

**Abertawe Bro Morgannwg
University Health Board**

MORRISTON HOSPITAL, SWANSEA

Travel Plan

October 2015

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1 INTRODUCTION

- 1.1 This Travel Plan has been produced by Vectos on behalf of Abertawe Bro Morgannwg University Health Board (ABMUHB) specifically to discharge condition 6 of the outline planning permission granted in March 2010, in support of the new building at Morriston Hospital in Swansea.
- 1.2 The Travel Plan has been prepared in accordance with Travel Plan guidance issued by the Department for Transport, and the intention is to provide an overview of the Travel Planning opportunities for Morriston Hospital.
- 1.3 Morriston Hospital is part of a larger Health Trust ABMUHB and the hospital comprises approximately 5000 full and part-time staff, some of whom who are not primarily based at Morriston.

Travel Plan Scope

- 1.4 The scope of this Travel Plan is to reinforce the sustainable travel ethos of the ABMUHB for staff, patients and visitors.
- 1.5 This Travel Plan is aimed at encouraging staff traveling to work, as well as patients and visitors to travel to the hospital by sustainable modes.
- 1.6 This Travel Plan has been written as a standalone document and contains all the relevant information needed to implement the monitoring strategy. The remainder of this document is structured as follows:
- **Section 2:** outlines the background to the site;
 - **Section 3:** outlines the accessibility of the site;
 - **Section 4:** outlines local, regional and national policy;
 - **Section 5:** outlines the Travel Plan process including how it will be managed, marketed and consulted;
 - **Section 6:** outlines the existing travel patterns;
 - **Section 7:** sets out the objectives and targets of the Travel Plan;
 - **Section 8:** sets out the sustainable transport measures to help achieve the objectives and targets of the Travel Plan. It will also outline measures which could be adopted once travel patterns are known and specific targets are set;

- **Section 9:** outlines the monitoring and review programme that will ensure the Travel Plan continues to progress; and
- **Section 10:** summarises the actions that need to be undertaken to ensure successful implementation of the Travel Plan.

2 BACKGROUND

The Development

- 2.1 The new hospital building consists of a new entrance with main and outpatient reception, retail units, café, ancillary facilities, Medical Education centre and Clinical building.

Previous Travel Plan Review

- 2.2 The previous Travel Plan which was completed in 2008, reported the findings of a travel survey undertaken by staff at all of the hospitals under the Trust. This showed that 70% of staff at this time travelled to work by single occupancy car. The 2008 survey also showed that 61% of staff work office hours, whereas in the 2005 survey reported that 49% of staff worked office hours. This survey also highlighted that in 2008, 15% of staff lived within 2 miles of their place of work. **Table 2.1** is taken from the previous Travel Plan and demonstrates the results of the previous 3 staff travel surveys.

Table 2.1 – Previous Travel Plan surveys

Mode	Survey 2002	Survey 2005	Survey 2008
Car (on Own)	73.1%	88%	70%
Car (with others)	8.3%	7%	16%
Motorbike/Scooter	0.8%	n/a	1%
Bus	5.6%	1.8%	5%
Train	0.4%	n/a	0.2%
Walk	7.2%	0.9%	5%
Cycle	2.0%	0.4%	4%
Other	2.6%	1%	n/a

- 2.3 Some of the previous travel plan commitments are summarised below:
- Morriston Hospital previously offered its staff access to a 'Corporate Travel Club' which allows staff a discounted bus pass from the operator 'First';
 - A 'cycle to work' salary sacrifice scheme is available to all Morriston Hospital staff to purchase bicycles (and cycle equipment) up to the value of £1,000;
 - Pool cars for inter-site travel; and
 - Video conferencing facilities to be used where possible.
- 2.4 Over the last 7 years various initiatives have been implemented and maintained. These initiatives and their current status are summarised below:

2.4.1 The introduction of a **Travel Plan Steering Group** which was conceived to engage in regular meetings concerning Travel Plan goals; a primary outcome was an **Action Plan** which is summarised below:

- To submit Planning Applications to the Local Authority for the re-provision of car parking and improvements to site access infrastructure at Morriston Hospital.
- To expand the Active Travel project to Morriston Hospital.
- To launch a partnership agreement with local bus companies, train operators and the Community Transport Association in order to improve integrated transport to Morriston Hospital, this will enable patients to have ample sustainable travel options.
- To complete the enabling works for the Metro system at Morriston Hospital.
- As identified in the 2008 survey, patient appointment letters should contain sustainable travel information by March 2010.
- Car sharing offers should be considered.
- The Travel Plan Steering Group were also to act upon the Car Parking Strategy Action Plan which aimed to complete the following in **Table 2.2** (taken from the previous Travel Plan):

Table 2.2 - Car Parking Strategy Action Plan

Action	Date
The predecessor Trust's Travel Plans will be reviewed and amalgamated as part of the Welsh Assembly obligations.	March '09
Trust Travel Plan Steering Group to discuss WAG feedback from Travel Plan submissions in March	May 09
Prepare a Travel Action Plan, which recognises the loss of charges as a deterrent and promotes innovative options and alternative forms of transport.	July '09
Work in partnership with Local Authorities and public Transport operators to improve accessibility and provide incentives for modal change	Ongoing

2.4.2 Many of the measures in the action plan were completed, however some were not implemented due to financial restraints of the ABMUHB. Specific patient and staff transport issues were to be identified, reported, and actioned accordingly. A Transport Liaison Sub Group was set up successfully by the target date on December 2009 and met regularly until 26th February 2015.

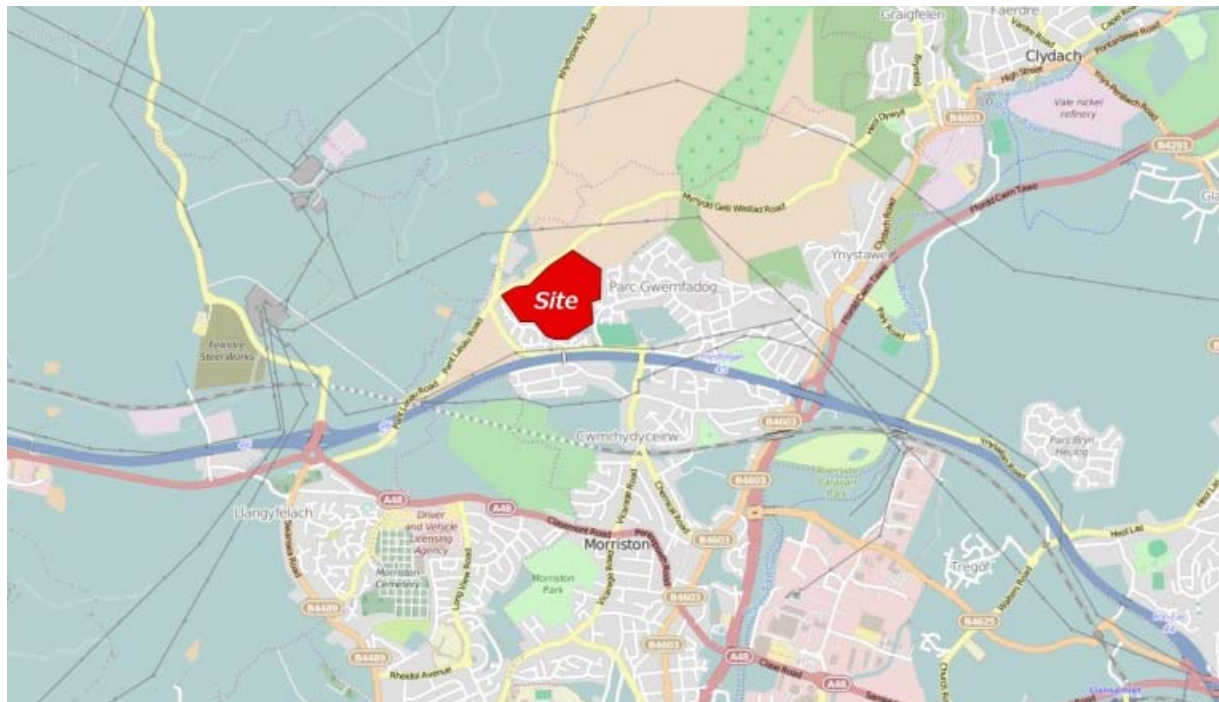
- 2.4.3 Further measures proposed included costing of all action plan measures. A key measure aimed at staff was to investigate the use of Pool Cars within the Health Board (not just Morriston Hospital), to combat the rise in 'cross-site' working. This was targeted for January 2010, and a Community Nursing car sharing scheme was established. In addition 'Share Cymru' was reported to have been launched in February 2014, but had a poor response.
- 2.4.4 Trust-wide intranet / internet 'Travel' and 'Transport' pages were established by October 2009. All bus information is now included on the intranet/ internet, and discounted travel offers and cycling maps are included in the new 'Virtual Staff Room' pages on the staff intranet.
- 2.4.5 Travel information was included in patient appointment letters by February 2010. This was achieved in March 2010, however as demonstrated in **Section 3** of this report, over 80% of patients surveyed in 2015 said they did not think there was enough sustainable travel information in their appointment letter.
- 2.4.6 The discounted bus travel scheme was implemented in January 2010. It was also recorded in the February 2014 Travel and Transport Liaison Group minutes that the pilot bus between Neath and Morriston was being concluded due to lack of usage.
- 2.4.7 Finally, the Action Plan set out to change visitor times to reflect transport provision and accessibility, and to conduct a project into new ways of providing non-emergency patient transport. As of December 2010 both of these measures were ongoing.

