THIS PAPER RELATES TO ITEM 10 ON THE AGENDA

CLACKMANNANSHIRE COUNCIL

Report to: Clackmannanshire Council

Date of Meeting: 19 December, 2013

Subject: Hospital Buses - Proposed Removal of H1 and H2 Services by NHS Forth Valley & Introduction of Demand Responsive Transport Service

Report by: Chief Executive

1.0 Purpose

1.1 The purpose of this report is to update members on developments regarding proposals NHS Forth Valley (NHS FV) put forward in October to replace the current H1 and H2 bus services between Clackmannanshire and Forth Valley Royal Hospital (FVRH) at Larbert with a Demand Responsive Transport (DRT) Service.

2.0 Recommendations

- 2.1 It is recommended that Council:
 - a) notes the latest position as set out in this report;
 - b) instructs the Chief Executive to write to NHS FV setting out the Council's views on the latest position;
 - c) reaffirms its previous decisions as set out at paragraph 3.2 of this report;
 - d) supports the principle that NHS FV should provide more health services locally in Clackmannanshire to reduce the need for people to travel to FVRH;
 - e) agrees to use all avenues open to it to hold NHS FV to account in respect of its commitments to ensure public transport access between Clackmannanshire and FVRH;
 - f) agrees that the Council Leader write to NHS FV Board Members setting out the Council's position;
 - g) instructs the Chief Executive to write to Falkirk Council outlining concerns about potential alterations to the existing s75 Agreement;

h) welcomes the intervention of the Scottish Government to host a meeting to seek to reach a resolution to the matter.

3.0 Background

- 3.1 The Council was formally advised by NHS FV on 11 October, 2013, of proposals to replace existing H1 and H2 services with a DRT service, the key features of which were:
 - it would transport those who qualified to use the service to either Kincardine or Tullibody from where existing commercial bus services would then be accessed (clearly this would make the sustainability of the DRT service reliant on the continuation of those commercial services)
 - only those people who met certain criteria would be able to use the service
 - there would be charges for those who did not hold National Entitlement Cards
 - bookings would require to be made at least 24 hours before travel to quarantee a journey
 - there was no ongoing revenue commitment to the service
- 3.2 NHS Forth Valley asked for formal feedback on these proposals by 1 November, 2013, and the Council agreed as follows at its meeting on October, 24:
 - a) to note the proposal by NHS Forth Valley to replace existing bus services H1 and H2 and to amend the existing Travel Plan in which the commitment to these services is contained;
 - b) to note the proposal which was put forward by Council officers in 2012 which, had it been accepted by NHS Forth Valley, would have offered improved public transport access between Clackmannanshire and FVRH and secured significant savings for both organisations (potentially £953,545 over 5 years for NHS Forth Valley and £28,355 over an equivalent period for the Council);
 - c) to note the representations which the Chief Executive and Leader had made to the Chief Executive and Chair of NHS Forth Valley over the previous six months in respect of the importance of access between Clackmannanshire and the hospital in Larbert;
 - d) to agree that the Council will support proposals which would improve overall access between Clackmannanshire and the hospital but will not support any proposals which will lead to any diminution of overall access;
 - e) to ask the Council Leader to write again to the Chair of NHS Forth Valley and the Scottish Government Minister for Health to reinforce the concerns in Clackmannanshire about the prospect of any diminution in access between the county and the hospital in Larbert which may result as consequence of a change in NHS Forth Valley's commitment to the Travel Plan which was agreed in 2010; and

- f) to note that officers will continue to work in partnership with officers of NHS Forth Valley and other relevant organisations on transport proposals which will not diminish overall access.
- 3.3 Further to the decisions at d) and e) above, the Council's Chief Executive wrote to the Chief Executive of NHS FV on 30 October, 2013, setting out the Council's position and highlighting some of the themes which had been raised during the debate on the matter (Appendix 1). In addition, the Council Leader wrote to the Chair of NHS FV and the Cabinet Secretary for Health & Well-Being making the Council's case (Appendix 2).

