

# The Plug-in.

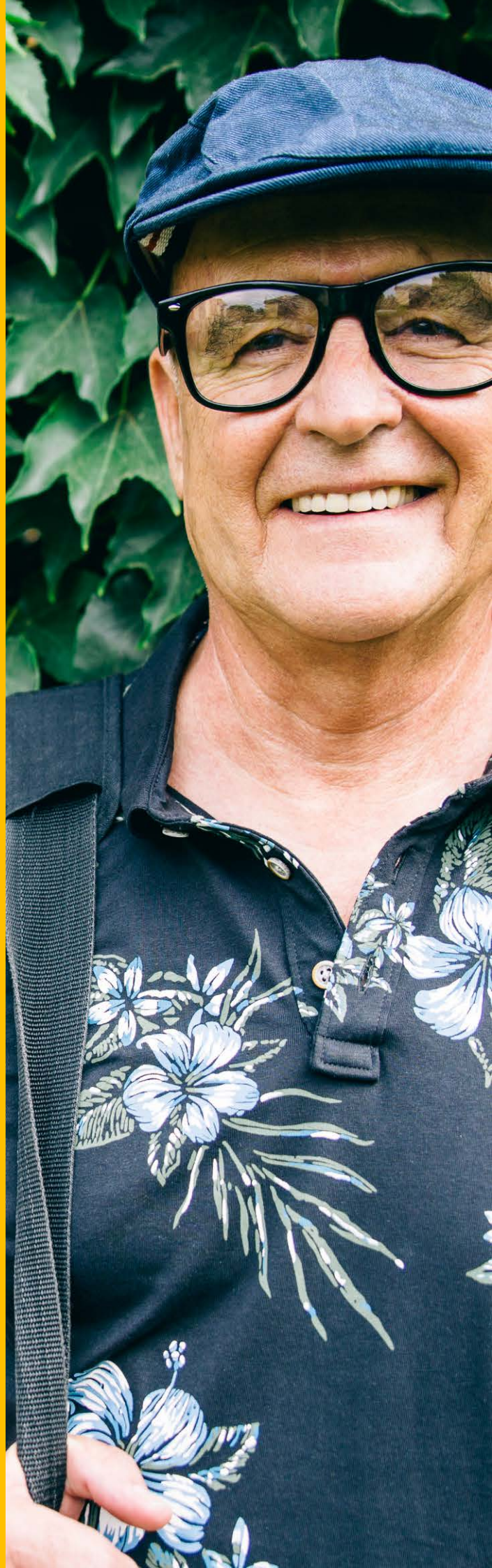
## Office for Ageing Well

### Transport Options Project

### Final Report

V 1.0                      24 March 2020

Author:                    Rachael Nielsen



# The Plug-in.

COTA SA's social enterprise The Plug-in, is a specialist market insights operation which connects older people with business, industry and researchers. We give older people an influential voice and enable clients to innovate and improve products, services and policies for the growing 50+ market.

The Plug-in draws on its own 'Influencer' community of people aged 50+ that is demographically diverse to reflect the general population and ready to 'plug in' to client projects, by providing their insights and experience.

Since start-up in 2017, we have delivered projects for clients across aged care, health, government, banking, legal, technology, urban planning, lifestyle and retail.

Every project delivered by The Plug-in supports the important work of COTA SA, advancing the rights, interests and futures of more than 633,000 South Australians.

The Plug-in is a member of AMSRO, the Association of Market and Social Research Organisations.

## **The Plug-in, Powered by COTA SA**

16 Hutt Street Adelaide SA 5000

08 8224 5588

[connect@theplugin.com.au](mailto:connect@theplugin.com.au)

[theplugin.com.au](http://theplugin.com.au)

ABN: 28 426 218 581

# Table of Contents

1. Executive Summary.....	4
2. Background.....	6
3. Research Design.....	7
3.1 Stage 1: Online Survey understanding behaviours and challenges.....	7
3.2 Stage 2: Metropolitan and Regional Focus Groups.....	9
3.3 Stage 3: Community Forum.....	11
4. What we discovered.....	12
4.1 Awareness of Transport Services and Schemes.....	12
4.2 Increasing usage of services and schemes.....	14
4.3 Value proposition of transport services and schemes.....	16
4.4 Communication channel to increase awareness of transport services.....	21
4.5 Improvement of existing transport services and schemes.....	24
5. Recommendations: Communications Strategy.....	25
5.1 Messaging.....	25
5.2 Communications channel.....	26
6. Feedback on communications strategy.....	28
7. Future Research.....	30

# 1. Executive Summary

Office for Ageing Well, SA Health recognise there is the potential for older people and their families to increase their awareness and usage of Transport Services and Schemes to assist them to travel to hospital and specialist appointments. To investigate possible solutions, Office for Ageing Well partnered with The Plug-in in June 2019 to design and execute a consumer engagement project to understand the community's perception of transport assistance.

The project had two distinct objectives. The first is about awareness older people and their family members across South Australia have of the variety of existing transport services and schemes that are available to attend hospital or specialist appointments. The second is about developing recommendations that may be applied to a communications strategy which would increase the awareness and use amongst older people of the transport services and schemes available in their communities.

An online survey and six co-design workshops were conducted with older people across South Australia including metropolitan and regional areas. The survey and focus group discussions explored the level of understanding of the services and schemes on offer and workshopped solutions to influence a communications strategy aimed at increasing the usage of the services. The findings were shared with stakeholders (from community organisations, transport providers and government) to gather feedback for an effective and unified approach to implementation alongside SA Health.

Findings from the research indicate that overall, whilst awareness of transport services and schemes is relatively high, there is a limited *understanding* of the services and schemes including what the services offered and who was eligible to utilise the services. Research participants expressed a keen interest in learning more about services that were available to them and were very receptive to using these services if or when they were required. This indicates that among older people, there is a high interest level, but low awareness and understanding; transport services are just not front of mind for potential users.

