Patient transport – Journey to better health?

Date: Spring 2026



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Disclaimer

Please note: This report is based upon feedback provided to Healthwatch North East Lincolnshire, North Lincolnshire, Healthwatch Hull and Healthwatch East Riding from service users, members of the public and professionals. The findings are based upon individuals' perceptions, which are not verified for factual accuracy.

Quotes in the report are written as received, to ensure opinions are kept in context, as such there may be grammatical errors within quotes.

1 Introduction

1.1 About Us

We are the independent champion for people who use health and social care services. We exist to make sure that people are at the heart of care. We listen to what people like about services and what could be improved. We share their views with those with the power to make change happen. We also help people find the information they need about services in their area.

We have the power to make sure that people's voices are heard by the government and those running services. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them. Our sole purpose is to help make care better for people.

In summary Healthwatch is here to:

- Help people find out about local care.
- Listen to what people think of services.
- Help improve the quality of services by letting those running services and the government know what people want from care.
- Encourage people running services to involve people in changes to care.

2.Background

What is Non-Emergency Patient Transport – (NEPTS)

Non-emergency Patient Transport (NEPTS) provides pre-planned and on-day (unplanned) transport to support eligible patients who have been referred for NHS non-primary care services, or who are being discharged following NHS-funded treatment. NEPTS caters for those patients who are either too ill to get to hospital without assistance or for whom travelling may cause their condition to deteriorate. The service provides for a wide range of patient mobilities, requiring a variety of vehicle types and levels of care consistent with the patient's medical needs - including specialist moving and handling or support during transport such as provision of oxygen.

Who is responsible for patient transport rules.

NHS England sets the eligibility criteria

NHS Humber and North Yorkshire Integrated Care Board funds the service locally and sets what must be provided

Yorkshire Ambulance Service run the NEPTS service across Kingston upon Hull, East Riding of Yorkshire, and North Lincolnshire and **HTG** formally Thames Ambulance Service run NEPTs across North East Lincolnshire under contract to the ICB.

NHS Humber and North Yorkshire ICB awarded a contract to the existing provider Yorkshire Ambulance Service following direct award process C of The Health Care Services (Provider Selection Regime) Regulations 2023.
Stating the existing provider is satisfying the original contract and will likely satisfy the proposed contract to a sufficient standard.
Approximate lifetime value of the contract is £82,015,030 Contract term - 1 April 2025 - 31 March 2030.

2.1 Why this subject?

The four Healthwatch teams across the Humber region have received feedback from the public about the difficulties they are experiencing accessing non-emergency patient transport. Further discussion with The Humber and Wolds voluntary car scheme and other local community transport providers also highlighted a number of patients had contacted them with difficulties accessing non-emergency patient transport across The Humber area.

In May 2022 the eligibility criteria for accessing non-emergency patient transport was revised. Please see link to the criteria below.

B1244-nepts-eligibility-criteria.pdf

From Tuesday 1 April 2025, The Humber and Yorkshire ICB adopted national guidance and YAS implemented the new tightened criteria from May 2025.

Patients have since been advised if they can make their own way to and from healthcare settings using their own transport, family members, public or community transport or taxi services they should do so.

Some patients who were previously eligible may now no longer qualify for transport.

The changes align with NHS England's Urgent and Emergency Care Plan 2025/2026, which aims to reduce pressure on ambulances and hospitals by ensuring transport is reserved for those with genuine medical need.

Alongside the criteria change the Humber Acute Services review took place HASR-Summary-Case-for-Change_Final-for-Publication.pdf This means that patients are now travelling further to hospitals across The Humber region for their appointments and treatments.

The aim of the project was to gather the views of people that use or previously used NEPTs and community transport providers to see if the criteria changes have impacted them, what is working well and where things could be improved.

2.2. Research

We looked at what provision for non emergency transport is available in each area across the Humber region.

We contacted the below community organisations and asked them if they would like to provide a statement or any information regarding the impact the changes have had on their service. We received two responses which are highlighted on page 25/26.

If you live in North East Lincolnshire

Non emergency patient transport (NEPTS) Is provided by East Midlands Ambulance Service on 0300 300 3434 between 8am and 8pm. From 4 January 2027 these opening times will change to 6am-6pm.

The staff will ask the patient a series of questions to ensure you're eligible. Please see link to the website

Eligibility criteria for Non-Emergency Patient Transport is set nationally, and the criteria can be seen here: NEPTS Eligibility Criteria

If you are told you are not eligible and you believe that you are, please ask the call handler to submit an appeal on your behalf.

Community Transport

Dial a ride is a community run service which provides accessible transport for people who find it difficult to use public transport due to illness or disability. Passengers can book any number of journeys with one telephone call 01472 269199 and they can book for others making the same journey. They should book preferably 3 to 4 days before they want to travel. The service is door to door for the passengers and a companion. The booking clerk will work out the route to be as efficient as possible, collecting people in the same area with similar travel requests. The service does not travel outside the Lincolnshire area.

Louth Voluntary Car Scheme Louth and District voluntary car scheme takes clients to any medical appointments, doctors, physio, opticians, chiropodists, visiting hospitals and care homes. The drivers are all volunteers who give their time but are reimbursed towards the cost of the journey at 50p per mile.

Phone and ride is an on -demand bus service with no fixed route or timetable. This service covers North East Lincolnshire.

If you live in East Riding of Yorkshire

Non emergency patient transport (NEPTS) are provided by **Yorkshire Ambulance Service** (YAS) on 0330 678 4000 between 8am and 6pm (excluding bank holidays).

When this is not possible, YAS will consider the needs of all patients for example their physical health, visual impairment, mental health or learning disability for their eligibility for PTS. Staff in their reservations team will ask a set of questions, these questions will also be used when making online bookings through Quick Book. This is to ensure the patient qualifies for PTS, and to assess their transport needs.

Community Transport

Medibus operate a service to Scunthorpe, Goole and Hull hospitals for anyone living in the East Riding of Yorkshire. Find out more about the service or call 03456 445959 or email passengerbookings@eastriding.gov.uk

Beverley Community Lift Bridlington Community lift . Local charity that provides transport for elderly or isolated individuals in and around the East Riding of Yorkshire and Bridlington areas.

HART (Holderness Area Rural Transport) – The charity provides accessible transport solutions to those without private transport and that are unable to use public transport. 01964 536684 or hart@medibus.org.uk

If you live in Hull

Non emergency patient transport (NEPTS) by **Yorkshire Ambulance Service** (YAS) on 0330 678 4000 between 8am and 6pm (excluding bank holidays).

Community transport

East Hull Community Transport can be contacted on 01482 719600 provide inclusive accessible transport solutions.

If you live in North Lincolnshire

Non emergency patient transport (NEPTS) by **Yorkshire Ambulance Service** (YAS) on 0330 678 4000 between 8am and 6pm (excluding bank holidays).

