



Healthcare Travel Costs Scheme Awareness

September 2025



What we did

We want to find out what people in Bucks know about the NHS [Healthcare Travel Costs Scheme](#) (HTCS). This aims to help people who have no medical need for ambulance transport, but who might find it hard to afford travel to healthcare appointments. We heard from 154 people. All responses were collected between 24 July and 4 September 2025.

Key Findings

- + 86% (128/148) of survey respondents (and all of the discussion group participants) had not heard of the Healthcare Travel Costs Scheme (HTCS).
- + 75% (15/20) of those aware of the scheme, told us they did not know about the NHS online tool which helps to work out who can claim.
- + Only four respondents told us they had used the Healthcare Travel Costs Scheme (HTCS). Two of these said the process needed to be simpler and more details about the scheme should be publicised.
- + Not all respondents were aware of how, when and who can claim. For example,
 - o 78 believed you could claim online, but this is not an option yet.
 - o Only 59 thought carer's travel costs might be included.
- + 32 respondents told us they were in receipt of a low income benefit, but only the four who had already used the HTCS scheme had heard of it.
- + 31 people said they were unable to afford to go to their hospital referral with three of these (all on low income benefits) missing their appointment as a result.
- + 38 respondents told us more about the cost of travel and parking being difficult to afford. Some told us this increased their anxiety and has limited their access to healthcare. Others mentioned accessibility issues travel to hospital created.

- + Almost half of the respondents were unaware of any of the voluntary/subsidised transport schemes in Bucks we listed.

Our recommendations

We have made the following recommendations to Buckinghamshire Healthcare Trust (BHT).

- ✓ Actively promote the Healthcare Travel Costs Scheme e.g. ensure all invites (letters, texts etc.) for [referrals for specialist care](#) or to a hospital for further NHS treatment mentions the HTCS and put posters up on hospital noticeboards.
- ✓ Send publicity about the scheme (and the associated NHS online tool) to local voluntary and community groups and social enterprises (particularly those who support those on income related benefits) to improve awareness locally amongst their staff/clients.
- ✓ If not already present, add HTCS details to thejoyapp.com for Buckinghamshire; (e.g. under Transport) as [St Georges' Hospital](#) in London have done.
- ✓ Consider undertaking a pilot programme to see how online reimbursements under this scheme might work (especially regarding accuracy and accessibility).

We have made the following recommendations to Buckinghamshire Council.

- ✓ Raise the HTCS profile by mentioning it on the [Help with the cost of living \(Helping Hand\) | Buckinghamshire Council](#) page and the [Parking, roads and transport | Buckinghamshire Council](#) page. At the moment it only appears on the [Support if you have difficulty using public transport | Buckinghamshire Council](#) page.
- ✓ Continue to publicise the existing Buckinghamshire community transport hub and transport schemes.

We have made the following recommendation to Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board (BOB ICB)

- ✓ Encourage BOB ICB Communication and Engagement Team to actively promote the Healthcare Travel Costs Scheme in BOB ICB stakeholder newsletters as well as social media platforms

We have made the following recommendation to BHT, Buckinghamshire Council and BOB ICB.

- ☑ Work with INTs to publicise the NHS [Healthcare Travel Costs Scheme](#) to communities and individuals who may need help in travel costs to attend appointments.

What the project was about

Background

The [Healthcare Travel Costs Scheme](#) (HTCS) is designed to help people who do not have a medical need for ambulance transport, but who might find it hard to afford travel to healthcare appointments. If someone receives certain benefits or has a HC2 or HC3 certificate, they can apply to get back some of the reasonable travel expenses they paid. To qualify, these requirements must be met:

1. At the time of the appointment, the patient (or partner) must receive Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance, Pension Credit Guarantee Credit or [Universal Credit](#), or meet the eligibility criteria for the [NHS Low Income Scheme](#).
2. The patient must have a [referral for specialist care](#) from a healthcare professional to a specialist or a hospital for further NHS treatment.
3. The appointment must be on a separate visit to when the referral was made.

"Transport can be a barrier to accessing care. The Social Exclusion Unit estimates that 1.4 million people miss, turn down or simply choose not to seek health care because of transport problems."

([White paper – 'Our health, our care, our say'](#))

We continue to hear from people who say they are unable to get to healthcare appointments because of difficulties (including cost) getting to a location where healthcare is delivered. We have also listened to those who did not attend planned hospital appointments. A few people said they couldn't go because it was too expensive for them to get to the hospital. This can widen health inequalities and might lead to serious health problems for these individuals.

“A small step that could make a big difference to people facing inequalities would be understanding why people find it so hard to access the NHS travel schemes specifically designed to break down access barriers. The main scheme to support those on state benefits and/or low incomes with the costs of travel is the Healthcare Travel Costs Scheme (HTCS). However, the low uptake of the scheme compared to the number of those eligible suggest it is unknown to most people” ([National Voices](#), June 2025)

Moving forward, Integrated Neighbourhood Teams should reduce the amount of travel to health appointments for many, but it won't eliminate the problem for everyone.

