



Macclesfield District General Hospital

Implementation Travel Plan

30 November 2007

East Cheshire **NHS**
NHS Trust



Macclesfield District General Hospital

TRAVEL PLAN

November 2007

Safe, Effective and Efficient Specialist Acute Healthcare

Chairman: Kathy Cowell

Chief Executive: John Wilbraham



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Chief Executives Statement

The Trust is currently at an exciting part of its history as it shapes its services for the future. Whilst doing this the Trust Board recognises that it has responsibilities to the wider community as well as to its patients, visitors and staff. A major issue faced by the Trust is traffic congestion and this annual travel plan sets out the initiatives the Trust is undertaking in order to reduce the use of cars on to its premises.

There is much discussion about the need to reduce carbon emissions to ensure a sustainable future and the Trust as a major institution in the local economy can and should play a role in this area. By working to reduce the level of vehicles coming to the site not only will there be an environmental benefit but there are also other benefits.

It is well known that the demand for car parking at present outweighs the availability of spaces. This causes frustration for many people visiting the Macclesfield Hospital site. If the volume of cars visiting the Trust drops, then this level of frustration will fall, increasing the satisfaction of both patients and staff.

This will improve the experience of the patient which, as a Trust Board objective, is a consideration for patients choosing this Hospital for their treatment. For staff this should mean less stress when arriving for work with no need to either arrive early to ensure a space is found or driving around the site looking for somewhere to park.

The drop in the volume of traffic would also lead to a reduction in the congestion being experienced by those people living around the borders of our hospital. It is important that we act as a good neighbour and demonstrate that we do take into account consequences of our activities on those living close by. By so doing again we can enhance the reputation of the Trust in the local community.

Of course to be successful in these aims we need to enable those people who could travel to work in a different way to do so. The plan sets out the initiatives to engage people, primarily staff, to walk, cycle or to share cars or use public transport. Clearly where people walk or cycle to work then there is also the health benefit to those individuals, again something we as a Health Organisation should be seeking to promote.

I hope you find the plan informative and feel challenged in changing the way you get to the Hospital to play your part in achieving these benefits.

John Wilbraham
Chief Executive

1 Introduction

1.1 Introduction

This Travel Plan (TP) has been prepared by Faber Maunsell (FM) on behalf of Macclesfield Hospital NHS Trust (the Trust) in conjunction with Cheshire County Council (CCC).

This report details the Sustainable Transport Initiatives to be provided by the Trust. Measures and targets have been set for a reduction in car travel. These will be monitored against results obtained from future staff surveys.

1.1.1

Vision

The vision of East Cheshire NHS Trust is as follows:-

To be:

- A provider of excellent services;
- A friendly and helpful Trust where people work together;
- The hospital of choice for the people of eastern Cheshire and local environs;
- An outstanding employer providing a workplace where staff feel involved and respected;
- Known for actively involving the public in planning and developing services;
- An active partner with statutory and voluntary health and social care agencies; and
- Eligible for 'Foundation Trust' status.

1.1.2

The Purpose of a Travel Plan

A travel plan is a way of managing how people travel to a particular area or organisation. This travel plan addresses:

- Staff travelling to and from the workplace;
- Staff travel mode for work; and
- Deliveries to and from the site.

The Trust needs to have a travel plan as it has:

- Parking problems due to lack of spaces;
- Traffic congestion in and around the site;
- A commitment to the environment; and
- A commitment to encouraging healthier lifestyles.

1.1.3

The Benefits of a Travel Plan

The main benefits that can be expected from the travel plan are as follows:-

Benefits to staff, visitors and patients.

- Services that are easier to access by all forms of transport, reducing anxiety and frustration and leading to better health outcomes from treatment.
- Reduced travel costs;
- Staff generally healthier due to increased exercise;
- Creates a level playing field for all travellers, thereby enabling more people to be able to apply for jobs; and
- Provide choice through increasing travel and working options.

Benefits for the Trust:

- Improved recruitment and retention of staff by providing a wider choice of candidates; improving morale and reducing absenteeism;
- Lower mileage claims and more effective use of staff time;
- Reduced demand for car parking;

- Reduced costs for use of land for car parking including capital charges, maintenance and security;
- Released car parking space for alternative uses, i.e. delivery of services;
- Increased revenue through parking charges which can be used to fund travel plan initiatives;
- Timely patient attendance at appointments;
- Presenting a positive image of the organisation;
- Fewer complaints; and
- Improving relations with the local community and the local authority.

Benefits to the community:

- Help to reduce congestion both locally and further field and thereby reduces the Trust's carbon footprint; and
- Help to improve air quality and reduce road accidents and noise.

1.1.4

Key Message

The key message that this Travel Plan should present is that "small changes by each of us will make big changes for us all".

1.2

Background

Macclesfield Hospital forms part of East Cheshire NHS Trust. East Cheshire NHS Trust provides services for a population of circa 200,000 people at Macclesfield, Congleton and Knutsford sites, as well as at Poynton, Wilmslow and Handforth clinics and most recently alongside Primary Care colleagues at the Waters Green 'super surgery'.

Macclesfield District General Hospital is one of the largest employers in the area and generates a significant amount of traffic both in the vicinity of the site and within its curtilage. The volume of traffic to and from the hospital has risen over the last few years with an increase in activity on site and more reliance by staff and visitors on the car. It is becoming increasingly difficult for staff and visitors to find a parking space when they arrive at the hospital. Illegal parking is creating traffic safety issues and compromising access by emergency and delivery vehicles. Approach roads are becoming busier as traffic levels continue to increase and on-street parking is also adding to these problems. Complaints are made to the hospital by neighbours on a regular basis.

The trust produced a commuter plan in 2003 to encourage alternative means of transport to that of the car. This had moderate success at the outset but has since declined in effectiveness.

The trust is required however in meeting its service targets to further develop the hospital site which will potentially generate more traffic and congestion. Planning approval for the development of the Stroke Rehabilitation Centre was granted by Macclesfield Borough Council. This approval was based on a planning condition which included the Trust providing cycle shelters and stands and producing a Travel Plan to effectively manage the future transport provision to the site.

It is anticipated that the Travel Plan will be an ongoing process and will respond to changes as they occur and where appropriate as a result of further planning requirements resulting from additional developments on site. This report therefore acts as a working document which will evolve and develop over time as it responds to changes and improvements at the hospital.



Photo 1 – Unmanaged Parking at Macclesfield Hospital

1.2.1

Profile

The borough of Macclesfield is home to approximately 150,000 people. Macclesfield District General Hospital (MDGH) is the main acute healthcare provider in the area, which encompasses Macclesfield, Congleton, Knutsford, Wilmslow and Poynton.

MDGH is situated about 1Km from Macclesfield town centre.

The railway and bus stations are both located approximately 1.6km from the site. The MDGH site has a bus stop located next to the Accident and Emergency Department which is served by the local operators.

The Hospital can be accessed by car and foot via two entrances off either Victoria Road or Fieldbank Road.

There are approximately 2760 employees on the MDGH site working for three different Trusts including East Cheshire NHS Trust, Central and Eastern Cheshire Primary Care Trust and Cheshire and Wirral Partnership Trust, of these 1366 are part time staff. In addition, approximately 233 staff are employed to provide ancillary services e.g. porters, domestics, ground maintenance, catering, linen, security and switchboard services. MDGH also accommodates other organisations. The site is split into two parts, namely the Green Zone (main hospital) and Blue Zone (old West Park).

1.3

Travel Plan Co-ordinator and Contacts

The travel plan co-ordinator at Macclesfield Hospital is and will continue to be Lyn Scullion, her contact details are as follows:

Email: Lyn.Scullion@echeshire-tr.nwest.nhs.uk

Tel: 01625 663605.

Lyn will also be the main contact for the hospital travel plan steering group; known as 'Drivers for Change'.

A representative from each of the hospital departments will be in attendance at steering group meetings.

Cheshire County Council's travel co-ordinator Jenny Lees will be available to attend steering group meetings if necessary; her contact details are as follows:

Email: Jenny.Lees@cheshire.gov.uk

Tel: 01244 603996.

1.4

Report Structure

This report contains six further chapters and these are as follows:

- **Chapter 2** provides details of a transport SWOT analysis for the hospital,
- **Chapter 3** details the results of the Travel Plan questionnaire survey,
- **Chapter 4** details the master-plan proposals and parking numbers,
- **Chapter 5** details the travel plan measures or initiatives to be imposed at the hospital,
- **Chapter 6** outlines details of targets and monitoring, and
- **Chapter 7** summarises this report.

2 Transport SWOT Analysis

2.1 Strengths

The Trust's site has strengths including:

- Being well located on road and public transport networks;
- A travel plan co-ordinator in post;
- Car sharing in place;
- A level of car parking management;
- Bus stops close to the site; and
- A number of initiatives to encourage use of bicycle and public transport, such as:-
 - Cycle Parking (Secure and Covered);
 - Provision of bus service information.

2.2 Weaknesses

The weaknesses include:

- A history of piecemeal developments on the site leading to inefficient use of space and congestion around the site;
- A large employer in the area resulting in significant levels of traffic being generated;
- As a result of the piecemeal developments, poor layout of car parking and insufficient space to meet demand;
- Too few 'carrots' or 'sticks' to stem the demand and encourage behaviour changes, including low parking charges; and
- Further developments on the hospital site and a desire to develop further leading to increased demand for car parking.

2.3 Opportunities

However there are opportunities:

- To improve the layout and increase the number of car parking spaces;
- To manage the parking to discourage staff from using the spaces that could be used by patients and visitors;
- To hypothecate monies from car parking charges into improving the staff parking and travel and contribute to additional public transport services where necessary;
- To develop the site and improve access as a result;
- To investigate opportunities for enhancing bus travel to the hospital; and
- To link the site to local cycle routes.

2.4 Threats

Significant threats exist from:

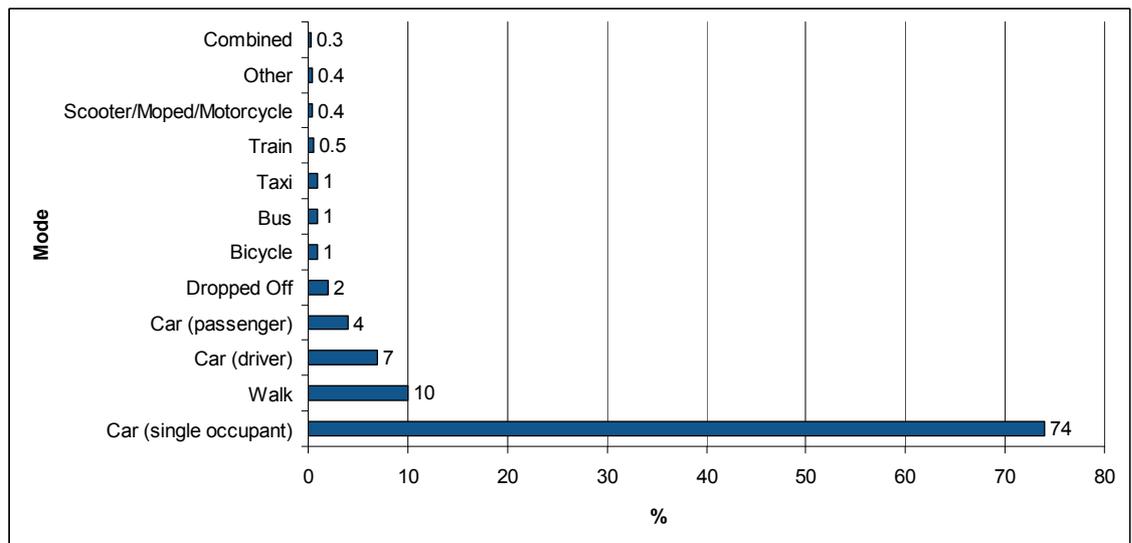
- Continued reliance on the car;
- Recruitment and retention of staff being affected by poor access to the site;
- Lack of parking available for patients and visitors; and
- Increasing levels of complaints from neighbours regarding on-street parking.

3 Results of Travel Plan Survey

3.1 2003 Travel Survey

A staff travel survey was undertaken in 2003 with the assistance of Travelwise at CCC. The travel mode split established from this travel survey is illustrated in the table below:

Figure 3.1 2003 Travel Plan Survey Modal Split



3.2 June 2007 Travel Survey

A revised staff travel survey was issued to all members of staff on the 14th June 2007 and returned on 27th June 2007. 1800 copies of the staff travel survey were issued and 688 completed forms were returned, giving a return rate of 38%. The results presented below should be interpreted carefully and consider the return rate achieved following the staff survey. A copy of the staff travel survey can be found at **Appendix A** of this report.

