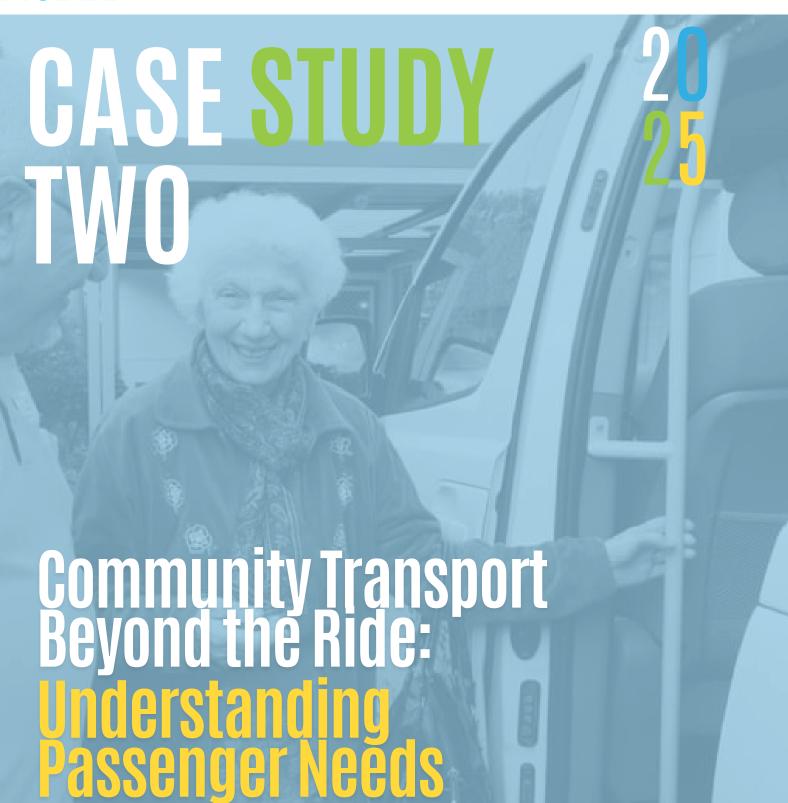
# NATIONAL COMMUNITY TRANSPORT PRICING MODEL











## Acknowledgements

Ngambri peoples, the Traditional Owners of the lands upon which ACTA's Canberra office is situated. We pay our respects to their Elders, past and present, and honour their enduring connection to this land, as well as their rich history, culture, and spiritual heritage. In addition, we recognise the Traditional Owners of the lands in Northbridge, Western Australia, the Whadjuk people of the Noongar Nation; Winnellie, Northern Territory, the Larrakia people; and Tailem Bend, South Australia, the Ngarrindjeri people. We acknowledge their Elders, ancestors, and cultures, and are committed to ensuring that our work

reflects respect for their lands, peoples, and

We respectfully acknowledge the Ngunnawal and

Acknowledgement of Country

We would like to extend our heartfelt thanks to all the participants in our research and case study development

enduring cultural heritage.





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# KEY TAKEAWAYS

- **1.** Community transport is not just about moving people but is a person-centered service that plays a crucial role in fostering inclusion, access to essential services, and social connection for senior Australians, people with disabilities, and those in rural or remote areas.
- 2. Community transport services are essential for supporting older and diverse populations, yet they remain underfunded due to a lack of recognition of their full social value. Providers often cross-subsidise and rely on fundraising to maintain operations, but as demand increases, sustainable funding becomes crucial. To ensure equitable access to high-quality services, especially as the population becomes more diverse with varied care needs, the government should invest in studies on the social benefits of community transport. These studies will provide valuable insights to guide future policymaking and funding allocations, ensuring the long-term viability of the community transport sector.
- **3.** The NCTPM groups individuals requiring higher support, such as those needing physical assistance or who do not speak English at home (CALD) communities, into a single "High Support Needs" category. This means that, for costing purposes, it does not matter whether a client falls into one, two, or all three of these high support needs categories, the model assigns the same cost loading regardless.
- **4.** The NCTPM Pilot Project found that High Support Needs passengers incur an additional cost of \$36.40 per client compared to those with Low Support Needs. These costs stem from additional staff time to support clients with higher care needs, tailoring services to meet diverse and complex client needs, and/or offering translation services, which current government funding does not fully cover.
- **5.** The Basic Delivery Model (commercial transport) is primarily used for clients without mobility or cognitive impairments.

