

OX12 Project

Solution Building Event

Group Work 4 – Travel and Transport

Post-its

Roads/Services

- Restrict lorries and tractors on main roads into OX12
- Highways Department improve road infrastructure to accommodate
- Improve public transport
- Improve public transport links
- Maintain roads better – A34 closed frequently because of accidents
- Add seats at bus shelters
- Pick Me Up – transport to interlink with Park and Ride
- Pick up bus initiative
- Change the route of Bus number 4 back to what it was to be able to go direct to the Nuffield
- Community bus dedicated for HealthTransport (and disabled access)
- Ensuring that info about transport availability and eligibility is available
- Provide temporary bus pass to patients that need it

Car/transport sharing

- Use neighbours to transport you
- Encourage cycling and walking
- Encourage car sharing – make it easy for a driver to offer a space on an existing journey
- Sharing transport to Oxford services, co-ordinating appointments, offering lifts

Access/Travel to the JR

- Outer ring of park and rides outside Oxford
- Park and Ride from Redbridge
- Needs more buses on all routes
- No buses go to the JR/Churchill direct from Wantage or Grove
- Incentivise staff not to park at the JR to make room for patients
- Buses for staff at JR
- Improve traffic flow from peak times e.g. 9-5pm
- Open care to outside peak hours

- Parking at hospitals is not just an OX12 issue. – therefor – the northern, eastern, western and southern providers to be inked by buses connecting them with hospitals

Provide services closer to home

- Co-ordination of appointments to not travel so far
- More services/apps
- Mobile services to the community
- Flu jabs at village halls
- Invest in third sector
- Pre-op assessments locally – where appropriate
- Developing GP Specialists and tele-medicine
- Less demand for travel by increasing outpatient services in OX12
- Move outpatient services to OX12
- Improve GP and acute relationship and patient referrals
- Better info on patient need
- Provide mobile diagnostics e.g. MRI
- Clinics more local: in villages, in the Health Centre
- Improve Abingdon services instead of going to the JR
- Return funding to Abingdon EMU ambulance
- Bring clinics/consultations nearer to Wantage and Grove instead of in the JR/Churchill
- Do not send people to Bicester for test – apart from no public transport it takes 9 months
- Less time, less distance means more seen with less stress/anguish

Others

- Patients who can't use public transport have to use patient transport or taxis. This doesn't work where patients are 'ill'
- One size and shape doesn't fit all – flexibility, efficient, practical not purely cost viability
- Ensure Private competition does not impinge on the public NHS locally