3.3 Respondent Profile

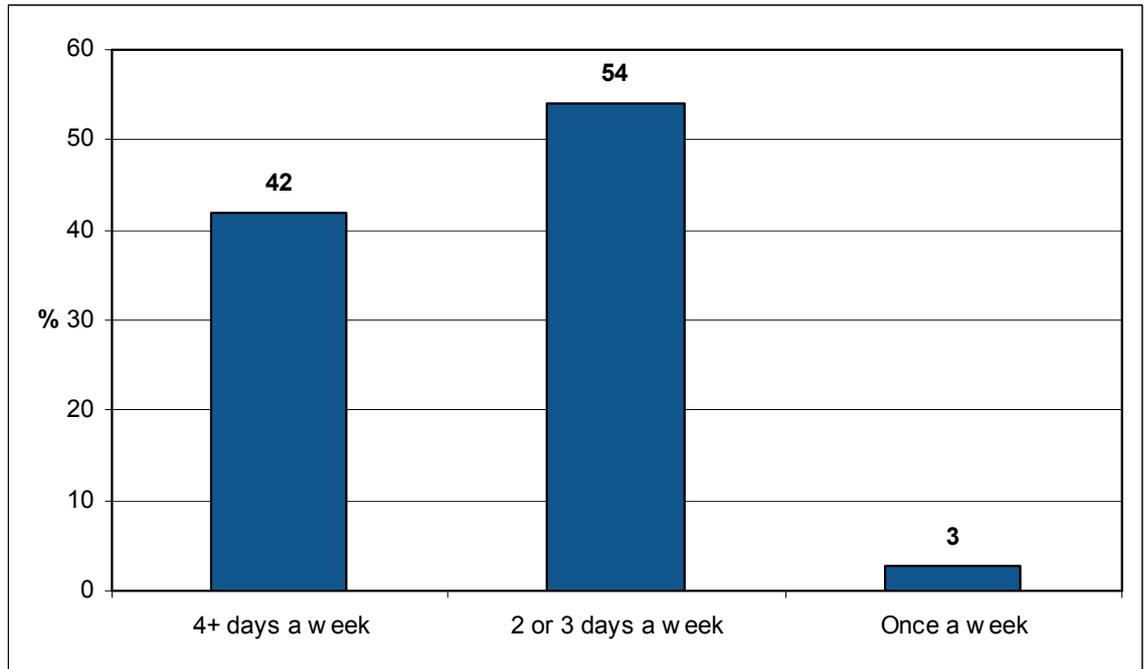
In total 688 questionnaires were returned, with 57% of the sample full time employees and 43% part time employees, and this can be seen in Table 3.1 below.

Table 3.1 Work Status of Respondents

Employees	%
Full Time	57%
Part Time	43%
N	673

Of those part time employees, most (54%) worked 2 or 3 days a week followed by those who worked 4 or more days a week (42%). This implies that some part time employees worked shorter hours but more frequently (for example part time hours over 5 days).

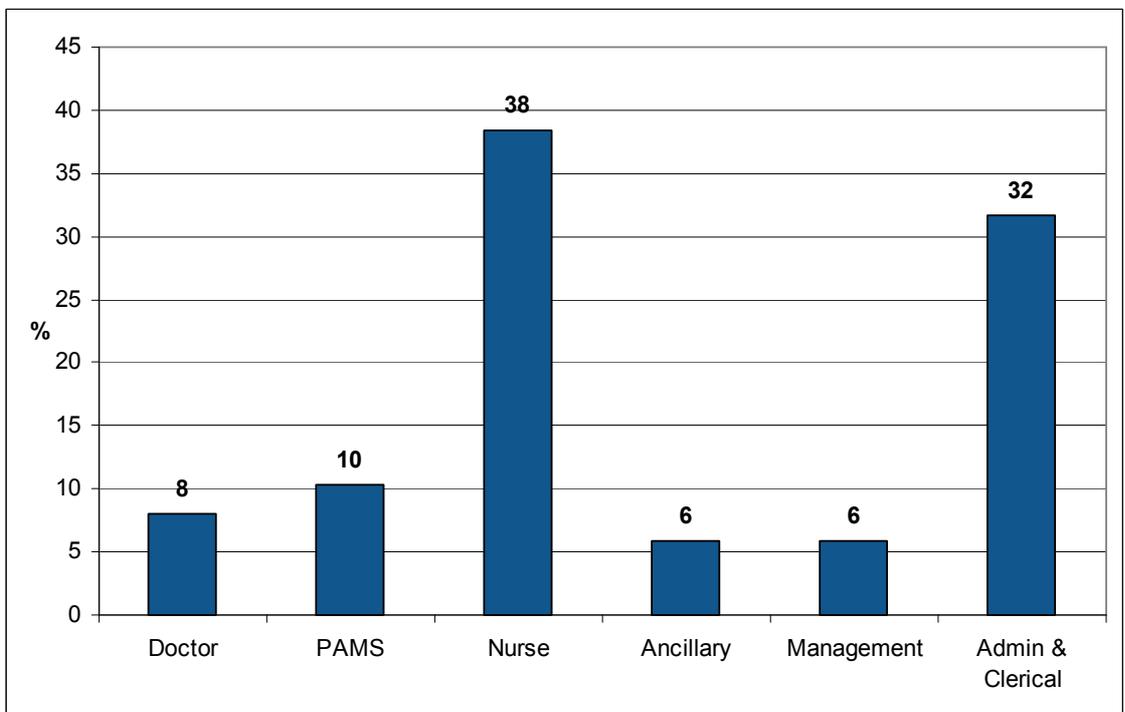
Figure 3.2 Number of Working Days for Part-Time Staff



Base= 289

From **Figure 3.3** we can see that most respondents (38%) were employed as Nurses followed by Administrative and Clerical staff (32%).

Figure 3.3 Occupation

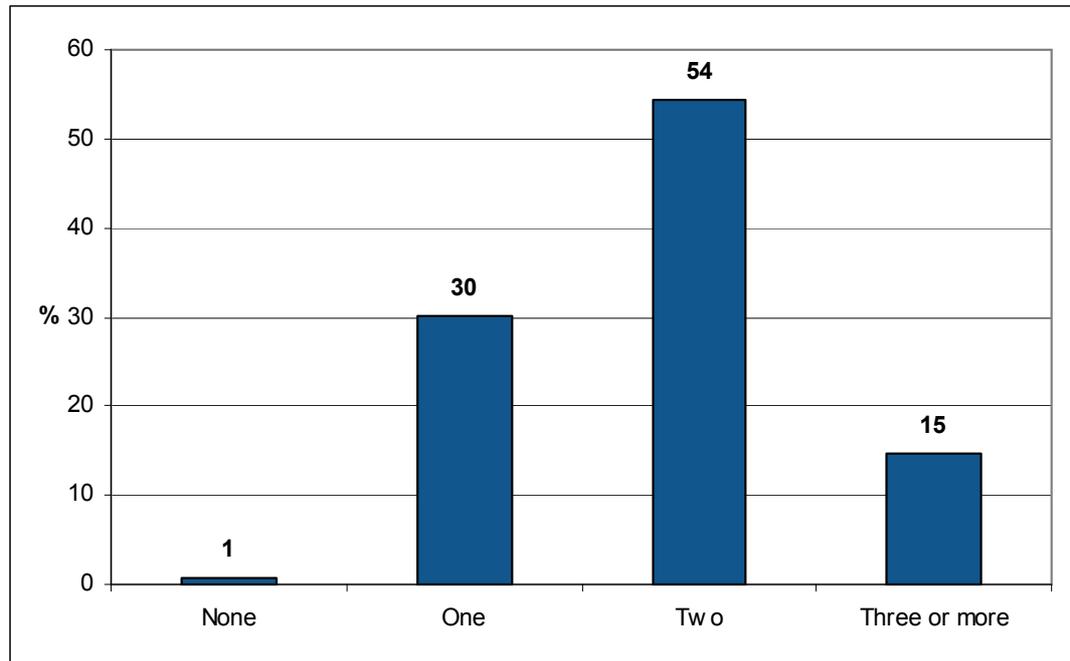


Base = 613

Respondents who travelled to work by car were asked how many cars were available for use in their household. Most (54%) had 2 cars available for use, 30% had one car available and 15%

had 3 cars or more. Only 1% of respondents had no car available for use. These respondents are likely to have travelled to work by car as a passenger.

Figure 3.4 Number of Cars in Household



Base = 554

Only a minority of respondents (5%) were blue badge holders (disabled parking badge).

3.4

Journey Origin

Respondents were asked to provide their home postcode. This data was used to ascertain where respondents had travelled from (origin).

In total 603 (88%) valid postcodes were mapped. The following maps plot the origins of respondents who travel to Macclesfield District Hospital for work purposes.

Figure 3.5 Journey Origins – North West Region

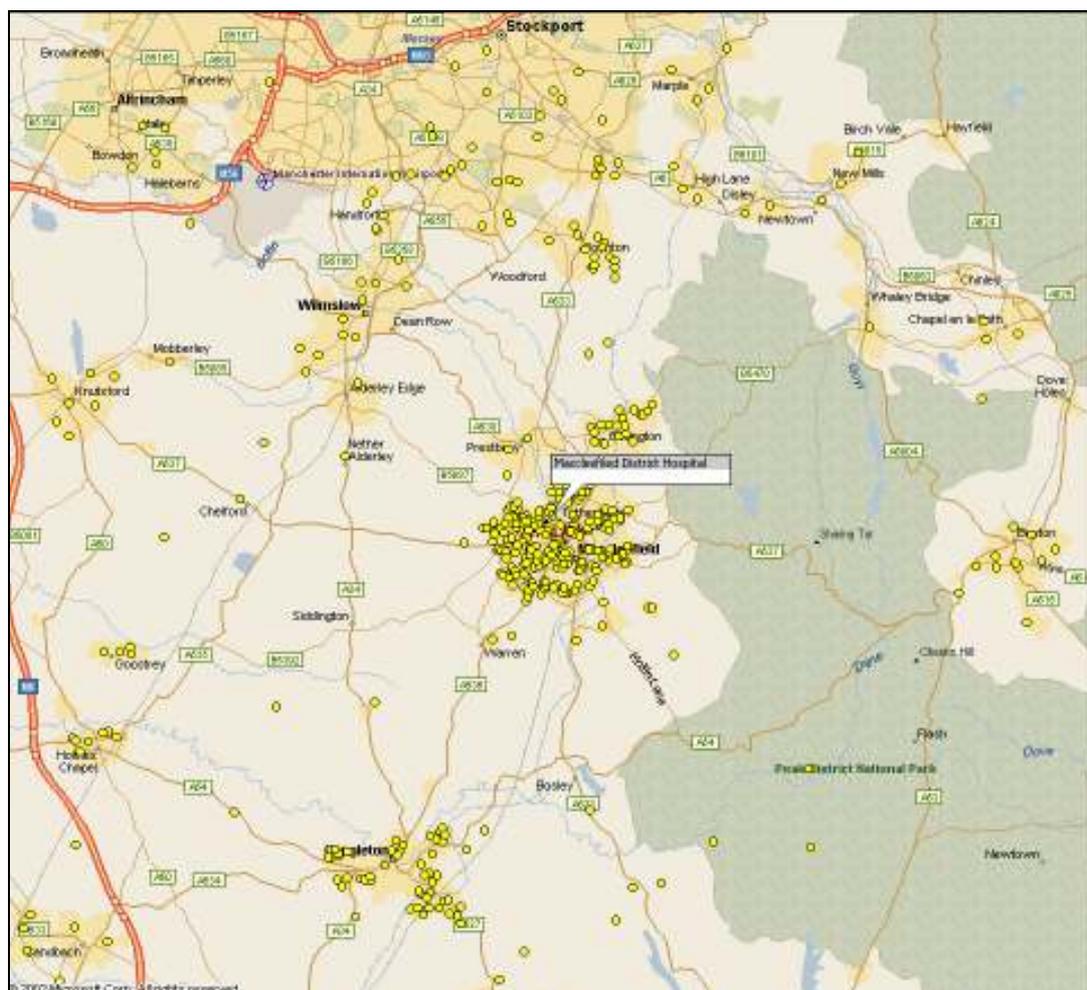


● Origins (Home Postcode)

Most of the respondents provided a home postcode in the North West region and this can be seen in **Figure 3.5**. We can see that the majority of origins were clustered around the Macclesfield and surrounding area indicating that hospital staff that completed the survey questionnaire did not have very far to travel.