# KEY TAKEAWAYS

- **6.** Client Stories demonstrate the significant positive impact community transport has on individuals:
  - **Ms. To:** A Cantonese-speaking senior woman who overcame isolation and accessed medical and social support services.
- **Mr. Costello:** An elderly Aboriginal man who benefited from reliable transport to essential medical appointments.
- Ron: A man living with dementia, whose dignity and social connection were supported through tailored transport services.
- **7.** The value of community transport includes services like wheelchair-accessible vehicles, reduction of isolation and foster social connection, translation assistance for Culturally and Linguistically Diverse (CALD) communities, and tailored care for complex needs such as dementia and Indigenous groups. However, these benefits often go unrecognised or unaccounted for on funding and policy decisions.
- **8.** The Full-Service Delivery Model Provides comprehensive support, including door-to-door assistance, translation services, and personalised care. This model ensures accessibility, safety, and compliance with the Code of Conduct for Aged Care.
- **9.** Despite issues when using taxis and rideshare services, those services still serve a role in specific situations. However, the passenger preference remains for full-service delivery model, offered by community transport providers.
- **10.** To meet increasing demand and evolving client needs, community transport requires ongoing government support, research, and financial investment to remain viable and equitable.
- 11. Passenger needs must be considered equitably in relation to both cost and volume of services provided. Under current models, individuals living in remote or rural areas might be disadvantaged, as they typically need to travel longer distances and therefore incur higher costs. This means that, based on their individual budgets under Support at Home (SaH), they often have access to fewer trips than someone in an urban area. ACTA recommends that providers should be funded per kilometre based on the NCTPM, while passengers should have access to a capped number of trips tailored to their individual need, for example, people living with cancer or severe kidney failure may require frequent transport to attend chemotherapy or dialysis. This approach will ensure equity and service affordability for senior Australians.



## Introduction

Community transport is often perceived as an extension of public transport or services like taxis, Ubers, and rideshares. However, it is much more than simply moving people from point A to point B. Community transport is a person-centered service, offering vital support where other transport options are limited. It plays a crucial role in fostering inclusion, providing high-quality service, and ensuring safety, access to essential health, social connection, social isolation reduction and community services.

While senior Australians, people living with disabilities, and those in rural and remote areas are the primary users, it also serves transport disadvantaged individuals in urban, rural and remote settings. Despite its importance, community transport is frequently underfunded due to a lack of awareness of its full benefits and contributions as well as the 'full service' delivery model that community transport providers follow to meet passenger needs.

The ACTA National Community Transport Pricing Model (NCTPM) Pilot Project, led in partnership with the University of South Australia, has prioritised understanding passenger needs. By analysing how and why passengers receive the services they do, the pilot project aim to design a policy arrangement and a sustainable pricing model for the community transport sector. This case study will highlight client stories to showcase the diverse needs of users and then will move onto the need for deeper insights into the hidden benefits of community transport, which highlights some of the challenges providers face when tailoring service for diverse client groups.



#### **Basic Delivery Model**

A basic delivery service model refers when a client utilises taxis and/or Ubers for travelling from point A to point B. This approach is predominantly used in metropolitan regions and some regional cities and is seen as appropriate in certain circumstances:

- · When the client has no mobility or cognitive issues
- · When the client prefers to use this service.

This model is more commonly used in metro and regional cities rather than in rural and remote locations. However, consumers have expressed dissatisfaction with taxis due to reliability issues and concerns about driver behaviour, including overcharging and instances of misconduct or assault. Additionally, during the NCTPM qualitative interviews some community transport providers cited severe complaints, including reports of drivers "taking money from the client, holding them hostage."

### **Client Story**

Community Transport Helping Frank Stay on Track for Vital Health Appointments

Mr. Costello, 78, has lived in Murray Bridge for 50 years and is part of the Arunta Tribe. After moving to Murray Bridge, he began facing challenges accessing transport for crucial medical appointments in Adelaide such as cancer treatment and other health concerns. Public transport options required exhausting transfers.