Community transport

The Humber and Wolds Rural Community voluntary car service

Volunteers across North Lincolnshire use their own cars to provide transport for journeys such as health-related appointments. They can be local or long distance. The customer pays the driver a mileage rate, currently 45p per mile from the driver's residence and return. Where possible, they try to get a driver as close as possible to the passenger's home. A minimum of 48 hours notice is required to arrange a journey. They can be contacted on 01652 637700.

Connect 2 North Lincs bus service

There is an on demand bus service operating for people travelling in North Lincolnshire between the hours of 7am -7pm weekdays and 8am -6pm on a weekend. Passengers book and pay directly from their smartphone through the connect 2 North Lincs app or by calling 01724 297777. Prices are from £2.50 for a single trip and can be booked up to 7 days in advance. There are discounted rates for under 19s, and passengers can also pay on the bus.

Our research highlighted that most community transport services work Monday-Friday between the hours of 9-4. Several of the services work within a commissioned area and do not travel across or out of authority areas, meaning they cannot support journeys across the Humber Health partnership footprint. Patients often require early morning transport for appointments and surgery and community transport does not always support these out of hours appointments.

2.3.Methodology

Healthwatch produced a survey that was available online via the Healthwatch websites, via a scannable QR code and a printed paper version. Healthwatch Freepost envelopes were also provided to participants so that they could post back their completed surveys; this ensured people could remain anonymous if they wished to do so. Wherever possible, surveys were also handed out during regular engagement sessions.

The survey was live on our website and was also regularly shared across our social media platforms.
In person engagement took place with the following organisations across the Humber region. This gave us opportunity to have face to face conversation with people about their experiences and to help people have their say if they are unable to complete a digital or paper survey.

Discharge Lounge DPoW	Care Homes NEL	The Ironstone centre - Scunthorpe
Assisted Living Centre Grimsby	Sir John Mason House	Age UK Engagements at - Anlaby Community Library, Barrington Avenue, Garden Village, and Streetlife Centre.
DPoW charity stand	Social Prescribing Day - Princes Quay	Experts by experience meeting NL
The Rock Foundation - Grimsby	Scunthorpe Hospital Outpatients and Discharge Lounge	Disabled Club Winterton

We received a total of **59** survey responses from our online survey. We also received many responses from attending various support groups and venues across The Humber region.

Healthwatch met with The Humber and Wolds Voluntary Car Scheme to discuss their concerns. They have received **over 100** pieces of feedback that they have collected from patients across the Humber.

We have examined the results, and the key findings are provided in this report. Responses from the surveys have been analysed and highlighted over the following pages.

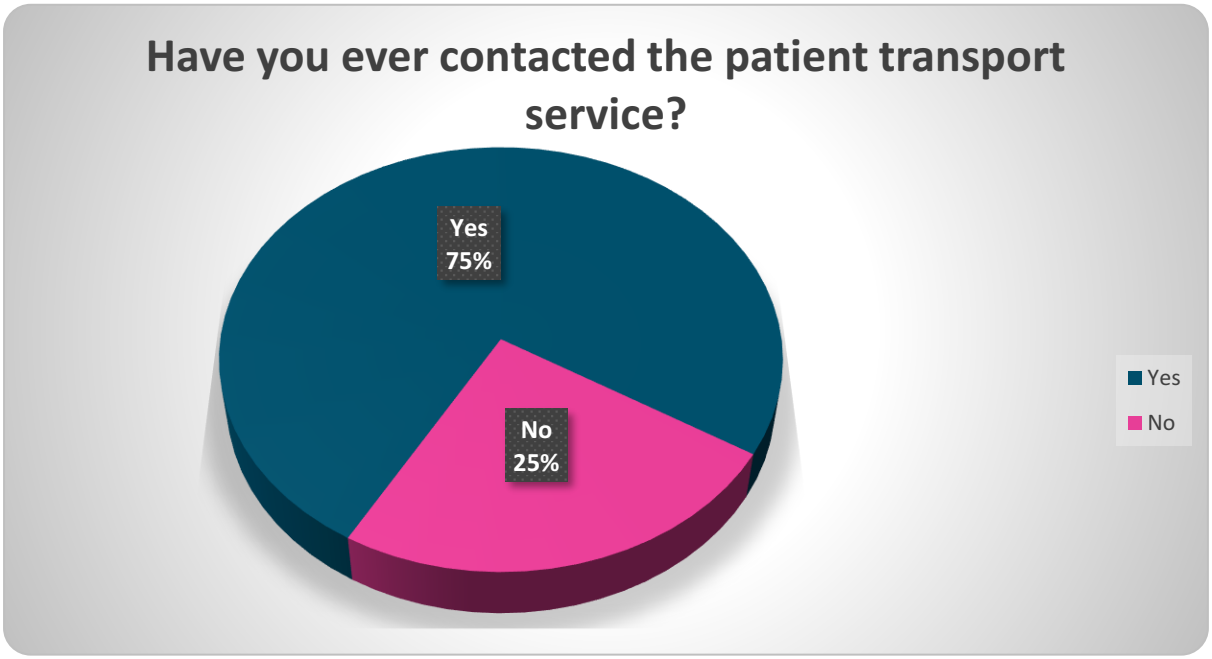
3. Key Findings:

The Initial diagnostics:

Responses received via the in person and online survey:

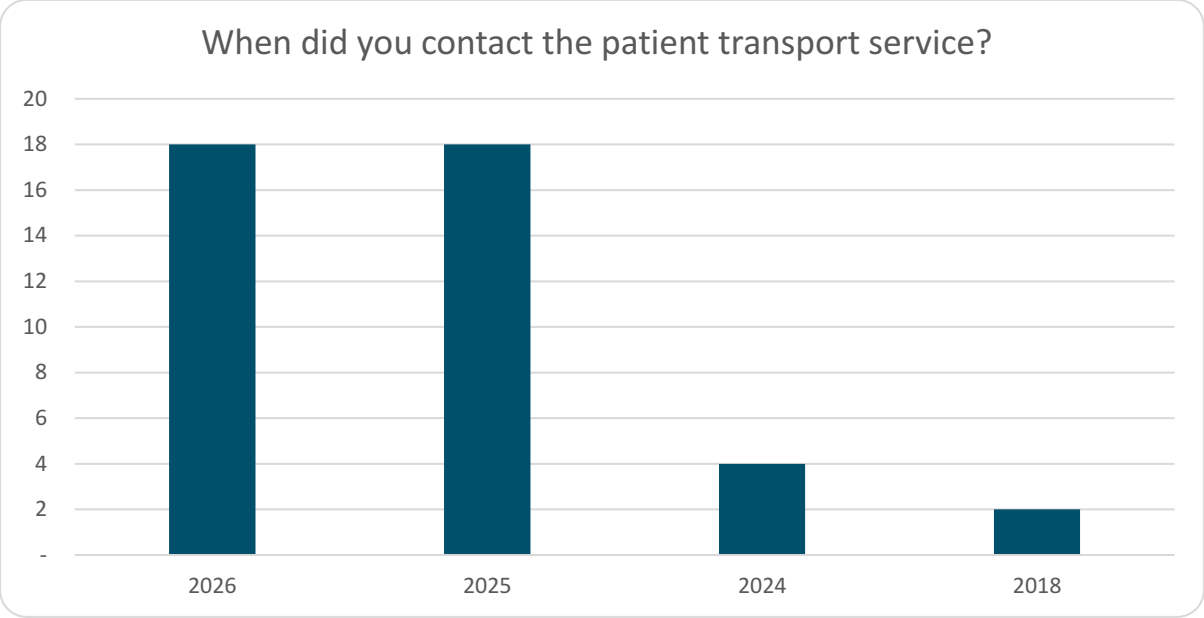
We asked

Question 1. Have you ever contacted the patient transport service?