4.0 Current Position

- 4.1 Further to the correspondence mentioned above, the Chief Executive and Council Leader met with the Chair and Chief Executive of NHS FV on 14 November. At that meeting, the Council's Chief Executive and Leader explained the Council's agreed position and emphasised the key issues which had informed that position. There was an exchange of views and NHS FV advised that they would consider the Council's position and revert to us in due course.
- 4.2 On 4 December, the Council Leader and Chief Executive were briefed on potential revised proposals which were being considered by NHS FV, namely that while the intention remained not to continue the existing H1 and H2 services once contracts expire next March, the previously proposed DRT project was not likely to be pursued given the lack of support it received in the consultation. Instead, it was suggested that an option was being considered which would see an annual £50,000 revenue contribution by NHS FV to some (undefined) form of community transport in Clackmannanshire. (It is not clear why the suggested financial contribution appears less than the contribution which would likely have been associated with the earlier DRT proposal). In addition, there was an expressed intention to consider providing more services locally in Clackmannanshire to reduce the need for people to travel to Larbert.
- 4.3 Coincidentally, also on 4 December, the Council became aware that NHS FV are applying to create 196 additional car parking spaces at FVRH (at a cost of around £600,000 ex fees).
- 4.4 All elected members received a written briefing from the Chief Executive on 5 December on the latest position and a well-attended all-member briefing was then held on 10 December. This report now outlines the matters considered and views expressed at that briefing.

5.0 Considerations

5.1 The consultation responses to the proposals put forward by NHS FV in October were predominantly negative as can be seen from the table below:

NEGATIVE	NEUTRAL	POSITIVE
Clacks 3rd Sector Comm. Transport Forum	RTP Sestran ¹	Muckhart Comm Council

Passenger	Transport Scotland ²	RTP Tactran ³
Member of PPF	Member of Public	
Member of PPF		
Member of Public		
Member of Staff (NHS)		
Local Councillor (Clacks)		
Member of Public		
Public Transport Operator		
Clacks Council		
Falkirk Council		

¹ South East of Scotland Transport Partnership (Clacks, Edinburgh, East Lothian, Falkirk, Fife, Midlothian, Borders, West Lothian)

5.2 The main themes emerging in the responses of other organisations and individuals were:

- no deep consideration had gone into the proposals, with the agenda being driven by the need to draw to a conclusion the financial commitment rather than taking the time to exhaust all investigations
- the proposals represent an abdication of current commitment to provide easy access to healthcare
- there had been no proper consultation
- there had been no equalities impact assessment
- the proposals would increase car traffic around hospital
- in respect of the proposed DRT scheme:
 - low eligibility
 - o prohibitive costs
 - o concerns over the additional time to make journeys
 - o concerns over interchange points
 - diminished ease of access and introduction of barriers which do not currently exist.
- 5.3 Notably, the planning authority, Falkirk Council, was critical of the DRT proposals.

² National quango

³ Tayside & Central Scotland Transport Partnership (Angus, Dundee, P&K, Stirling)

- 5.4 Concerns were raised by elected members at the Council's October meeting and the recent briefing about:
 - the process which NHS FV have undertaken in relation to the hospital buses;
 - the approach to partner engagement which has completely ignored community planning forums and mechanisms;
 - the quality of consultation; and
 - the apparent lack of transparency of decision-making on the matter within the Board's formal governance structures.
- 5.5 Accordingly, it was proposed that individual NHS FV Board Members should be directly sent a communication outlining the Council's position.

6.0 Going Forward

- 6.1 As things stand, NHS FV intend to cease support for the H1 and H2 services from the end of March 2014 and have no clear plans for any alternative provision. This is an unacceptable situation which the Council needs to challenge using all available avenues (including any legal avenues).
- 6.2 The Council should also continue to seek to assist NHS FV to meet its obligations. To that end, officers are reviewing whether it might be possible to recreate an opportunity for integrated commissioning of services (as per the previous council proposal) and also continuing to work with other partners on potential options for community transport. However, a significant concern is that it is highly unlikely that any such solution could be developed and implemented prior to the end of March next year when existing contracts expire.
- 6.3 Further to the Council Leader's correspondence with the Scottish Government Cabinet Secretary for Health & Well-Being and Minister for Transport & Veterans, and since the all-member briefing, the Leader has received a letter from the latter advising:-

"I am disappointed that there are issues surrounding the provision of such an important service and am aware of the importance of finding a suitable solution that delivers a positive outcome to the residents of Clackmannanshire. I am, therefore, pleased to note that Mr Neil has recently agreed to host a meeting between NHS FV, Clackmannanshire Council and myself to find an acceptable resolution. Scottish Government officials are in the process of contacting the relevant parties in order to make arrangements. I trust that this reassures you on the importance that the Scottish Government attaches to this issue and I'm hopeful that the planned talks successfully resolve these issues."