3 ACCESSIBILITY

Location

- 3.1 The Hospital is located in Morriston, Swansea, and is located just north of the M4 motorway, between junctions 45 and 46. The site location is illustrated in **Figure 1**.

Figure 1 – Site location plan



Existing Sustainable Travel Provision

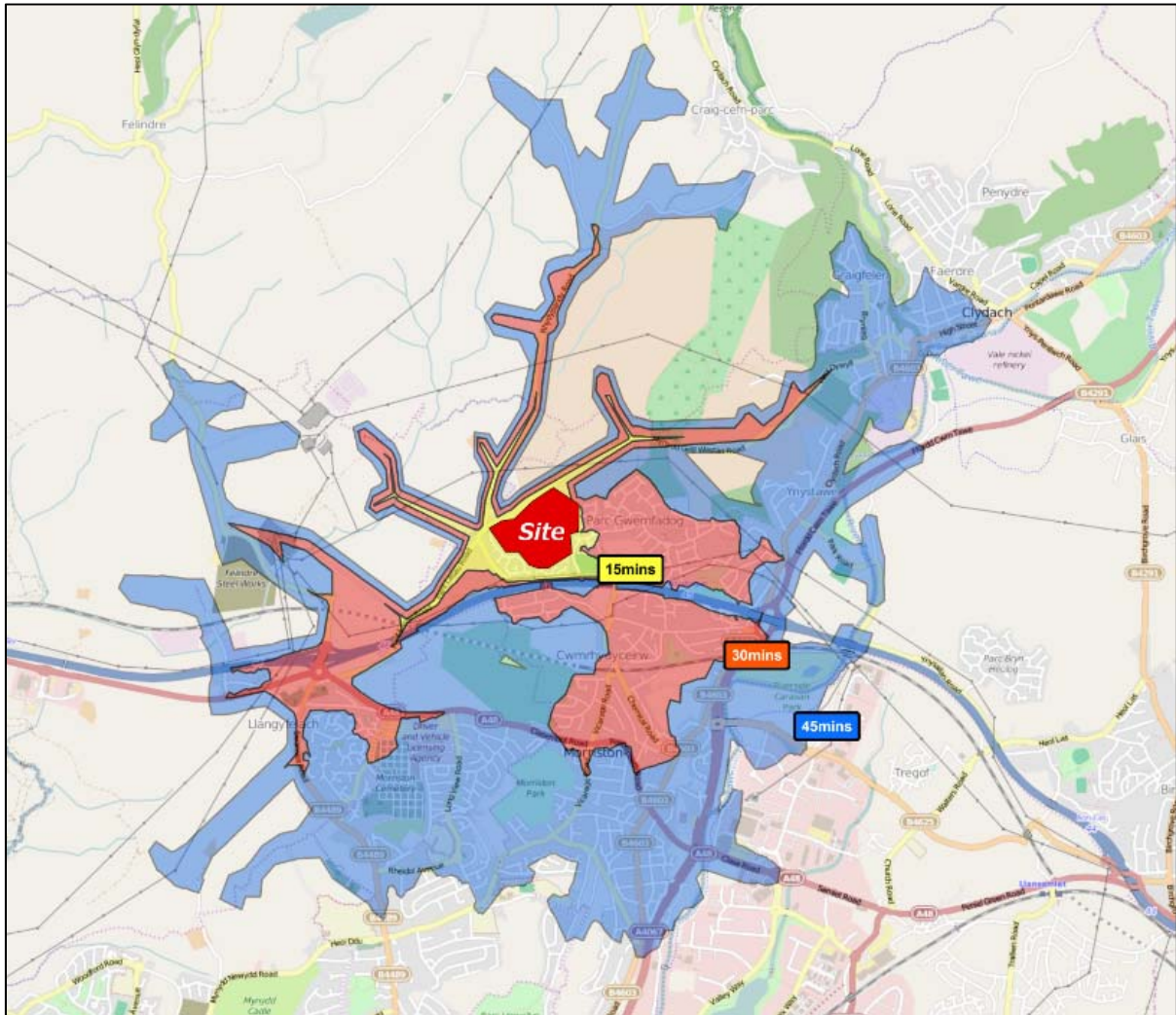
- 3.2 The ABMUHB website for Morriston Hospital provides detailed information pertaining to travel by foot and by cycle (contained in **Appendix A**) as well a link to Traveline Cymru website for staff and visitors. The website also contains a map of the hospital and car park locations. As part of this travel plan process this information will be updated with the locations of cycle parking across the hospital.
- 3.3 The following section provides a summary of the current sustainable transport provision at Morriston Hospital.

Travel by Foot

- 3.4 The hospital is accessible by foot from the neighbouring residential areas to the east and south west (Cwmrhydyceirw and Ynysforgan to the east, and Pant-Lasau to the south west).

- 3.5 The internal roads within the hospital site have recently been subject to design and surface improvements, and all provide good connectivity by foot. Footways are present on the surrounding road network also, and are provided on both sides of the highway. The walking routes to the hospital from the surrounding residential areas benefit from street lighting, and in most cases dropped kerbs and tactile paving, creating continuous walking links.
- 3.6 There is a footbridge (over the M4 Motorway) connecting Maes-y-Gwernen Road and Maes-y-Gwernen Close on the southern side of the M4, to Heol Maes Eglwys on the northern side of the M4 which connects to the hospital's southern access road. This footbridge is not intended for cyclists, although cyclists could dismount and push their bicycle across. The bridge has lighting and safety barriers at either end and this route provides a good connection to the walking routes surrounding the hospital. This is considered to be attractive for both staff and visitors, and local gradients make it suitable for disabled access also.
- 3.7 On-site, uncontrolled pedestrian crossings are provided at all junctions in the form of dropped kerbs with tactile paving. These crossing points are generally located on pedestrian desire lines and facilitate easy and safe connections between car parks and between hospital buildings.
- 3.8 Outside the new hospital main reception is a new controlled pedestrian crossing which connects the hospital to the new car parks. A covered pedestrian walkway connects the pedestrian crossing with the ground floor car parking level. Within the car park itself, informal zebra-type markings have been located at the pedestrian crossing points in order to prioritise pedestrians over vehicular movement.
- 3.9 All bus stops are now located on the hospital side of the access road, enabling passengers to board and alight the bus without crossing the road.
- 3.10 **Figure 2** shows walking isochrones of 15 minutes, 30 minutes and 45 minutes from the northern access to Morriston Hospital on the site, assuming a comfortable average walk speed of 5 km/h (3 mph). This demonstrates that the majority of the residential area of Morriston and Clydach is within a 45 minute walk, and the majority of the neighbouring residential areas of Parc Gwenfadog and Cwmrhydyceiriw are within a 30 minute walk to the hospital.