There are misconceptions in the community about just who the transport services and schemes are available for. People assume the service is for someone older, more frail and less capable than they are. Therefore, a communications strategy has an opportunity to change attitudes and perceptions as this is preventing people from not only using the service but finding out more about the services available.

A communications strategy aimed at increasing awareness and use of transport services and schemes would benefit from addressing the barriers to use expressed by people who did not use the transport service, including:

- + Assumptions about eligibility: "I don't feel like the service is for people like me".
- + Concerns over the service catering for different levels of mobility and health.
- + Concerns about reliability of the service.
- + Affordability of the service.
- + Availability and timing of the service.
- + Feelings of pride and the loss of independence: A reluctance to ask for help.

The messaging of the services and schemes is key. Participants felt what the services were offering was *support*, including emotional, practical and financial. A communications approach would benefit from using language that frame the services as a *support*. This approach has the potential to cut through the feelings of guilt or impeding loss of independence that some participants felt.

The channel of communication of how transport services and schemes are promoted to potential users is an important consideration. The community suggested promotion through the following channels would be the most effective for reaching an older audience, including:

- + Information available in medical and health related locations (such as the GP and pharmacy).
- + Information received via postal mail to people's homes.
- + A dedicated website and phone number.

To combat misconceptions, assumptions and the reluctance of asking for help as expressed by community members, a communications strategy would benefit from including the findings from this report in the approach taken to increase usage of services. This will ensure communications are targeted in a clear and informative way to increase awareness and consideration when people are planning their transport for specialist and hospital appointments.

The following report details these findings in depth, complimentary to the Stage 1 and Stage 2 reports provided to Office for Ageing Well throughout the duration of the project. The Plug-in would like to thank Office for Ageing Well, notably Mark Cullen, Cassie Mason and Kathy Williams for their accommodating and flexible approach to the delivery of this important project.

## 2. Background

Office for Ageing Well, SA Health commissioned The Plug-in to investigate the usage and awareness of existing transport services and schemes to support older people attending hospital or specialist appointments.

The outcomes for the project were to achieve the following:

- + insights into how older people and family members could **increase their understanding** of the variety of existing transport services and schemes that are available to meet their needs in order to attend hospital or specialist appointments
- + recommendations to SA Health that may be applied to **a communications strategy**, which leads to older people and family members increasing their use of these transport services and schemes

The following report provides findings for all three stages of the project including:

Stage 1: Online Survey understanding behaviours and challenges

Stage 2: Metropolitan and Regional Focus Groups

Stage 3: Stakeholder Engagement

In each stage of the project, the terms 'Transport Services' and 'Transport Schemes' were used with the following definitions:

*A **Transport Service** is a service which transports people aged 50+ to attend a planned hospital or specialist appointment by car or by bus.*

*Examples: local council, Red Cross, community groups, hospitals, Department of Veteran Affairs*

***Transport Schemes** are programs where the government will provide people aged 50+ with some money back or discounts to travel to a planned hospital or specialist appointment (e.g. reimbursement for petrol or Transport Services, or discounted taxi vouchers).*

*Examples: Patient Assistance Transport Scheme (PATS), South Australian Transport Subsidy Scheme (SATSS)*

### 3. Research Design

The research project was conducted in three stages. All were designed to build upon the other to meet the key objectives of the project and to look ahead to how the project recommendations can be implemented effectively by SA Health.

#### 3.1 Stage 1: Online Survey understanding behaviours and challenges

The survey was conducted online with Metropolitan Adelaide and regional South Australian people aged over 50 years old who have organised transport for themselves to attend a hospital or specialist appointment in the past 12 months (referred to as end-users throughout the report); or organised transport for a family member or friend aged over 50 years old to attend a hospital or specialist appointment in the past 12 months (referred to as family member throughout the report).

The objectives of the survey:

- + Insights into current awareness and behaviour
- + Understanding of what facilitates access to existing services
- + Understanding of perceived barriers to existing services

The survey was designed and administered by The Plug-in team and was live for three weeks from Wednesday 14 August until Monday 2 September 2019. 901 people from the Plug-in's community of influencers, COTA SA and Office For Ageing Well's networks responded to the survey, which took 7-10 minutes to complete.

The Plug-in scoped for 150 responses to the online survey, 75 from Metropolitan and 75 from Regional South Australia, a figure which was far exceeded as the survey was shared by the Patient Assistance Transport Scheme (PATS) database on Monday 26th August. The influx of responses via the PATS database resulted in a large number of responses from regional and rural based participants. The sample was weighted to 50/50 Metropolitan and Regional, in-line with the scope of the project and to remove a Regional bias in the results.

Table 1 details the weighted demographic sample profile for the survey.

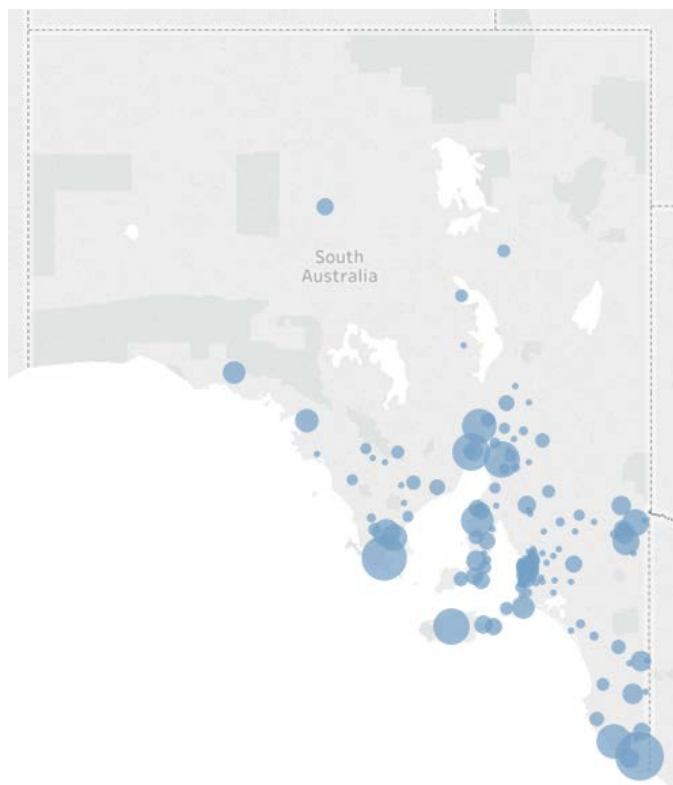
Table 1: Survey sample Profile: Demographics