6.4 This is a welcome intervention and members will be advised once that meeting is arranged.

7.0 Conclusions

- 7.1 The Council supported the siting of a new acute hospital for Forth Valley in Larbert on the condition that certain access issues which disadvantaged the people of Clackmannanshire would be addressed by NHS FV. These were addressed by the Board via the section 75 agreement.
- 7.2 It continues to appear the case that the Board now wishes to renege on that previously agreed commitment to Clackmannanshire.
- 7.3 The Council through its officers, in particular those in the transport unit and the governance team, has provided significant support to NHS FV on hospital transport issues since the opening of FVRH in Larbert. In recognition of the economic issue around the H1 and H2 services, council officers put forward an innovative proposal which would have integrated services and secured significant savings to both organisations (NHS FV £953,545 and the Council £28,355 over the five years of the proposed contract). It remains unclear why NHS FV did not wish to commit resources beyond a year to that proposal.
- 7.4 Given the importance of public transport access to FVRH from Clackmannanshire, it is vital that the Council continues to take all the steps it can to hold NHS FV to account and to ensure that access is maintained and protected.

8.0 Sustainability Implications

8.1 A diminution in access from Clackmannanshire to FVRH Larbert would have a negative impact on social exclusion and health inequalities.

9.0 Resource Implications

- 9.1 Financial Details there are no direct financial implications for the Council as a result of this report.
- 9.2 Staffing there are no direct staffing implications for the Council as a result of this report.

10.0 Exempt Reports

10.1 Is this report exempt? No

11.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) Our Priorities (Please double click on the check box)

The area has a positive image and attracts people and businesses Our communities are more cohesive and inclusive Vulnerable people and families are supported

(2) **Council Policies** (Please detail)

Clackmannanshire Community Plan

12.0 Equalities Impact

12.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations? This is not relevant to the Council.

13.0 Legality

13.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes

14.0 Appendices

14.1 Please list any appendices attached to this report.

Appendix 1 - Letter dated 30th October, 2013 from the Chief Executive to the Chief Executive of NHS FV.

Appendix 2 - Letters from the Leader of the Council to the Chair of NHS FV and the Cabinet Secretary for Health and Well-Being dated 31st October, 2013 and 30th October, 2013 respectively.

15.0 Background Papers

- 15.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered) YES
 - a) Report to Council of October 24, 2013, on this topic
 - b) Consultation feedback on DRT Proposals

Author(s)

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Elaine McPherson	Chief Executive	452002

Approved by

NAME	DESIGNATION	SIGNATURE
Elaine McPherson	Chief Executive	Signed: E McPherson



Chief Executive

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Ms Jane Grant Chief Executive Our Ref: NHS Forth Valley Your Ref: Carseview House

Castle Business Park Date: 30th October, 2013

Stirling FK9 4SW

Dear Jane

Thank you for your letter of 23rd October, 2013, regarding hospital buses.

The Council met on 24th October and considered the report which I had given you a copy of. There was considerable discussion on the matter and the formal decision was that Council unanimously agreed as follows:

- notes the proposal by NHS Forth Valley to replace existing bus services H1 a) and H2 and to amend the existing Travel Plan in which the commitment to these services is contained;
- b) notes the proposal which was put forward by Council officers in 2012 which, had it been accepted by NHS Forth Valley, would have offered improved public transport access between Clackmannanshire and FVRH and secured significant savings for both organisations (potentially £953,545 over 5 years for NHS Forth Valley and £28,355 over an equivalent period for the Council);
- notes the representations which the Chief Executive and Leader have made c) to the Chief Executive and Chair of NHS Forth Valley over the last six months in respect of the importance of access between Clackmannanshire and the hospital in Larbert;
- d) agrees that the Council will support proposals which would improve overall access between Clackmannanshire and the hospital but will not support any proposals which will lead to any diminution of overall access;
- asks the Council Leader to write again to the Chair of NHS Forth Valley and e) the Scottish Government Minister for Health to reinforce the concerns in Clackmannanshire about the prospect of any diminution in access between the county and the hospital in Larbert which may result as consequence of a

change in NHS Forth Valley's commitment to the Travel Plan which was agreed in 2010; and

f) notes that officers will continue to work in partnership with officers of NHS Forth Valley and other relevant organisations on transport proposals which will not diminish overall access.