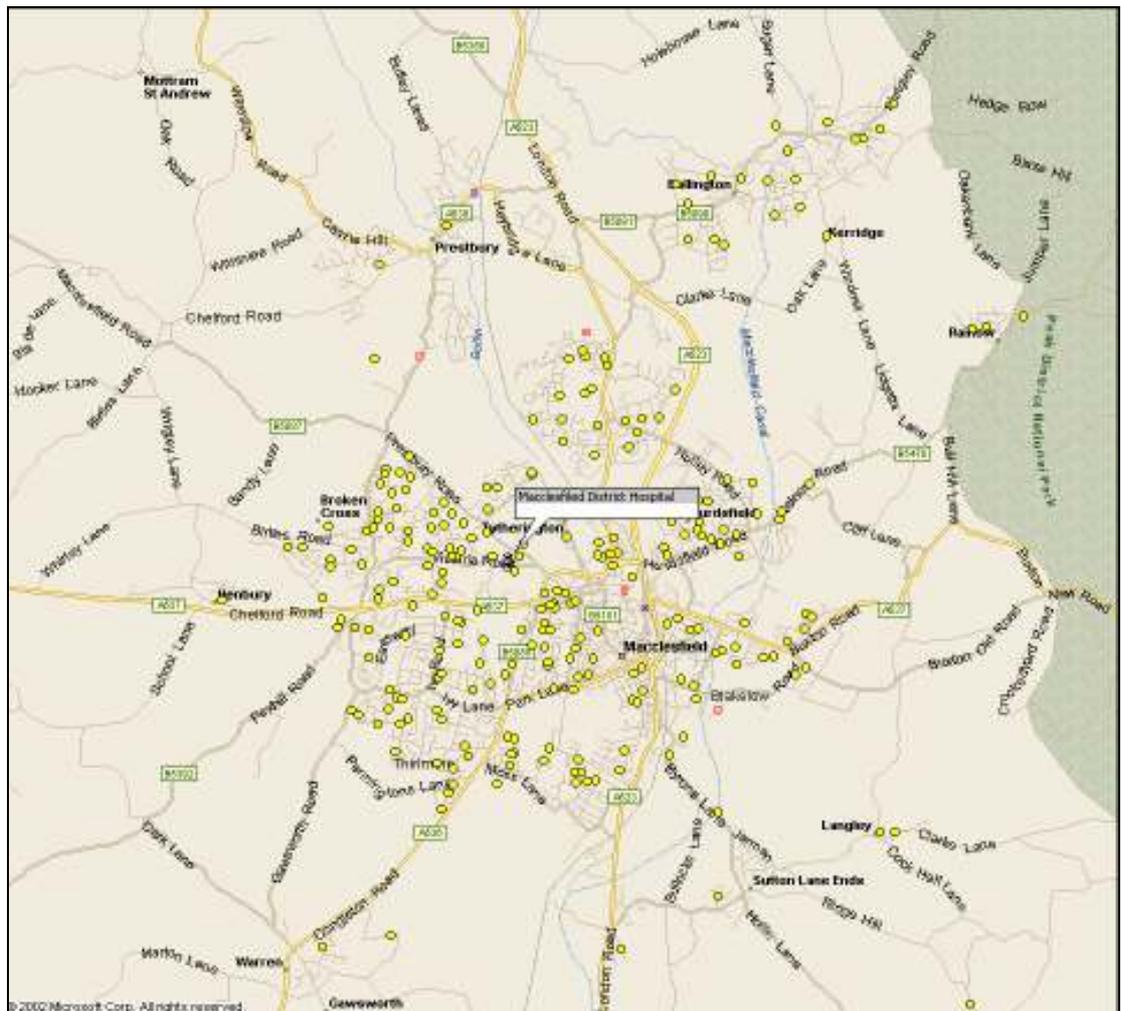
Figure 3.6 below shows those home postcodes that were within approximately 20km of Macclesfield District Hospital. Again we can see large clusters of home post codes in the Macclesfield central areas with further clusters in surrounding townships such as Congleton, Knutsford, Holmes Chapel, Wilmslow and Buxton. There were also less clustered home postcodes scattered around the southern Stockport area.

Figure 3.6 Journey Origins – Macclesfield & Surround Area (within 20km)



● Origins (Home Postcode)

Figure 3.7 Journey Origins – Macclesfield Central Area



● Origins (Home Postcode)

From **Figure 3.7** we can see that numerous home postcodes were within the Macclesfield Town Centre area and were therefore relatively close to Macclesfield District Hospital. There are also clusters of home post codes in the Bollington area (North West of Macclesfield) located approximately 4km from the Hospital.

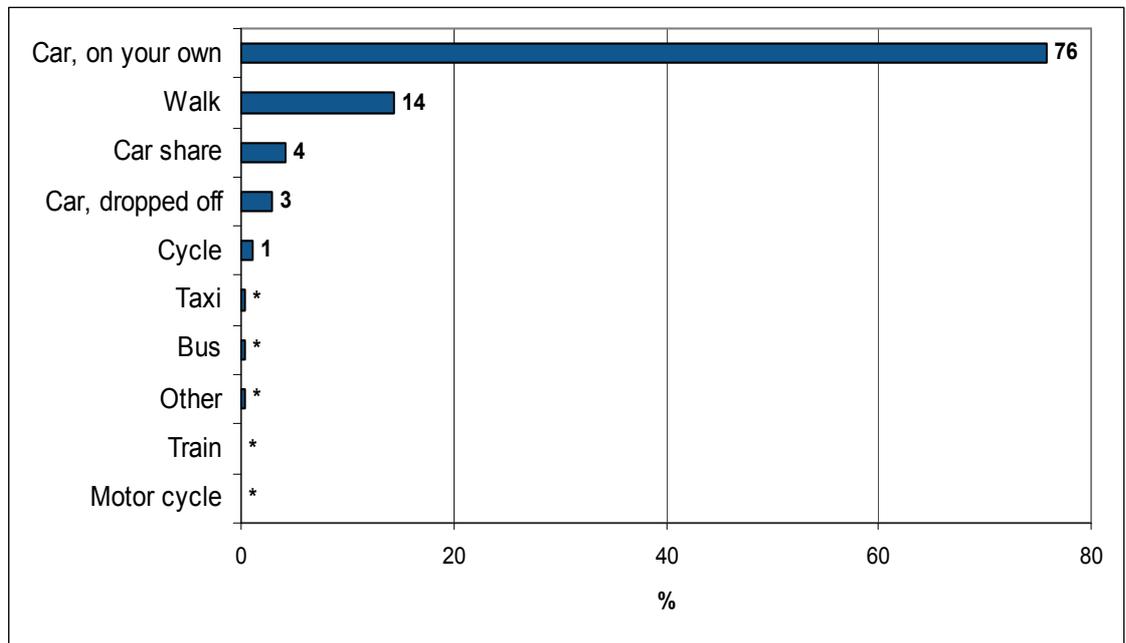
3.5 Journey to Work

Respondents were asked a series of questions regarding their journey to work.

3.5.1 Mode of Transport Used

The majority of respondents (83%) travelled to work by car with over three quarters of respondents (76%) saying that they travelled to work by car, on their own, 4% said they shared a car and 3% said they were dropped off at work in someone else’s car. 14% said that they walked to work.

Figure 3.8 Mode of Transport for Getting to Work



Base = 668

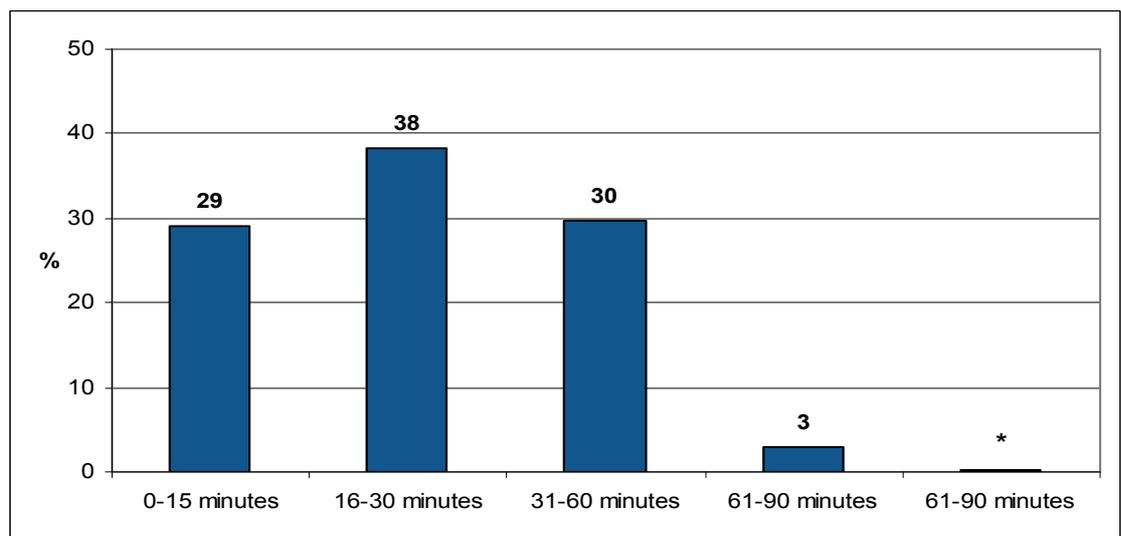
There were no differences between mode of transport used and respondent type (employee type, occupation etc).

3.5.2

Journey Time

Respondents were asked about the time it took them to travel to work and the results are illustrated in **Figure 3.9**. The majority of respondents (67%) travelled to work in 30 minutes or under (29% took up to 15 minutes and 38% took between 16 and 30 minutes). There was no difference by employee type.

Figure 3.9 Journey Time



Base = 668

3.5.3

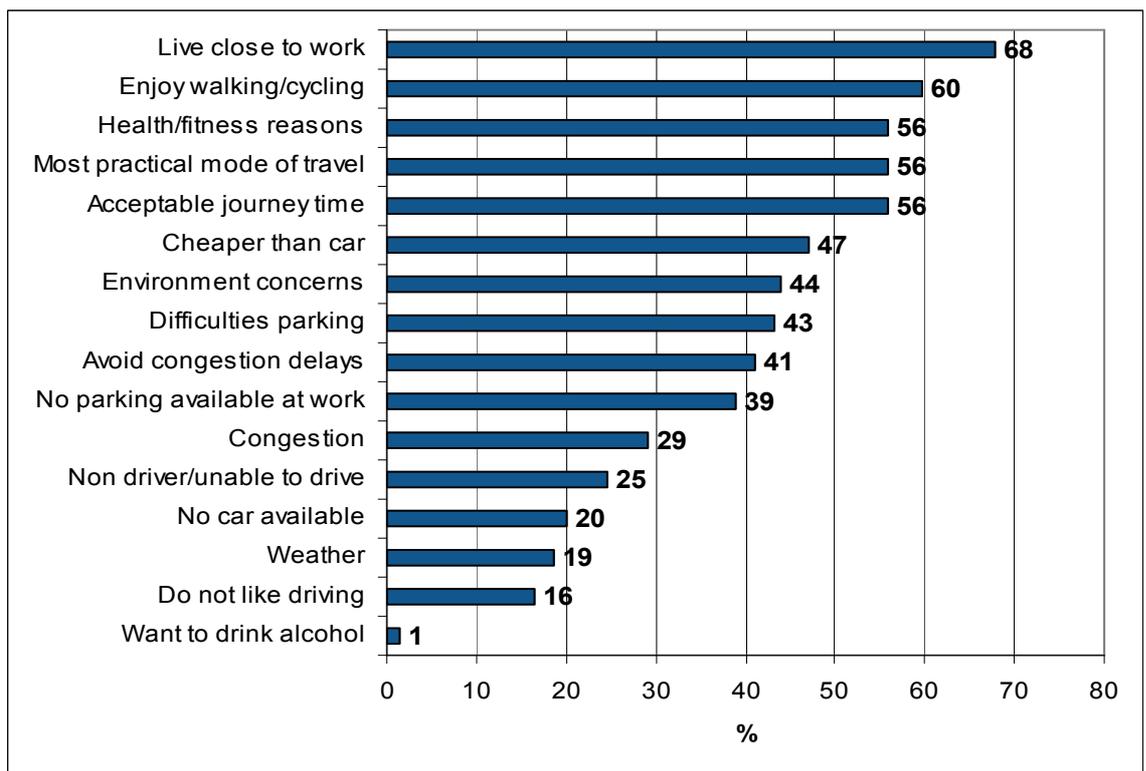
Reasons for not Travelling by Car

Respondents who said that they did not travel to work by car were asked why made this choice and the results can be seen in **Figure 3.10**. The most common reason was that respondents lived close to work (68%), 60% said that they enjoy walking or cycling to work and 56% said that they travelled by a mode other than car:

- For health/fitness reasons,
- Practical reasons; and
- Acceptable journey time.

Percentages total more than 100% as respondents could give more than one answer.

Figure 3.10 Reasons for Not Using Car to Travel to Work



Base = 134

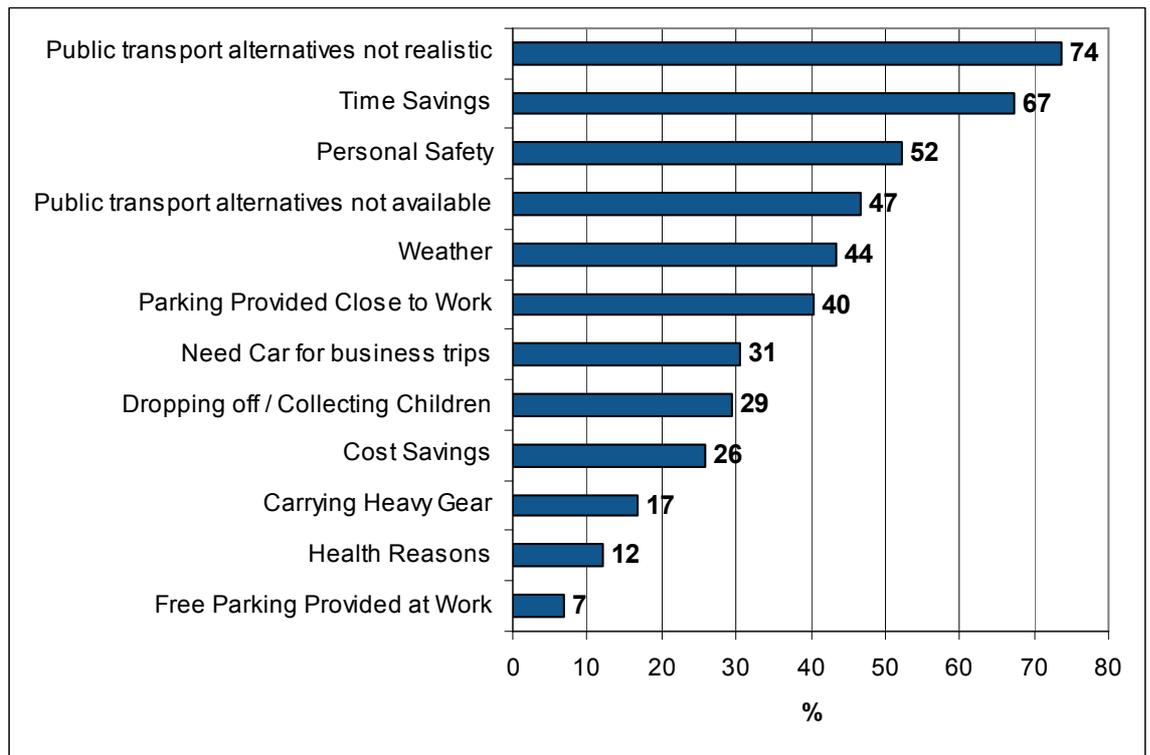
3.5.4

Reasons for Using Car

Respondents who did use their car to travel to work were asked why they chose to travel by car. Almost three quarters of respondents (74%) said that they drove to work because the public transport alternatives were not realistic. Over two thirds (67%) said that they used the car to save time, while 52% did so for reasons of personal safety and this can be seen in **Figure 3.11**.