The BOB ICB Joint Forward Plan aims to prioritise prevention, (to maintain good health), reduce health inequalities and promote 'Start well, live well, age well'. It is therefore particularly important to ensure those who are challenged by a cost of living crisis or because they live in a rural community (where there may be less public transport) know about the HTCS and how it works.

Our Aims

We wanted to find out what people in Bucks know about the [Healthcare Travel Costs Scheme](#) (HTCS). We expected to hear that most people are not aware of the HTCS, or the [NHS online tool](#) which might help them work out whether they could make a claim under this scheme.

Who talked to us

We heard from 154 people. We collected 148 survey responses between 24 July and 2 September 2025. The Winslow Hard of Hearing group also ran a discussion session on 4 September and collected responses from 6 of their members.

Full details about the survey respondents can be found in Appendix 2. We found the following:

- + 78% (104/133) identified as woman and 20 % (27/133) identified as a man.
- + 74% (99/133) identified as White British.
- + The median age of 104 respondents was 58.

- + Of the 117 people that gave valid postcodes, 15.4% (18) lived in “the bottom 40% of postcodes for levels of deprivation in England (IMD2019)”.

What we heard

This report reflects the views of the 148 people who completed our survey. More general comments from the discussion group have also been added. All lived in Bucks or were registered with a Bucks GP. Where we invited them to leave a comment, we analysed, and have summarised, these by theme. Where people commented on more than one theme, the number of comments is greater than the number people who responded. Full details about how people responded to our questions can be found in Appendix 3.

On a recent visit to Stoke Mandeville hospital we looked for posters advertising the scheme. We did not see any in general outpatients, the pre-op assessment area or the Oasis café.

Awareness of the Healthcare Travel Costs Scheme

86% (128/148) of respondents (and all 6 of those participating in the Hard of Hearing discussion group) told us they had not (or were unsure whether they’d) heard of the Healthcare Travel Costs Scheme (HTCS).

“I don't think this is widely advertised in any hospital setting”

“I have an adult son who could do with help. I don't think he knows about it”

“My brother receives PIP [personal independent payment] and UC [universal credit]. He has had numerous hospital appointments and travel wasn't always easy. I took him to countless appointments and have never heard of this scheme.”

Of those who were aware of the HTCS, 75% (15/20) told us they were not aware of the associated NHS online tool. This can help a person work out whether they could make a claim under this scheme.

Only four of these 20 respondents told us they had used the Healthcare Travel Costs Scheme (HTCS). We asked them what worked. While one person was satisfied with their experience, the other two who left comments were not.

“Absolutely nothing. I followed all advice and guidelines and was asked to jump through so many hoops it was made impossible to get reimbursed. Now I have to refuse appointments that are not at my local hospital.”

We also asked what could be improved for people who use the Healthcare Travel Costs Scheme. People said they wanted the process to be simpler and for more details about the scheme to be shared.

“Stop making it so difficult to claim.”

How when and who can claim?

Figure 1 shows **who** respondents would expect to be able to claim for travel costs under this scheme. They could tick as many answers as they wanted. 148 people gave at least one answer. The top two responses were:

- a patient seeing a specialist who is eligible for the NHS Low Income Scheme or in receipt of income related benefits e.g. Income Support, Jobseeker's Allowance or Universal Credit would be eligible
- a carer/escort

“You can claim travel costs for an escort if your healthcare professional says it's medically necessary for someone to travel with you.”

