

Feedback from Waikato Community Transport Forum on Health New Zealand Request for information regarding Non-Acute Patient Transport Solutions

Introduction

Health New Zealand Te Whatu Ora has put out a Request for Information (RFI) from non-acute transport providers and drivers as a first step in understanding the options and steps towards providing a national Health New Zealand non-acute transport solution.

The RFI targets non-acute transport providers and requests a detailed response through a formal process via the Government Electronic Tenders Service (GETS).

Whilst Waikato Regional Council is not a community transport provider, Council does provide an important support, coordination and funding role for community transport in the Waikato region, including for non-acute patient transport providers. Importantly, Council facilitates the *Waikato Community Transport Forum*, working in partnership with 30+ community transport providers in the region. This puts us in a unique position to provide feedback and insights from a Waikato perspective to Health New Zealand to take into consideration when designing a national approach for non-acute patient transport solutions.

The following high-level response to the RFI, which includes input from the *Community Transport Forum*, provides some initial feedback on the key things Health New Zealand is interested in hearing back on (as outlined in the RFI. p2), including:

- an overview of community transport in the Waikato region, to provide a general understanding of what type of organisations are operating and the scope of services they offer with respect to non-acute patient transport;
- the challenges and opportunities we see in the market for non-acute patient transport; and
- the challenges and opportunities we see for Health New Zealand as a large national organisation operating a national non-acute patient transport solution (including rural and urban transport options).

Process to provide information to Health New Zealand

Before providing information on the above, the *Community Transport Forum* feels it is important to provide feedback on the process Health New Zealand has undertaken to facilitate discussion on this topic.

The RFI explicitly states that “*we are looking for responses from all different types and size of transport providers including, but not limited to traditional taxi providers, local iwi, companion driving services, volunteer and charity organisations...*” Given that the aim of the RFI is to hear from a range of non-acute transport providers to enhance understanding of the sector, it is unfortunate that Health New Zealand has opted to take a GETS approach to engage with this sector.

Although not a tender process, the RFI uses a procurement template and requires responses to be submitted via GETS. It also requires respondents to be GETS registered. Many of our non-acute

patient transport providers are small-scale, volunteer-run charity organisations, often coordinated by elderly people. The unfortunate effect of this decision to seek information via this way is that many of our providers feel shut out of the process. Feedback from the Forum is that it is too technical and too onerous (the Response Form contains in excess of 30 questions, demanding detailed information). We have also heard concern from community transport groups that the RFI is clearly targeting Health New Zealand's needs, collecting data on current operators, as opposed to providing a more open initial discussion through a consultation process that explores how Health New Zealand could engage with organisations to understand their experiences, and how this might help shape a national non-acute patient transport solution.

This is particularly concerning given the statement on p3 of the RFI that the responses received through the RFI "*may lead to detailed market activity mid-2025...*", which is imminent – yet this is the first community transport providers have heard about it. Added to this on p6 of the RFI the intent that National Transport Assistance (NTA) Programme Patients will also come under the umbrella of services that will be sought under a national solution. The scope and potential impact of this is significant and warrants a better discussion with organisations across the country, wider than the GETS audience targeted. It's questionable as to whether a mid-2025 deadline provides enough time to consider the diverse needs represented in this engagement.

Furthermore, the dissemination of this RFI has been problematic. It appears that most community transport providers operating in this space have not been made aware of this consultation, including those providers who hold contracts with Health New Zealand for health transport. Given the key outcomes Health New Zealand has outlined it wants to achieve in the RFI, including "*a greater understanding of the non-acute transport provider market...*" it is difficult to understand why a wider first-step consultation process encompassing a broader range of community transport providers views was not rolled out. There is feeling amongst Forum members that there was a good opportunity missed to engage.

Following direct enquiries to Health New Zealand to raise this issue, we have been led to understand that community transport providers who are not GETS registered can, in fact, submit their feedback via email. Hence the decision for Waikato Regional Council to support the Waikato *Community Transport Forum* in taking up the opportunity to provide some informal high-level feedback on the RFI. This will at least provide a high-level Waikato perspective of providers' contributions and experiences and the challenges and opportunities they see ahead. We hope this will be considered in the mix by Health New Zealand as you look at options to develop a national non-acute patient transport solution, and would welcome further opportunity to engage on this issue.