On the other hand, rideshare or taxi did not offer him the level of care and comfort he required.

Frank struggled with the complexity of the journey.

Thanks to the Murray Mallee Community Passenger Network (MMCPN) managed by the Tailem Bend Community Centre (TBCC), Frank now has access to reliable, subsidised transport for medical appointments. The service allows him to travel to Adelaide with his wife, Trotti, or a friend for support, at a fraction of the cost of rideshare or taxi services. Frank shared that MMCPN's services have made his life much easier, removing the worry of how to get to appointments and easing the stress of navigating the city while unwell. Grateful for the service, Frank says MMCPN has truly helped him.

Equitable access is not just about availability. it's about ensuring that no one is limited to access transport services for where they live. Consider the example of Mr. Costello, living in a rural town 100km from his regular medical specialist, and Ms. To, based in a metropolitan area just 10km from hers in Perth. If both are allocated the same number of 'trips' under a support package but are charged based on distance, Mr. Costello can only afford a fraction of the trips Ms. To can. This undermines true equity in service access.

Under a fair and sustainable model, funding to providers should be calculated based on actual distance and cost, but passengers should be charged based on a unit of service a trip, regardless of how far they travel. This ensures clients un rural and remote areas like Mr. Costello are not disadvantaged simply because of their location, allowing all clients to engage equally in medical, social, and community activities.



# VOICE FROM THE COMMUNITY

At 82, Margaret found daily errands and medical trips increasingly challenging. Public transport was exhausting, and the long travel times made worse by frequent rest stops and the need to take earlier buses in case later ones didn't arrive, significantly reduced her social activities. Over time, she became isolated, and many of her friendships faded.

That changed when a neighbour introduced her to Community Transport, which quickly became a lifeline. Now, she has a trusted driver who not only ensures she gets to her medical appointments safely but also provides companionship on longer trips. With this support, Margaret has been able to reconnect with friends, reducing her sense of isolation and staying motivated to keep up with her medical care.

#### **Full-Service Delivery Model**

The full-service delivery model is overwhelmingly preferred by most clients in most situations. Community transport providers consistently emphasise that this model differentiates them from taxis or Uber services. Small to medium organisations in metro and regional areas underscore a commitment to holistic, full-service transport, which goes beyond simply moving clients from one location to another.

#### **Key Features of the Full-Service Model**

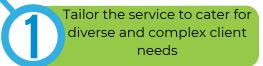
Many providers view their role as more than just transport, offering additional assistance such as:

- 1. Helping clients with mobility issues, e.g., assisting clients downstairs when using walkers, assisting clients to get in and off the vehicle, etc.
- 2. Conducting welfare checks if a client does not answer the door.
- 3. Translation assistance for Culturally and Linguistically Diverse (CALD) communities.
- 4. Engaging in social interaction during bookings, recognising that the driver or scheduler (Backoffice staff) may be the only person the client speaks with that day.
- 5. Observing and noting changes in a client's functioning or behaviour, which may indicate a need for additional support.
- 6. Providing information on other services or connecting clients to necessary resources.
- 7.Offering transport as a social opportunity, enabling interaction with drivers, other passengers, and the wider community.



## Cost Implications of the Full-Service Model

While passenger needs are highly complex and encompass a wide range of factors, the NCTPM Pilot Project categorises these needs into two groups: Low Support Needs and High Support Needs. This classification is based on the criteria outlined in the ABS Survey of Disability, Ageing, and Carers (SDAC). Data collected from 31 pilot participants indicates that serving clients with High Support needs, including physical, psychological, or a combination of both as well as and/or non-English-speaking clients, incurs an additional cost of \$36.40 per client compared to those in the 'Low Support Needs' category. This cost increase stems from the additional activities required to deliver a dignified and inclusive service, such as:



Providing extra time and staff to assist clients with higher care needs

Providing translation services and ensuring well-trained staff in CALD affairs.

As demand in Aged Care services grows, sustainable funding is essential to ensure clients can continue accessing high-quality, equitable services when they need them most. As highlighted in the Final Report of the Aged Care Taskforce (2023, Australian Government):

"Over the next few decades, the cohort of people is expected to become more diverse, with varied care needs and expectations."