Percentages equal more than 100% as respondents could give more than one answer.

Figure 3.11 Reasons for Using Car to Travel to Work



Base = 560

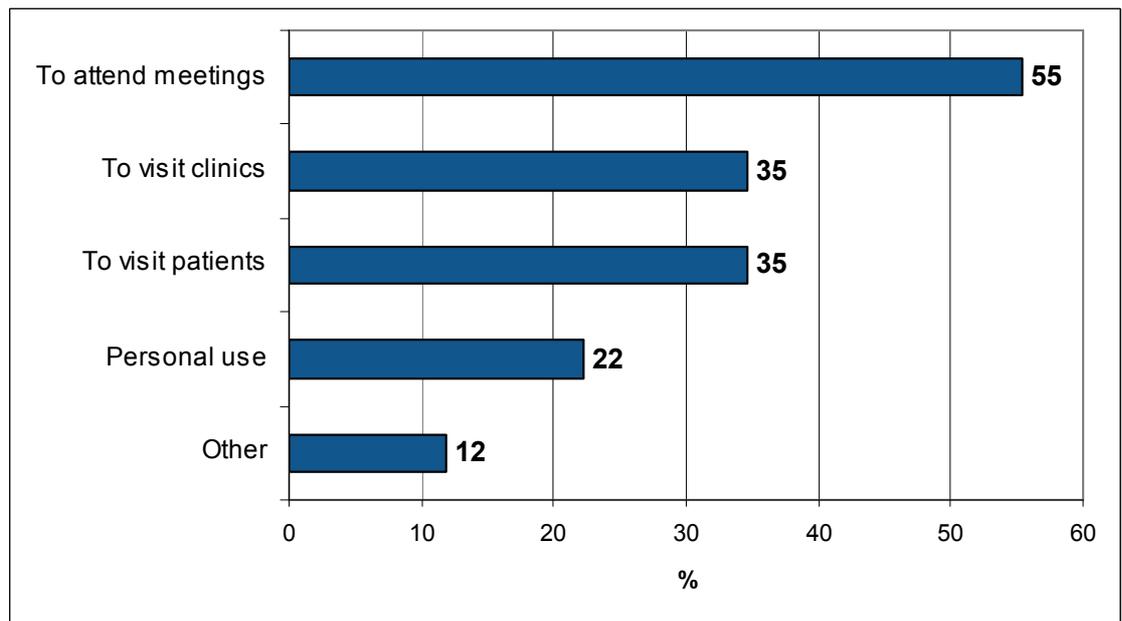
3.5.5

Car Usage During Work Hours

Respondents who used their car to travel to work were asked if they also used their car during work hours and if so how often.

Almost half (49%) said that they used their car during work hours for a variety of reasons and this is illustrated in **Figure 3.12**.

Figure 3.12 Purpose of Trip during Work Hours



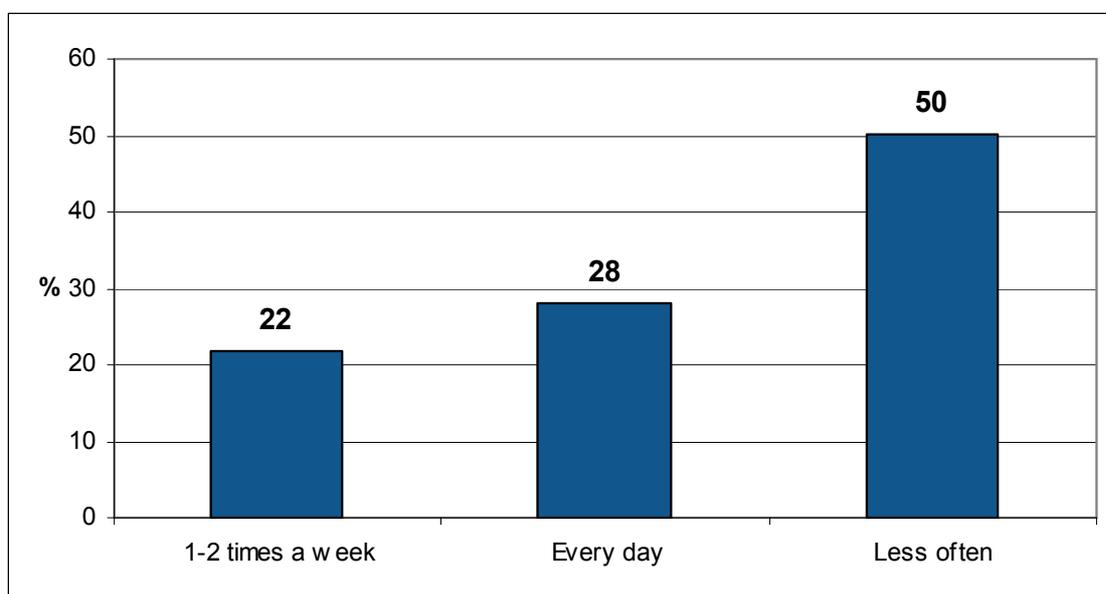
Base = 269

Most respondents (55%) used their car during work hours to attend meetings, 35% said that they needed their car during work time to visit clinics and to visit patients and 22% used their car during work hours for personal use. Twelve percent gave other reasons for using their car during work hours and these responses included:

- Take part in/deliver training (n=5);
- Visit other hospitals (n=4);
- On call (n=2);
- Registering birth/death (n=2); and
- Mobile screening unit (n=2).

Of those respondents who used their car during work hours, half (50%) used their car less than once a week, 28% used their car every day and 22% used it 1-2 times a week. This can be seen in **Figure 3.13**.

Figure 3.13 Frequency of Car Usage during Work Hours



Base = 309

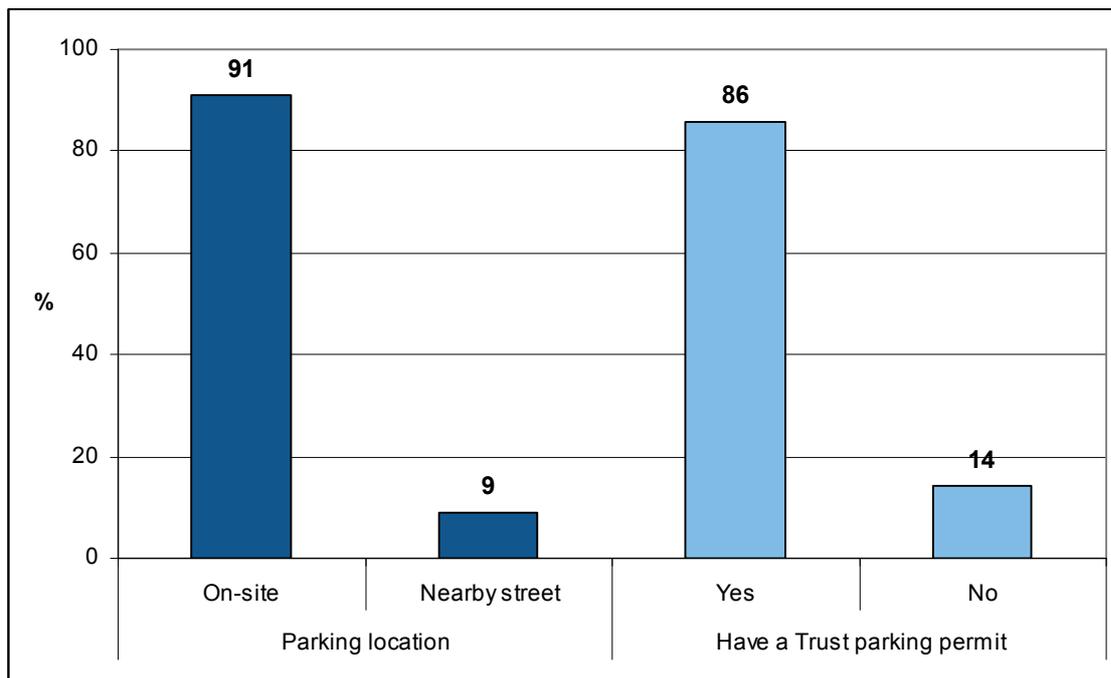
3.5.6

Parking at Macclesfield District Hospital

Respondents who used their car to travel to work were asked where they parked when at work and whether they had an NHS trust parking permit.

The majority of respondents (91%) said that they parked on-site, while just 9% said they parked on a nearby street. The majority of respondents (86%) had a parking permit and 14% did not, this can be seen in **Figure 3.14**.

Figure 3.14 Parking Locations and Proportion of Respondents Having Trust Parking Permits



Base = 554

3.5.7

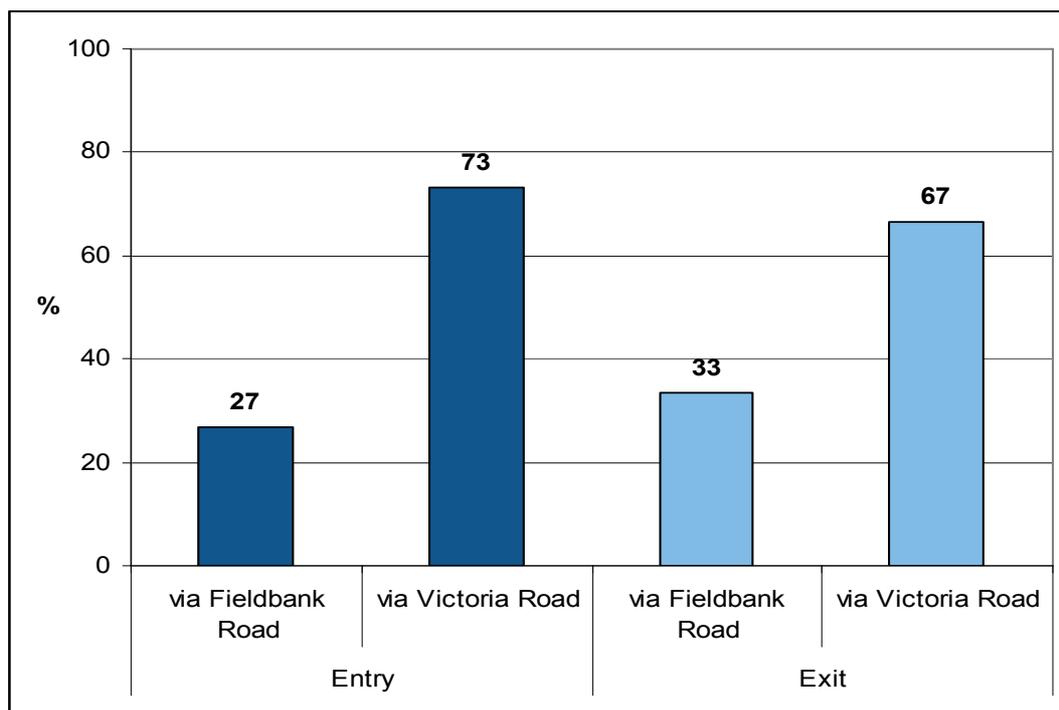
Site Entry and Exit

Respondents were also asked about how they entered and exited the hospital site, either by Fieldbank Road or Victoria Road and the results are illustrated in **Figure 3.15**.

The majority of respondents (73%) said they entered the hospital grounds via the entrance on Victoria Road, while 27% used the entrance on Fieldbank Road.

Respondents exiting the hospital grounds were most likely to use the Victoria Road exit (67%) compared to 33% using the Fieldbank Road exit.

Figure 3.15 Entry/Exit to Hospital Site



Base = 502

3.6 Car Sharing

3.6.1 Current Extent of Car Sharing

Table 3.2 shows the proportion of respondents who stated that they participated in car sharing to travel to work and only 8% of respondents said that they did car share.

Table 3.2 Percentage of Respondents Who Car Share

	%
Yes	8%
No	92%
N	552

Of those who did car share the majority (91%) said that two people usually occupied the car while 9% said that three people were usually in the car. No respondents said that they travelled with more than three people by car.

