewable energy.

8. Appendices

- a. Event flier
- b. Online questionnaire
- c. Consultation presentation