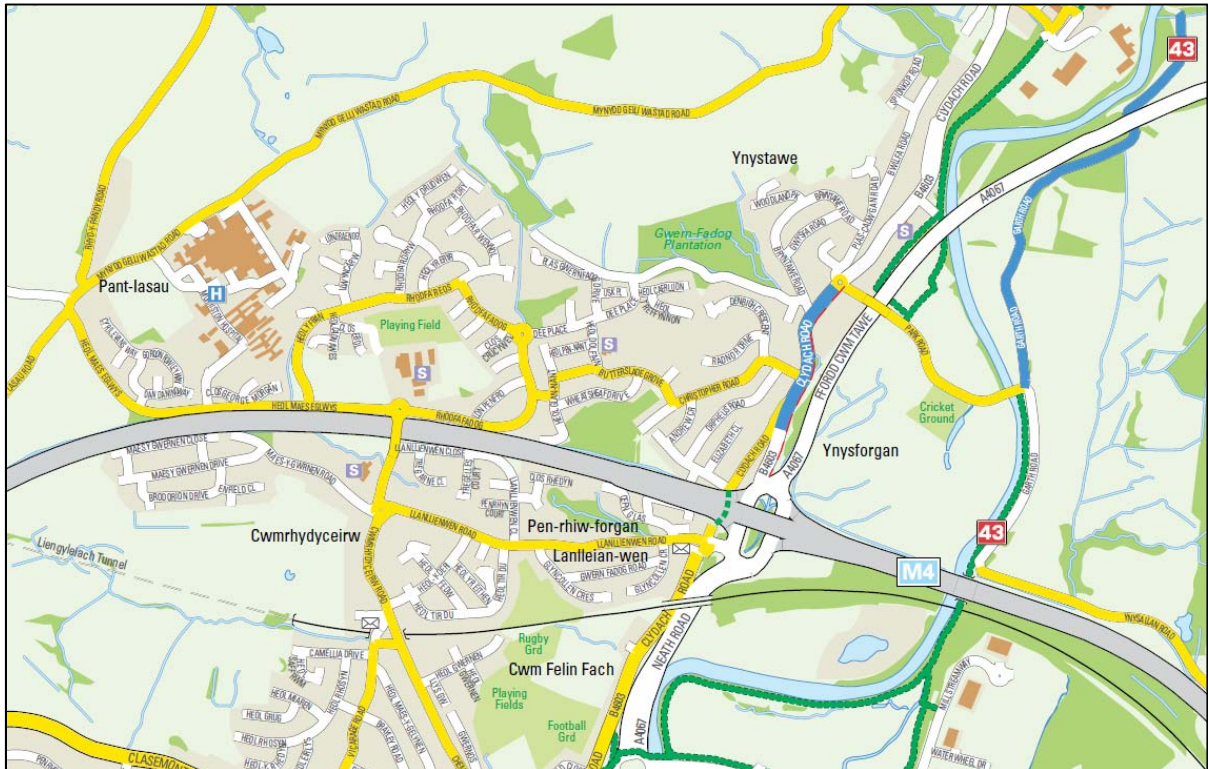
Figure 2 – Indicative walking isochrones



Travel by Cycle

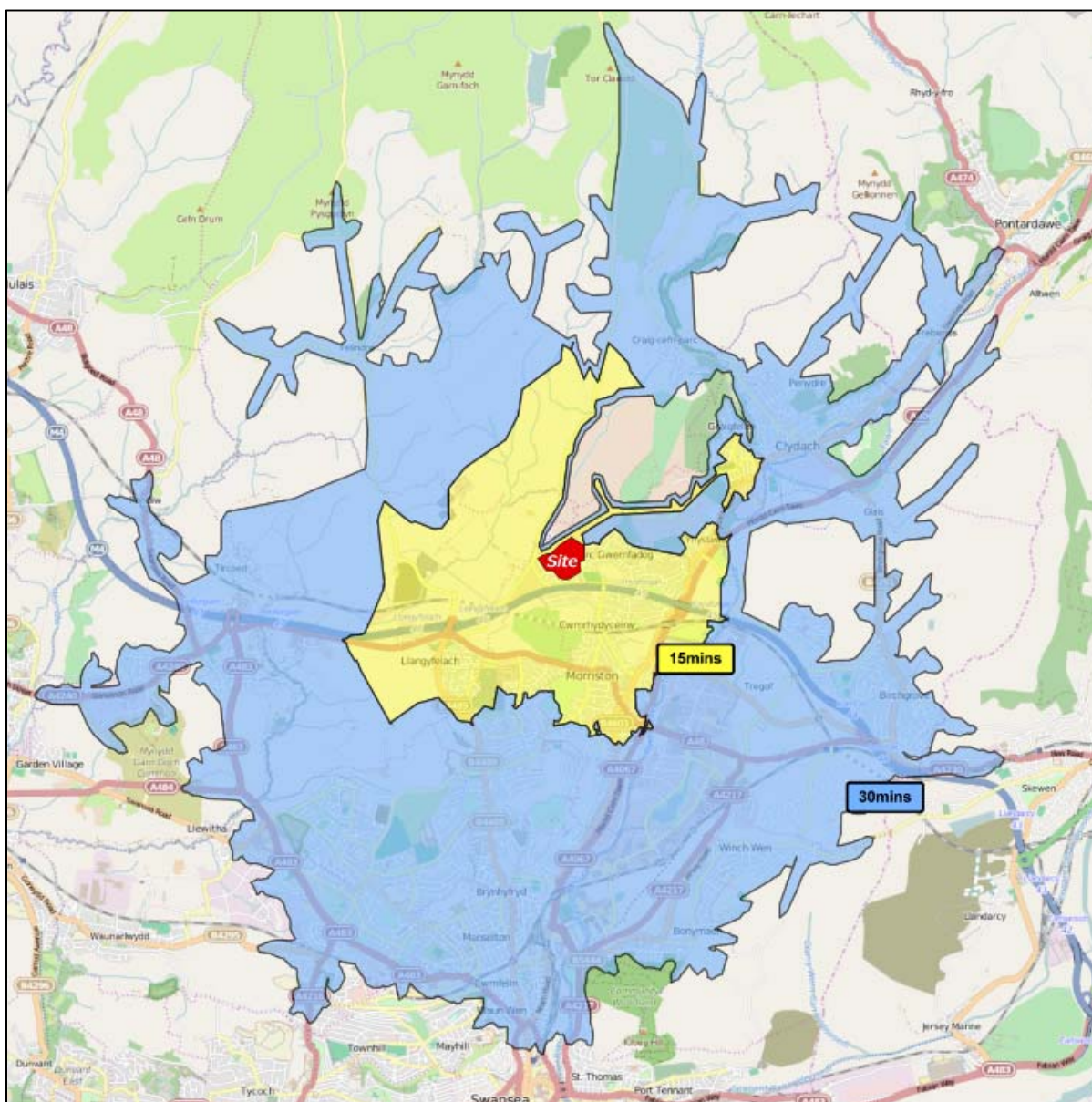
- 3.11 Morryston Hospital is surrounded by advisory cycle routes according to Swansea's cycle map (yellow routes identified in **Figure 3**). In addition National Cycle Route 43 passes the site approximately 3km to the east, running north to south, for the most part alongside the River Tawe, connects Morryston with Swansea in the south and locally, with Clydach, Pontardawe and Ystalyfera in the north. The route is generally a traffic free route and an extract from the Swansea cycle map is included below in **Figure 3**.

Figure 3 – Extract from Swansea's Cycle Map



- 3.12 **Figure 4** shows cycling isochrones of 15 minutes and 30 minutes from the northern access to Morryston Hospital on the site, assuming a comfortable average cycle speed of 15 km/h (9 mph). Sustrans has suggested that up to 5 miles (8 km) is an appropriate distance for cycle commuting. This equates to 33 minutes at this speed.
- 3.13 This indicates that all of Morryston and Clydach are easily reachable within 30 minutes by cycling, and indeed Llanamlet Railway station is comfortably within a 30 minute cycle to Morryston Hospital.

Figure 4 – Indicative cycling isochrones



Travel by Bus

- 3.14 There are three bus stops within the hospital site, one located adjacent to the new main hospital entrance, the second outside the entrance to the new Renal Dialysis Unit and opposite the entrance to the Specialist Rehabilitation Centre and the third outside the old Out Patient Department and opposite Ty Olwen Palliative Care Centre. The old bus stop approximately 150 m to the south of the new Main Entrance and below the multi storey car park is still utilised by some of the bus companies serving the site the hospital site is served by several routes that connect the site with Swansea City Centre, Singleton hospital, Morriston, as well as other local urban areas. These services provide a good level of service and are summarised in **Table 3.1**. The site is also served by the excellent FTR Metro service,

the looped service number 4, connecting Morriston Hospital with Swansea City Centre and Singleton Hospital. This service is operated by First Bus and uses state of the art, articulated buses which are designed to resemble trams in appearance. This service is highly promoted and marketed in Swansea and is seen as a flagship route. The service benefits from **dedicated** road-space and priority signal systems to keep the buses running on time. A typical journey time from Swansea train Station to Morriston Hospital is 30 minutes.