Question 2. If so when was this, if unsure please provide an approximate date.

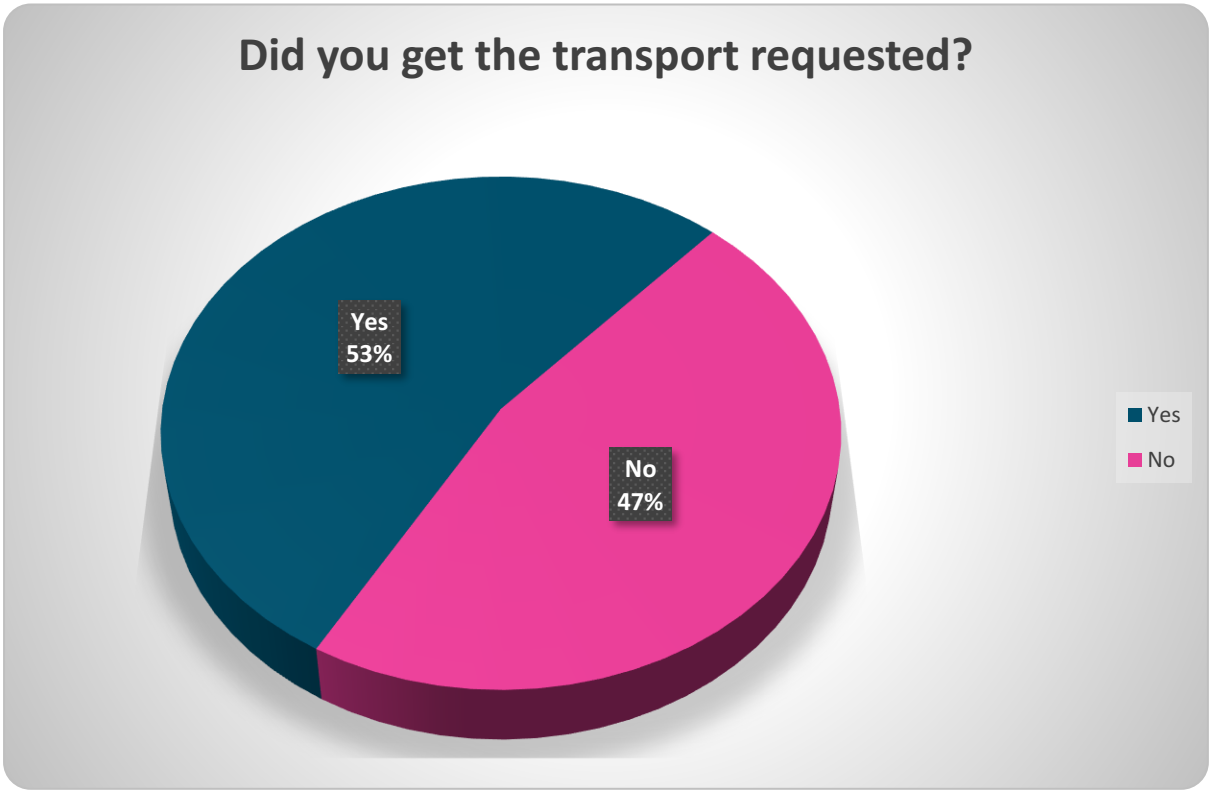
Most people that completed the survey had had recent experience of using hospital transport within the last two years.



Question 3

Did you get the transport requested?

47% of respondents stated that they did not receive the transport requested. Most of the reasons given, by the provider, were around eligibility.



Question 4

If you didn't receive transport what reason was given?

- I was asked if I can physically walk, when I said I could they said I should get someone else to take me
- I was told I was no longer allowed transport. Even though I've had it for years
- Didn't fit the criteria, even though the person in question has ongoing cancer treatment and has dementia.
- Not eligible. Said that I had used a friend and had managed to get a taxi before and could do that again.
- I am having Chemotherapy at Castle Hill which I do get NHS transport for but I do not get transport for my follow up Haematology Appointments. I am disabled and cannot get a bus to Castle Hill so I have to pay for a private taxi to take me which costs me £60 each way. The reason I was given was they do not take into consideration financial reasons or even that I am disabled.
- The East Yorkshire ambulance service told me that I no longer qualify as I didn't need a stretcher, I could use a wheelchair so I could use public

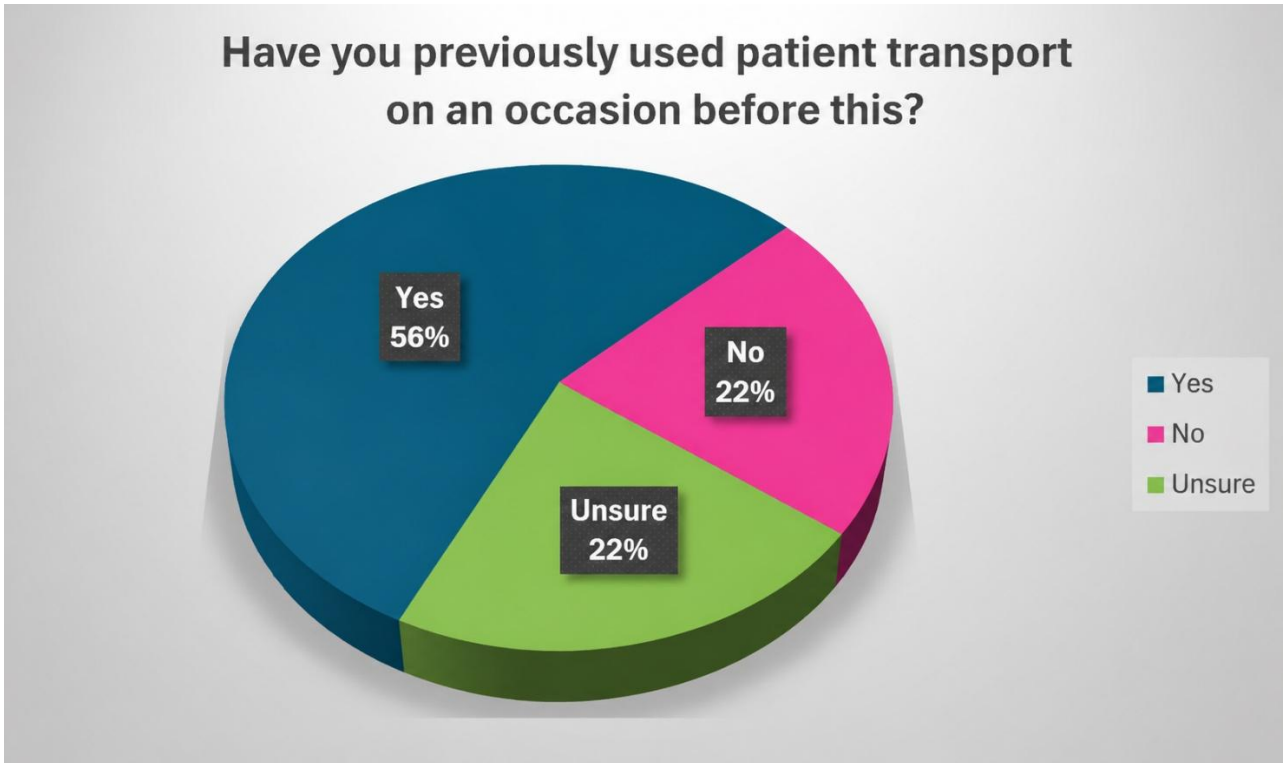
transport, or get a friend or family member to take me, I did explain that my family (1 son) was at work I did suggest that if they were providing transport why didn't they charge people I was willing to pay, they said the transport was being used for those people on dialysis or needed 2 ambulance attendants, at this time I was a newly amputee only having had my operation in December and getting used to a new way of life, I really tried my best to be helpful but no matter what I said the answer was no, I had to accept this, change my appointments until I could find a way of attending although when I did attend, talking others who had come from Hull, Scarborough Bridlington were all still able to get transport.