Overview of Community Transport in the Waikato region

Community transport, typically provided by volunteers, offers non-profit transport services to support peoples' unmet needs and access limitations throughout New Zealand. In the Waikato region, we have a robust network of over 30 groups that collectively come under *the Waikato*

Community Transport Forum. The Waikato Regional Council partners with this collective to support their invaluable work.

Community Transport Provider
Cambridge Community House Trust
Coromandel Community Services Trust
Coromandel Independent Living Trust (CILT)
Eastern Coromandel Community Services Trust
Friends of Morrinsville Community Charitable Trust
Hato Hone St John Cambridge Waka Ora Health Shuttle
Hato Hone St John Hamilton Waka Ora Health Shuttle
Hato Hone St John Mercury Bay Waka Ora Health Shuttle
Hato Hone St John Otorohanga Waka Ora Health Shuttle
Hato Hone St John Taupo Waka Ora Health Shuttle
Hato Hone St John Thames Waka Ora Health Shuttle
Hato Hone St John Tokoroa Waka Ora Health Shuttle
Hato Hone St John Waihi Waka Ora Health Shuttle
Hato Hone St John Whangamata Waka Ora Health Shuttle
Mai Lighthouse
Matamata Community Health Shuttle
Nga Watene Māori o te Rohe Potae Regional Association Inc, Waikato Māori Wardens Transport Service
Ngāti Maniapoto Marae Pact Trust - Maniapoto Community Services
North Waikato Transport Trust
Otorohanga Support House Whare Āwhina
Paeroa Community Support Trust
Raglan District Community Vehicle Trust
South Waikato Community Health Transport Inc
Tairua Care and Friendship Club Incorporated
Taumarunui Mobility Van Society Inc
Te Ahi Kaa Training and Social Services Centre Inc
Te Aroha Community Support Incorporated
Te Aroha Springs Community Trust

Te Awamutu Community Health Transport Trust
Te Kauwhata & Districts Information & Support Centre Inc
Te Kuiti 4H Community Trust Board
Waikato/Bay of Plenty Division Cancer Society of NZ Inc
Whitianga Community Services Trust

These providers offer bespoke service models tailored to the unique needs of their communities. Services range from transporting individuals to general and specialist appointments, providing Kaumatua/elderly catered transport, offering wheelchair-accessible transport, facilitating late-night long-distance patient discharge trips, and even supporting wellness and quality of life through shopping and social trips. For people living rurally, people with disabilities, and individuals who are financially disadvantaged or lack access to a car or public transport, these community services are essential for staying connected and well.

Small groups have emerged in the most remote towns, while wider-reaching community transport groups like the Hato Hone St John model operate across the region and country. With independent stations in many towns, including nine in the Waikato region alone, St John provides critical services but cannot meet the needs of all Waikato residents. It is crucial, therefore, to recognise the invaluable role smaller entities provide that are addressing non-acute patient transport needs elsewhere.

The Waikato Regional Council view community transport as a vital service for meeting the needs and supporting the wellbeing of its residents. The Council has established a fund that has grown in response to the needs met by these 30+ groups/providers across the region. While the Council provides public transport services and collaborates with commercial services like taxis, it also recognises the importance of supporting community organisations that complement these other transport modes with a community transport service model. Some groups operate multi-seater wheelchair-accessible vans for services like renal transport, while others involve volunteers using their personal cars to transport individual patients. These services typically operate during regular weekday business hours and require pre-bookings, but many also respond on-tap to community needs, providing unplanned hospital transport on weekends.

In 2022-2023, only 14 of the 30+ groups operating community transport services in the Waikato region received funding from the \$200,000 allocated to the *Waikato Community Transport Grant Fund*. Despite this, they reported 23,662 trips, 858,000km travelled, and 52,020 volunteer hours donated (equivalent to over \$1.2 million in unpaid labour). Additionally, the combined operating costs of those 14 groups exceeded \$1.2 million that year. These efforts, and those of the many other community transport groups who operated without Council funds, enabled people to attend medical appointments they would have otherwise missed, and provided wheelchair users and isolated individuals with access to essential services and social interactions.

The latest 2025 funding round has seen a substantial increase in the number of applicants applying to the fund, with the increased fund (\$300,000) substantially over-subscribed. This demonstrates the growing demand for community transport services in our communities. Council has requested through its 2025-26 Draft Annual Plan process (subject to consultation) to increase the fund to \$500,000.