Table 3.1 – Summary of bus services from Morriston Hospital

Service	Route	Weekday			Saturday			Sunday		
		First	Last	Daytime Frequency	First	Last	Daytime Frequency	First	Last	Daytime Frequency
4	Swansea - Singleton Hospital	07:56	18:13	Every 12 minutes	08:06	18:26	Every 15 minutes	10:25	17:59	1/ hour
4a	Swansea	06:29	22:05	7 services/ day	19:59	22:05	4 services/ day	No service		
24	Caemawr & Morriston Cross - Brynhyfrhyd - Swansea	09:20	17:25	1/ hour	09:20	17:25	1/ hour	No service		
31	Birchgrove - Trallwn & Bonymaen - Swansea	07:55	22:50	1/ hour	08:18	22:50	1/ hour	No service		
42	Morriston - Sketty - Swansea University	07:35	-	1/ day	No service			No service		
43	Singleton Hospital - Swansea	08:24	18:27	Every 1-2 hours	08:24	18:27	Every 1-2 hours	No service		
141	Morriston - Gorseinon	07:43	18:15	7 services/ day	10:11	18:15	7 services/ day	No service		
142	Morriston - Garnswllt	09:28	14:30	3/ day (Tues, Wed, Fri only)	09:28	14:30	3/ day	No service		
145	Morriston - Swansea	10:56	15:24	3/day	10:56	15:24	3/day	No service		
X60	Neath via Skewen	6.45	16.45	hourly	No service			No service		

- 3.15 First Bus operates a corporate travel club for regular bus travellers with a 15% discount on the purchase of monthly tickets. This scheme is offered to staff at the hospital.
- 3.16 The bus stops on the hospital site benefit from lighting, shelters with seats, signs and timetables, as well as a raised boarding platform to complement the designated layby. Bus stops also benefit from real-time information systems.

Travel by Rail

- 3.17 Llansamlet Railway Station is the nearest rail station to the site, and is located approximately 3km from Morriston Hospital. Local service provision is summarised in **Table 3.2**.
- 3.18 Llansamlet Station links to the hospital via the 31 bus service, which stops directly adjacent to the station on Frederick Place.
- 3.19 Bus service 31 offers hourly links from Llansamlet Station to Morriston Hospital with no changes, this journey is approximately an hour long.

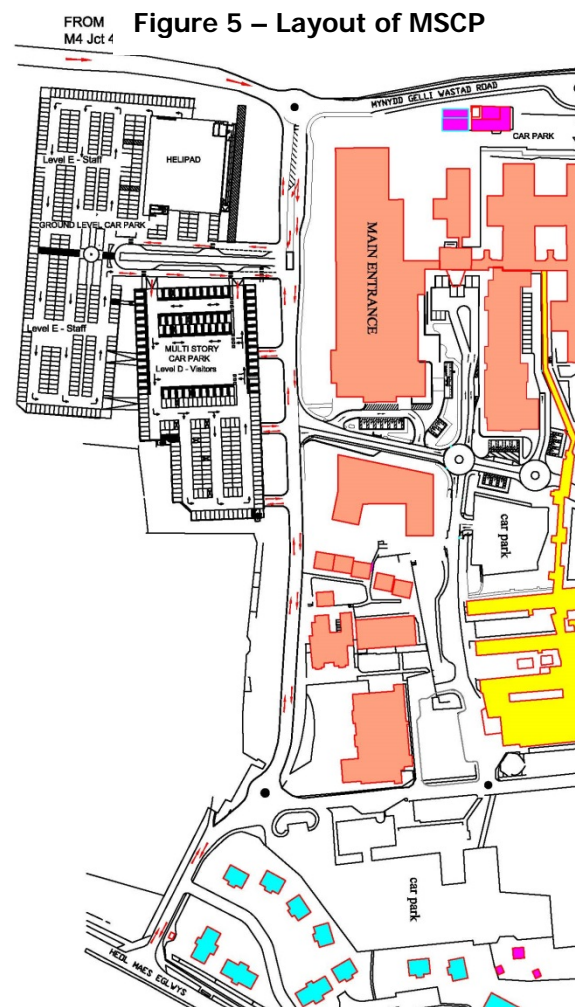
Table 3.2 – Summary of rail services at Llansamlet Station

Destination	Daytime Frequency	Approximate Journey Time
Chester	2 per day	4 hours
Swansea	Every 2 hours	8 minutes
Llanelli	4 per day	half an hour
Cardiff Central	Every 2 hours	1 hour
Newport	4 per day	1 hour
Bridgend	Every 2 hours	half an hour

Vehicular Access

- 3.20 The primary access road through the hospital, is connected in the north with Heol Mynydd Gelli Wastad and in the south by Heol Maes Eglwys. This road facilitates access to the car parks, serves the main hospital entrance, the A&E department, the service entrance for staff, and the fleet vehicles and delivery entrance.

3.21 On-site car parking provision is allocated for staff and for visitors across the hospital. There are some very small car parks attached to some of the hospital departments across the site, however the primary parking allocation is located to the west of the new hospital building and is provided at multiple storeys. Further visitor and staff car parks are allocated to the south of Ty-Olwen building. The multi-storey car park provides 1,305 spaces, 741 spaces for patients & visitors and a 564 for staff. A plan illustrating the location of the multi-storey car park is shown in **Figure 5**. The 2008/01495 planning notice allows for no more than 2,131 parking spaces at the hospital without further consent. The parking provision spread across and to the south of the hospital makes up the remainder of the permitted 826 spaces.



3.22 In line with the Welsh Government’s ‘Welsh Health Circular’ (2008) 011, parking at the hospital is free for staff and visitors. Typically, establishments where modal shift to more sustainable modes of travel are sought, Travel Plans such as this would recommend a stepped increase in on-site parking charges in order to discourage unnecessary travel by car. However, this Welsh Government circular prevents this from being implemented in this case and as such, other measures should be sought to discourage unnecessary travel by car, particularly by staff at the hospital. The ABMU NHS Trust acknowledges in their Car Parking Strategy report (2009) that following a review of their previous Travel Plan and the Welsh Health Circular, that the Trust ‘*will need to develop more innovative measures to encourage alternative travel options*’. Further details relating to how this will be achieved are detailed in **Section 7** of this Travel Plan although it should be recognised that providing free parking is diametrically opposed to generating a culture of sustainable travel for any site. In this

respect, Morriston Hospital should not be penalised for this as they are adhering to a Welsh Government directive.

- 3.23 As of 1st April 2015, Abertawe Bro Morgannwg introduced staff parking permits controlled by an external parking monitoring company. Any member of staff caught parking on-site without a valid permit after this date would be subject to a Parking Charge Notice. Staff applications for permits are reviewed and various factors such as disabilities, distance from home address, hours of work, dependencies, and car sharing use are considered on a case by case basis. New signage has been installed across the site informing of parking (and waiting) restrictions at each of the car parks at the hospital.
- 3.24 Parking permits were introduced in an attempt to control staff parking, as well as fly-parking by anyone without a legitimate reason for being at the Hospital (particularly commuters) as well as inappropriate parking, such as abuse of disabled spaces, drop-off areas and ambulance areas.

Travel Patterns

- 3.25 A Travel questionnaire survey has been undertaken to understand current travel patterns by staff, visitors and patients to the hospital. This is detailed further in the following section.