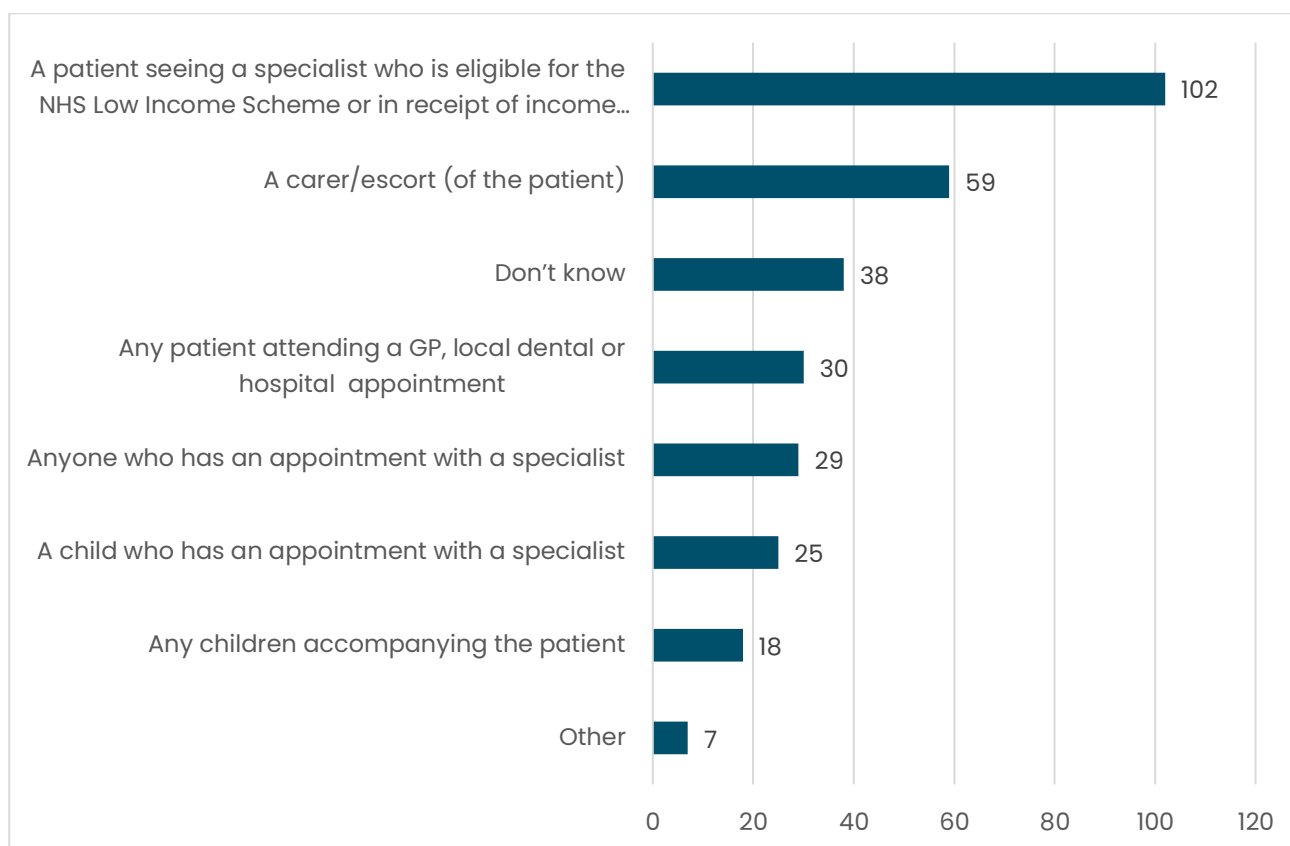


Figure 1 – Who would you expect to be able to claim for travel costs under this scheme?

While many correctly identified these two primary categories of claimants, not everyone did.

- 19% of respondents said they didn't know the answer and gave no other response.
- Approximately 20% incorrectly identified groups (e.g. anyone who has an appointment with a specialist) who would not qualify.

Seven people suggested other groups of people who should get help paying for their travel expenses. Several of these were aimed at helping people who may be less mobile than others.

“Anyone either disabled/elderly who lives in an outlying area with no regular transport and on limited income.”

“Patients with sight loss.”

These comments were reiterated by the discussion group.

“People not able to drive or afford a taxi.”

Figure 2 shows **which costs** respondents would expect to claim for. They could tick as many answers as they wanted. 148 people gave at least one answer.

- 33 said they didn't know.
- 63 said they thought a claim could be made for any type of transport which is not the case. Someone commented on what they understood as 'reasonable costs' which is what a person is permitted to claim under this NHS scheme.

"Most reasonable transport considering location, health and fitness of the user."