Gender	%	n	Household Income	%	n
Female	61%	551	Below \$29,999	30%	270
Male	38%	343	\$30,000 to \$49,999	28%	255
X	1%	6	\$50,000 to \$74,999	10%	89
Age	%	n	\$75,000 to \$99,999	6%	57
<50	2%	17	\$100,000+	6%	53
50-54	5%	41	No answer	20%	177
55-59	10%	88	<i>Median income</i>	<i>\$30,000 to \$49,999</i>	
60-64	15%	131			
65-69	21%	190	Location	%	n
70-74	24%	218	Metropolitan	50%	450
75-79	15%	133	Regional	50%	451
80>	9%	84			
<i>Median age</i>	<i>65 - 69 years</i>				

Base: All respondents, n=901



Figure 1: Map of survey respondent postcode locations across South Australia



Base: Unweighted, n=901

**Significant tests:** Within graphs throughout the report, when reporting on survey findings, down red arrows (▼) indicate that the figure is significantly lower whereas up green arrows (▲) show that the figure is significantly higher than the comparable figure. Significant differences were reported at 95% confidence level.

### 3.2 Stage 2: Metropolitan and Regional Focus Groups

Six focus groups were held in Metropolitan Adelaide and Regional South Australia throughout October 2019 in the following locations: City of Onkaparinga (Christies Downs), West Lakes, City of Playford (Playford), Victor Harbor, Naracoorte and Port Pirie.

The objectives of the focus groups:

- + Deeper exploration of challenges identified in the online survey
- + Clarity and effectiveness of key messages and value propositions
- + Identification of strategies/solutions to increase awareness and service usage

Focus group participants were diverse: a mix of genders, a range of mobility levels, aged between 55-80+ years old, on varying incomes, and differing access to transport choices and family support.

*Table 2: Focus Group sample Profile: Demographics*

Location	Date	Participants	Gender	Age range
City of Onkaparinga: Christies Downs	9 October 2019	8	63% female 38% male	60 – 79 years
City of Charles Sturt: West Lakes	10 October 2019	8	75% female 25% male	55 – 80+ years
Victor Harbor	11 October 2019	5	100% female 0% male	55 – 80+ years
Naracoorte	18 October 2019	7	86% female 14% male	55 – 79 years
City of Playford: Playford	23 October 2019	10	50% female 50% male	65 – 79 years
Port Pirie	25 October 2019	7	57% female 43% male	55 – 74 years
		<b>45</b>	<b>69% female</b> <b>31% male</b>	<b>55 – 80+ years</b>

The focus groups used a co-design approach to capture the experiences and ideas of people aged 50+ years old who have organised transport for themselves or a family member or friend aged 50+ to attend a hospital or specialist appointment. Participants were recruited for the focus groups after their involvement in Stage 1 of the project.

### 3.3 Stage 3: Stakeholder Engagement

The final stage of the project was to gather feedback and advice on the research findings from key stakeholders who could action the findings both in the community sector and in state government.

The objectives of the stakeholder engagement:

- + Workshop possible **solutions** with stakeholders
- + Actions required to **implement solutions** to increase awareness and usage rates

The project initially scoped for a Community Forum to take place in December in the Adelaide CBD, however due to low interest and the exclusion of people in regional areas, the forum was moved online. A 'Key Findings Film' was produced by The Plug-in and sent out to stakeholders along with an online survey to gather feedback on the effective implementation of the findings. The film and survey were distributed by the Office for Ageing Well to 60 stakeholders in February 2020, with four (4) responses received.

The responses to the online forum were from the following organisations and locations:

Organisation	Location
Barossa & Light Community Transport	Nuriootpa
Red Cross	Mount Gambier/Berri
Yorke Peninsula Community Transport	Minlaton
SA Health	Port Pirie

The following report details the responses of the four stakeholders and suggests direction for implementation of the project recommendations for SA Health (see section 6).