- I was asked can you walk from the house to the ambulance and when I replied yes I was told " you don't qualify" I was told I could call and claim my taxi fair back
- The transport arrived but they refused to take the patient to Hull, as he needed a carer with him, he was asked to make his own way there.
- It was for an eye appointment. I was having injections in my eyes and couldn't drive after it. The first time I went i was allowed transport. The second time I rang to book transport I was told I was no longer eligible. I was given no reason why this was.
- I was told I no longer met the criteria for using patient transport. No reason why given.

Question 5.

Had you previously used patient transport on an occasion before this?

56% of people replying to the survey said that they had used patient transport previously.



Question 6.

What was the impact of not receiving transport?

Themes identified looking at the comments listed include financial pressure from having to pay for taxis; anxiety and stress when trying to arrange transport; reliance on relatives or friends who may not be available; and, in some cases, cancelled or missed appointments.

- I was unable to attend my appointment
- Missed appointments as needed to go to Castlehill and live in Scunthorpe.
- Pain, discomfort, expense and a long tiring day
- I was going to cancel the appointment initially as I can't afford the expense. I didn't in the end
- Had to get a taxi to appointment. I am a retired man with not a lot of money.
- Had to ask friends/family
- I have to pay for a taxi now.
- Because I am in a fixed wheelchair and was told to book an accessible taxi.
- I have used transport many times before but was told I was no longer eligible. I ended up having to back to my GP after missing appointment.
- I had an operation booked at Scunthorpe hospital. I was told I could have transport home but not there. I had to find my own way there.
- I was refused because I am able to walk without help.

- Previously had transport for injections in eyes. They will now only bring me home and not take me.
- Had to leave a message. I needed to get from Hornsea to York. I had explained over the phone that they do not operate in Hornsea due to none being available. It is disgusting from the NHS about the eligibility criteria. I asked what the criteria is and told I was asking 'stupid questions' and that I am just not eligible.
- Since when does being able to walk mean that I'm no longer eligible to be picked up. I can't walk to Castlehill.
- I had to get a friend to take me.
- Stress
- I had to pay.
- I had to get a taxi
- I had to organise and pay for my own way there.
- I didn't know how I would get to hospital as I don't drive
- Missed appointment and had to go back to GP.
- I didn't know who to call and ended up having to pay for it.

Question 7.

Please give details of your experience.

Patients described feeling comfortable and stated that staff were helpful and supportive and polite. Others highlighted long wait times.

- I'm happy with it. I'm housebound and don't have a car the buses are not reliable, and I would need to get two
- I was dropped off a hour before the appointment and picked up two hours after the appointment. I have an energy limiting illness and the time spent in the waiting room resulted in significant increase in the number of days to recover from the appointment.
- The vehicle was comfortable and the staff were helpful and supportive
- They got me there, had to be ready 3 hours before the appointment. Warm enough, took me to the correct ward and place. No overall niggles.
- As a powered wheelchair user. To start there were some problems. Now I can ring and know that I can ask for transport. I know on my information is that on the computer. So, I will use the hospital transport more.
- Good experience
- Was refused transport as allegedly I am no longer allowed it with dementia, severe epilepsy and chronic heart condition as well as diabetes when I was allowed it before had to cancel appointments

- Wasn't able to have it as I didn't fit the criteria. I could walk around my home. Wasn't interested in the fact that I was diabetic. I now get transport through Winterton volunteer scheme - there was nowhere to park we had to find somewhere else. Ambulances have all the parking bays
- Wait times, that can't be helped. It's a concern that the residents have.
- It's very time consuming. It's taking longer than it used to as you have to keep giving them all the information. They used to have it on their system before.
- Responsive, polite, helpful and supportive.
- My wife had a small operation in Hull, but she needed to be transferred home from Castle Hill. I thought the wording of the letter for patient transport was too formal. I wasn't sure if we would get it, but I decided to telephone and we did.
- Very good although have to wait a long time for transport to pick me up after my appointment.
- No problems booking transport

Question 8.

Do you have any additional comments?

People that completed the survey advised of long journeys , no direct routes and changes in eligibility making it difficult for them to access their hospital appointments.

- No transport to Grimsby directly. Would need train and bus. At least when it's Hull the drop off on the bus is outside. We have no choice in where we go My appointment was at Sheffield and I am very unsafe on my feet, cannot walk far even using my crutches or walker
- I'm due to attend a rheumatology appointment soon and was hoping to get hospital transport as I can't stand for very long. I don't know what I'll do if they say I can't have it, probably just not go as I can't use the bus and can't afford a taxi
- The transport is mostly punctual
- I used to get transport from Scunthorpe to Castle Hill for my follow up appointments for my Non Hodgkin's Lymphoma every 4 months but then when I started chemo in December 2025 I was informed I could only get Transport for treatments. But now I need to see the Haematologist more often and also go for bloods more often and I can not take the bus due to

being disabled and also the bus to Castle Hill from Scunthorpe would not get me to my appt in time. And a taxi is £60 each way.
- I find it amazing in 2026 the brain injured are ignored by the patient transport service. I would however like to say the crew of the East Midlands ambulance that took me to transplant operation were outstanding at putting me at ease. Frontline people are fantastic, but the management don't seem to be.
- I have not used this service, but I understand the criteria is very strict
- They are very friendly.
- The whole experience was good.
- Friendly lady on the telephone, but lot's of questions and no service
- I find it ridiculous that wheelchair bound patients cannot get transport. There are a list of questions that some are not relevant, ie: how do you get to your GP? I have to fight every time to try to get transport for my partner, when he's going long distance to Hull or Grimsby.
- When I have explored all other options and I cannot get help it is very stressful if I have to cancel his appointments. I feel that patients details should be kept on record and the information used when you call without having to go through assessments every time
- Friends and family often have work/other commitments
- Public transport absolute nightmare with minimum 2 buses each way Taxis WAV not available with most companies.
- If you do manage to get one booked, then it doesn't turn up (which has happened) then you have to cancel appointment.