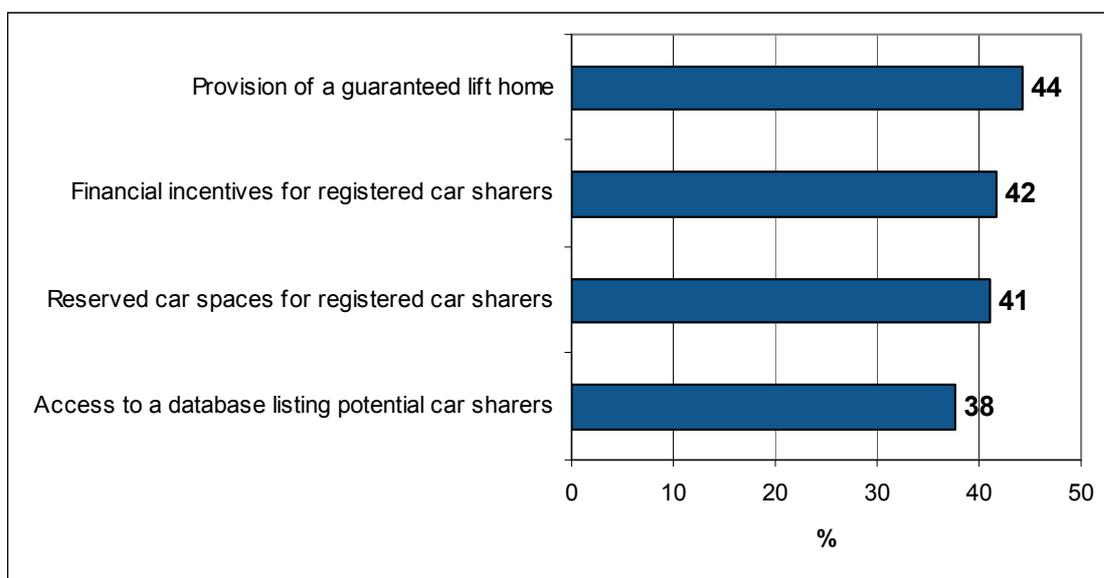
Table 3.3 Number of People Occupying the Car

	%
2 people	91%
3 people	9%
4 people	0%
5 people	0%
N	44

3.6.2 Incentives to Join a Car Sharing Scheme

Respondents were asked what would encourage them to join a car sharing scheme and this can be seen in **Figure 3.16** below.

Figure 3.16 Incentives to Joining Car Share Scheme



Base = 459

Most respondents (44%) said that the provision of a guaranteed lift home would increase the likelihood that they would join a car share scheme, 42% said that financial incentives would help, while 41% said that reserved spaces for registered car sharers would persuade them to car share. The least popular incentive was access to a database of potential car sharers but this was mentioned by a similar proportion of respondents (38%).

3.7 Incentives to Travel to Work Using Alternative Modes to Car

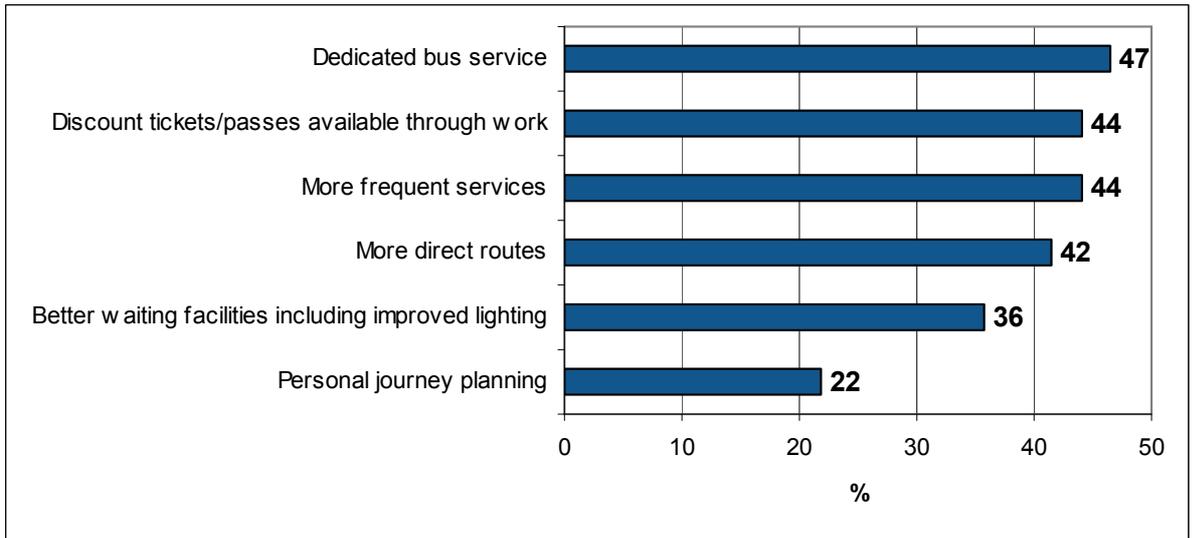
Respondents who travelled to work by car were asked a series of questions on what aspects would encourage them to travel to work by alternative modes, such as public transport, bicycle or walking.

3.7.1 Public Transport

Most respondents (47%) said that they would travel to work by public transport if there was a dedicated bus service available, 44% of respondents each said that discounted tickets/passes and more frequent services would make them consider using public transport to travel to work. More direct routes (42%) would also encourage them to use public transport rather than car.

Only 22% would be encouraged to use public transport if personal journey planning was provided.

Figure 3.17 Incentives for Travelling to Work by Public Transport

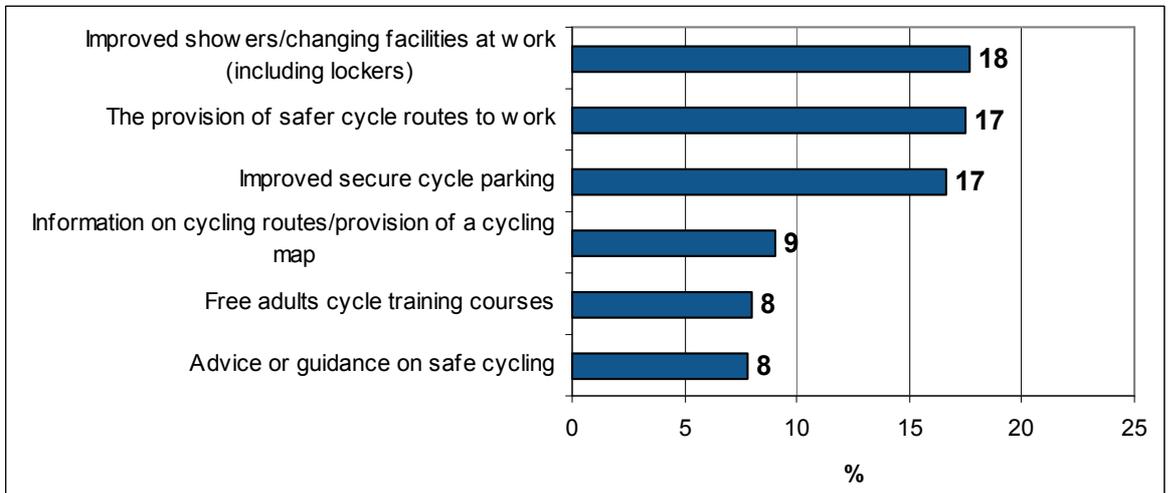


Base = 496

3.7.2 Cycling

Figure 3.18 below shows that 18% of respondents said that improved shower/changing facilities would increase the likelihood of them cycling to work, 17% of respondents each said that the provision of safer cycle routes and improved secure cycle parking would help them to consider cycling to work. Incentives relating to information on cycling routes (9%), free training courses and advice/guidance on safe cycling (both 8%) were rated poorly by respondents.

Figure 3.18 Incentives for Cycling to Work



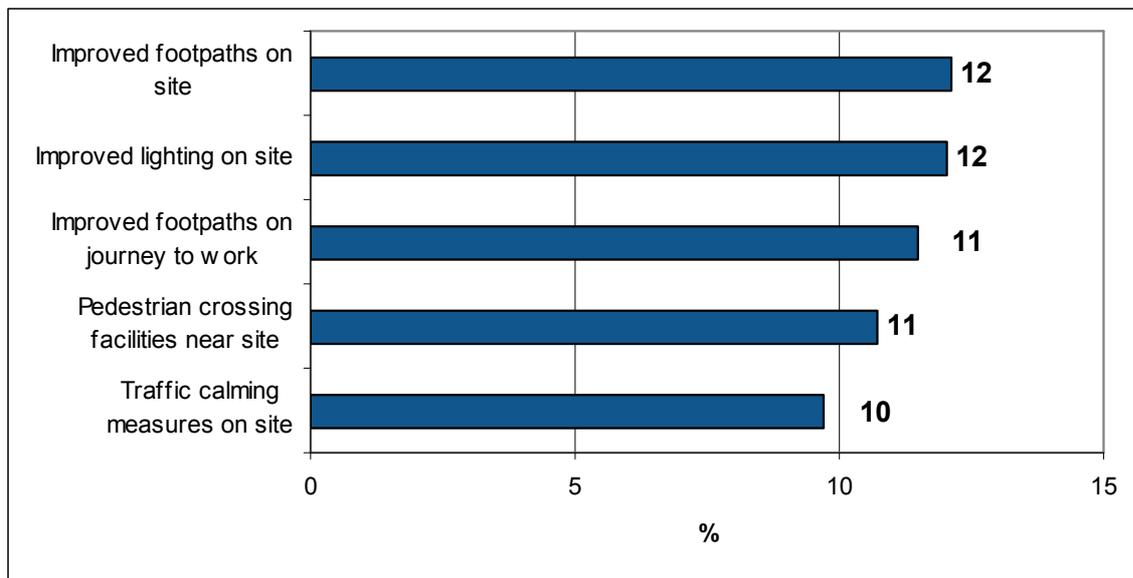
Base = 496

3.7.3

Walking

Improvements to the provision of walking facilities on site would be most likely incentive to encourage staff to walk to work, however only a minority of respondents considered these. For example, only 12% of respondents stated that improved footpaths and lighting on site would increase the likelihood of them walking to work. Improved footpaths on the journey to work and pedestrian crossings near the hospital were mentioned by 11% of respondents.

Figure 3.19 Incentives for Travelling to Work by Walking



Base = 474

3.8

Home Working

All Respondents were asked whether they would consider working from home if it was appropriate and the results can be seen in **Table 3.4**.

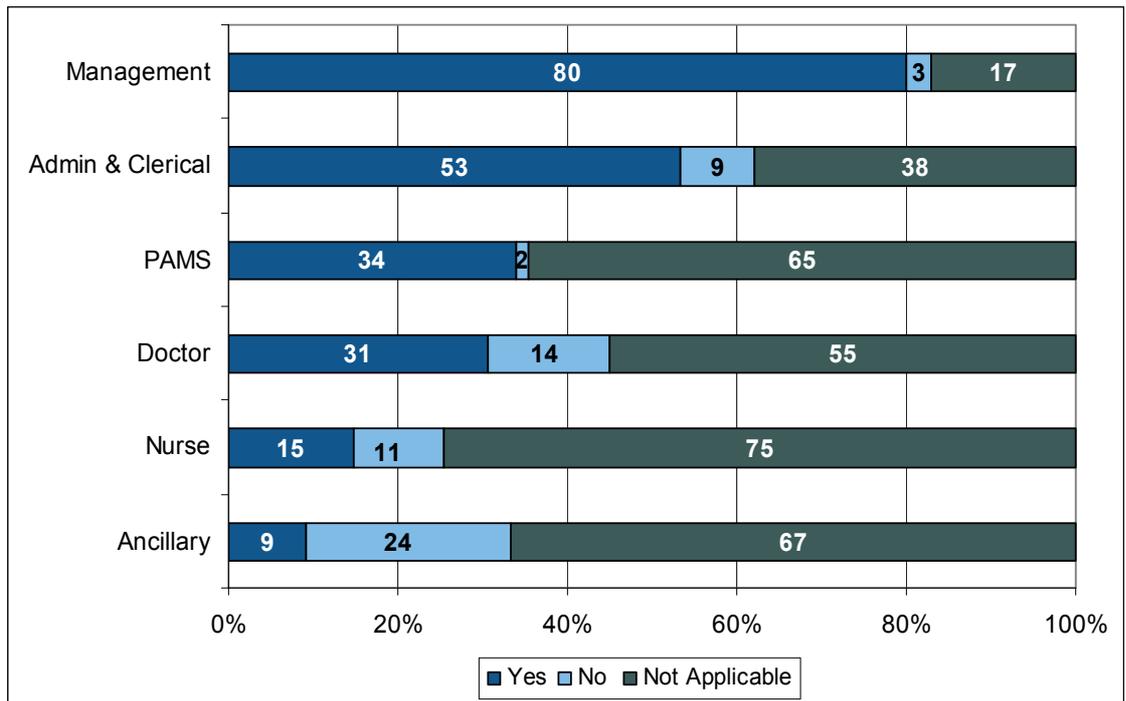
Table 3.4 Respondents Who Would Work From Home if Appropriate

	%
Yes	77%
No	23%
N	634

Overall, over three quarters of respondents (77%) said they would work from home if it was appropriate and this differed by employee type as illustrated in **Figure 3.20**.

For example respondents employed in management positions (80%) and administrative and clerical positions (53%) were more likely than others to consider working from home if the opportunity arose. Ancillary staff (9%) and nurses (15%) were those least likely to consider working from home. In fact, these employee groups were most likely to state that working from home was not applicable to their jobs (75% of nurses and 67% of ancillary staff).

Figure 3.20 Home Working by Occupation



Base = 577

There were no differences between full time and part time workers.

The data entry, processing, analysis and reporting were undertaken in-house by FM.

3.9 Further Analysis

3.9.1 Walking Partners

The results of the questionnaire survey were analysed further in order to establish potential walking partners within a two mile radius of the hospital. Employees who live within a 2 mile radius of the Hospital with similar shift patterns have been identified and there is potential for a total of approximately 50 people spread over various locations to become 'walking buddies'.

3.9.2 Non-Essential Car Users

Members of staff who lived within 2 km of the hospital were extracted from the hospital database. Of these consultants and doctors were removed along with those who were considered to need a vehicle for the purpose of their working day. Auxiliary nurses work a 3 shift pattern of these shifts one ends at 10 in the evening. It was therefore considered that whilst auxiliary nurses would not need a car for most of their shifts they would require one for the late shift due to safety reasons and travelling late at night. This would need to be controlled by a special barrier system that would only allow them on site for certain shifts.