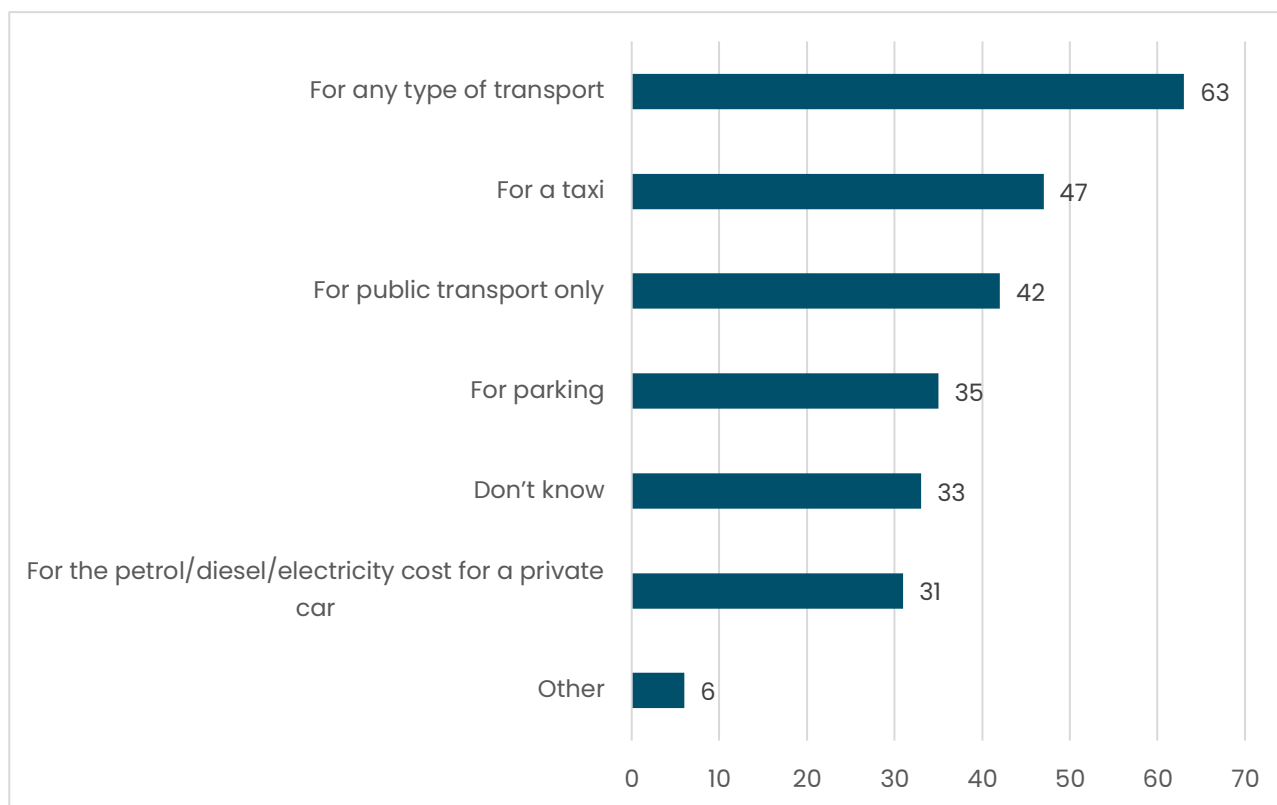


Figure 2 - Which costs would you expect to claim for?

Figure 3 shows **how** respondents would expect to make a claim under this scheme. They could tick as many answers as they wanted. 147 people gave at least one answer.

- 36 people said they didn't know and gave no other answers.
- Of other responses, 72% (78/108) thought that people would be able to claim online. This is not yet possible. The scheme aims to pay for reasonable travel costs after they have been incurred and pays the individual back at a cashier's office in the hospital. Alternatively, they can claim by post afterwards, but this must be made within three months of the expense.

- 23% (25/108) respondents thought people would be able to request for the cost of travel to be paid before attending the appointment. This is only available in some cases, and only by application.

In the discussion group, two people said they didn't know how a person could claim, and two others thought that it was possible to claim online.

We also heard directly from a social prescriber in Bucks

"I have used this, and the patient has found it easy to use and was successful with getting money back. You may want to know - they didn't use the form - he just took his UC statement to a cashier at the hospital, with travel cost receipt and got his money back there and then. "