Additional feedback received from webforms, general engagement and groups attended in each Healthwatch area.

Healthwatch North Lincolnshire

- A couple of clinical staff from the Outpatients department came to talk to me about their experience with patient transport. They explained that they are having real issues with transport patients being booked in for late afternoon appointments by the secretaries. This means that these patients are often left waiting for transport in the Outpatients up to 7pm in the evening. The staff then have to offer them food. If they are still waiting by 6.45pm they have to then go to the Discharge lounge to wait for transport.

The staff explained that they have raised this with management, but nothing has changed

- Patient had attended the Eye clinic and had used patient transport. As I got chatting to her, she informed me that she had not been allowed to have her son come with her as an escort. I had watched the lady mobilise and she needed maximum help to walk by the ambulance crew and the staff in the Eye Clinic. She asked me if I could help her to the toilet which is quite a walk from the Eye Clinic. She needed full assistance from me to walk. She could have not done it on her own. I asked what she would have done if I hadn't been there to help her. She stated that she "would have wet herself'. I asked if anyone else was in the patient transport when she was picked up and she replied no. She had been picked up from Goole.
- "I took my nan to a hospital outpatient appointment today. I needed a wheelchair for her but there were none. I spotted two members of staff from the non emergency crew in the waiting area and asked if they knew where I could find some. One crew member immediately went off to find me one, whilst the other assisted me to get my nan out of the car. They had a couple of spare minutes and did not hesitate to help. When the wheelchair was found, the crew member took my Nana directly to her appointment for me. I feel they went above and beyond in helping us. I just wish I had taken their names"

- "When I needed to be transported from Scunthorpe hospital to the Grange. The person that came to pick me up wouldn't help me onto the bus, she said that it wasn't down as a 2 x person assist. The nurse from the ward helped me on using a wheelchair. The driver reluctantly operated the lift for me. When I got to the Grange, I asked how was I going to get off the bus and was rudely told "down the steps". I asked them to ask the Grange for a wheelchair as I hadn't walked since being in hospital. At first they said they wouldn't be able to, I assured them that I had been in the Grange before and that they are very accommodating. A member of staff came out with a wheelchair for me".

- "I was picked up from the Grange Care home to go to Sir John Mason House and was told rudely by the lady driver that I shouldn't have more than one bag with me. I couldn't help having more than one bag, I had gone from Scunthorpe Hospital to The Grange and then onto Sir John Mason. I hadn't been able to go home".

- "I have a patient who is a double amputee and is visually impaired who no longer can access patient transport since the change in service. I have

been informed that 'probing' questions are being asked when patients telephone the service. These questions are asked to determine whether a patient can afford to take a taxi".

- "I had to get ready early for hospital transport to Scunthorpe General Hospital. I was ready to go and they made me a pack up to take with me. I sat waiting in reception at Sir John Mason, but I never got there. No one turned up to take me".
- "I was refused transport because I'm not on oxygen or such, even though I am permanently in a wheelchair and have to travel nearly an hour in taxi..... if I can get a wheelchair accessible one.... or nearly 2 hours on a bus. It is disgusting that there have been so many cutbacks that it has come to this now".

- "I have been receiving cancer treatment at Castle Hill, the Cottingham site are fantastic. However, the receptionist where I have my PET scan is not so good. I can get hospital transport for my cancer treatments but not for my PET scan. It takes me 5 hours on a round trip, having to catch busses. They tell me to avoid close contact with children, pets and pregnant women. Yet all three are on the bus-doesn't make sense."
- "The initial appointments were very straight forward and well managed, however after receiving a diagnosis of possible lung cancer, his appointment days/ times have been changed three times. The final change would entail us catching three buses to cover the 36 mile journey to attend the appointment at 9 am."

- "We are both non drivers and pensioners, which makes it extremely difficult. I have asked for a time change but was told it can't be done".

Experts by Experience meeting – 18th March 2026 North Lincolnshire

The manager for Healthwatch North Lincolnshire attended a meeting of the Experts by Experience group to speak to members about their experiences of NEPTS. Members provided useful feedback including:

- An elderly gentleman, that one member knows will go outside during the timeframe given by YAS to wait rather than waiting in the house.
- The group discussed whether a messaging service should be used, whereby YAS telephone 10 minutes before to say that they are on their way / or that they are the next stop.

    - "What would be handy is 10minutes before to ring beforehand to make sure you are ready"
    - Another member of the group said that this will also help people who take longer to get ready due to age or medical conditions.
- Concerns about services moving to Grimsby
- Concerns-around the times that Patient Transport ends during the day for those coming into the hospital. "They Stop at 2.0. clock taking people into hospital'
- "With the centralisation of some services [you] may come across transport issues"
- Travel independently and face problems causing you to become late then you won't be seen.
- Transport does not go to the Community Diagnostic Centre
- Some people may now find booking transport more difficult as:
    - There is a lack of understanding as to what conditions are accepted for Patient Transport meaning that some elderly people automatically now feel that they won't qualify.
    - When people have tried to help book transport for other people, they don't necessarily have all the information to answer the questions (because there are a lot more questions).
    - "We don't know [what] the new criteria is and how to answer the questions"
    - It was also commented that the transport service "respond for visual but not for hearing"

- Some members of the group felt that the service had improved for them. This is because notes have been added to the system – like the ambulance needs to have ramp/wheelchair space.

Healthwatch Hull feedback

Healthwatch Hull gathered two compliments about NEPTS in their local area and one person advised that they were no longer able to access NEPTs, another missing their appointment due to late collections.

- "I'm no longer able to access non-emergency ambulance service for hospital appointments"
- "Good service no issues"
- "Good service no issues"

- “Multiple issues of late collections & missed appointments”

Healthwatch North East Lincolnshire feedback

A Healthwatch North East Lincolnshire project officer spoke to patients at Diana Princess of Wales hospital about their experience of NEPTs.

- I received an appointment for a hospital appointment in Scunthorpe (I live in Grimsby) I don't drive and don't have family. I asked for patient transport and was told I'm not eligible and to get a taxi. I couldn't afford a taxi all that way, they eventually agreed to allow me transport. I got delivered to the hospital at 11am for my appointment at 2pm. On the way back I got picked up from Scunthorpe then went to collect others before heading back to Grimsby. It was such a very long day, and I was in with the consultant for literally 4 minutes.
- A patient described being impressed with the Patient Transport service. He was picked up on time from his home in Louth and brought to the Orthopaedic Department for his appointment in Grimsby.
- A patient had an appointment booked at the hospital and needed Patient Transport. Transport had been booked; however, he was contacted by them prior to his appointment to say that they couldn't pick him up due to not having enough drivers. He then had to cancel and rearrange his hospital appointment for another date and time.