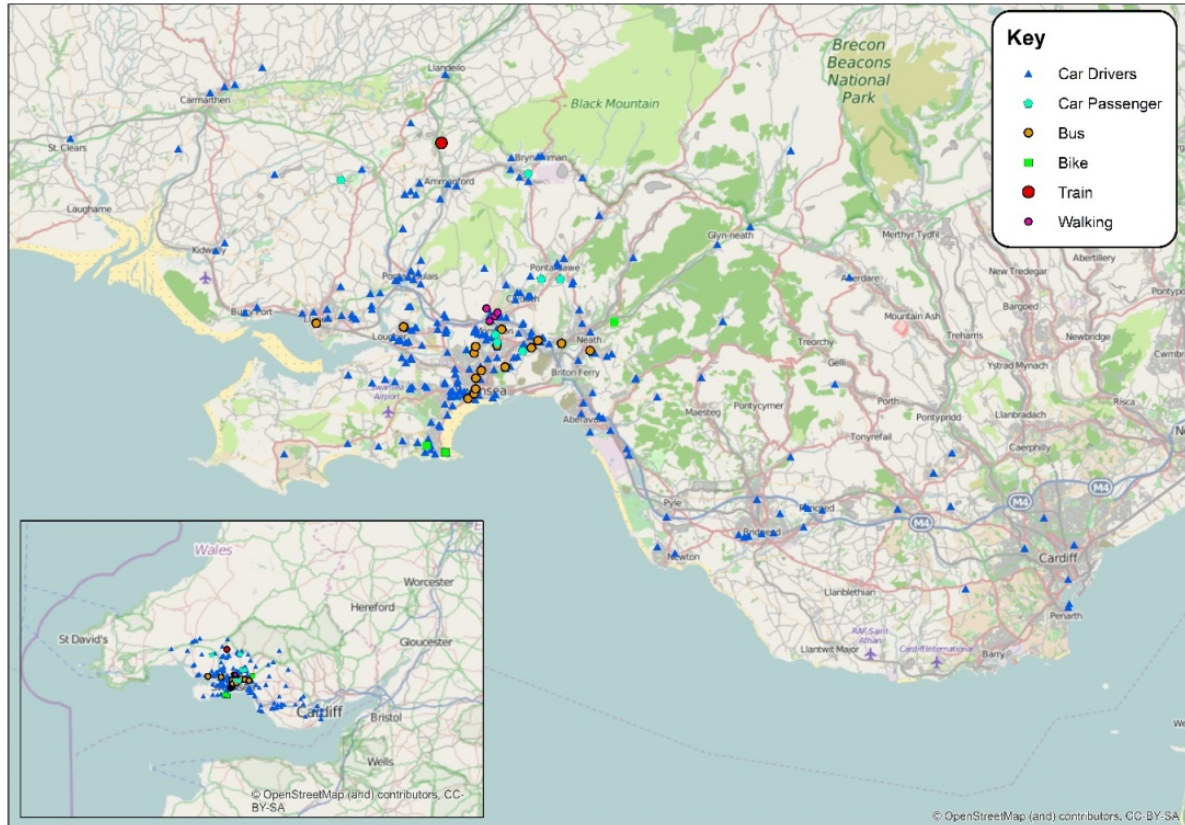
4 EXISTING TRAVEL PATTERNS

- 4.1 This section considers the movement patterns for staff, visitors and patients. It is important to differentiate between the travel patterns for different users as the Travel Plan should focus on influencing the travel patterns for regular 'trips' to the hospital, which in many cases relate to staff working on the site on a daily basis. This is not to say that providing travel choice for visitors and patients is less important than for staff, just that the target audience for staff may be easier to influence and for more regular journeys.

Staff

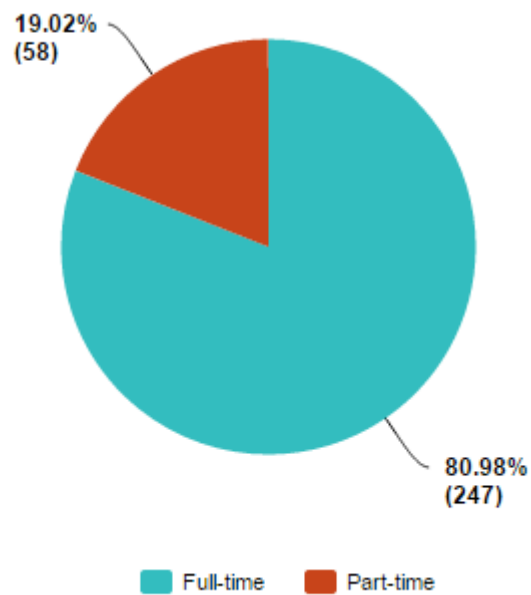
- 4.2 An online questionnaire survey was distributed to all hospital staff on the internal intranet via the online service 'Survey Monkey'.
- 4.3 A total of 307 staff responses were received and summarised in this section. This response rate is considered to be a sufficiently robust sample size from which to base objectives and targets for this Travel Plan.
- 4.4 A summary of the responses given to this questionnaire is contained included in the remainder of this Chapter.
- 4.5 Question 1 asked staff for their home postcode which were analysed against 'main mode of transport for your commute' (question 7) and plotted on a map (**Figure 6**). The home postcode data provides the typical distance from which staff commute from on a regular basis, and the mode in which they most often travel.

Figure 6 – Staff Home Postcodes



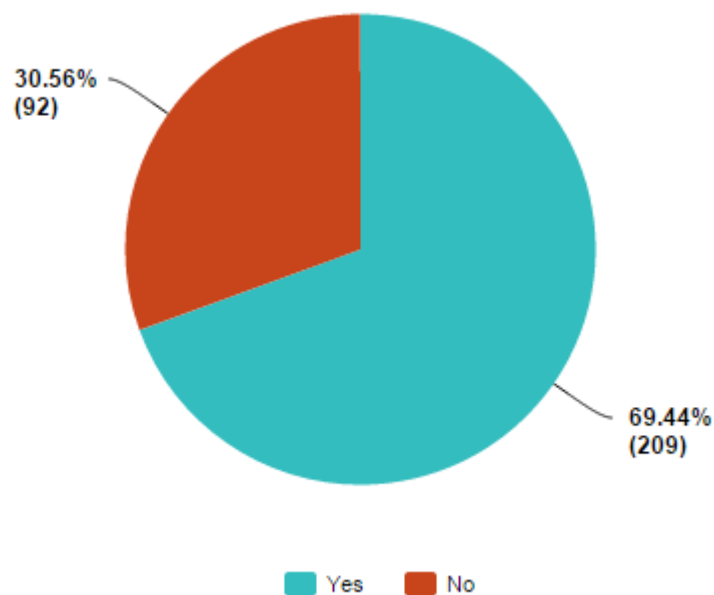
4.6 Question 2 asked whether staff were full or part time. The results of the survey are illustrated in the graph below.

Full/ Part-Time Employment



4.7 Question 3 asked whether the staff member's main place of work was Morryston Hospital.

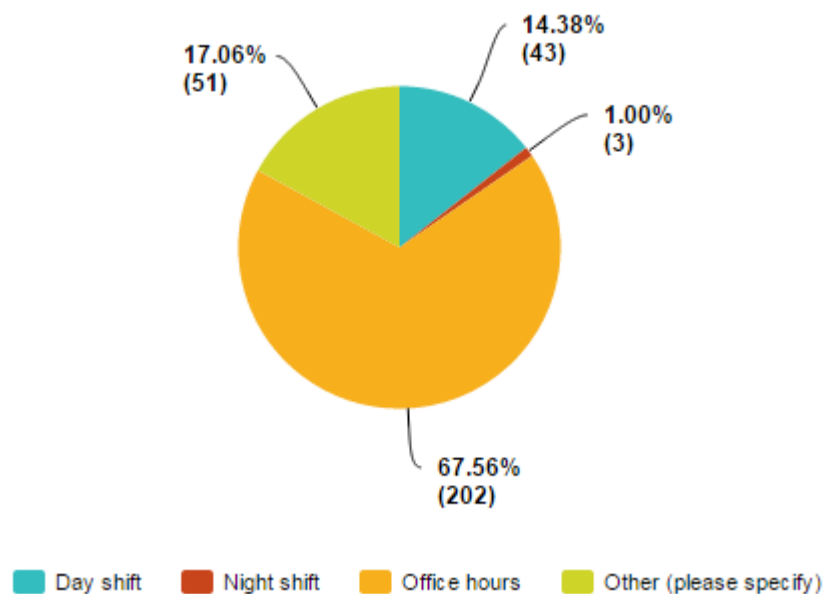
Main Place of Work – Morryston Hospital



4.8 More than two thirds of the staff surveyed responded that Morryston Hospital was their main place of work.

4.9 Question 4 asked staff for their usual hours of work.

Shift/ Office Hours

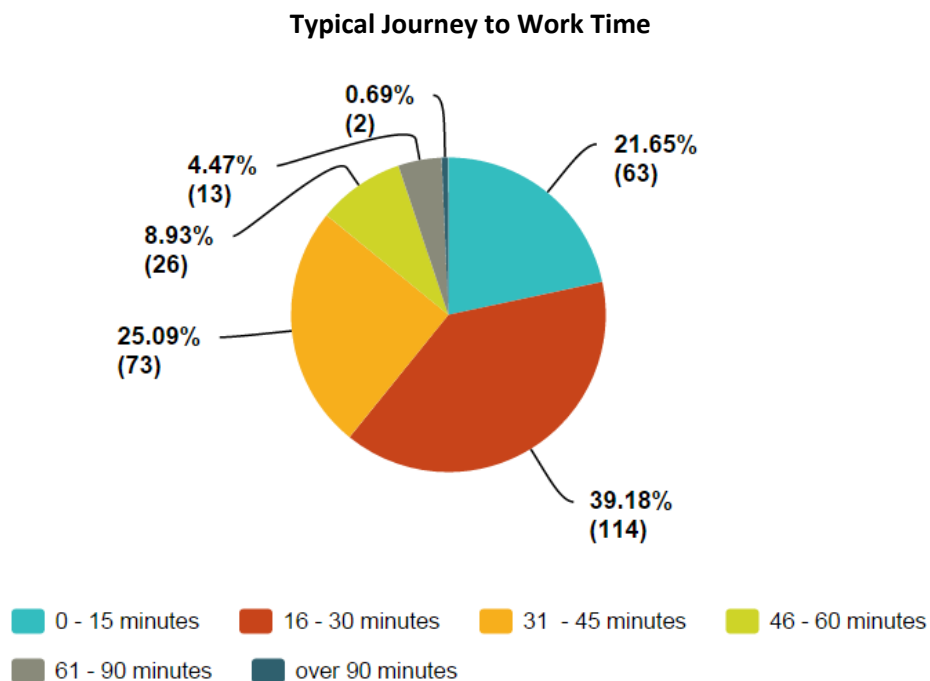


- 4.10 This question generated 51 'other' responses. These responses can be categorised into; shift work (varying hours), sessions / full-time and on-call, and all-of-the-above. Two thirds of staff responding to this question work typical office hours e.g. 0900-1700hrs.
- 4.11 Question 5 asked staff what department/ service they work in. The survey word cloud depicts the results in the following.