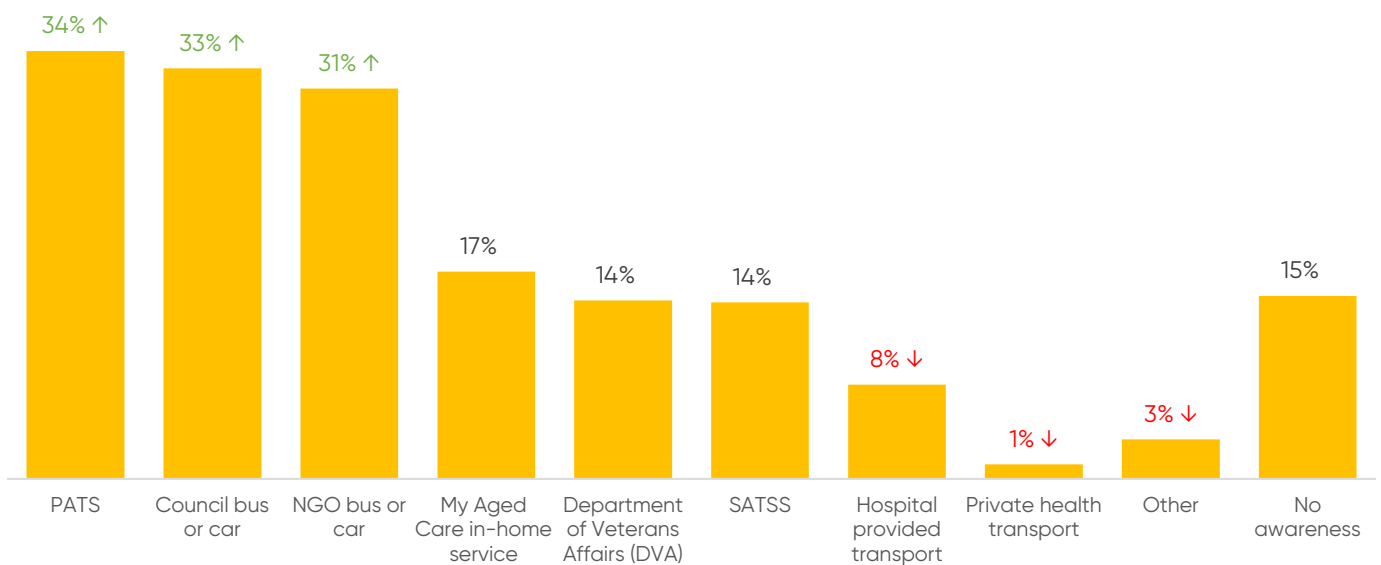
## 4. What we discovered

### 4.1 Awareness of Transport Services and Schemes

A key outcome of the project was to explore the current awareness of existing transport services and schemes available to assist older people to travel to hospital appointments. Findings from the online survey indicated that overall, awareness of at least one Transport Service or Scheme is high and the three services/schemes of PATS, Council community bus or car and NGO bus or car are each known by one third of respondents. 15% of respondents stated they have not heard of any of the transport services or scheme options available (Figure 2).

PATS was the most recognisable of the services with 34% of respondents having heard of it. This awareness should be taken lightly however, given the high number of PATS recipients responding to the survey. It is therefore assumed that awareness would be higher for this option than other existing services as their responses were targeted.

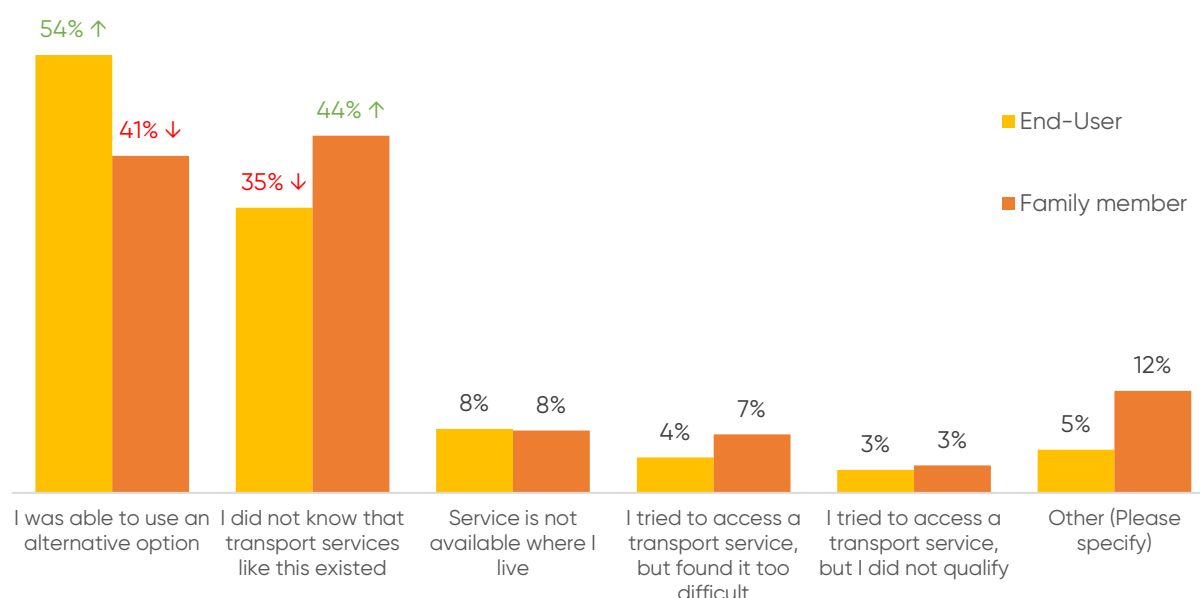
Figure 2: Awareness of the range of existing transport services and schemes



Base: All respondents n=901

The results from the online survey indicate that although respondents may have heard of a service, awareness is a major barrier to use (Figure 3). For those End-Users who did *not* use the service, almost half (54%) of this cohort stated it was because they were able to use an alternative option and one third (35%) stated that they did not know this type of service existed. For Family Members organising the service for someone, a significant difference shows that more respondents (44%) were not aware that Transport Services like this existed. This was their main barrier for not using the service, above being able to find an alternative option.

Figure 3: Barriers to using a Transport Service: End-Users and Family Members



Base: End-User who did not access a Transport Service n=766; Family member who did not access a Transport Service n=299

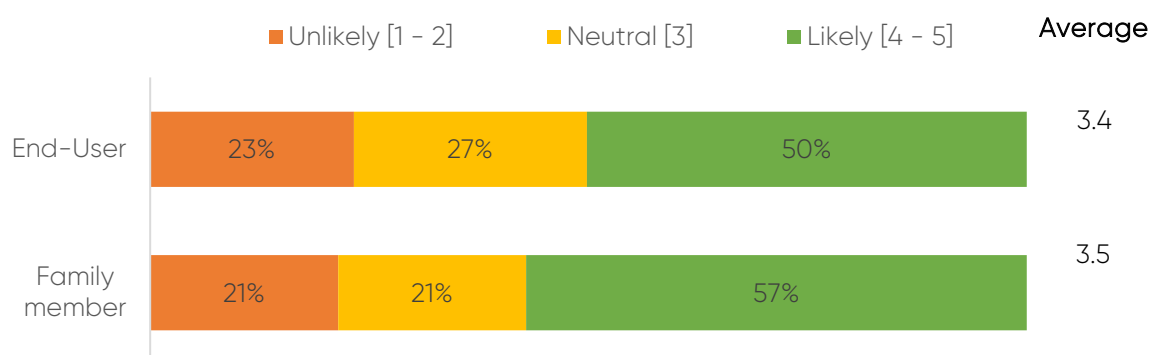
Likewise, Focus Groups participants indicated they felt a key barrier to the use of transport services (council, NGO, hospital provided car or bus) was awareness of the *details* of the services available. Whilst most respondents had heard of a transport service, they had a lack of *understanding* of key elements to the services including eligibility, timing and where to find out more information (see section 4.3).