3.1 The Impact on mental and physical health

Patients we spoke to highlighted how their mental and physical health has been impacted by the NEPTs eligibility criteria.

- I was advised that I couldn’t have any help with transport. I had to go to St James in Leeds I had to get a taxi to the station train to Hull then a bus to Leeds I had 21 staples in my stomach

- I think that they don't take into account people with mental health problems, and how this makes us very anxious having to go to a new place without support. I was diagnosed with autism last year and need predictability. Even being on a bus with strangers is hard. If a friend can't take me, I can't attend my appointments
- I got very stressed and anxious trying to sort my own transport whilst in a plaster cast, I wasn't able to use public transport.
- One patient told Healthwatch staff they were denied transport for an appointment in Hull. After several hours on the phone trying to sort the appointment out they were able to get an appointment at Grimsby for Cardiology. The patient advised the whole situation was "stressing them out" when they are supposed to be resting as they have a heart condition. Patient asked for this situation to be flagged as they felt it needs sorting out.

3.2 Accessibility and Inconsistencies

Patients have advised that there are many inconsistencies with regards to accessibilities in the response to the transport request.

Patients have been offered appointment in hospitals away from their local area but when questioned the appointment has been changed to a local hospital. Consistency with eligibility, appointment type and split journeys ie only eligible for a journey one way, appointment times before 9am after 5pm or at a weekend. Many patients require transport for early morning, out of hours or weekend appointments. Many community transport services work Monday to Friday 9-4 and are therefore unable to support such journeys.

- Phone call received from patient who has previously used patient transport. Recently been ill and has been referred to cardiology. Received an appointment through for Castlehill Hospital. Went to book transport to get there and was informed that they no longer meet the criteria for transport and that they would have to use public transport or get someone to take them. Patient advised that they are unable to

use public transport due to mobility issues. After several hours on the phone trying to sort the appointment out, they were able to get an appointment at Grimsby for Cardiology. The patient advised the whole situation was "stressing them out" when they are supposed to be resting as they have a heart condition. Patient asked for this situation to be flagged as they felt it needs sorting out.

- “Sometimes I was granted transport and other times I was denied as I didn't meet the criteria. It seemed to depend on what month of the year it was.”
- “We don't always get the transport that we requested. It can get cancelled at short notice when drivers are off sick”.
- I have no faith in the current patient transport system. I have Korsakoff's syndrome following a liver transplant. I can't drive and am advised not to venture to new places unaccompanied and often get confused. Not eligible.The current system only caters for the physically disabled and has zero provision those with brain injury. Over six years I have either managed to get a lift from friends to appointments in Leeds (from Scunthorpe) paid for Uber transport with my daughter as chaperone or cancelled. Occasionally I would ring and be told I was eligible, but these occasions were few.

3.3 Cost implications and lack of knowledge around the financial support scheme.

Patients shared with us that the journey from Grimsby to Hull or Scunthopre wasn’t straightforward as there isn’t a direct route. This journey would require several buses and a train or a taxi. We spoke to local taxi services to ask for the cost of journeys to our area’s hospitals.

Coxon Taxi Grimsby

Grimsby to Scunthorpe Hospital - £52

Grimsby to Goole - £88

Grimsby to Hull Royal - £65

Grimsby Castle Hill - £62

Ash Taxis Scunthorpe

Scunthorpe to Grimsby wheelchair and standard taxi -£75

Scunthorpe to Hull- wheelchair and standard taxi £60

Patients advised;

- "I wasn't eligible as could walk from her house to the gate. The appointment was on a Saturday at 7.30 am. Humber and Wolds don't work weekends. I had to pay for a taxi it cost me £75 each way"
- "I am disabled and cannot get a bus to Castle Hill so I have to pay for a private taxi to take me which costs me £60 each way. The reason I was given was they do not take into consideration financial reasons or even that I am disabled"
- "The impact is financial. It costs me £60 each way. If I do not have the money for a taxi my partner has to take a day off work to take me. This turns out to him missing an entire day of work because the appointment takes most of the day."
- "I can't afford to pay it out in the first place so claiming it back wouldn't help me".
- "I am on low income with pension credit. I was told I am no longer eligible despite receiving travel for the past 3 years. I was given no reason. I was told that I would be able to claim back costs but not how".

Patients may be eligible for hospital transport if they are on low income, or in receipt of Income Support, Working Families Tax Credit or Income Based Job Seeker's allowance.

Patients can claim back travel costs using the cheapest form of public transport available, and if travelling by private car, they may claim for fuel and parking costs. Patients advised if they could afford to pay out for transport in the first place, they would be unlikely to claim it back.

The form, see link below is not straightforward and has a requirement to be emailed/ posted back with attached documents or to be taken into the hospital cashier's desk. We discovered the only cashier's office for NLAG patients to reclaim travel costs is in Grimsby.

HC5(T) Refund claim form: travel costs to receive NHS treatment

On the south bank the Grimsby office is located near The Pink Rose Suite. The site advises it's best to call first before making a special journey and that they are only open on a Monday and Wednesday. There are no offices at Scunthorpe or Goole hospitals.

On the North bank forms are available from the hospital Main Reception which are located at Hull Royal Infirmary on the Ground Floor, Tower Block Main Entrance and Castle Hill Hospital Entrance 2 (Canopy)

3.4 Impact on families and friends

Patients advised that they feel uncomfortable or a burden when asking family and friends to transport them to their hospital appointments.

- "Anxiety I had no option but to ask my older sister if she could take me, I have to say she didn't want to, but reluctantly did. I paid them but it wasn't the money they are just set in their ways and don't really drive further than Scunthorpe, I have to build up to asking friends or family to ask them to take me to appointments as I know they don't really want to do it, they have to put my wheelchair in their car which they don't like, I don't blame them I do like I said pay for every appointment that someone has to take me to, it's not so much just taking me, they have to wait the whole time so if the appointment is running late it takes up their day as well as mine, I'm sorry that's how things have been for me for the whole of 2025. Thank you for listening to me".
- "I cannot use patient transport even though I am eligible. This is due to the vehicle not being wide enough to fit my wheelchair because of the tail lift. My daughter instead has to take time off work to go with me".

- "I support a friend with cancer, and she finds it very difficult to obtain transport to get to Scunthorpe hospital even as she lives on the outskirts. She relies on friends to find her a lift as she is unable to access advice online and it is a very stressful experience and not helpful to the patient"
- A Healthwatch staff member took a phone call from a Lady seeking patient transport to and from Lyndsey Lodge Hospice. The lady was trying to get non-emergency patient transport for her father. He will be going to Lindsey Lodge Hospice for respite care. He has been bedridden since Christmas. Taxi's that have room for wheelchairs are not appropriate for him. The caller advised that YAS has told her that it will cost £250 each way so £500 in total for his transport.
  She has been told that because it is Respite care it is a choice. She explained 'it's not a choice me and my husband need this respite' and there is no other way.