3.9.3 Car Sharers

Of the members of staff who currently use their car to travel to and from the hospital 8% car share and 43% stated that they would car share. Information about employees who live in the same vicinity and share similar shift patterns has been correlated and it was found that there were a potential 39 car sharers spread out in various clusters.

3.9.4 Congleton Park and Share

The staff survey has been used to extract car drivers who travel to the hospital via Congleton with the intention of establishing a park and car-share facility. It is intended that a car park provided by a local business should be used in as a meeting point for those who are able participate in sharing their onward journey to the hospital. A potential 12 employees have been identified who may be able to participate in this scheme.

4 Masterplan Proposals and Parking Numbers

4.1 Introduction

East Cheshire NHS Trust has prepared a Masterplan for the development of Macclesfield District General hospital to meet the changing requirements in the 21st Century.

The Blue Zone area to the east of the main entrance has developed in a piecemeal manner over the years centring on the historic Macclesfield Union Workhouse. The buildings are not suited to current healthcare needs and the majority of administrative services which were based in this area have moved off site. It is intended that this area of the Hospital site, with the exception of some buildings in the south west corner, is sold for residential or mixed use development.

The main part of the Hospital to the west of the entrance is to be maintained with improvements both to the infrastructure and the car parking provision. A new prestigious entrance is proposed for the Hospital with drop-off areas and disabled parking. This would be situated at the eastern end of the main building and be prominent for all visitors to the Hospital. The area currently used as an entrance would be replaced by a new breast unit on the Victoria Road side of the site.

The paddock area to the south of the site is to be developed for a new renal dialysis unit with associated parking whilst the remaining part of this site would be used for additional car parking.

4.2 Car Parking

Car Parking is considered to be a major problem at Macclesfield Hospital and patients/visitors frequently encounter difficulty in finding suitable places to park. The Trust is keen to address this issue to reduce the unnecessary additional stress experienced by patients/visitors. It is expected that there will be future changes in demand and provision due to new building proposals and staff relocation. Further reductions in car access to the Hospital are anticipated once the Travel Plan has been implemented.

The supply and demand for car parking across the site is likely to change in response to a number of factors, the principal ones of which are:

- Relocation of existing facilities and staff from The Blue Zone off site;
- Relocation of existing facilities and staff from The Blue Zone elsewhere on the site;
- Imminent reduction of off-site parking (Cricket Club and Conservative Club);
- Loss of car parking spaces as a result of the Masterplan proposals;
- Changes resulting from the Travel Plan, which is being produced in parallel with the masterplan; and
- Provision of on-site parking to meet Hospital demand.

4.3 Parking Shortfall Assessment

There is likely to be a shortfall of approximately 80 parking spaces as a consequence of the different phases of development. The parking demand and provision was calculated over the different phases of the masterplan.

Table 4.1 Car Parking Demand, Provision and Ultimate Shortfall

OPTION 5 with revised entrance layout - not including Travel Plan reduction

Development of the Paddock Site to provide 16 place Renal Dialysis Unit together with surface car parking for ECT use. Sale of Blue Zone phase 2 delayed.

↓ PARKING DEMAND ↓			NUMBER OF SPACES	RUNNING TOTAL	↓ PARKING PROVISION ↓			NUMBER OF SPACES	RUNNING TOTAL	SURPLUS / SHORTFALL
Existing Situation										
Peak total from survey (10.00) ex'rat running' vehicles			1107			Hospital Car Parks		1003		
Cricket Club			32			Cricket Club		50		
Conservative Club			23			Conservative Club		40		
			Sub total	1162	1162			Sub total	1093	-69
24 'Drop Off' included Spaces occupied by building works and vehicles (may have displaced some vehicles onto Victoria Road)										
				67						
Phase 1 - (to April 2008) vacate Blue Zone										
185 staff relocating off-site			-116			Retain Blue Zone spaces (no change)		0		
(assume 1space for each 1.6 staff)						Parking on area vacated by Langley		44		
Staff parking permits return			-43							
			Sub total	-159	1003			Sub total	44	1137
										134
Phase 2 - Locate Renal Dialysis Unit on Paddock Land and provide car parking										
Relocation of Dialysis Unit			-6			Renal Dialysis Unit		27		
Renal Dialysis Unit			27			Surface parking on paddock		82		
						Loss of Conservative Club Spaces		-40		
						Loss of Cricket Club spaces (please see Note 3)		-50		
						Surface level parking over pond		0		
			Sub total	21	1024			Sub total	19	1156
										132
Phase 3 - New Entrance Arrangements										
No change in demand						Adjustment to car park layout by pond		10		
						Loss of Spaces due to new entrance layout		-16		
						Additional spaces at entrance		26		
						Loss of Blue Zone Ph 1 Parking (2008?)		-264		
						Additional spaces off-site		50		
			Sub total	0	1024			Sub total	-194	962
										-82
Phase 4/5 - New ward + Breast Unit										
No change in demand										
						Loss of spaces due to new breast unit inc 2 drop-off		-20		
			Sub total	0	1024			Sub total	-20	942
										-82
Phase 6 - Internal Improvements										
Not presently identified (please see Note 2 below)						Not presently identified (please see Note 2 below)				
			Total	0	1024			Total	0	942
										-82

It is anticipated that the resulting shortfall in car parking will be met by the reduction in car trips once the Travel Plan Initiatives have been implemented.

5 Travel Plan Measures/Initiatives

5.1 Introduction

The chapter below discusses the proposed green transport initiatives to be provided by East Cheshire NHS Trust. Many of the initiatives outlined below have already been started up or are already in place at the hospital.

5.2 Car Park Management Proposals

A car parking management strategy is key to the success of the travel plan initiatives and acts as a deterrent to unnecessary parking.

5.2.1 Problems

The current maximum payment of £3.00 per day and £7 per week is an issue as it does not discourage staff from parking in visitor/patient areas all day.

Due to a transitional agreement between the Trust and its staff there will be limited income from staff parking over the next two years until 1st August 2009. However, the Trust are committed to injecting £100,000 to improve facilities, e.g. barriers and cycle storage.

Staff and patient parking is currently identified by signing but there are no physical deterrents to prevent patient/visitor parking being taken up by staff. Current parking enforcement arrangements are inadequate and the Trust is currently in the process of re-tendering for parking enforcement staff as well as developing a suitable barrier strategy. Implementing a barrier system which restricts access to pass car holders only will ensure that only members of staff with a valid parking permit will be able to access the car park. In addition segregating areas of parking for staff and patients / visitors will ensure that parking spaces close to the hospital are kept clear for patients and visitors.

The Trust is committed to providing adequate parking to meet patient demand and reduce the stress levels currently experienced when visiting the hospital by car.

5.2.2 Number of Parking Spaces

There are currently 1093 parking spaces available (including some off-site parking) for patients, staff and visitors at Macclesfield District General Hospital and after the re-allocation of parking resulting from The Masterplan there will be a total of 942 spaces (including 50 off-site). Of these, 678 parking spaces are intended for staff, 240 for patients and visitors and the remaining 24 spaces are for drop-off's. The demand for parking spaces will also reduce as some staff and services, primarily from the Blue Zone area, will be relocating off site.

5.2.3 Potential Solutions

The key to the success of the Travel Plan would rely on an incentives and disincentives approach in order to discourage people from parking at the hospital. The initiatives to be implemented in order to discourage parking at the hospital would be as follows:

Segregation / Organisation of Staff / Patient Parking

Segregation

Staff / Patient parking in separate areas with implementation of a barrier system where practicable at each of the staff parking areas surrounding the hospital so that members of staff with parking permits require a pass to enter the car park and operate the parking barrier (this reduces the requirement for enforcement).

Organisation of staff parking areas

The Trust will identify groups of commuters who according to their line managers do not need to access a car for their work. These groups identified as non-essential car users will not be allocated on-site parking. Priority for on-site car parking would be given over to patients and visitors, 240 car-parking spaces will be available for patients and visitors. In terms of staff parking on-site, priority will be given to essential business users, then shift workers, followed by car sharers and non-essential car users who live further away. We anticipate that there will be

628 parking spaces available for staff on-site. 50 car parking spaces will be available off-site and these will be available for the use of staff who, although not essential car users, have no alternative means of travelling to work.

Car park passes will be limited to staff who live over a certain distance from the hospital site (over 2km). The distance to work would be determined by walking routes. The remainder will be encouraged to walk or cycle to work. The Trust has already started to retrieve car parking passes from people who live within 2km of the site and this will be completed by spring 2008. For those members of staff who work shifts, access will be permitted into the car-parks at night but not during the day.

A pool car will be leased and a booking system set up. This will then be analysed and if successful further cars will be leased.

Car Parking Charges

Staff

There will be a review of staff charges for parking by 1st August 2009 at the end of the transitional period.

Patients / Visitors

Current car-parking charges for patients and visitors are detailed in the table below:

Table 5.1 Current Car-Parking Charges

CURRENT CAR PARKING CHARGES	
1 to 6 hours	£1:50
6 hours plus	£3:00
Weekend Day Time	£1
Evenings 6pm – 6am	Free
Week	£7

It has been recommended by Faber Maunsell that parking charges be reviewed with length of stay up to 4 hours being reasonably priced and prices for more than 4 hours being increased in order to discourage all day staff parking.

- A weekly parking ticket will be available and distributed at the discretion of the Trust;
- There is no charge for disabled car parking;
- Parking concessions would be introduced as an incentive to the car sharing initiative; and
- The Trust will provide a discount in car parking to those members of staff who use sustainable transport to travel to and from the hospital a couple of times a week.

Enforcement

Improved enforcement—the Trust has recently negotiated a new security contract and will take this opportunity to improve security management and car parking enforcement.

The Trust currently impose a £30 fixed penalty for those who are found to be parking on site without having paid or without a current permit or illegally parked. The Trust approach has been to give two warnings and to impose a fine on the third occasion. The Trust has instigated instant fines for specific offences, e.g. parking in disabled bays.

Improved barrier system—the Trust will implement an improved car-park barrier system at the hospital which will assist with enforcement and segregation of parking areas, allowing access to parking only for pass card holders. A quota system will be introduced if technically viable.

5.2.4

*Summary***Table 5.2 Summary of Car Parking and Permit Initiatives****Permit and Parking System Changes**

- All permits will be removed for non-essential car users (i.e. those who live within 2km of the site and who do not need the use of their car during the working day).
- Parking enforcement improvements by recruitment of new enforcement staff and implementation of improved barrier systems.
- The fixed penalty of £30 for parking without a permit or with an out of date permit will be reviewed.
- Staff and patient car parking areas will be segregated where practicable.
- Review of staff car parking charges at the end of the transitional period
- Car parking concessions would be introduced as an incentive to the car sharing initiative.
- The Trust will provide a car parking discount to those members of staff who use sustainable transport to travel to work a couple of times a week.
- The number of car parking spaces given over to staff, patients and visitors will be re-established following implementation of the staff travel plan. It is anticipated that the need for staff parking will reduce gradually over time and that further spaces close to the hospital can then be given over to patients and visitors.

5.3

Car Sharing

In terms of car sharing the Trust will be able to provide the following:

- Car-share database / software on intranet site – the Trust will have this in place by Spring 2008;
- Dedicated, Car-Share parking spaces – the Trust will provide 16 dedicated discounted car-sharing spaces by Spring 2008. Car sharing spaces will be provided according to demand. Car-share spaces will be kept free until 9:30am after which time if these spaces have not been taken up then they will be given over to other users. Car share parking spaces will be enforced by instant fines for offenders.
- Guaranteed Ride Home in an Emergency – the Trust will organise a guaranteed ride home service for car sharers by Spring 2008;
- Car share user groups – the Trust will help to establish a car share user group within the hospital in order for car sharers to meet one another and share their ideas – this will be in place by Spring 2008;
- The potential to provide a central meeting point where car sharers can park their cars safely for the day while travelling with another driver – the Trust are investigating the feasibility of using a car park provided by a local business near Congleton for this purpose.
- FaberMaunsell has analysed the staff survey in order to establish potential car share partners who work similar shift patterns, a figure diagram showing these potential car share partners is enclosed at **Figure 5.1** of this report. The Trust will approach these individuals to promote this initiative.

5.4

Public Transport Initiatives

- Integrated ticketing and travel discounts – Interest free loans for the purchase of public transport season tickets. Travel discounts from bulk-purchase tickets – the Trust will investigate the opportunity for establishing these initiatives.

5.4.1

Bus and Rail Initiatives

- Bus service information to be placed on and regularly updated on internal hospital notice boards and intranet sites – the Trust will have this in place by Spring 2008;
- A visitor information point will be provided – the Trust is investigating the potential for purchasing visitor information points which will provide detailed information of travel to and from the hospital by public transport;
- Bus user group – the Trust will promote the setting up and running of a bus user group in order for bus users to network socially and to share their ideas / initiatives – the Trust will have this in place by Spring 2008;

- The Trust will investigate with its partner organisation the opportunity for the provision of a shuttle bus, providing an extension to existing services, to and from the bus and rail station in Macclesfield.