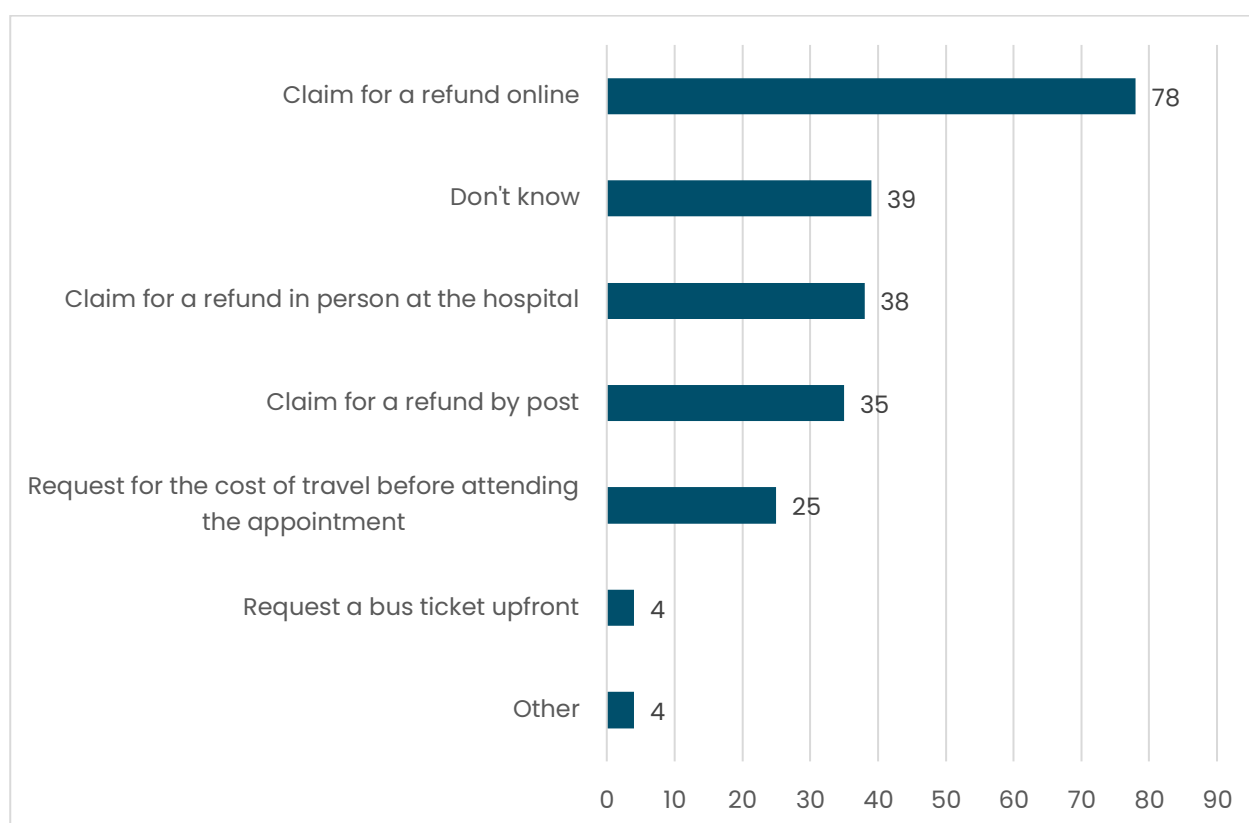


Figure 3 - How would you expect to make a claim under this scheme?

Table 1 shows that three quarters (112/147) of respondents told us they did not receive a range of low income benefits we listed.

Benefits	Total
Income support	2
Jobseeker's Allowance	0

Employment and Support Allowance	6
Pension Credit Guarantee Credit	7
Universal Credit	22
I am eligible for the NHS Low Income Scheme	1
I don't qualify for any of these benefits/schemes	112
Total	147

Table 1 – Do you receive any of these benefits?

However, 31 respondents did, and would therefore be entitled to claim under the HTCS if they had a [referral for specialist care](#) from a healthcare professional to a specialist or a hospital for further NHS treatment. Figure 4 shows that few of these respondents were aware of the scheme. The four that were aware of the HTCS were those who had already made a claim under the scheme.

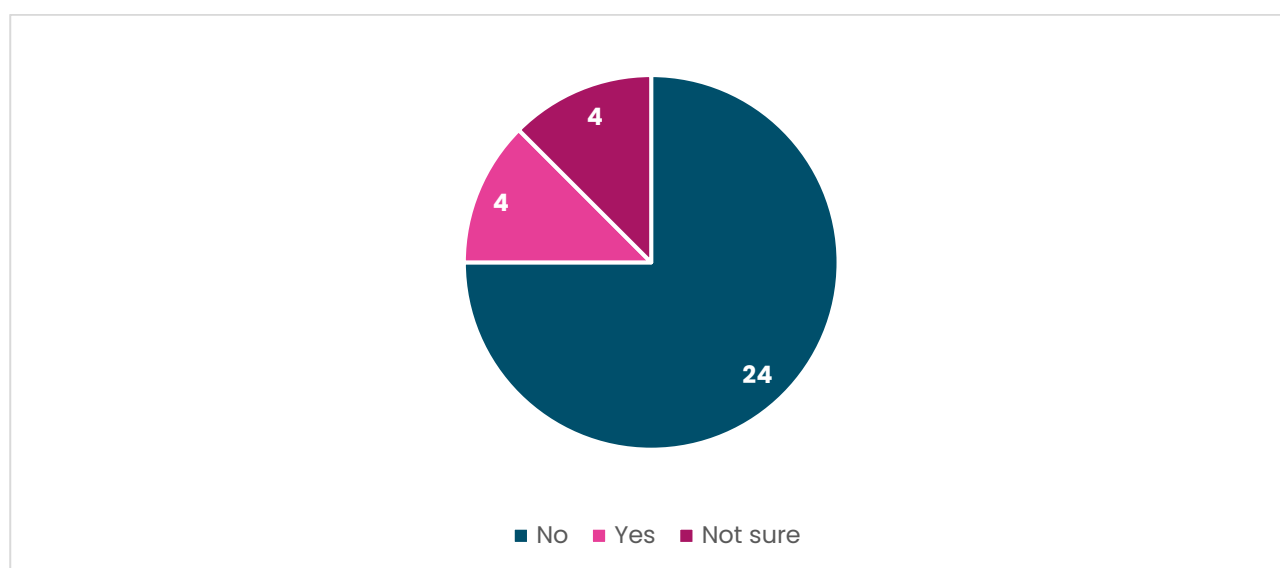


Figure 4 – Awareness of respondents on named benefits of the HTCS

Affording transport costs

We asked more about whether people had ever found themselves unable to pay to go to a hospital appointment for specialist treatment or medical tests. Table 2 shows that 31 people said they were unable to afford to go to their hospital referral with three of these (all in receipt of low income benefits) missing their appointment as a result.

I could not afford to go	Total
Yes, but I went to the appointment	28
Yes, and I had to miss the appointment	3

No	88
Prefer not to say	10
Not applicable	18
Total	147

Table 2 – Have you not been able to afford to go to a hospital appointment for specialist treatment or medical tests?

One person said they had to use an overdraft facility to pay for them while another said they had to budget accordingly.

“I had to go without other things that I needed in order to pay the £9 parking charge at Stoke Mandeville Hospital.”

Some get help from friends, family or other support.

“With long travel distances and associated costs for specialist hospital appointments, it has been hard to afford to cover the costs. Only one occasion was I able to get a tiny amount of money towards considerable travel via a hospital directly...”

But others do not.