3.5 Impact on community transport organisations

Healthwatch discussed the impact of eligibility changes with several community transport providers across the Humber region. Humber and Wolds Voluntary transport team and Medi -bus provided us with these statements.



Humber and Wolds Voluntary transport scheme

We are the only community transport provision in North Lincolnshire. Almost half North Lincolnshire's residents live in rural areas which are not well-served by public transport. The service provides more than just transportation; it helps people maintain an active lifestyle and independence whilst reducing social isolation and many of our passengers tell us how the moral support given by our volunteer drivers has helped their confidence and reduced their worry about the appointment they are travelling to.

Bookings are taken from 9am to 12pm on weekdays to respond to requests for transport and allocate drivers. Passengers are asked to give at least 48

hours' notice of a journey request to enable allocation to a volunteer driver. Membership is currently free and passengers pay 55p per mile for the journey they undertake which is paid to the volunteer driver to cover their vehicle expenses. Volunteer drivers are recruited from the local area; are DBS checked and undertake an induction with ongoing support and training provided.

The Voluntary Car Service currently has 915 registered passengers, and we undertook 4264 journeys in the period April 2025 – March 2026. 53% of journeys were for health appointments. The number of volunteer drivers remains stable at 38 but on average, we turn down 10% of bookings because we don't have a driver available. We continue to work hard to recruit new volunteer drivers, although outreach in rural areas to try to recruit drivers also increases awareness of and, in turn, the demand from passengers who need to use the service.

The number of new passenger registrations has more than doubled since 2024/2025 and 404 new passengers were registered during the last financial year.

There is no doubt that our service is under increasing pressure due to the eligibility criteria change in Non-Emergency Patient Transport. We receive several calls per week from patients who are directed to us from Yorkshire Ambulance Service and who expect us to transport them as the NHS would do. We asked in December 2025 for our contact number to be removed but this request was ignored.

We are an already under funded service who is under immense strain, knowing that we are not meeting our passengers' transport expectations. Half of our drivers are aged over 75, and we desperately need to recruit further throughout the county.

Updated statement 1stJuly 2026

Voluntary Car Service Important Information

Humber & Wolds Rural Action have taken the difficult decision to suspend new passenger registrations with immediate effect.

During the last twelve months we have been under immense pressure as demand for transport has risen sharply leaving us in the position of not being able to manage the expectations of our passengers, resulting in many transport refusals.

Our situation has been exacerbated with the change in eligibility criteria for Non-Emergency Patient Transport.

As a Charity, we are reliant on funding and are unable at present to provide a viable service, but we hope that suspension of new passengers will be a temporary measure.

Working towards future proofing our service, an annual membership fee of £25.00 will be implemented for all passengers from September 2026

Humber & Wolds Rural Action continue to look at funding streams and remain invested in the continuation, sustainability, and delivery of this vital and much needed service in North Lincolnshire.

Medi bus

East Riding of Yorkshire Council provides a MediBus service for residents, offering transport from their front door to local hospitals, GP surgeries, clinics, and dentists. The service is split into nine geographical areas. Community transport providers Goole GoFar and HART deliver seven of these contracts, with ERYC covering the remaining two.

Goole GoFar and HART operate minibus services, which has meant the impact of the NEPT changes has been easier to absorb than it has been for individual car schemes. However, demand for the MediBus service has increased significantly. The CT groups are now meeting much higher demand on the same financial contract, which inevitably puts pressure on both organisations and affects their ability to maintain other important services such as shopping trips, leisure transport, and day outings.

Despite requests for the NEPT changes not to be introduced without consultation, they were implemented with only two days' notice. This left passengers who previously used patient transport confused and worried

about missing appointments, and left ERYC and CT providers dealing with the fallout without any preparation.

In my role with East Yorkshire Community Transport (the umbrella organisation bringing Goole GoFar and HART together to work on community-based schemes), I have been speaking with the ICB about the problems these changes have created.

Our overriding concern is for passengers who are told they do not meet the criteria for NEPT but are also not suitable for CT. Our drivers are not qualified to assist passengers or accompany them to appointments, and we are finding that some people are either physically unable to use our vehicles or are confused and need more support than we can provide. We have had one meeting with YAS, convened by the ICB, and the only support offered was an email address to which we can send details of passengers we believe to be unsuitable. In short, if someone does not qualify for NEPT and is not suitable for MediBus, their details are sent to an email address—and we have no visibility of what happens next.

I have asked the ERYC Call Centre, which handles MediBus bookings, to keep a record of passengers they feel are not suitable for our transport.

YAS has also caused confusion by directing passengers to individual CT groups instead of the ERYC call centre, and by giving out contact details to passengers outside our area.

We remain in contact with our ICB and are working with them to ensure our concerns are heard.

4. Conclusion

Non-emergency patient transport plays an important role in enabling patients across The Humber to access NHS appointments safely and with dignity. The feedback gathered across the Humber region shows that patients value the service and the support provided by Non emergency

transport staff when it works well. However, the changes to eligibility criteria introduced in April 2025, alongside the impact of the Humber Acute Services Review, have created additional barriers for some patients who need to travel further for care.

We heard from people who had previously used patient transport but were no longer considered eligible, despite continuing to experience significant mobility, health, sensory, cognitive or mental health needs. For some, being able to walk short distances was used as a reason for refusal, even where they could not safely or practically complete long journeys by public transport, taxi or with support from family and friends.

The impact of this has been wide-ranging. Patients described financial pressure from having to pay for taxis, particularly for longer journeys to hospitals outside their local area; anxiety and stress when trying to arrange transport; reliance on relatives or friends who may not be available; and, in some cases, cancelled or missed appointments. These challenges are greater for people living in rural areas, those attending early morning or weekend appointments, and those who require wheelchair accessible transport or additional support during their journey.

Community transport providers are also experiencing increased demand as more patients are directed to them. While these services provide valuable support, they are not designed or funded to replace non-emergency patient transport, and they may not be able to meet the needs of people who require medical assistance, escorts, accessible vehicles, or journeys outside standard operating hours.

The findings highlight the need for a clearer, more consistent and person-centred approach to assessing transport needs. Patients need transparent information about eligibility, practical support to explore suitable alternatives, and accessible advice about financial help with travel costs. Where services are changing and patients are expected to travel further, transport must be considered as part of planning so that access to healthcare remains fair and realistic.

5. Healthwatch Recommendations:

Healthwatch recommends that NHS England, Humber and North Yorkshire Integrated Care Board (HNYICB), NHS Provider organisations, patient transport providers and local authorities work together to address the issues highlighted in this report.

NHS England should

1. Review the national Non-Emergency Patient Transport Services (NEPTS) eligibility criteria to ensure patients with significant mobility, sensory, cognitive, mental health or other health-related needs can safely access healthcare appointments and treatment.

Humber and North Yorkshire Integrated Care Board (HNY ICB) should

2. Review the impact of the current eligibility criteria and transport arrangements across the Humber region, particularly in relation to patients travelling longer distances as a result of service reconfiguration and centralisation.

3. Work in partnership with community transport providers, local authorities and transport providers to identify gaps in provision and explore sustainable solutions where patients are unable to access suitable transport alternatives.

