

To Rural Communities and Beyond

Twenty-two local authorities in England have implemented Demand Responsive Transport (DRT) schemes since 2020, with the support of the Government's Rural Mobility Fund.

Other government funding, not least the first round of BSIP grants, has seen further DRT schemes established or existing ones expanded. The Welsh Government has rolled-out its <u>fflecsi DRT trial</u>, supported by a regional grant, while similar schemes are in place or in development in Scotland and Northern Ireland.

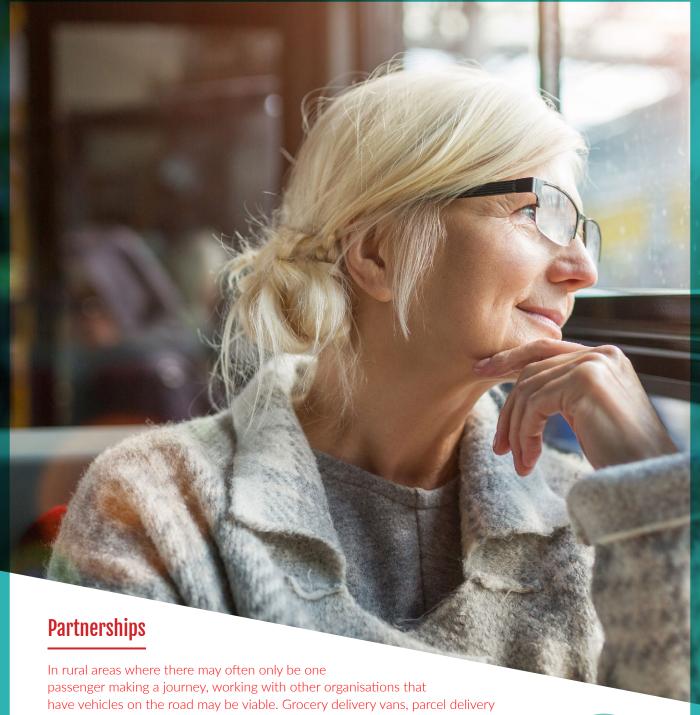
Despite the advantages of flexible routing and user demand-led scheduling in rural areas, one in four county councils believe that DRT is unsustainable in the long-term once funding reverts to council budgets. So, at a time of ever-tightening belts, local authorities face an all-too familiar dilemma: cost efficiency versus equitable service provision. With some schemes operating with low or even no passengers, the question is: can supported DRT survive in the long-term?

Joining forces

To improve the value for money of DRT services in areas of low or scattered demand the answer potentially lies in joining forces with other essential transport providers, such as healthcare, education or community transport. Joined up provision will undoubtedly help DRT schemes become more cost-effective, while improving reach and passenger numbers. Community transport services, many voluntarily run, serve as lifelines for remote communities, providing regular services that are often exemplars of fantastic customer service and adaptability – this sort of DRT has proven the most resilient due to a much smaller staff cost and an overriding sense of community spirit and purpose. Partnering with different types of transport services means shared resources and expanded reach. Some councils in the UK are also examining how to integrate education transport services, utilising school bus services to save funds and enhance provision.

It's common knowledge that the NHS needs to make major savings. In 2021, the NHS spent around £460 million on non-emergency patient transportation. While past attempts by local authorities to pool provision with the NHS have failed, these were largely due to the limitation of technology. With huge tech advances, co-operation and collaboration is now a much simpler and more streamlined process. Where there is the will, now there is a way. Sophisticated scheduling algorithms, new booking and smooth payment systems means that partnerships between small- and large-scale providers are readily achievable. With technology advancing at an unprecedented rate, the potential for merging operations, ensuring cost efficiency and reducing service duplication is more promising than ever.





In rural areas where there may often only be one passenger making a journey, working with other organisations that have vehicles on the road may be viable. Grocery delivery vans, parcel delivery companies and other services (for example mobile libraries, personal health care and mobile banking) might be able to offer journeys to passengers using a DRT system, in exchange for a fee from a shared DRT app. Likewise, the 'lift sharing' apps could reach their full potential for arranging car-shared journeys – if real-time lift sharing was available in a wider DRT system, this could open up many more seats for passengers in rural areas.