“Cost a lot and had to miss appointments because of it. [Travel] cost me more than £15. Hard to get the bus especially with disabilities”

“I have been offered an Upper Limb Course, and I am unable to find the appropriate transport within my costs to attend these sessions. I am a MS Patient.”

Figure 5 shows what aspects of travel 38 respondents found difficult to afford. They could tick as many answers as they wanted.

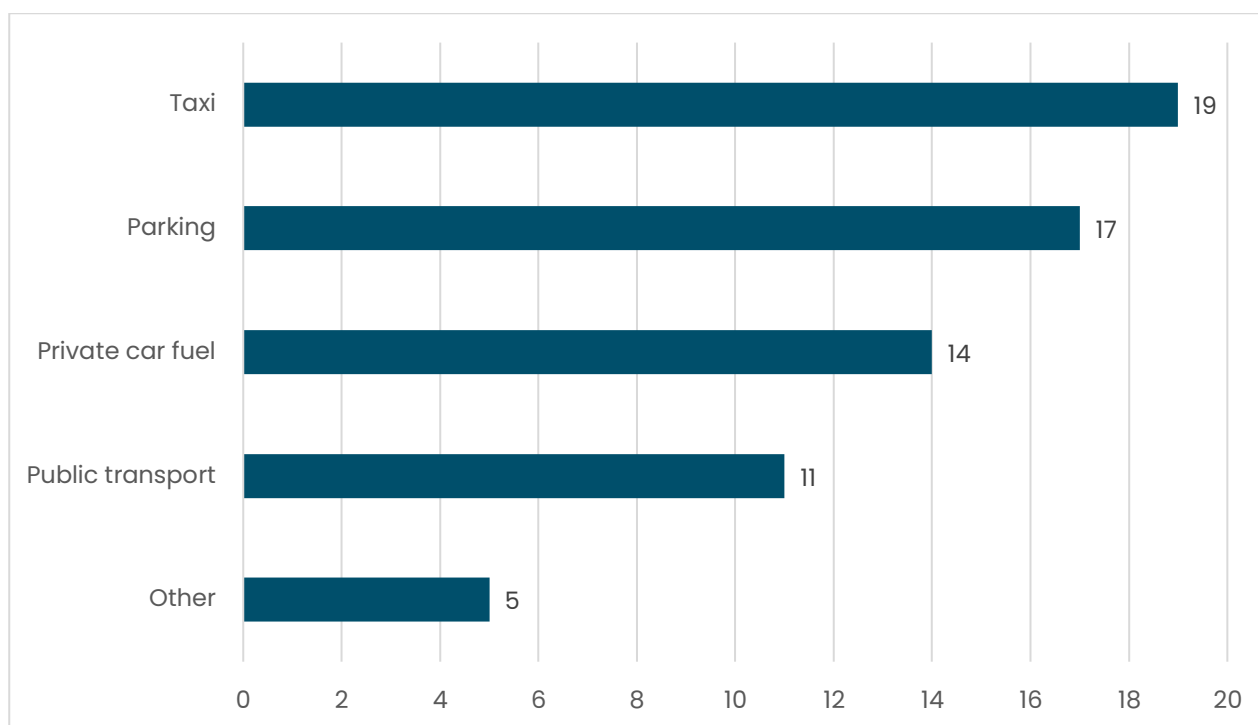


Figure 5 - Which parts of the travel were difficult to afford?

People were mainly concerned about how much it would cost to travel to a specific hospital and how much parking would be. One person mentioned that blue badge permits only allow parking for a limited time, so if their appointment ran late or lasted a long time, they would need to pay for parking.

"I have been quoted up to £200 for transport to John Radcliffe Hospital (when I couldn't find other transport) which is extortionate for anyone."

"Time to get there. Frequently go Buckingham to High Wycombe, Buckingham to Oxford hospitals. Takes ages and costs £sss in fuel and parking."

"It was difficult to pay taxis from High Wycombe. I did not have the money to go to Stoke Mandeville."

Other travel schemes

Figure 6 shows people's awareness of voluntary/subsidised transport schemes in Bucks (which may be able to help get individuals to medical appointments). 44% (63/142) of respondents were unaware of any of the transport schemes we listed.