*“So many people aren’t aware of what’s available out there... people need to be more resourceful or know where to go”*

## 4.2 Increasing usage of services and schemes

Although awareness is a barrier to use of transport services to attend hospital and specialist appointments, there is a high *interest* in utilising services to attend appointments. In the online survey, both end-users and family members report a high likelihood of organising a Transport Service in the future if it was available. For End-Users, 23% stated they were unlikely to use a Transport Service in the future and 22% of Family Members were also unlikely to use such a service (Figure 4). The opportunity to effectively communicate services to increase both awareness and usage is therefore promising based on respondents reported likelihood.

Figure 4: Likelihood of using an existing Transport Service if it was available: End User and Family member



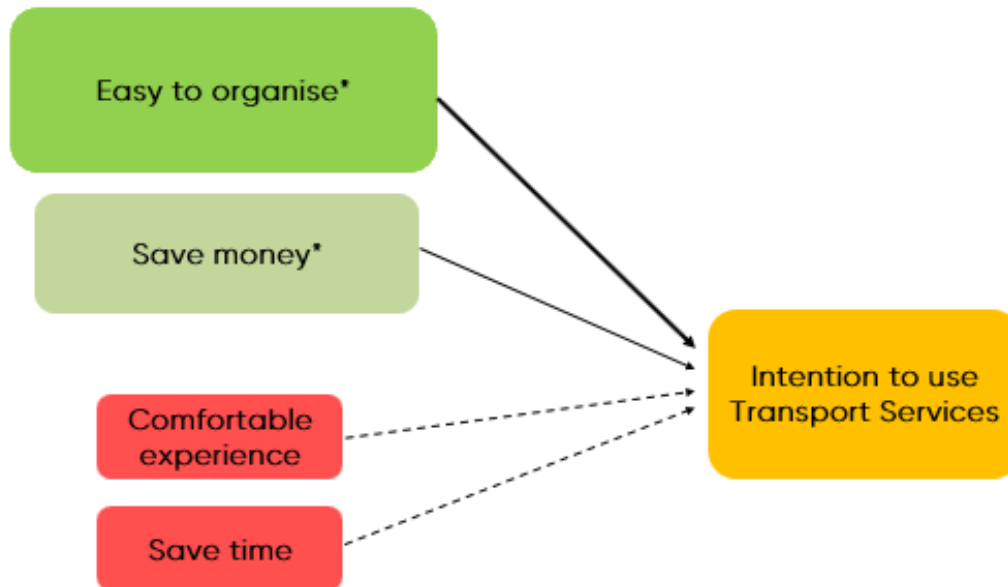
Base: End-User n= 803; Family Member n= 322

Survey results show that when considering factors that would influence utilising a transport service (aside from knowing more about the service) there are certain factors that would encourage them to use the service (Figure 5):

- + Intention to use transport services is **driven** by the Ease of organising a transport service. In other words, this factor has a significant and strong impact on people's likelihood of using a Transport Service.
- + Similarly, intention to use a transport services is **driven** by the prospect that using the service to attend an appointment would be an option that could save them money. This is a significant factor, but its impact is smaller than easy to organise.
- + Intention to use a Transport Services is **not** related to comfort or time saved.
- + An effective communication strategy should discuss that Transport Services are easy to organise and advertise the cost saving of using a Transport Services as

opposed to another option. Communicating these factors have the potential to improve intentions to use these services and should be a key focus of the strategy.

Figure 5: Intention drivers for using a Transport Service in the future



Base: All respondents n=901

Q: I would organise a transport service to help me get to my hospital or specialist appointment if it...

### 4.3 Value proposition of transport services and schemes

An anticipated outcome of the Stage 2 focus groups was to help shape the principles that would make up the value proposition of transport services and schemes including:

1. Perceptions of the potential customer of transport services and schemes
2. The value that transport services and schemes can offer to users
3. The barriers to usage of transport services or schemes

The following section details these three factors as discussed in the focus groups including the key messages recommended for communication of services.

#### 1. Potential customer of transport services and schemes

Focus Group participants shared their thoughts on who they thought the transport services were designed to be utilised by. It is important to understand who people think the service is for as this indicates the type of messaging that can be included in a communications strategy to encourage usage.

The perceptions of the potential customer of transport services from focus group participants can be categorised into four central factors:

- + **Age/health:** There was an initial perception that transport services are mainly for the frail and very elderly, rather than 'younger older people' (50-70 years old). However, when explored these initial assumptions were broken down and participants accepted that the services were based on the person's health status:

*"you need to help people realise that it's not just if you're 90 plus, or not just if you are in a wheelchair... the younger generation need help as well"*

- + **Disability:** People with a disability were considered important users of this service, however as detailed below, there were concerns about comfort and suitability of vehicles.
- + **Family support:** People who don't have anyone else to rely on to take them to appointments. This was commonly referred to as people who live alone, but discussion also included those people who have family but couldn't or preferred not to rely on them.



- + **Emotional considerations:** People who find driving in the city to be a stressful experience, or for regional participants, driving themselves on a long journey to attend an appointment far from their home is for some considered to be exhausting and no longer viable due to their mobility.