Partnerships between local authorities and with other agencies (such as the NHS and Liftshare) can also provide cost savings and improve performance. Councils can consolidate back-office operations or partner to negotiate better deals from IT providers. Partnering increases efficiency by speeding up processes and allow for more streamlined ticketing systems. These days, it's easy enough to maintain distinct front-of-house branding while benefiting from shared back-office infrastructure and software management. This approach also creates opportunities to connect ticketing with transport services in neighbouring authorities, providing a more seamless service for passengers travelling further afield.

Funding for DRT services

There may be other ways to generate funding alongside these types of partnerships which also provide sharing community benefits. For example, in exchange for increased access, visibility and customer loyalty, commercial partners can provide funding for DRT services. In Leicestershire, for example, local housing developers have funded DRT services through Section 106 agreements, securing planning permission in exchange for funding DRT. Of course, the danger here is that when funding ends the service ends too, leaving new build residents stranded whilst encouraging car use. Yet, if these services are integrated early into the development proposals and incentives are given to new residents to use these services, take up of use can be significantly enhanced. Furthermore, the layout of developments can be designed to allow easy routing of services with priority over the car to further encouraging DRT use.

Integration is key to the success

Evidence suggests that integration is key to the success of DRT services, and it works best where there is a coordinated approach that allows for integrated booking, fares, and payment options embracing available modes of public transport, so the overall offer is strengthened. Seamless integration not only improves user experience but also contributes to the overall effectiveness of the transport network.



A good example of an integrated approach can be seen in Rhineland-Palatinate, a rural state in southwest Germany, DB Regio, a Deutsche Bahn subsidiary has added its DRT service into an inclusive Mobility-as-a-Service (MaaS) system. Instead of a separate DRT app, MaaS integrates DRT fares into its overall pricing structure, providing users with a single, transparent fare for their entire trip. Multiple transport modes can be used, allowing passengers to travel to rural destinations where standard public transport and DRT routes do not exist. Ride-sharing, licensed taxis or cycle hire can all be offered as part of the MaaS service. Integrating DRT into a MaaS system can be cost-effective by sharing overheads for marketing, ticketing and customer support. In Germany this has improved ridership by providing a more seamless and convenient travel



Route deviated service

Given the significant shifts in mobility habits we've observed over the past few years, local authorities must remain agile and responsive. Instead of continuing a full DRT service, it may be that a 'route deviated service' is more cost-effective and better suited to local need. Combining elements of traditional fixed-route transit and demand-responsive services, these schemes are typically cheaper to operate than full DRT services. Popular in the USA, route deviated services have the flexibility to shift from their course within a defined boundary to accommodate passenger requests for pickups and drop-offs. The latest technology enables deviations to be managed efficiently, meaning detours don't disrupt or lead to significant delays.

Wabash County Transportation in Indiana, USA transitioned from a demand responsive system to a deviated fixed-route system in 2018. The new system consists of four routes that serve the county's main destinations, such as schools, hospitals, shopping centres and elderly care centres. Deviations are permitted up to one mile from the fixed route, with 24-hour advance notice. According to the county transport authority, the new system has improved efficiency and reliability as well as customer satisfaction and reducing the subsidy and financial risk. This balance of flexibility and improved financial performance makes route deviated services a promising approach in areas where full DRT is too expensive to run.

Back at home, the 22 local authorities piloting DRT through the latest Government funding programme now have at the very least several terabytes of data that can be used to inform future decisions and strategies, identifying trends and patterns to help shape people-powered services that won't drain the public purse.

Conclusion

The Rural Mobility Fund may be winding down, and other support for new DRT schemes may be limited, but we needn't throw the baby out with the bathwater. When it is time to review cost and benefit, local engagement is critical—observing, listening and adapting to ensure that the DRT scheme is right for that community.

Simply put, a successful DRT is one that offers great connectivity for rural areas so much so that it becomes viable as a long-term community, health and education transport service offer - through carrying enough passengers to justify costs. By partnering with other service providers, integrating with existing public transport networks, and continuously adapting to changing mobility needs and technology, local authorities can ensure that DRT remains a viable (and valuable) option for rural communities and beyond.

Richard Jeremy prepared the SYSTRA report 'The State of County Buses' for the County Councils' Network, July 2023. He is currently evaluating new options for using school services and council fleets to support local transport in West Lothian, Scotland. He has worked in bus and DRT network development since 2003.

For more information on Richard's work at SYSTRA contact rieremy@systra.com









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RICHARD JEREMY

Principal Consultant Bus Services e: rjeremy@systra.com

WWW.SYSTRA.COM/UK/