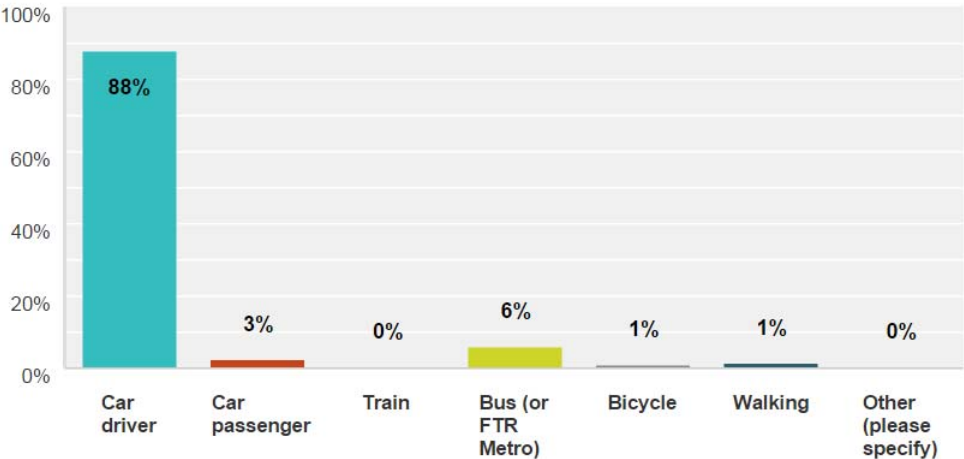
NB. Largest font = most respondents

- 4.12 Question 6 asked staff to provide their typical journey time to work. The results are presented in the graph below.



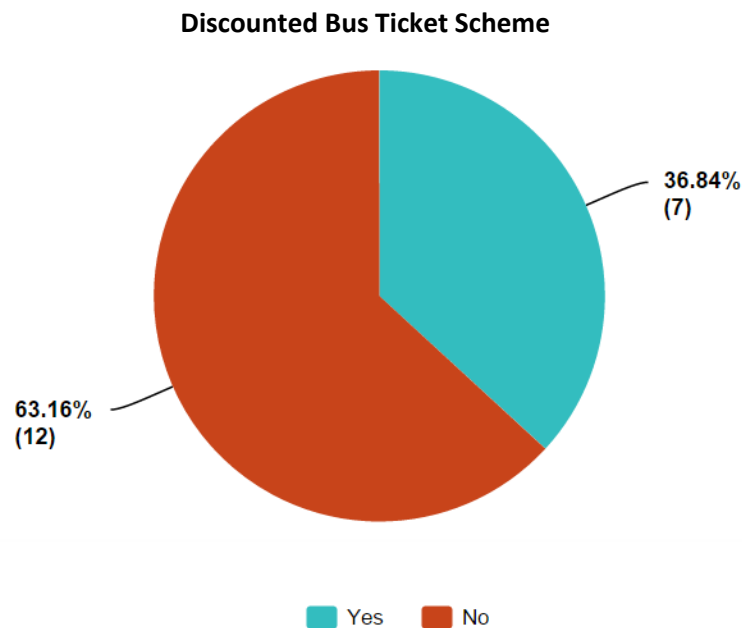
- 4.13 This graph demonstrates that over 60% of staff commutes less than 30 minutes to work and this suggests that even though some require their vehicles for work purposes, there is a substantial base to connect to travelling by more sustainable modes.
- 4.14 Question 7 asked staff to state their main mode of transport when commuting to Morriston Hospital. The results of the survey are indicated in the map of postcodes, and in the following chart.

Main Mode of Commuting

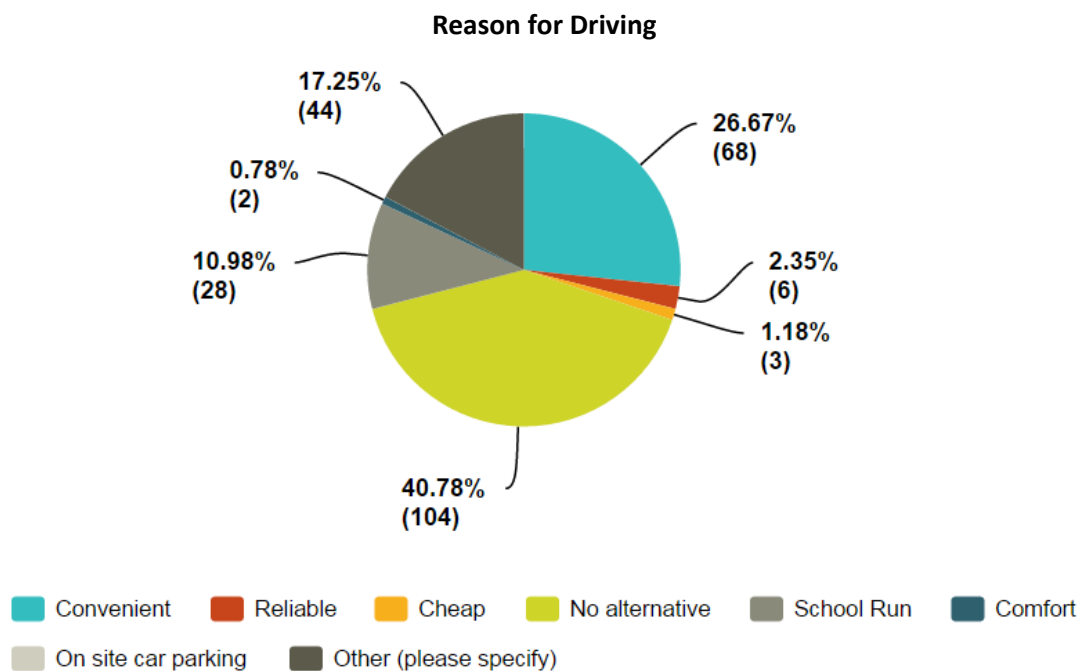


- 4.15 The data shows that car is the dominant (91%) mode of travel to the hospital by staff. Further cross-examination of questions 3, 6 and 7 demonstrate that 22% of staff work permantly at Morriston, and live within a 15 minute commute by car. These staff could potentially be targeted by the TPC in the first round of individual travel planning.

- 4.16 Question 8 asked only those who selected 'Bus (or FTR Metro)' as their main mode of commute, whether they currently use any discounted ticket scheme. The results are indicated in the graph below.



- 4.17 Questions 9 – 14 were available only to those who selected 'car' as their main mode of commuting. The results are illustrated in the following.

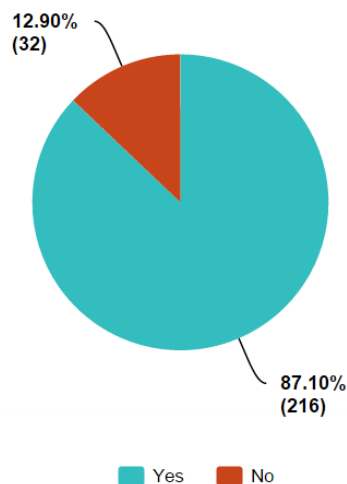


4.18 Only 40% of staff suggest that there is no alternative to driving, and 27% staff chose convenience for the reason they drive to work. This would suggest that there are sustainable travel alternatives available that could be explored.

4.19 The 44 'other responses' are summarised and comprise;

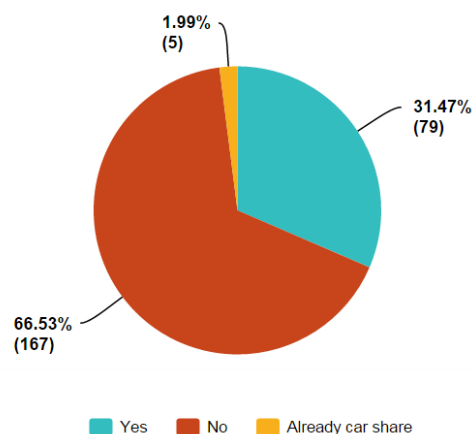
- working across different sites;
- carer at home so quick transport required;
- only method suitable for shift times;
- public transport journey too long;
- urgency of calls;
- no cycle route and unlit roads until 5am; and
- school / nursery run, and medical reasons.

Do you possess a Hospital Parking Permit?