5.5

Cycling and Walking Initiatives

- A 'Bike to Work Scheme' via a salary sacrifice programme has already been put in place. 18 bikes have been bought via this method so far and the Trust is interested in providing training/advice in cycling proficiency through the Bike to Work scheme.
- The provision of cycle maintenance facilities and equipment from a reliable local source, as apposed to via the internet, would inspire more confidence in potential cyclists- the Trust are discussing this initiative with a local cycle outlet;
- The Trust has applied for planning permission for a secure, covered cycle rack for 8-10 bicycles to be located at the front of the hospital. This will be in place by the end of October 2007 and further stands will be provided in convenient locations close to building entrances;
- Safe cycling routes have been established to and from the hospital and these will connect to new cycle routes within the Hospital site. The routes are presented in **Figure 5.2** below;
- The Trust is also proposing the refurbishment of a staff changing area to include the provision of showers. This will be completed by March 2008;
- Establish Walking Buddies – The Trust will establish walking buddies with individuals who live close to one another and who share similar work patterns – Specific personnel can be identified from the data obtained from the FM survey;
- Walking routes will be improved as necessary to provide safe well-lit paths – walking routes have been identified in the Trust Masterplan and improvements will be made as appropriate. The routes are presented in **Figure 5.3** below.
- Other potential initiatives include the following:
 - Secure lockers for storing walking gear;
 - Umbrellas;
 - Improved pedestrian access;
 - Interest free loans for the purchase of cycles and cycling attire, cyclist user group, cycle maintenance clinics; and
 - Basic cycle repair kit available.

Figure 5.2 Cycling Routes around the Hospital Site

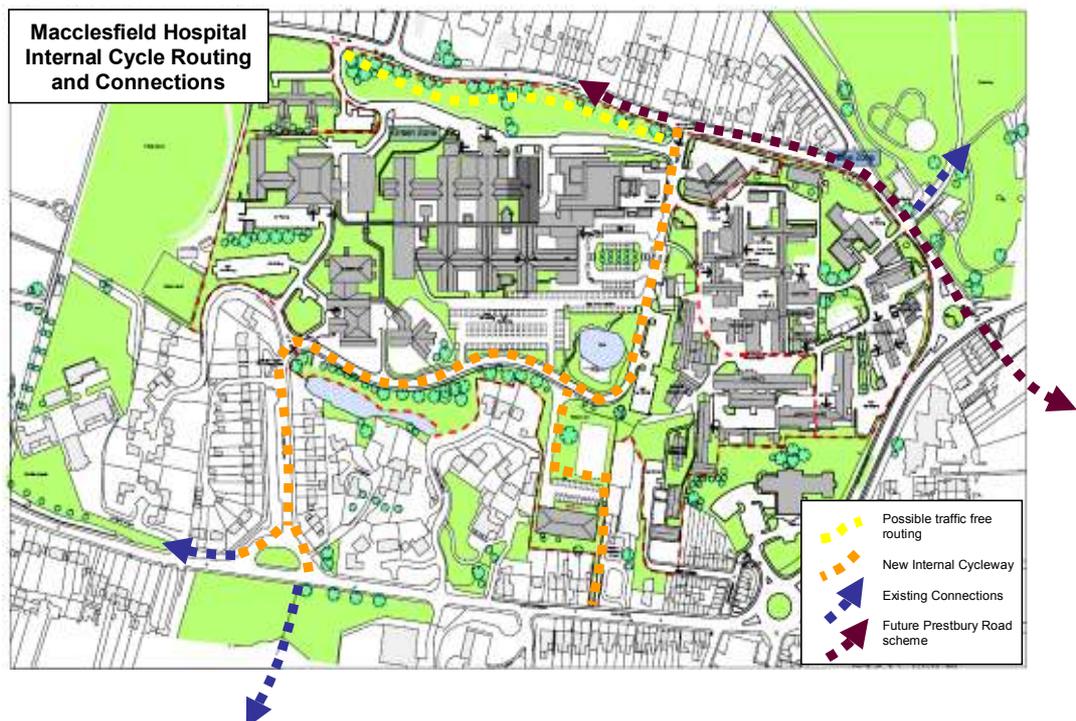
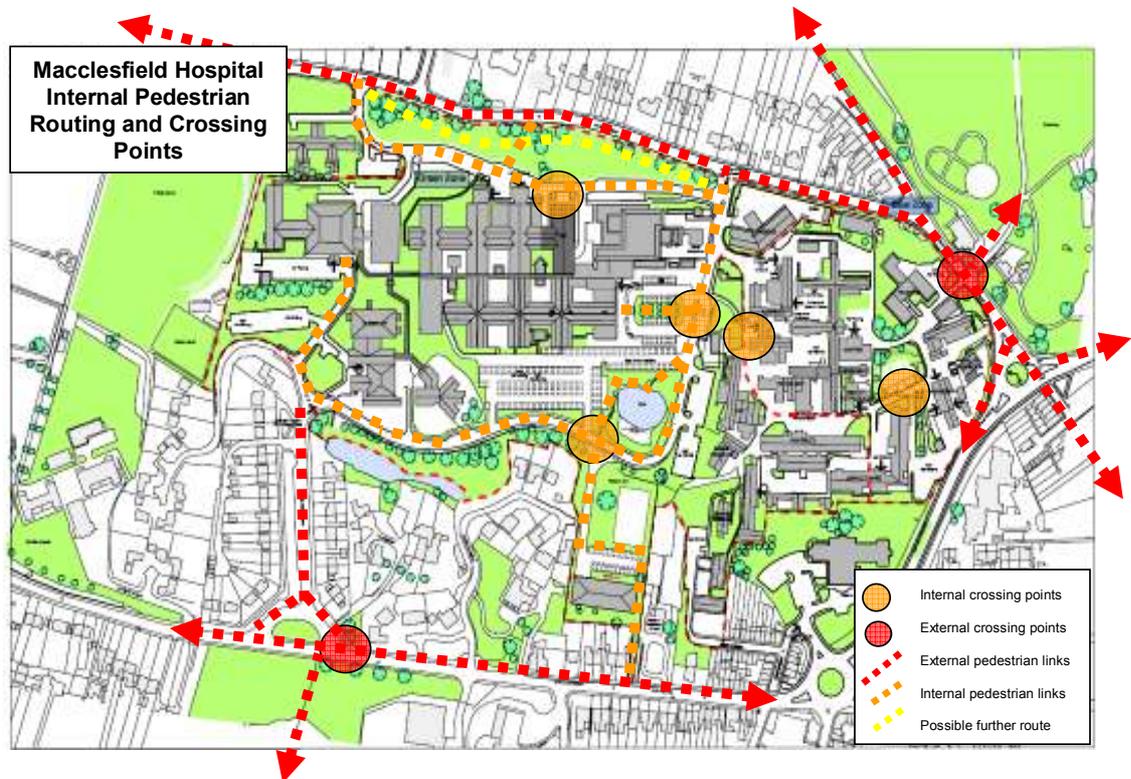


Figure 5.3 Walking Routes around Hospital Site



5.5.1

Motorcycles and Mopeds

- Make parking space available for these modes of travel which are more efficient in terms of space;
- Promote CBT training for staff; and
- Establish User Group.

5.6

User Groups

- User groups to be established for all pedestrians, cyclists and public transport users to the hospital. Usually initiated by the Travel Plan Co-ordinator. A combined user group, for all modes of sustainable travel will be established initially, until members grow. This will be established in within the existing 'Drivers for Change' travel group which incorporates a broad cross section of Hospital Employees. .
- Regular discussions will help to establish members of staff's opinions and suggestions for improvements, making cyclists and bus users journeys more comfortable and attractive - This will be in place by Spring 2008;
- The Travel Plan Co-ordinator will have an important role to play in collating the information established from the user group meetings and investigating the feasibility for any changes – This will be in place by Spring 2008; and
- Any changes / additions to facilities resulting from the user group meetings can be updated on Trust travel information boards and Intranet – This will be in place by spring 2008.

5.7

Travel Information / Marketing

- Provision of internal notice boards and intranet facilities for provision of public transport information, walking and cycling facilities – the Trust have resources to provide a communications co-ordinator who will be able to assist with setting these initiatives up;
- Way-finding project – The Trust would be prepared to review their on-site signing strategy and update any site plans in the masterplan;
- Maintain integrity and quality of information provided by having close links with GMPTE and local bus operators – this would be an ongoing initiative to be undertaken by the Trust.

- Provision of Travel Information for visitors, interviewees and new starters included in appointment and recruitment letters – this will be in place by Spring 2008;
- Leaflets – the Trust's communication co-ordinator will develop a Hospital travel leaflet outlining sustainable options for travel to and from the hospital;
- An opening event will be organised to launch the travel plan, this will involve posters being located all around the hospital, distribution of travel leaflets, and cycling and walking events – The Trust will set this up once all measures for sustainable travel are in place; and
- Hold national walking cycling and car-sharing events – the Trust will ensure that this is established on an annual basis.

5.8 **Disabled Access**

- Improving disabled access; and
- Provide the appropriate number of disabled parking spaces.

5.9 **Other Initiatives**

- Money from staff car parking will be hypothecated back into initiatives to encourage sustainable travel to and from the site, this will include undertaking upgrades to pedestrian routes and cycle routes;
- Suppliers – subject to national NHS contracts, suppliers will be chosen for their local proximity to the hospital;
- Fleet Vehicles – The operation of fleet vehicles will be considered in order to identify opportunities for improving the efficiency and cleanliness of their vehicles. The use of cleaner fuelled vehicles, such as compressed natural gas (CNG) or liquefied petroleum gas (LPG) will be considered by the Trust or its delivery /transport providers; and
- The Trust will provide on site pool – cars for members of staff who travel to and from the hospital by sustainable means but need their car during the day for work purposes – a booking system will be available for using these vehicles.

5.10 **Action Plan, Proposals, Commitments and Timescales**

The following schedule has been prepared in association with the Macclesfield Hospital Travel Plan. The schedule outlines the measures and initiatives connected with the Travel Plan and indicates the status of commitment, timescales and funding source.

A budget of £100,000 has been included within the approved Master Plan to achieve the Travel Plan Measures and Initiatives.

Status	Scheme	Timescales
Implemented	Travel Plan Co-ordinator currently employed by the Trust and is located on site at the Hospital	
Implemented	Staff shower and changing facilities have been provided in the new Pathology Department	October 2007
Implemented	One covered cycle shelter to accommodate 8 bicycles (including hard standing for mopeds/motorcycles)	October 2007
Committed	Bike to Work Scheme - to encourage employees to cycle into work	November 2007
Commitment	To undertake further surveys of staff and patients/visitors to establish the issues concerning the use and access to public transport	December 2007 to April 2008
Commitment	To participate with other partner organisations in a 'root and branch' review of public transport serving the area	tbc
Committed	Car Share Promotion (1 st stage) 16 dedicated car parking spaces on site, by the Cooper Building for car sharers	December 2007
Committed	Refurbishment of staff changing areas with shower facilities	January 2008
Committed	Withdrawal of staff parking permits within 2km radius of the Hospital site	Ongoing to May 2008
Committed	Five further cycle shelters to be provided (for 32 cycles)	April – June 2008
Commitment	Set up car sharing database	June 2008
Committed	Implement provision of 5 barriers to segregate Macclesfield Hospital car park between staff and patients	June 2008
Commitment	Employees requiring the use of a car during the working day will be provided with either access to taxis for their journeys, or alternatively a pool car if this proves to be more cost effective	June 2008
Commitment	Investigate the viability of provision of Shuttle Bus Service, this will take the form of a marketing exercise to assess feasibility, followed by a trial service for up to 6 months, to test cost benefits	Commence June 2008
Commitment	Review allocation of staff parking permits against revised criteria	January – June 2008
Commitment	Withdrawal of parking permits from staff who do not meet criteria	July – December 2008
Commitment	Agreed targets will be monitored on an annual basis, e.g. reduction in single occupancy visits to site, increase in cycling, walking and car sharing etc	November 2008
Proposal	Weekly £7 parking ticket currently available from Pay & Display machines to be removed to prevent staff from parking in patient/visitor areas. However, this facility will be available to patients and visitors through the Cash Office	June 2008
Proposal	Investigate the possibility of instigating a computerised system whereby staff are limited to an agreed quota of onsite parking visits per month, the remainder of visits to site to be by an alternative sustainable mode of transport, e.g. walking, cycling car sharing, public transport	June 2008
Proposal	Investigate the possibility of setting up a computerised system to record when staff use alternative methods of transport, e.g. walking, cycling, car sharing, and reduce their car parking payments accordingly.	November 2008

5.11**Patients / Visitors**

Levels of patient and visitor parking will be monitored following implementation of the travel plan.

The Trust will participate with other partner organisations in a route and branch review of public transport serving the area.

Travel leaflets will be directed to patients and visitors also.

6 Targets and Monitoring

6.1 Targets for Macclesfield Hospital

6.1.1

Staff

It is anticipated that Staff Travel Targets will be achieved by implementing the selection of measures detailed in the previous chapter. Targets have been calculated by how each sustainable mode of travel can contribute towards reducing the need for parking. It is anticipated that these measures will then meet the shortfall in car parking spaces anticipated following alterations to car-parking resulting from the master plan proposals. A further staff survey will be undertaken to establish how things are progressing towards reaching targets. Three year targets for modal shift are presented in the table below:

Table 6.1 Modal Split Targets

<i>Mode</i>	<i>Number (shortfall 82 spaces)</i>	<i>Percentage %</i>	<i>Permits Withdrawn</i>
Car Share	20	24	32
Public Transport	10	13	16
Bicycle	20	24	32
Walking	23	28	37
Scooter/Moped/Motorcycle	4	5	7
Taxi	5	6	8
Total	82	100	132

6.2 Targets Achieved For Other Hospitals

6.2.1

Introduction

Faber Maunsell has been commissioned by Macclesfield Hospital to establish the success rate of Travel Plans at other hospitals. Details of modal shift levels achieved at other hospitals are contained within the following paragraphs.