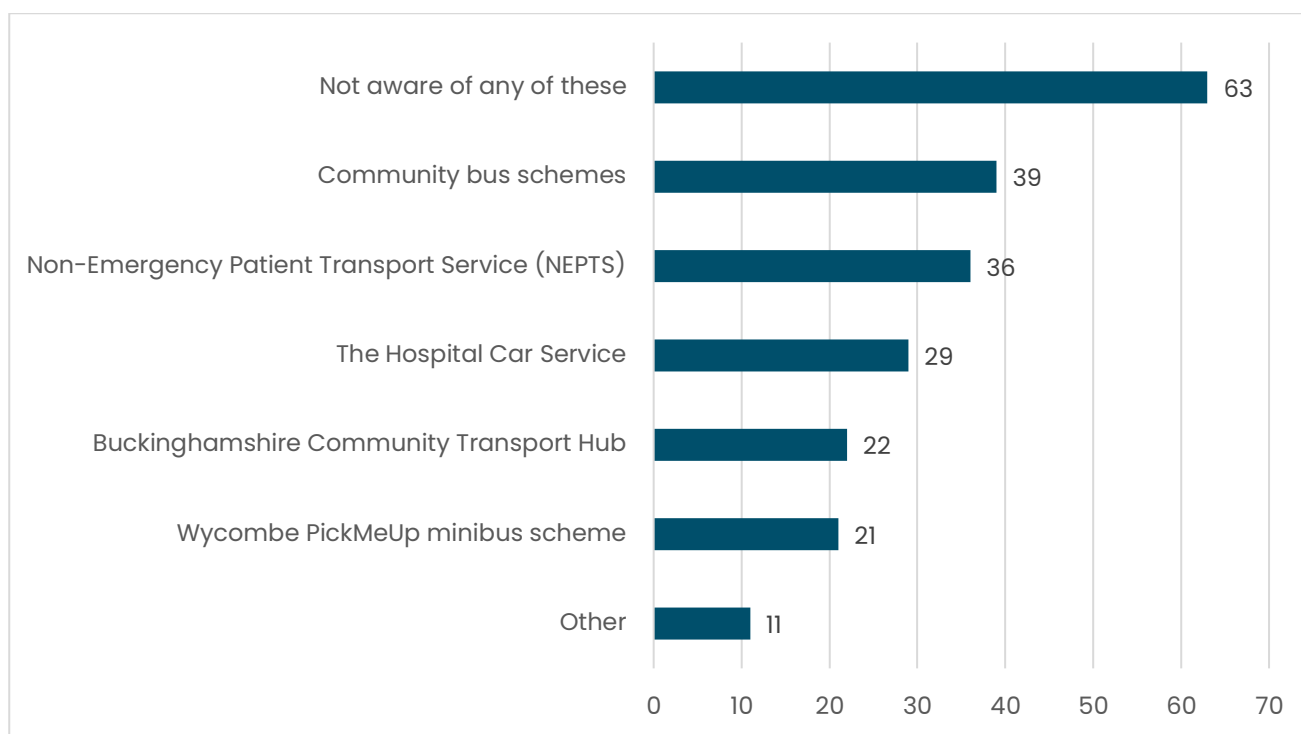


Figure 6 – Which of these other voluntary/subsidised transport schemes have you heard of?

Any other comments

51 people provided additional comments. Apart from a few general comments, **parking** (22) at the hospital was the biggest concern. Several people complained about the price of parking being inconsistent across different hospital trusts as well as expensive.

“Hospital car park charges are too expensive and feels like the companies are exploiting people who are coming to hospital for care.”

“I think it should be free parking for people who are old, disabled, low income, dependent and have long term illnesses.”

One person suggested reduced parking fees for those who attend regularly.

“People who are receiving regular or long term healthcare at a medical centre where parking is charged for should be able to buy a block of tickets at a cheaper rate, especially if elderly, have a carer, long term mobility or on benefits due to health reasons.”

Several also mentioned that there is insufficient hospital parking for cars and sometimes motorcycles.

One person did say they had positive experiences when appointments had fitted within free parking periods at certain hospitals.

“... I have also had really efficient services at Wexham Park hospital ... in and out for blood tests within the free parking period.”

Six people wanted the NHS to understand that they found having to travel, often outside their immediate neighbourhood, to a hospital appointment very **stressful**. This was especially true for someone who was vulnerable and lived alone, often without any family nearby.

“Always a challenging and difficult area which adds to the distress and burden of appointments and trying to seek healthcare. It is an extra layer of worry and concern for many, and no doubt impacts their wellbeing even more so when they may be suffering already.”

“Parking is a nightmare. I drove myself to an appointment at Stoke Mandeville hospital last year. I was there with 45 minutes in hand ... I couldn't find a space in any car park. I tried to phone the clinic but couldn't get through to anyone and left an answer on a voicemail. I was outside driving around when the appointment time came. Eventually I left my car on double yellow lines. I arrived at my appointment stressed and in tears. I was told that I was likely to get a parking fine. I have been reluctant to attend appointments there since then.”

Five people also had issues with **accessibility**.

“Issues with lack of availability of disabled parking bays at High Wycombe general hospital, Amersham hospital and Stoke Mandeville hospital (SMH).”

“It is difficult living in Brill with no transportation, and I am housebound, cannot get Age Concern to take me to hospital as they tell me I have difficulty in getting into their vehicles must get there by other means”

The **cost of transport** (7) to medical appointments was also mentioned whether respondents were on low income benefits or not. Those who were older, and with long-term health conditions commented on this the most.

"It cannot be assumed that if you are not in receipt of state benefits that you can afford the additional costs of travel and parking to hospital appointments, sometimes over a long period of time."

"It can be unaffordable when the hospital appointments are not local."

"I have to pay for volunteer transport to take me to all hospital appointments. £20 to attend my nearest hospital Stoke Mandeville, £37 to attend High Wycombe & that is only for short appointments. If I am having a procedure, I have to pay twice, I'm 78 yrs old."