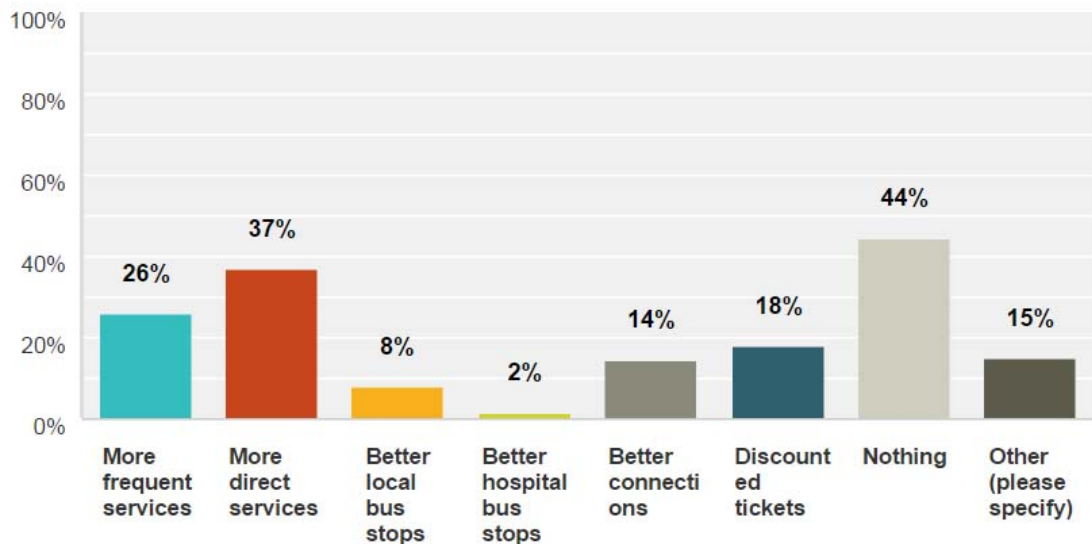
4.20 A high proportion of staff possess a parking permit which is unsurprising given the availability of free parking.

Would you consider car sharing if priority parking were available?



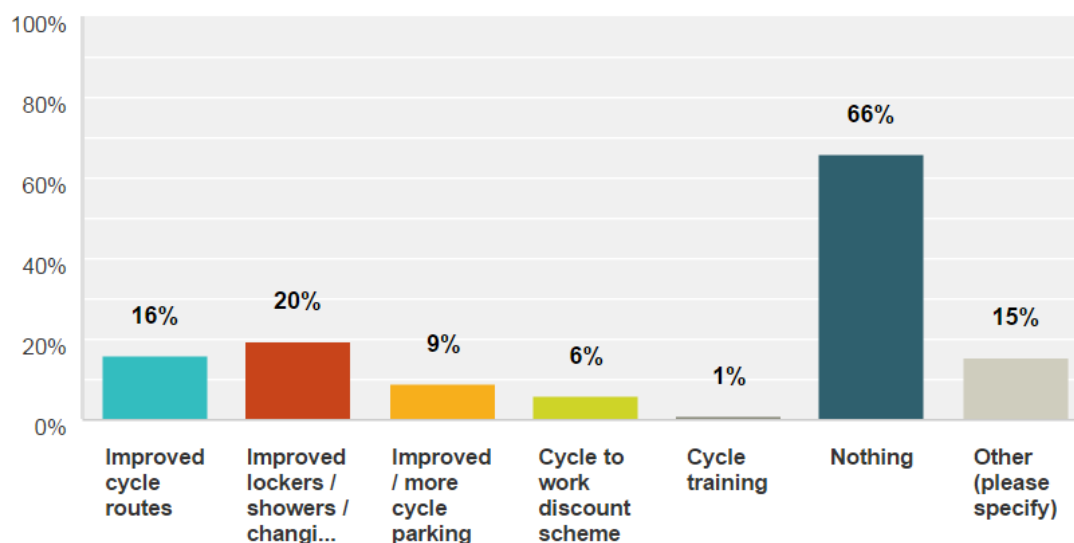
- 4.21 Staff responding to this question would appear to be amenable to car sharing with the right incentive, for example if priority parking was available.

What would encourage use of Public Transport?



- 4.22 To note, only 44% of staff suggest that there is nothing that would convince them to use public transport. This means that there is a large proportion of staff willing to investigate travel by these means.
- 4.23 More direct and frequent services appear to be the most popular requirements for travelling by public transport, equating to approximately 65%.
- 4.24 There were 38 'other' responses which have been condensed and include;
- all-of-the-above;
 - linking cycling routes;
 - more applicable service times; and
 - alternative travel/ a shuttle service being implemented between each hospital sites.

What would encourage cycling?

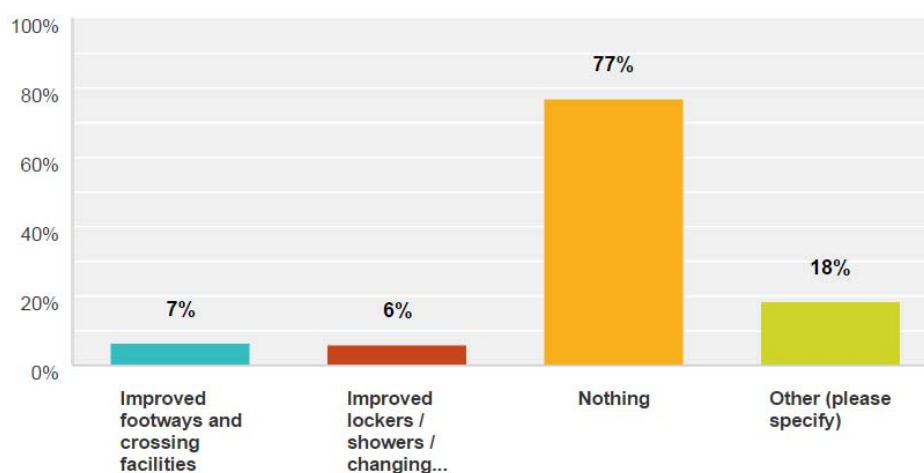


4.25 To note, 66% of staff suggest that there is nothing that would convince them to commute by bicycle. This means that 34% responded stating that better routes, lockers and showers, and cycle parking would encourage them to cycle. This means that there is a reasonably significant proportion of staff willing to investigate travel by these means.

4.26 There were 38 'other' responses to this question;

- these briefly encompass; a dedicated cycle route;
- grant towards cost of gear; and
- incorporate carsharing and cycling to enable travel between sites during the day,

What would encourage walking?



- 4.27 To note, 77% of staff suggest that there is nothing that would convince them to commute by foot. However, there is a large workforce at Morriston and the answers to Question 1 suggest that 5% of staff currently not walking live within a reasonable walkable distance.
- 4.28 A total of 45 people responded to this question with 'other'. The answers are have been grouped and comprise;
- a southern walking access point to the hospital grounds;
 - pool car available to travel between sites;
 - better street lighting and road surfaces; and
 - public transport link between hospitals.
- 4.29 The final question (question 15) asked the respondents to provide any further comments. This resulted in 96 responses which are summarised below.
- 4.30 There are a number of responses noting that they would be incentivised to walk to work if a suitable and official walking route would be created from the Maes y Ffynon, Parc Gwernfadog residential area (behind Morriston Comprehensive), to the hospital grounds.
- 4.31 This may be worth investigating further especially as staff living locally claim that this would cut their walking journey length/time in half.
- 4.32 In addition, concerns were raised regarding crossing the main road to the hospital. The concern is that drivers travel too fast along here and so it is difficult and dangerous to cross.
- 4.33 Other comments collected from this staff survey include:
- More frequent and flexible hours of public transport are needed;
 - Bus services currently operate at unrealistic journey times and offer poor connections, as well as proving unreliable. This includes poor hours offered of the Sunday services;
 - Park and Ride as an option;
 - Safe, secure bike lockers are needed to incentivise cyclists;
 - Parking at Morriston Hospital is a problem and needs improvement, parking for visitors is poorly signposted so visitors end up parking in staff spaces;
 - DVLA staff car park at the Velindre site would benefit from a shuttle service, this could be used by patients also;

- There are a large proportion of staff that require travel between sites during the day;
- Limit permits and enforce car sharing/ other forms of transport than driving for 9-5 predictable hours workers;
- Part of the car park at the bottom of the hospital site is gravel which causes some to park inefficiently;
- A drop off point for heavy bags etc so staff can park further away and walk in;
- Dedicated parking spaces for staff coming and going during the day/ staff visitor permits/ card access to the staff car park to preserve spaces; and

4.34 It was noted by one respondent that the bus service from Swansea is good, and that patients often inform staff of this.