6.2.2

Addenbrooks Hospital, Cambridge

Addenbrooks hospital travel plan was launched in 1997 and since its introduction the initiative has been extremely successful, having won a number of awards in the process. The travel plan is often used as a benchmark for other organisations to achieve.

The success of the travel plan to-date has been achieved through a combination of self-help (car park management, car park charging, cycle loans etc...) and working closely in partnership with other agencies.

6.2.3

Success of Addenbrooks Travel Plan

In 2000 the trust set itself a target of reducing the number of staff driving to work in single occupancy vehicles by 1% each year up to 2005, from an initial level of 50% in 2000. The Trust has already exceeded this target – the 2003 survey shows that this percentage has already fallen to 34% single occupancy cars.

Travelling by Bus

Staff

The proportion of staff travelling to work by bus has risen from 4% in 1993 to 23% in October 2003.

Patients and Visitors

The proportion of patients and visitors travelling to work by bus has risen from 3% in 1993 to 6% in 2003.

Travelling by Bicycle*Staff*

The proportion of staff cycling to work has increased from 17% in 1993 to 25% in 2003.

Travelling by Car*Staff*

In 1993, 74% of staff working on the campus drove to work. By 2003 this figure has fallen to 42% of which 8% car share.

6.2.4

Success of Christie Hospital Travel Plan

Faber Maunsell was instrumental in establishing the travel plan initiatives and targets at Christie Hospital. The travel plan report was issued in March 2005 and since then a travel plan co-ordinator has been employed at the hospital to implement the measures and meet targets.

The travel plan has not yet reached its three year target period. However the travel mode shift has progressed. Details of this have been provided by the hospital and are contained within the table below:

Table 6.2 Christie Hospital Travel Mode Shift (Percentage)

	2004	2006
Singe Occupancy Vehicle	65	60
Car Share	6	6
Walk/Cycle	14	19
Public Trans.	9	9
Other	6	6

It can clearly be seen from the results presented in the table above that single occupancy vehicle use has decreased from 65% to 60%.

7 Summary

- 7.1 Summary**
East Cheshire NHS Trust is committed to reducing traffic congestion in and around Macclesfield Hospital through the implementation of an effective Travel Plan.
- The Travel Plan initiatives are being prepared in parallel with the Masterplan proposals for Macclesfield Hospital. These proposals incorporate changes which are underway with the relocation of staff off site and the proposed disposal of the Blue Zone area of the hospital.
- The Masterplan proposals provide the opportunity to undertake a major car parking review and improve facilities for walking and cycling. It also provides a platform to discuss initiatives with public transport providers to improve accessibility to the site.
- A comprehensive Travel Survey of approximately 1800 staff at Macclesfield Hospital was undertaken and the results of the 688 returned surveys have been analysed by Faber Maunsell.
- From these results a number of initiatives have been developed which meet the preferences of the staff and it is also possible to tailor appropriate initiatives according to home addresses and shift patterns of the employees, for example car sharing registers and walking buddies.
- A large proportion of employees reside within a 2km radius of the Hospital which creates significant potential to promote walking and cycling. As an additional measure the Trust are withdrawing on site parking permits from those employees who do not require use of their cars for work.
- The Travel Plan Initiatives have been discussed with CCC and the success will be monitored annually with further staff travel surveys to ensure that the targets agreed with the Council are being achieved.

Appendix A – Staff Travel Survey



Macclesfield Hospital
East Cheshire NHS Trust

MACCLESFIELD HOSPITAL STAFF TRAVEL SURVEY

All returned questionnaires will be entered into a prize draw to win 1st prize of £75, 2nd prize £50, and 3rd prize £25.

Please could you spend a few minutes completing this questionnaire and then return it to one of the collection points by Friday 29th June 2007.

The survey results are a step towards improving our environment and promoting healthier lifestyles.

SECTION A Personal Details					
A1 Do you work full time or part time?					
Full-Time	<input type="checkbox"/>	<i>Full time workers go to A3</i>	Part-Time	<input type="checkbox"/>	
A2 On average, how many days a week do you work? Part time workers - What is your working pattern (Tick One)					
4 + days a week	<input type="checkbox"/>	Once a week	<input type="checkbox"/>	Once a month	<input type="checkbox"/>
2 or 3 days a week	<input type="checkbox"/>	Once a fortnight	<input type="checkbox"/>	Other	<input type="checkbox"/>
A3 (a) What time do you usually start work/finish work?					
Start time Finish time					
A3 (b) If you work shifts please indicate the start and finish times for each shift					
Shift 1	start time		finish time		
Shift 2	start time		finish time		
Shift 3	start time		finish time		
A4 Are you a Blue Badge holder?					
Yes <input type="checkbox"/> No <input type="checkbox"/>					
A5 What is your home postcode?					
Postcode					
A6 What is your occupation?					
Doctor	<input type="checkbox"/>	Nurse	<input type="checkbox"/>	Management	<input type="checkbox"/>
PAMS	<input type="checkbox"/>	Ancillary	<input type="checkbox"/>	Admin & Clerical	<input type="checkbox"/>
A7 If appropriate would you consider working from home?					
Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable <input type="checkbox"/>					
SECTION B Journey to Work					
1311 How do you usually travel to work? (Please tick one only)					
Car, on your own	<input type="checkbox"/>	Walk	<input type="checkbox"/>		
Car share	<input type="checkbox"/>	Bus	<input type="checkbox"/>		
Car, dropped off	<input type="checkbox"/>	Train	<input type="checkbox"/>		
Motor cycle	<input type="checkbox"/>	Taxi	<input type="checkbox"/>		
Cycle	<input type="checkbox"/>				
Other (please specify)					
B2 How long does it take to get to work? Please include the whole trip, from your front door to reaching your work area (e.g. your desk, department or ward).					
0-15 minutes	<input type="checkbox"/>	16-30 minutes	<input type="checkbox"/>		
31-60 minutes	<input type="checkbox"/>	61-90 minutes	<input type="checkbox"/>		
Longer than 90 minutes	<input type="checkbox"/>				

SECTION C About car use (non car users please proceed to Section D)				
C1 What are your main reasons for travelling to work by car (as either a driver or a passenger)? (Answer all questions Yes or No)			Yes	No
Time Savings			<input type="checkbox"/>	<input type="checkbox"/>
Cost Savings			<input type="checkbox"/>	<input type="checkbox"/>
Free Parking Provided at Work			<input type="checkbox"/>	<input type="checkbox"/>
Parking Provided Close to Work			<input type="checkbox"/>	<input type="checkbox"/>
Personal Safety			<input type="checkbox"/>	<input type="checkbox"/>
Health Reasons			<input type="checkbox"/>	<input type="checkbox"/>
Weather			<input type="checkbox"/>	<input type="checkbox"/>
Dropping off / Collecting Children			<input type="checkbox"/>	<input type="checkbox"/>
Public transport alternatives not realistic			<input type="checkbox"/>	<input type="checkbox"/>
Public transport alternatives not available			<input type="checkbox"/>	<input type="checkbox"/>
Carrying Heavy Gear			<input type="checkbox"/>	<input type="checkbox"/>
Need Car for business trips			<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)				
C2 (a) If you use your car during work hours, how often do you use it? If not, go to C3				
Every day <input type="checkbox"/> 1-2 times per week <input type="checkbox"/> Less often <input type="checkbox"/>				
C2 (b) What purpose do you use your car for during the working day?				
To attend meetings <input type="checkbox"/>		To visit patients <input type="checkbox"/>		
Personal Use <input type="checkbox"/>		To visit clinics <input type="checkbox"/>		
Other				
C3 How many cars are there in your household?				
None <input type="checkbox"/>		Two <input type="checkbox"/>		
One <input type="checkbox"/>		Three or more <input type="checkbox"/>		
C4 Where do you usually park?				
On site <input type="checkbox"/> Nearby street <input type="checkbox"/>				
C5 Do you have a Trust parking permit?				
Yes <input type="checkbox"/> No <input type="checkbox"/>				
C6 If yes, what is the car registration number?				
Registration Number				
C7 Which entrance do you normally use to enter/exit the MDGH site?				
Enter site via Fieldbank Road <input type="checkbox"/>		Enter site via Victoria Road <input type="checkbox"/>		
Exit site via Fieldband Road <input type="checkbox"/>		Exit site via Victoria Road <input type="checkbox"/>		
C8 Do you currently Car Share?				
Yes <input type="checkbox"/> Go to C9 No <input type="checkbox"/> Go to C10				
C9 If you do Car Share, how many people usually occupy the car?				
Two <input type="checkbox"/>		Four <input type="checkbox"/>		
Three <input type="checkbox"/>		Five <input type="checkbox"/>		
C10 Would you consider joining a car sharing scheme if the following were provided? (Answer all questions Yes or No)			Yes	No, would never consider
Access to a database listing potential car sharers			<input type="checkbox"/>	<input type="checkbox"/>
Reserved car spaces for registered car sharers			<input type="checkbox"/>	<input type="checkbox"/>
Financial incentives for registered car sharers			<input type="checkbox"/>	<input type="checkbox"/>
Provision of a guaranteed lift home			<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)				

C11 Would you consider using public transport for your journey to work if any of the following were provided? (Answer all questions Yes or No)	Yes	No, would never consider
Dedicated bus service	<input type="checkbox"/>	<input type="checkbox"/>
More direct routes	<input type="checkbox"/>	<input type="checkbox"/>
More frequent services	<input type="checkbox"/>	<input type="checkbox"/>
Better waiting facilities including improved lighting	<input type="checkbox"/>	<input type="checkbox"/>
Discount tickets/passes available through work	<input type="checkbox"/>	<input type="checkbox"/>
Improved connections from the station to work	<input type="checkbox"/>	<input type="checkbox"/>
Improved connections from home to the station	<input type="checkbox"/>	<input type="checkbox"/>
Better public transport information	<input type="checkbox"/>	<input type="checkbox"/>
Personal journey planning (Assistance with planning a route using alternative modes of travel)	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)		
C12 Would you consider cycling to work if the following were provided? (Answer all questions yes or no)	Yes	No, would never consider
Improved secure cycle parking	<input type="checkbox"/>	<input type="checkbox"/>
Improved showers/changing facilities at work (including lockers)	<input type="checkbox"/>	<input type="checkbox"/>
The provision of safer cycle routes to work	<input type="checkbox"/>	<input type="checkbox"/>
Free adults cycle training courses	<input type="checkbox"/>	<input type="checkbox"/>
Advice or guidance on safe cycling	<input type="checkbox"/>	<input type="checkbox"/>
Information on cycling routes/provision of a cycling map	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)		
C13 Would you consider walking to work if the following were provided? (Answer all questions yes or no)	Yes	No, would never consider
Improved lighting on site	<input type="checkbox"/>	<input type="checkbox"/>
Improved footpaths on site	<input type="checkbox"/>	<input type="checkbox"/>
Improved footpaths on journey to work	<input type="checkbox"/>	<input type="checkbox"/>
Pedestrian crossing facilities near site	<input type="checkbox"/>	<input type="checkbox"/>
Traffic calming measures near site	<input type="checkbox"/>	<input type="checkbox"/>
Traffic calming measures on site	11	<input type="checkbox"/>
Other (please state)		
SECTION D Non Car users (Please answer this question if you mostly travel to work by a means other than car)		
D1 Please state why you choose to travel to work by this form of transport? (Answer all questions yes or no)	Yes	No
Do not like driving	<input type="checkbox"/>	<input type="checkbox"/>
Acceptable journey time	<input type="checkbox"/>	<input type="checkbox"/>
Weather	<input type="checkbox"/>	<input type="checkbox"/>
Want to drink alcohol	<input type="checkbox"/>	<input type="checkbox"/>
Congestion	<input type="checkbox"/>	<input type="checkbox"/>
Difficulties parking	<input type="checkbox"/>	<input type="checkbox"/>
Live close to work	<input type="checkbox"/>	<input type="checkbox"/>
No car available	<input type="checkbox"/>	<input type="checkbox"/>
Non driver/unable to drive	<input type="checkbox"/>	<input type="checkbox"/>
Cheaper than car	<input type="checkbox"/>	<input type="checkbox"/>
Environment concerns	<input type="checkbox"/>	<input type="checkbox"/>
Most practical mode of travel	<input type="checkbox"/>	<input type="checkbox"/>
No parking available at work	<input type="checkbox"/>	<input type="checkbox"/>
Avoid congestion delays	<input type="checkbox"/>	<input type="checkbox"/>

Health/fitness reasons	<input type="checkbox"/>	<input type="checkbox"/>
Enjoy walking/cycling	<input type="checkbox"/>	<input type="checkbox"/>
Other (please <i>state</i>)		
SECTION E Finally, please provide the following information about yourself so that we can contact you if you win the prize draw. This information will not be used for anything else.		
E1a Name		
E1 b Job Title		
E1 c Department		
E1d Contact Number		
SECTION F - Anything to add		
F1 Do you have any other comments about your travel to work, or any suggestions which would help to reduce the number of single occupancy car journeys to work?		

THANK YOU FOR YOUR ASSISTANCE, PLEASE RETURN THE COMPLETED QUESTIONNAIRE NO LATER THAN FRIDAY 29th JUNE 2007 TO:

**OPERATIONAL SERVICES DIRECTORATE ARLEY BUILDING,
BLUE ZONE
OR PLACE IN BOX SITUATED INSIDE TREETOPS STAFF RESTAURANT**