Seven identified transport as something which stopped them **accessing health services**. For four, this was because they felt the transport costs was unaffordable.

"I would need to use a taxi to ensure I arrived at my appointment in time. This would probably cost £40 each way which is a lot of money. I can get a bus from Amersham to High Wycombe but there is a fair walk at the other end..."

Two people said it was the infrequency of public transport which made accessing healthcare difficult.

"In Buckingham it is hard to access any health services by public transport. Out of the question, in fact. In my village (Maids Moreton) there is one bus a day into Buckingham, so any appointment even at the GP surgery is impossible ... To get to the hospitals... is not practical ... by public transport..."

A few people did not understand why they needed to go to hospitals further away rather than one near to where they lived.

"Never understood why going to High Wycombe and Oxford is better than going to Milton Keynes or Northampton; both are closer and easier to get to but keep getting sent to far away places."

"Buckingham too far from hospitals for older persons to drive. It is difficult attending appointments. The car transport we used did not turn up until 1.20pm to get us to SMH for 2pm appointment. Very stressful."

Three people found the transport booked did not always turn up when they needed it.

"Used hospital transport service to go to hospital but was left there as operation was delayed and return journey was outside office hours."

"Travel to the hospital is difficult, taxis not turning up on time and then forced to miss appointment as a result – they won't see me."

Four people wanted more information about the HTCS scheme and /or the subsidised transport in Bucks.

"I would like to hear more about the voluntary/subsidised transport schemes as I know nothing of any of them, and as I live alone would be most helpful."

Acknowledgements

We thank all the people who completed our survey and those organisations who helped promote it.

Disclaimer

Please note this report summarises what we heard. It does not necessarily reflect the awareness or experiences of all people living in, or registered with a GP in, Bucks.

If you require this report in an alternative format, please contact us.

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Appendix 1

More about our approach

Who we contacted

We approached a range of organisations to promote the survey. These included:

Parkinsons Society	FACT Bucks	Carers Bucks
All local Community Boards	Oasis Partnership group	Department for Work & Pensions
BOB ICB Social Prescribing Manager	Wycombe and Aylesbury Homeless Connections	Parkinsons Society
Buckinghamshire Libraries	Connection Support	Chiltern Music Therapy
Winslow Big Society	Buckinghamshire Health & Social Care Academy	Age UK Bucks
Health on the High Street	Missenden Walled Garden	MS Society
Macular Society	The Vineyard	Southcourt Baptist Church

We also collected survey responses directly at a Community Action day in Friars Square, Aylesbury. Winslow hard of Hearing group also held a discussion based on the survey question set.

Who we will share our findings with

We will share our findings with the Care Quality Commission and Healthwatch England, the independent national champion for people who use health and social care services. We also share all our reports with Buckinghamshire Healthcare Trust; the Buckinghamshire Council Health and Wellbeing Board and the Health and Adult Social Care Select Committee.

How we follow up on our recommendations

We will request a formal response to our recommendations from:

- Buckinghamshire Healthcare Trust
- Buckinghamshire Council
- Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board

We will follow-up each formal response to confirm what changes have been made.

Appendix 2 – Who talked to us

How old are you?

Age Group	Total
16 to 17 years	1
18 to 25 years	2
26 to 35 years	7
36 to 45 years	20
46 to 55 years	23
56 to 65 years	35
66 to 75 years	20
76 to 85 years	19
86 years and above	5
Prefer not to say	1
Total	133

Please tell us your gender

Gender	Total
Woman	104
Man	27
Prefer not to say	1
Prefer to self-describe	1
Total	133

Please tell us if you have a disability

Do you have a disability?	Total
No	85
Yes	41
Prefer not to say	6
Total	132

Please tell us your ethnicity

Ethnic Group	Total
Arab	1
Asian / Asian British: Chinese	1
Asian / Asian British: Indian	3
Asian / Asian British: Pakistani	9
Asian / Asian British: Any other Asian / Asian British background	2
Black / Black British: African	2
Black / Black British: Caribbean	2
White: British / English / Northern Irish / Scottish / Welsh	99
White: Irish	3
White: Any other White background	4
Prefer not to say	7
Total	133

Please tell us if you have a long term health condition

Do you have a long-term health condition?	Total
No	55
Yes	74
Prefer not to say	4
Total	133

Please tell us if you consider yourself to be a carer

Are you a carer?	Total
No	93
Yes	35
Prefer not to say	2
Total	130

Please tell us your sexual orientation

Your sexual orientation	Total
Heterosexual / Straight	116
Asexual	1
Bisexual	2
Pansexual	1
Prefer not to say	11
Prefer to self-describe	1
Total	105

Appendix 3 – What did people tell us?

Have you heard of the Healthcare Travel Costs Scheme (HTCS)?

	Total
Yes	15
No	128
Not sure	5
Total	148

Are you aware of the NHS online tool which might help work out whether you could make a claim under this scheme?

	Total
Yes	5
No	10
Not sure	5
Total	20