The view of the Council was also that, as the proposals from NHS Forth Valley represented a diminution of overall access from Clackmannanshire to the hospital in Larbert, the proposals would not be supported but rather actively opposed.

In the course of the debate, some general points were made in support of the formal decisions above and these were broadly around perceptions that:

- a) NHS Forth Valley is reneging on a commitment to ensure access from Clackmannanshire to the hospital in Larbert;
- b) NHS Forth Valley is not demonstrating a long term commitment to Clackmannanshire; and
- c) the manner in which NHS Forth Valley has operated in the past year in relation to the matter of hospital transport has lacked transparency and openness.

In addition, there were concerns about the very short period for consultation responses, particularly for voluntary and community groups. (I understand that this concern has been expressed by the Clackmannanshire Third Sector Community Transport Forum, too.)

Aside from the big picture issues, some specific issues were also raised in respect of the proposed DRT service. These were:-

- While DRT services tend to be most beneficial to people with mobility difficulties who are unable to use public transport services, the proposal would simply deliver users to public transport hubs to access public transport.
- DRT would connect to all Service 60 and X24/X26/X28 journeys from 06:00 to 23:00 - the first Service 60 journey isn't timetabled to leave Tullibody Turning Circle until 06:50 am and the last Service 60 on the 20 minute frequency leaves FVRH at 17:23, although there is one later service at 20:18 which would potentially cater for visitors.
- Staff using the early H2 service arrive at the hospital at 06:26. The earliest staff could arrive at the hospital using DRT and Service 60 would be 07:36.
- The timetabled journey time on Service 60 from Tullibody Turning Circle is 50 minutes. A DRT taxi journey from many of the entitled locations, plus changeover time, would almost certainly push the total journey time to over 60 minutes. While SESTRAN's recommendations are that people should have a maximum journey time to healthcare facilities of no more that 60 minutes, the aim should be to minimise journey time.

 The references to DRT being in place while NHS FV work with partners to develop a community led transport system implies that any DRT service

would then be removed and NHS FV would no longer be involved in transport provision. On that latter point, the Council is very concerned by the apparent desire and intention of NHS Forth Valley to cease entirely support for any transport between Clackmannanshire and the hospital in Larbert.

Given these concerns, therefore, the Council wishes to urge NHS Forth Valley to reassess its current proposals to ensure Clackmannanshire is not disadvantaged in terms of transport access to the hospital in Larbert.

I would also like to take this opportunity to respond to the points you raised with me in your letter of 23rd October, 2013.

In terms of portraying an accurate picture of the situation, the report to Council included as an appendix NHS Forth Valley's proposals in full. It was open, therefore, to the Council to consider that detail alongside the report's commentary. I agree the report doesn't acknowledge that the proposal will improve transport links; that is because we do not consider that to be the case (for the reasons set out in the report).

The Council neither misunderstands nor lacks acceptance of the s75 agreement. On the contrary, we remember well the rationale for the Agreement in the context of Council consideration of the proposal to site the acute hospital in a location which was less accessible to Clackmannanshire than the location at that time (i.e Stirling).

In terms of the financial analysis in respect of the integrated five year option, I would refer you to a letter dated 24th December, 2012, from the Council's Roads and Transportation Manager, Mac West, to your Mark Craske which sets out proposed costs of £127k annually for NHS Forth Valley. These were based on actual tender returns rather than estimates. In addition, a paper entitled Clackmannanshire - Forth Valley Hospital: Bus Service Provision from August 2013, by your consultants SKM Colin Buchanan (1.11.2012) states that the integrated option would cost "less than half of retaining H1 and H2".