Some participants who currently have the ability to drive saw themselves as **potential customers** in the future. They were reassured that there is a transport service available to help them when the time comes. These participants recognised that it was important for them to plan for their future and educate themselves as to the different services available to help them:

*"I like to have the means that I have available at the moment, but I would like to think that [transport services] were there if I can't use my own... like if I become incapable of driving...."*

Although there was discussion in all groups that transport services should be determined by *need*, there was a different discussion for transport schemes (notably PATS) which were considered a **scheme for all people living regionally**:

- + For PATS users, there is a sense of entitlement like receiving PATS is something that is owed to them:

*"PATS is different to [transport services], PATS is a service that is for regional people who miss out on most things... it's almost like an entitlement. I live in the country, I'm a full-time carer for my husband and he needs to go for these appointments, and I'll drive him down 'cause we need the flexibility, but I can claim that back"*

- + Others express a level of acceptance that driving to medical appointments in Adelaide is part of the price of living in the country and the costs they incur from that is very much the way it is:

*"It is what it is. If you have to pay it then you have to pay it. You get money back from PATS now and again but that's a bonus"*

## 2. The value that transport services and schemes can offer

There was agreement amongst focus group participants that the main benefit to those people who most needed the service is that they were able to fulfil their need to attend medical appointments at the most basic level. The services were overall framed in a way as offering **support** to those in need.

Participants discussed the following three themes focussed on transport services offering support:

- + **Emotional support:** Calling on busy family to take them to appointments was a difficult decision for some participants to make and left them with feelings of guilt and isolation. Transport services were considered a positive and less emotionally strained alternative for these participants.

*"Other family, they've all got their own kids and it's difficult to ask people- 'oh, can you come and do this for me' when maybe they've got three little ones who have a temperature and need to go to emergency, so I'd rather be self-sufficient"*

- + **Practical support:** A transport service provided by a trusted organisation provides a sense of peace of mind for family members. It assures them their vulnerable family members will arrive safe and cared for at their appointment.

*"people like my mum, with dementia and early Alzheimer's. I would feel much safer her being accompanied"*

- + **Financial support:** Taxis are unaffordable for most participants and rarely considered a viable option unless taking advantage of the SATSS half price taxi vouchers or DVA assistance. For participants living regionally who do drive, the cost of petrol and parking are not viable options for them, therefore a transport service offered at an affordable price is crucial.

*"When you are on a lower income some extra things like that [cost of transport] can tip you over the edge sometimes"*

### 3. Barriers to use of transport services and schemes

Many of the perceived barriers to use of transport services specifically were based on a lack of understanding about the service offered, rather than users' actual experience with the service.

- + **Assumptions about not being eligible:** Due to the lack of awareness of services, some participants were unsure about who the service was designed for and if their situation made them eligible. They were more likely to assume that they were not eligible, and rather the service was for other people, who are older or frailer than they are.

*"For me, I just wouldn't have thought I was eligible. But I mean I am. I am 71 and I don't drive... But I'd feel quite embarrassed- 'what do you want this transport for?!' I would feel as if I was abusing the system."*

- + **Pride and loss of independence- "I don't like asking for help...":** There is a subset of participants who had a resistance to asking for help and accepting what they viewed as a charity service. Some felt that asking for help for something as basic as transport was a first step towards a loss of independence, something that was very much on their minds.

*"Some people might not do [transport services] out of pride, like some people won't put their hand up for a pension 'cause they are too proud"*

- + **Concerns over service catering for different levels of mobility/health:** There were concerns raised as to if the service would be able to accommodate someone with mobility issues such as the use of a walking frame or a wheelchair or if the service would be a comfortable experience for people who are quite ill and need to stop often if they are feeling unwell.
- + **Concerns about reliability:** Non-users were concerned about reliability, for example if the driver of the van or car was late or did not turn up, it would make them miss their appointment. This was **not** a reported problem for participants using the service. Therefore, this barrier is a *perceived* rather than an *actual* fear for non-users.
- + **Affordability of the service:** There was a wide acceptance that there should be a cost associated with the service, participants did not assume that this was a free service. Some participants were however concerned that a high cost of the

service could further disadvantage those people who already cannot use public transport for reasons such as mobility issues or no service near them.

- + **Availability and timing of the service:** For some participants, particularly those in Port Pirie, the timing of the service was a barrier as the transport service ran weekly, thereby excluding most people who did not have an appointment on that day. Additionally, regional participants were concerned that there would not be enough volunteer drivers to meet the demands of the service, therefore they would avoid utilising the service even if they were in need.

## 4.4 Communication channel to increase awareness of transport services

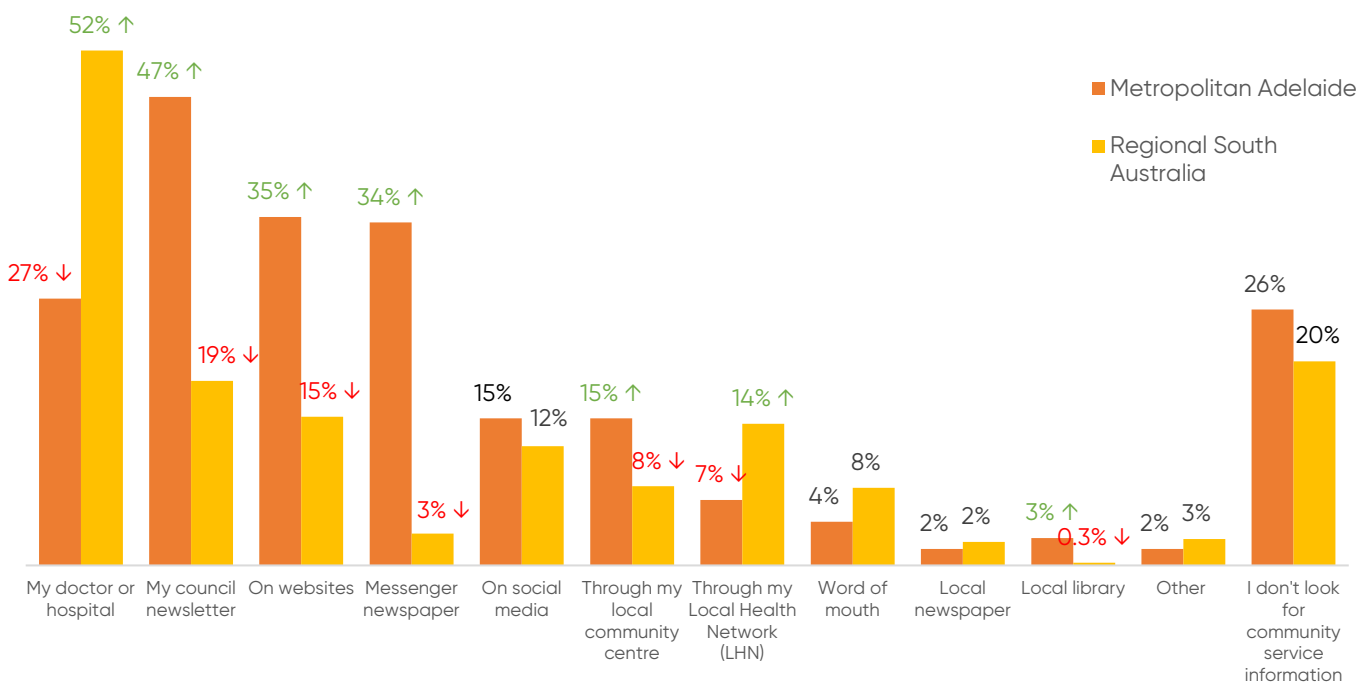
*"It's like everything, you don't know until you ask but we don't know what to ask, 'cause we don't know what's out there!"*