Many clients rely on community transport for safe, affordable, and dignified travel, yet funding challenges threaten the sustainability of these vital services. To sustain these services, providers often cross-subsidise by using funds from other programs, as well as relying on fundraising and donations through charitable and philanthropic events. Despite limited compensation and underfunding, community transport providers continue to support older and diverse populations with reliable transport.

# The need for deeper insights into the hidden benefits of community

The NCTPM Pilot Project has highlighted key factors that differentiate community transport from other services. Unlike a one-size-fits-all model, community transport is a person-centered service, addressing individual needs and promoting social connection, reduction of social isolation, independence, healthcare access, reablement and dignified care.



Passenger needs are central to community transport, and a deeper understanding of these needs will help the sector and government build a financially sustainable operating model to meet the evolving demands of senior Australians.

Skilled frontline staff and volunteers are essential to delivering high-quality, personalised service, embodying the concept of 'human capital', the expertise that shapes outcomes (Borland & Smedes, 2024, p.l). This analysis is part of the Social Return on Investment (SROI) framework, embedded in a Cost Benefit Analysis (CBA). ACTA continues to advocate for government funding to support further research on this topic and help the community transport sector continue meeting passenger needs.

### **Client Story**

#### **Finding Connection Through Community Support.**

Ms. To, 85, immigrated to Perth from Vietnam in the 1980s. As her mother's carer, she had little opportunity to build social connections. After her mother and later her brother passed away, Ms

To lived alone, relying on her sister-in-law for support. However, language barriers and unfamiliarity with transport made her increasingly isolated.

Concerned about missed medical appointments, her sister-in-law reached out to Chung Wah Community Care.

Chung Wah's Cantonese-speaking staff helped Ms. To register with My Aged Care, securing transport and social support services. Weekly trips to our community hub transformed her life, she formed friendships, engaged in activities, and regained a sense of belonging in the community.



Ms. To shared with us: "我從來都無諗過可以再交到朋友", Ms. Muoi 住親切嘅笑容同我哋嘅員工講, "而家我真係好期待去中華社區中心,感覺就好似我喺度有個新屋企.



**Translation:** "I never thought I could make friends again," Ms. Muoi told our staff with a warm smile, "Now I really look forward to visiting Chung Wah Hub. It feels like I have a new family."

To prevent missed appointments, Chung Wah Community Care coordinated with her healthcare providers and ensured transport services were arranged. Now, Ms. To attends all medical visits with ease, supported by caring drivers and staff. The staff also accommodate her language needs and are able to assist with translation from English to her native language when necessary.

## **VOICE FROM THE COMMUNITY**

Carlos, 74, moved to Australia from Chile 30 years ago and speaks little English. After his wife's passing, he felt isolated and struggled to attend appointments. Public transport was overwhelming, and taxis offered no translation support, making travel even more difficult. Community Transport changed that. With the help of Spanish-speaking staff, Carlos received assistance with bookings, translations, and companionship during trips. As he had little English, he often avoided answering the phone and stayed inside his home after negative experiences in the community where he couldn't respond to conversations. His Community Transport provider built his confidence by offering translation support before, during and after the trip. For Carlos, Community Transport means more than just getting from one place to another, it has restored his social connection, reduced his loneliness, and provided him with dignified care and independence.

### **Client Story**





**Dementia Australia: Ron's Story** 

Ron lives with vascular dementia, which affects his daily life by causing challenges with thinking, reasoning, memory, and concentration. He also experiences physical symptoms, including balance issues and an unsteady gait.

He joined Dementia Australia's Respite program after his wife, Carol, noticed his growing isolation. As his condition progressed, he attended the Men's Group, where up to six men with dementia enjoy BBQs, walks, and games.

Community transport ensures Ron can participate, giving Carol much-needed respite. Without this service, Ron would face increased isolation and faster cognitive decline, while Carol would struggle with fewer breaks, increasing her risk of caregiver burnout. Losing transport could ultimately force an earlier move to institutional care. More than just a ride, this personalised service provides mobility support and reassurance. For Carol, it means dignity and care for Ron, and the ability to keep him at home longer. Community transport is a lifeline, keeping people connected, independent, and supported.