Challenges and opportunities

The RFI outlines the challenges Health New Zealand is interested in solving, including payment solutions, spend controls, group transport options, scheduling, reporting and digital capabilities to increase patient delivery timeliness to appointments, and spend and trip transparency to ensure Health New Zealand is achieving public value with public money. It would be challenging to design a national solution across the range of delivery models currently in operation (e.g. “*traditional taxi providers, local iwi, companion driving services, volunteer and charity organisations*”). Given that most community transport providers in the non-acute patient transport sector are volunteer-delivered and funded primarily through koha, grants and contributions from Health New Zealand and other funding partners, this will also be a challenge.

Key challenges include:

- Different communities have different needs - metro/urban centres, rural centres and more isolated rural communities, so a national solution needs to be flexible to meet these needs. Many rural and isolated communities have limited or no public transport options, and ageing populations. They rely on volunteer and charitable organisations to access medical appointments. A national solution must, therefore, support community-centred, culturally responsive, flexible transport options for non-acute patients.
- Access limitations - while investing in hospital staffing, equipment, and appointment scheduling is crucial, it is equally important to address access limitations. Without adequate transport solutions, patients may not be able to attend their appointments, rendering other investments ineffective. Therefore, it is critical to ensure that the non-acute health transport solution is flexible enough to meet the needs of patients with various limitations, including mobility, financial, and rural/remote challenges. The national solution developed must be flexible to cover a broad spectrum of transport options.
- People resources - volunteer hours across the sector are substantial. The current system relies on this. Volunteer-run services are low-cost to deliver and often extremely flexible in meeting community needs, but often they are run by volunteers who have been involved for decades and are themselves elderly. Fresh volunteers are increasingly rare as people work later in life and require paid labour longer than they did previously. A national solution needs to carefully consider this challenge and better support and fund critical volunteer community transport services, particularly where there is no alternative.

- Funding - the sector is vulnerable and needs additional funding sources. Operational costs are increasing (e.g petrol), funding grants are being over-subscribed (as is the case in the Waikato region), and the public is increasingly relying on volunteer services to support transport needs. One of the unique aspects of community transport services is their operation on a koha (donation) model, ensuring that passengers are not denied transport if they cannot afford to pay. These services are sustained through a mix of grants from health organisations, trusts/charities, councils, fundraisers, and donations. A national non-acute transport solution must support community transport groups, enabling them to continue providing the critical and unique low-cost transport services their communities need.
- National Travel Assistance (NTA) Funding – Many transport providers currently serve as intermediaries to assist patients in navigating the inherently complex NTA scheme. A streamlined electronic solution would help to enhance accessibility and efficiency. This solution could enable both patients and transport providers to access scheme funds without financial disadvantage or limitation of transport options. Given the extensive reach of this scheme, any replacement as part of a national solution requires careful consideration.
- Funding wellbeing outcomes – Health NZ has a prerogative to meet the health needs of our country, including non-acute patient transport. If that is done right, then other funders are able to meet wider wellbeing and access needs of their communities.

Key opportunities include:

- Government working more closely with the community transport sector – targeted and sustainable funding models, particularly supporting smaller-scale volunteer organisations running services in rural and isolated communities where there are no public transport options.
- Leveraging the expertise from the community-driven approach in the design of the national solution for non-acute patient transport.
- Strengthening reporting and digital capabilities – whilst this is supported, Council is mindful of the level of administration any entity requires to operate, and how complicated that can be for small-scale volunteer-based providers. Given the reliance on and challenge around volunteers, it will be important to build easy navigation into the design, without too many onerous hoops that might deter future volunteer groups from services where no other form of reliable transport can be accessed. The RFI is a case in point, with many volunteer organisations not having the IT skills or capacity to tackle the Response Form.
- Waikato Regional Council has provided a booking software for its providers to use which enables them to track passenger data, driver information, vehicle registration, distances

travelled, payments made, and otherwise generate ad hoc reporting. There is a significant opportunity for Health NZ to support the development of a national model that enables seamless tracking and reporting of transport data.

- There is an opportunity to better define roles of funding partners and transport providers to meet access needs and ensure success of a national solution.
- A national solution elevates the important role community transport plays in both achieving health outcomes and providing accessibility and wider wellbeing needs.

Conclusion and next steps

The *Waikato Community Transport Forum* would like to hear the outcomes from this RFI process and how community transport providers can have further input or provide feedback on the future options Health New Zealand arrives at for a national non-acute patient transport solution. We have a thriving community transport sector in the Waikato region and are happy to further share our experiences to shape a national solution.

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