How and where the information about transport services and schemes is delivered to the community is key. For the communications strategy to be successful, information will need to be provided via channels that will reach both metropolitan and regional older people, including the most vulnerable.

Survey respondents were asked where they currently seek out general community service information, results are shown for metropolitan and regional respondents' side-by-side to show differences (see Figure 6):

- + Regional respondents (52%) are much more likely to go to their doctor or hospital for information, above Metropolitan respondents (27%). Whereas, almost half of Metropolitan respondents will seek out info in their council newsletter (47%).
- + Although there is a willingness to look online (35% Metropolitan; 15% Regional), as the survey was administered online there may be an online bias with respondents.
- + There is a sub-section of respondents who are not looking for community services information at all 26% for metropolitan residents and 20% for regional residents.

Figure 6: Communication channel for community services information, Metropolitan and Regional



Base: Metropolitan n=450, Regional n=451

In focus groups, participants were asked to reflect on the best channel to communicate transport services and schemes effectively for older people specifically. Including considerations for marketing strategies, slogans and communication channels.

Participants agreed that 'you don't know, what you don't know'. Therefore, information needs to reach people who are not looking for it, as well as those that are actively seeking information about transport assistance. Due to the varying levels of social isolation, mobility and internet usage of members of the older community, a communication strategy should target the message via a range of channels.

Three solutions were brainstormed by both the metropolitan and regional groups, complimenting the survey findings:

### **1. Information available in medical and health related locations**

- + In line with survey findings, both regional and metropolitan focus group participants felt medical locations were the logical and trustworthy place to find out information about transport assistance:

*"Most of us have to go to the doctor every two months or so to get scripts anyway, so you know it's a place that you regularly visit... they are a source of information that is generally trusted"*

- + There was an expectation that medical professionals should provide this information (without being asked) as a duty of care, especially in regional locations where longer travel is often required for specialist or hospital appointments.
- + Participants were interested in information at doctors' surgeries in the form of a person directly telling them what is available, brochures with information, information on tv screens or posters.

*"Brochure needs to be readable and eye catching- 'oh this is about transport!'. Simple language and not too many words... just the facts"*

### **2. Information received via postal mail to people's homes**

- + In line with survey findings, participants suggested information could be sent by post through the council as most participants are receiving and engaging with information from their councils (newsletter, rates notice, rubbish pickup).

- + Participants felt this channel could reach people who were not actively looking for information on transport services but who could very much benefit such as those that are socially isolated.
- + Advertisement of the services and schemes available in publications that are targeted to older people or are locally focussed:
  - o Council newsletter
  - o ONECOTA magazine
  - o Seniors magazine

### 3. Online

- + Whilst internet use was reasonably high across the groups, participants were quick to assert this was not the case for all older people, especially disadvantaged communities. Census data tells us that people aged 65 years and over are the lowest proportion of internet users (55%) (Census 2016, ABS).
- + Whilst participants felt that online was an essential channel for communication, online should not be considered the only step necessary to getting the information out to those who need it most:

*"It's an oxymoron to say this community service is available to you online...it should be online, but it shouldn't be the number one thing- 'oh let's put it online and then the problem's solved!'. We shouldn't rely on it"*

- + Groups were very clear that they want a dedicated website rather than a link embedded in a website. The government websites were described as very user un-friendly:

*"One of the problems with the big organisations like SA Health is you go to their website and there is so much information it's quite mind boggling... it has to be a dedicated website"*

- + A dedicated website is seen as a straightforward and easy way to be directed to a local service that is relevant to the individual's needs.

## 4.5 Improvement of existing transport services and schemes

Whilst most users of existing transport services and schemes were very appreciative and supportive of the services available to them, some users did take the opportunity within focus groups to discuss their frustrations. Although improving current services was not within scope for this project, it would be remiss not to include the feedback to improve the current services.

### Frustrations with current services:

- + **Timing of services not lining up with appointments:** Participants who had appointments first thing in the morning were unable to access transport services which only operated from 9am-4pm
- + **The type of appointment:** As hospital policy, some appointments require the patient to be accompanied home after the procedure and someone to be there with them e.g. if they have been under general anaesthetic. This was a major barrier for those participants living alone and transport services could not solve this problem either.
- + **Port Pirie Services:** There was agreement between Port Pirie participants that the different transport services and especially the PATS scheme is widely known about throughout the community. Therefore, awareness was not 'the problem', rather it was the limited and under-resourced transport services available to Port Pirie and surrounds. The service (Upper North Medical Bus) operates on one day of the week, and participants agreed they would be open to using the service if it ran more regularly.
- + **PATS scheme:** There was widespread agreement from Port Pirie and Naracoorte groups that although the PATS scheme is helpful, they feel there is room for improvement including:
  - o Inconsistencies of when claim is approved
  - o Lack of compassion for accessing a specialist in a further location based on their expertise and an existing relationship
  - o Difficulty uploading PATS claim documents online

*"It's just ridiculous that you go through the same process [for PATS] and you have to fight every time. When it's the same doctor, same specialist- and it's like 'oh, you're just making this up, you can go somewhere else'"*



## 5. Recommendations: Communications Strategy

The following section details the recommendations for a communications strategy to improve the awareness and usage of transport services and schemes for older people to attend hospital and specialist appointments.