I hope this is helpful in setting out the Council's formal position. I note your suggestion that a meeting takes place to discuss the matter and we would be happy for this to happen. I would ask that, in the first instance, the Council Leader and I meet with you and the Chair of the Board.

Yours sincerely

Elaine McPherson
Chief Executive

APPENDIX 2 Councillor Gary Womersley

Leader of the Council

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Stirling Date: 31st October 2013 FK9 4SW

Dear Alex

I have been asked by Council to write to you to reinforce the concerns in Clackmannanshire about the prospect of any diminution in access between the county and the hospital in Larbert which may result as consequence of a change in NHS Forth Valley's commitment to the Travel Plan which was agreed in 2010.

The council at its meeting on 24 October considered a report by our Chief Executive about the proposals for a DRT service and unanimously agreed that it will, "support proposals which would improve overall access between Clackmannanshire and the hospital but will not support any proposals which will lead to any diminution of overall access."

During the debate on the matter it was quite clear that the view of all 18 elected members was that the current proposals represented a diminution in overall access between Clackmannanshire and the hospital in Larbert and that, as such, not only could they not be supported but they will be actively opposed.

In the course of the debate some general points were made in support of the formal decision above and these were broadly around perceptions that:

- a) NHS Forth Valley is reneging on a commitment to ensure access from Clackmannanshire to the hospital in Larbert;
- b) NHS Forth Valley is not demonstrating a long term commitment to Clackmannanshire; and
- c) the manner in which NHS Forth Valley has operated in the past year in relation to the matter of hospital transport has lacked transparency and openness.

In addition, there were concerns about the very short period for consultation responses, particularly for voluntary and community groups. (I understand that this concern has been expressed by the Clackmannanshire Third Sector Community Transport Forum, too.)

Aside from these broader big issues, some specific issues were also raised in respect of the proposed DRT service. These were:-

- while DRT services tend to be most beneficial to people with mobility difficulties who
 are unable to use public transport services, the proposal would simply deliver users
 to public transport hubs to access public transport.
- DRT would connect to all Service 60 and X24/X26/X28 journeys from 06:00 to 23:00

 the first Service 60 journey isn't timetabled to leave Tullibody Turning Circle until
 06:50 am and the last Service 60 on the 20 minute frequency leaves FVRH at 17:23 although there is one later service at 20:18 which would potentially cater for visitors.
- Staff using the early H2 service arrive at the hospital arrive at 06:26. The earliest staff could arrive at the hospital using DRT & Service 60 would be 07:36.
- the timetabled journey time on Service 60 from Tullibody Turning Circle is 50 minutes. A DRT taxi journey from many of the entitled locations plus changeover time would almost certainly push the total journey time to over 60 minutes. While SESTRAN recommendations are that people should have a maximum journey time to healthcare facilities of no more that 60 minutes, the aim should be to minimise journey time
- the references to DRT being in place while NHSFV work with partners to develop a community led transport system implies that any DRT service would then be removed and NHSFV would no longer be involved in transport provision.

Given these concerns, I would urge you, on behalf of the Council, to reassess the current proposals to ensure Clackmannanshire is not disadvantaged in terms of transport access to the hospital in Larbert.

Our Chief Executive has written to your Chief Executive in similar, if slightly more detailed, terms and I believe she has advised that she and I would be happy to meet with you and your Chief Executive to discuss matters in more detail.

Yours sincerely

Councillor Gary Womersley Leader of the Council

APPENDIX 2 Councillor Gary Womersley

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EH1 3DG Date: 30th October 2013

Dear Alex

The council at its meeting on 24 October considered a report by our Chief Executive about proposals by NHS Forth Valley to remove two existing bus services between Clackmannanshire and the acute hospital in Larbert and replace those with a DRT service which would transport eligible individuals to one of two public transport hubs (one in Clackmannanshire and one in Fife).

During the debate on the matter, it was quite clear that the view of all 18 elected members was that the current proposals by NHS FV represented a diminution in overall access between Clackmannanshire and Larbert.

Accordingly, the Council unanimously agreed to:

- support proposals which would improve overall access between Clackmannanshire and the hospital but not support any proposals which will lead to any diminution of overall access
- Ask me to write to you to again reinforce the concerns in Clackmannanshire about the prospect of any diminution in access between the county and the acute hospital in Larbert which may result as consequence of a change in NHS Forth Valley's commitment to the Travel Plan which was agreed in 2010.