4. Ensure clear and consistent information is available across the Humber region regarding patient transport eligibility, alternative transport options and available support.

NHS Trusts, Integrated Care Board and Relevant Commissioners should

5. Review and simplify access to financial support for healthcare travel costs, raising awareness of available assistance and ensuring information is accessible and easy to understand.

6. Consider transport and accessibility needs when scheduling appointments, including the availability of local services, journey times, public transport options and appointment times.

7. Review arrangements for claiming healthcare travel costs and consider whether reimbursement support is accessible for patients attending hospitals across the Humber region, including those attending Scunthorpe and Goole sites.

Patient Transport Providers (Yorkshire Ambulance Service and East Midlands Ambulance Service) should

8. Continue to develop and promote timely pre-journey communication with patients, including telephone calls, text messaging or other accessible methods, so patients know when transport is due to arrive and can prepare accordingly.

9. Monitor and analyse instances where transport difficulties contribute to missed, delayed or cancelled appointments, using this information to support service improvement and system planning.

10. Continue to strengthen patient feedback mechanisms, ensuring feedback is routinely collected, reviewed and used to inform ongoing service improvements, while promoting opportunities for patients to share their experiences.

Demographics:

We asked for respondents that completed the online /face to face survey to provide demographic data. 59 people that responded and provided demographic data. A breakdown of the information is as follows.

- 37 women completed the survey with eighteen responses from men and 4 people preferring not to say.
- 23 people classed themselves as disabled, 15 had long term conditions, 12 were carers. 7 people had mental ill health, 6 had a sensory loss and two people were neurodivergent.
- We found that the most common age range of responses was 55-74 followed by over 70s and then people aged 45-64.

6.Provider Responses

Healthwatch would like to thank all organisations and providers that have provided a response to this report. Please see the responses below.

EMAS – Rachael Lockwood

8. We are exploring a web app option to give an alternative means of communication for those who struggle with phone-based communication.

9. We review patterns of cancellation and delays and use this to review both our provision for specific hospitals / clinics and meet regularly with stakeholders to ensure we are conveying patients reliably to their appointments. We also review changes in demand over time, which informs our rota patterns and location of resources.

10. We have a web form and phone options for communications from patients via our PALS team. We also have a text message survey which is available to all patients who have consented to the use of their phone number for this purpose and have internet access. The data from this informs our plans and areas for development.

North Lincolnshire Council -Jo Johnson

Thank you for your letter dated 13 July 2026 and for sharing the Healthwatch report, *"Patient Transport - Journey to Better Health?"*. We acknowledge receipt of the report and appreciate the considerable work undertaken by Healthwatch colleagues across the Humber region to gather the experiences of local residents and transport providers. We have carefully reviewed the findings and recommendations.
Transport and accessibility are issues that are consistently raised by North Lincolnshire residents, particularly those with lived experience of health inequalities, disability and caring responsibilities. This is a regular topic of discussion through our Experts Together Partnership and wider engagement activity, where residents tell us about the challenges they face in accessing healthcare appointments and other essential services.
North Lincolnshire Council recognises that access to suitable transport can have a significant impact on people's ability to attend appointments, maintain independence and achieve positive health outcomes. Whilst responsibility for the commissioning and delivery of Non-Emergency Patient Transport Services sits with our NHS partners, including the Humber and North Yorkshire Integrated Care Board, we are committed to playing our part in supporting residents to access healthcare and other essential services.
We welcome the response from Jason Stamp, Chair of the Humber and North Yorkshire Integrated Care Board, and the commitment to explore future approaches to community transport in partnership with local authorities, transport providers and the Mayoral Combined Authorities. We recognise the complexity of funding and

service arrangements across the transport system and support a collaborative approach to developing sustainable solutions.
The Council continues to work with local bus operators and taxi providers to understand and address barriers to accessibility, affordability and availability of transport across North Lincolnshire. Through these ongoing discussions we are seeking opportunities to improve access for residents, particularly those who may be vulnerable or living in rural communities.
We also recognise the valuable contribution made by community transport schemes and volunteer-led services in supporting access to healthcare appointments where other options may be limited. As part of our wider work on transport and accessibility, we will continue to engage with partners to understand how residents can be best supported and to ensure local intelligence and lived experience help inform future discussions and service development.
The findings of the report, particularly around the impacts on people living in our rural areas, those with disabilities and long-term conditions, are helpful in highlighting the importance of transport as a wider determinant of health and wellbeing. We will ensure these insights continue to inform our discussions with NHS and transport partners.
Thank you again for sharing the report and recommendations. We look forward to continuing to work collaboratively with Healthwatch, the Integrated Care Board and transport partners to improve access and reduce barriers for North Lincolnshire residents.

HNY ICB Jason Stamp

As you will imagine, the national changes in criteria for eligibility for non-emergency patient transport has generated a large amount of feedback to both providers and the Integrated Care Board, and we are well sighted on the issues.

Gary Sainty previously led on a key piece of work for us to review the current community transport opportunities available to us across the wider Humber and North Yorkshire geography (including North East Lincolnshire) as a means of ensuring that all patients have equitable access to non-emergency patient transport services wherever possible.

As you will appreciate, funding around non-emergency patient transport and community transport is complex, involving not only the NHS but our Local Authorities and transport is now a key area of responsibility for our Mayoral Combined Authorities.

In order to support a new approach, the ICB is hosting an event this week with community transport providers in Hull and the East Riding alongside the Mayoral Combined Authority to begin to explore the work that can be done in this area. This is a collaborative pilot approach which we will plan to potentially replicate across the other parts of our geography over time.

Additionally, we have recognised that accessibility and transport are key to our successful delivery of Neighbourhood Health services across our wider geography.

We note the recommendations within your report, which are helpful in terms of our future work.

Hull Council – Andrea Tether As a commissioning manager for prevention services in Adult Social Care, the report highlights the impact that access to transport can have on people's ability to attend appointments, remain independent and access support when they need it. The findings show that transport difficulties can contribute to missed appointments, increased stress, financial pressures and a greater reliance on family, friends and community support.
The report also highlights the increasing pressure on community transport providers and the important role the voluntary and community sector plays in supporting local people. While patient transport eligibility sits outside Adult Social Care commissioning responsibilities, the findings provide useful insight into the links between transport, prevention and health inequalities.
The report will help inform the current development of Hull's Prevention Market Position Statement and our ongoing work with partners across health, social care and the VCSE sector.

6. Acknowledgements

We would like to thank all organisations involved for distributing the survey and everyone who took part in the survey and provided us with information and feedback

7. Further Reading

- Patient transport - Northern Lincolnshire and Goole NHS Foundation Trust
- HC5(T) Refund claim form: travel costs to receive NHS treatment
- HASR-Summary-Case-for-Change_Final-for-Publication.pdf
- B1244-nepts-eligibility-criteria.pdf

- Humber and North Yorkshire Community Transport Report | News | VCSE news & resources East Riding
- Getting to healthcare: what people told us about patient transport | Healthwatch Northyorkshire