The results of the research provide recommendations for a communications strategy based on two elements:

1. Messaging of services and schemes
2. Effective channel of communication to reach older people living in metropolitan and regional locations

### 5.1 Messaging

The results of the research tell us that an *understanding* of transport services and schemes available in South Australia is low, however an interest in the services is high. Therefore, a communications strategy to increase awareness has the potential to increase usage of the services and schemes.

A communication strategy would benefit from using the following recommendations as a guide to ensure the value of the services is highlighted, the barriers are addressed, and the right audience is reached:

- + Make it clear in messaging who is **eligible** to use the service. This will help to alleviate perceptions that the service is only for people who are older and frail.

The main eligibility criteria to be addressed include:

- o Age
  - o Health status
  - o Disability
  - o Availability (or not) of family support
  - o Emotional considerations e.g. utilise a service to avoid a long stressful drive
- + The **barriers** to using a transport service should be addressed in communications which are aimed at increasing usage. Many barriers were based on assumptions, due to a lack of understanding about the services offered, therefore any communication should clearly state the following:
    - o Eligibility (as above)

- Assurance that different mobilities are catered for and carers are able to attend alongside patients
  - Information on who delivers the service e.g. reliable volunteers
  - The cost of the service
  - The timing of service
- + The value of transport services was made very clear across the groups- the services are there to offer support for those who need it. Framing the services as a **support** (emotional, practical and financial) has the potential to cut through the feelings of guilt or impeding loss of independence that some participants felt.

## 5.2 Communications channel

A communications approach focussed on increasing awareness and usage of transport services and schemes would benefit from advertising the services via the following channels:

- + **Information available in medical and health related locations:**
  - This includes verbal or printed information provided directly from GPs or hospital staff and brochures and posters displayed at clinics and pharmacies
  - Participants felt these were the logical, reliable and trustworthy places they would expect to find information about services related to hospital and specialist appointments
- + **Information received via postal mail to people's home:**
  - Including from local councils and seniors' magazines
  - Communication via this channel will reach people who were not actively looking for information on transport services but who could very much benefit, such as those that are socially isolated
- + **Online: A dedicated website**
  - Whilst there was agreement that the information needed to be online, this was only suggested as an *additional* channel to offline information being

widely available as well to cater for the large number of people aged over 50 years old who do not use the internet regularly

- o There was strong agreement that a dedicated website including a range of information about the different services should be available. This was in stark preference to the information being listed on an existing government website due to the difficulty of navigation

## 6. Feedback on communications strategy

Office for Ageing Well recognises that the uptake of recommendations for the communications strategy would not be implemented by their office, rather SA Health, community transport providers and Local Health Networks (LHNs) also needed to understand the recommendations for effective implementation.

It was therefore pertinent to gather feedback from stakeholders to understand if the findings from the report were both viable to implement and complimentary to the current communications approach undertaken by providers.

The responses to the online forum seeking feedback were from four stakeholder organisations outside of Metropolitan Adelaide including: Barossa & Light Community Transport; Mount Gambier/Berri Red Cross; Yorke Peninsula Community Transport; and, SA Health in Port Pirie.

**From the perspective of these stakeholders, improving the awareness and usage of transport services and schemes for older people should involve:**

- + Co-ordination of a central Transport assistance resource service for the public to access (both online and a phone service).
- + Create a directory for transport providers so detailed information about transport assistance is easily accessible for different regions to promote (updated regularly).
- + Produce a central brochure detailing the transport services available in the state including eligibility and barriers to use as highlighted in the findings (see section 5.1).
- + A clear approach from SA Health as to what 'transport' is and what services and schemes are included when discussing transport assistance.
- + SA Health to include transport as a health issue, to highlight the increased need for regional patients to travel long distances as specialists become more metropolitan focussed.
- + Promotion of the transport services and schemes via the channels highlighted by the participants (see section 5.2). Namely in medical locations such as GP's clinic and hospitals at the time of making the appointment.

The above recommendations very much call for an approach which complements the findings of the project as co-designed by the potential and actual users of the transport services and schemes. It is evident that a co-ordinated and centralised approach is what stakeholders view to be the way forward.

A limitation of gathering feedback from stakeholders in this stage was that only four organisations responded to the call out and all of these were regionally based, and feedback was not provided by LHNs. There is therefore a lack of feedback from metropolitan based stakeholders including councils, community transport providers, the Red Cross and government departments.

## 7. Future Research

The discussions that took place across the state for this project were rich and varied, and although the focus was on the awareness of transport services and schemes, discussion naturally deviated to a range of different topics affecting older South Australians, including:

- + Improve the usability, reliability and consistency of the PATS scheme, from an end-user perspective
- + The concern regarding the uptake of volunteer services in regional locations as the current volunteers age and will have to retire. Who will the new volunteers be?
- + Who will care for people who live alone and cannot call on family and friends for assistance if they have a procedure in hospital which requires them to have transport and 24-hour care in their home afterwards?
- + The extensive waiting periods for people living regionally to gain access to specialist health services in a location near them

The Plug-in has greatly valued the opportunity to work on this project in collaboration with Office for Ageing Well. Thank you for the opportunity to support you in this initiative. We would welcome the opportunity to build on the insights generated through this project, to improve the lived experience of older South Australians.



Powered by COTA SA

16 Hutt Street

Adelaide SA 5000

08 8224 5582

[connect@theplugin.com.au](mailto:connect@theplugin.com.au)

[theplugin.com.au](http://theplugin.com.au)