A fundamental factor in the council's stance on this matter relates to its views (stated in 2002) on the decision to site the new acute hospital for Forth Valley in Larbert. That decision was taken by the Board of NHS Forth Valley following significant local debate around the new hospital's location. This debate was particularly highly charged in Stirling and Falkirk where acute hospital provision was to be removed. In Clackmannanshire, while there was no angst about losing acute services (as there were no such services based here), the concerns revolved around ensuring there were community based non-acute services and that wherever the new acute hospital were sited, any resultant access issues to and from Clackmannanshire would be adequately addressed.

Given the significant concerns around access, once Larbert was chosen by NHS Forth Valley as the site of the new hospital, planning permission for the development was granted subject to a Section 75 Agreement which provided for a Travel Plan to be put in place by the Board for so long as "the Development remains operational (whether in whole or in part) in

public use." The contents of the travel Plan were agreed by the Council and NHS Forth Valley and a bus service contract was procured on behalf of NHS FV by the Council for the three year period between August 2010 and August 2013.

Towards the end of 2012, in the knowledge that the contract was due to end on 04 August 2013, the Council entered positively into discussions with the Health Board regarding the specification for a new bus service contract. Acknowledging that NHS FV considered the cost of the existing services (known as H1 and H2) to be too great, Council officers put forward an option which involved an integrated arrangement of the hospital bus services and various bus services provided by the Council. As well as improving overall access between the county and FVRH, this proposal also offered NHS FV significant savings of around £950,000 over a five year period.

Disappointingly, NHS FV, did not wish to commit resources beyond a one year period and, thus, rejected the above proposal. Instead, NHS Forth Valley began developing options which potentially represented diminished access between Clackmannanshire and the hospital.

When this approach and new policy direction became known at chief officer and senior political levels, interventions and representations were made by the myself and our Chief Executive with the result that NHS FV agreed to extend the contract for existing services H1 and H2 for six months to March 2014. This period was to be used to clarify mutual understanding of the section 75 agreement and to enable further work to be undertaken on potential alternative options to H1 and H2.

In the second week of October, 2013, NHS Forth Valley put forward consultative proposals (over a mere three week period) to replace services H1 and H2, which are accessible by all in Clackmannanshire, with a DRT service which, according to NHS forth Valley would be accessible by only 20000 out of 50000 people.

The Council's view is that these proposals would diminish overall access between Clackmannanshire and FVRH and, as such, they should be actively opposed.

In the course of the debate at Council, some general points made in support of that decision were around perceptions that:

- a) NHS Forth Valley is reneging on a commitment to ensure access from Clackmannanshire to the hospital in Larbert;
- b) NHS Forth Valley is not demonstrating a long term commitment to Clackmannanshire; and
- c) the manner in which NHS Forth Valley has operated in the past year in relation to the matter of hospital transport has lacked transparency and openness.

It is for these reasons, therefore, that I write to you to draw to your attention our concerns about diminished access to acute services from Clackmannanshire and also to express our disappointment about the way the Board has proceeded in the past year given the importance of local community planning to meeting our SOA targets and national outcomes. As you will appreciate, there is significant concern in communities across Clackmannanshire about the prospects of any diminution of overall access from the county to Larbert. This has already been expressed in a number of ways, including in responses to consultation on other matters such as recent consultation on the Reshaping Services for Older People's Care Strategy. The Clackmannanshire Third Sector Transport Forum has also made

representations against the proposal to remove the existing services and has called into question the proposed operation of the DRT service.

Whilst the Council is fully aware of its Corporate Goals and the greater outcomes committed to its Single Outcome Agreement, (as well as National Outcomes). I am sure you will fully appreciate it is unfortunately difficult for the Council to seek to work with NHS FV, whose ultimate stance is predicated on complete removal of bus services. I would ask therefore that NHS FV are reminded of both their specific and broader commitments to Clackmannanshire, which I hope would suffice to resolve the current impasse, without any further formal intervention from yourself.

Yours sincerely

Councillor Gary Womersley Leader of the Council