Summary

- 4.35 Existing travel patterns for staff to the hospital demonstrate that staff generally live in and around Swansea County, and some cases, much further afield including Cardiff. Staff primarily travel alone by car (88% car driver) and 3% as car passengers, equating to 85% single occupancy vehicles), with only 6% using public transport and the remaining 2% split between walking and cycling. It is evident that the high proportion of staff (88%) commuting to work is directly linked to the availability of free car parking across the site as per Welsh Government's Directive on parking.
- 4.36 Considering the high proportion of car drivers, there might be scope to actively encourage carsharing as a step toward more sustainable travel initiatives. Indeed, 31% of those staff who indicated that they drive to work intimated that they would consider carsharing to work if priority spaces were available. Only 2% of staff claimed they carshare already.
- 4.37 For question 12 (what would encourage you to use public transport?), the most popular responses were 'more direct services' (37%), 'more frequent services' (26%), 'discounted tickets' (18%) (which is already available but perhaps not well known) and 'better connections' (14%). Clearly, although 44% said that 'nothing' would encourage them to use public transport, the response appears to be that public transport in the area requires more direct, frequent, and cheaper services with better connections. Having said this, the number 4 service provides a 15 minute frequency high quality bus route to the Hospital.

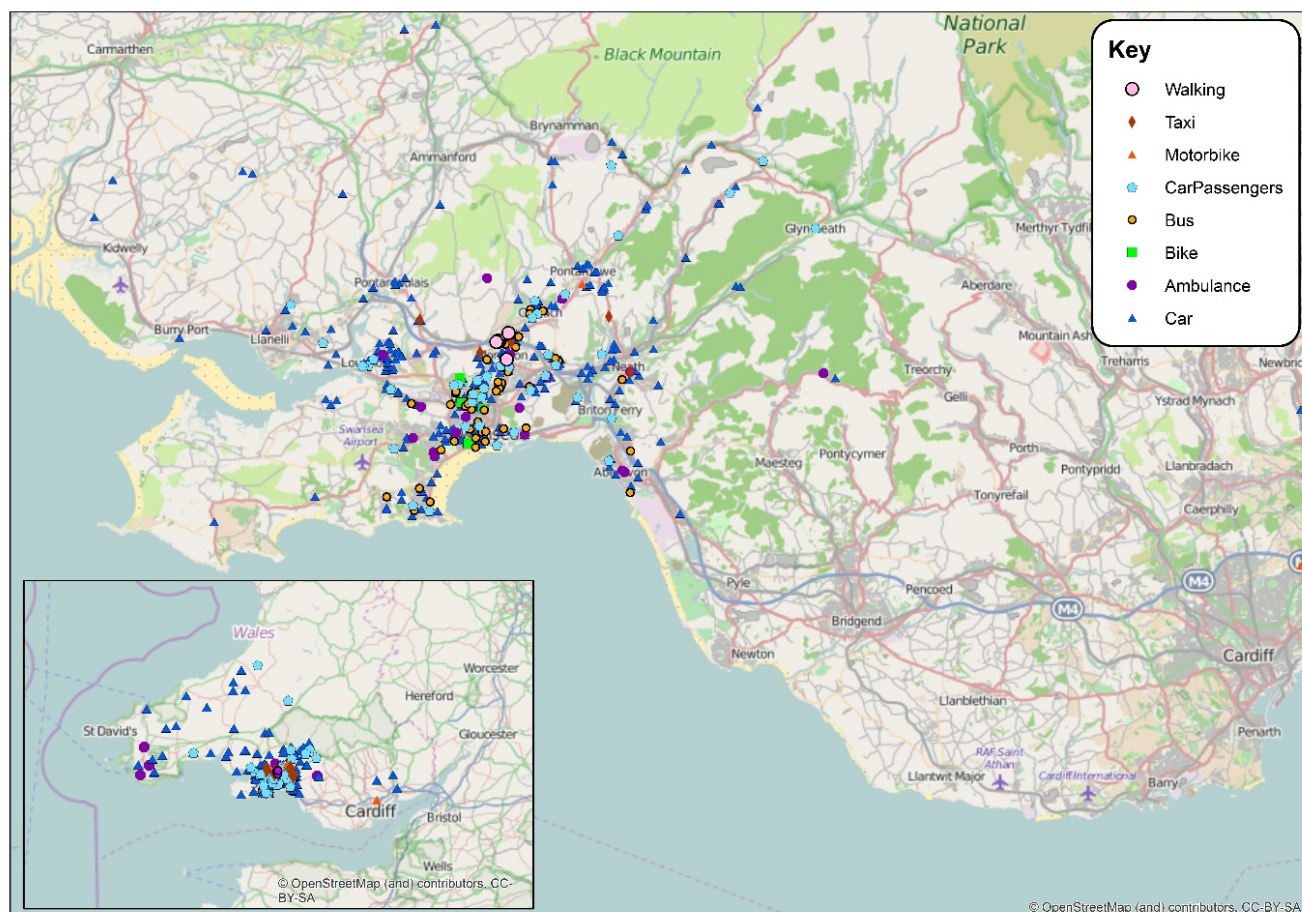
- 4.38 26% of staff indicated that they would consider using public transport if there were more frequent services available, and 37% would if the services were more direct. The new building will be located close to the bus stops on site, which are served by frequent bus services (approximately 7 every hour), which is considered to be an excellent level of service. The buses are also attractive and comfortable.
- 4.39 The new building will be built to modern specification and will have excellent facilities for staff, including showers changing rooms and lockers. Based on the existing staff response to Questions 12 and 13, re cycling and walking to work, then there is scope to encourage some 20% to cycle to work and also a further 8% to walk to work. This can be achieved with relatively low cost measures in addition to the showers and changing rooms, including cycle loans, discounted equipment and cycle training.
- 4.40 This survey has demonstrated that a large proportion of staff commute to work by single occupancy vehicle (88%), and therefore only 12% commute to work by sustainable means. However many of the staff have indicated that they would consider commuting by sustainable means if it becomes more convenient for them. The new building will increase accessibility and provide more on-site facilities (e.g. showers and changing rooms) and as such, it is reasonable to assume that this may encourage more staff to travel by a mode other than the private car.
- 4.41 Interestingly a proportion of staff (5%) live within walking distance, and have suggested that improved walking links from the south could reduce their journey time by half, and encourage them to walk to work. This is may be worth investigating in further detail and may improve the overall accessibility of the hospital.

Visitors & Patients

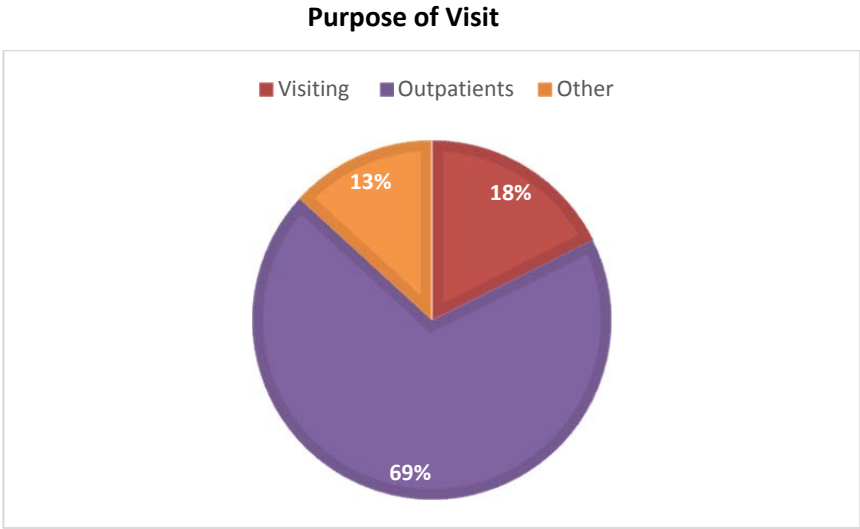
- 4.42 A questionnaire was undertaken for patents and visitors on 21st- 22nd April 2015, to collect a 'snapshot' of patient and visitor travel patterns to the hospital. Enumerators were positioned in the main entrance and main department receptions between the hours of 9 AM and 5 PM in order to record travel patterns.
- 4.43 A total of 650 responses were received over the two days, and a summary of responses is contained in the remainder of this Chapter.
- 4.44 Question 1 asked the respondent 'what is your home postcode'? Home postcodes were analysed against 'main mode of transport for your travel to the hospital' (question 5) and

plotted on a map (**Figure 7**). This map illustrates that many patients / visitors travel fairly long distances to reach the hospital, yet the focus is in the Swansea / Neath Port Talbot region.

Figure 7 – Visitor & Patients Home Postcodes



4.45 Question 2 asked what the purpose of the respondent's visit was. The results of the survey are illustrated in the graph following. The majority (69%) were outpatients receiving treatments, whilst 18% of people were visiting. 'Other' responses include A&E, and meetings.

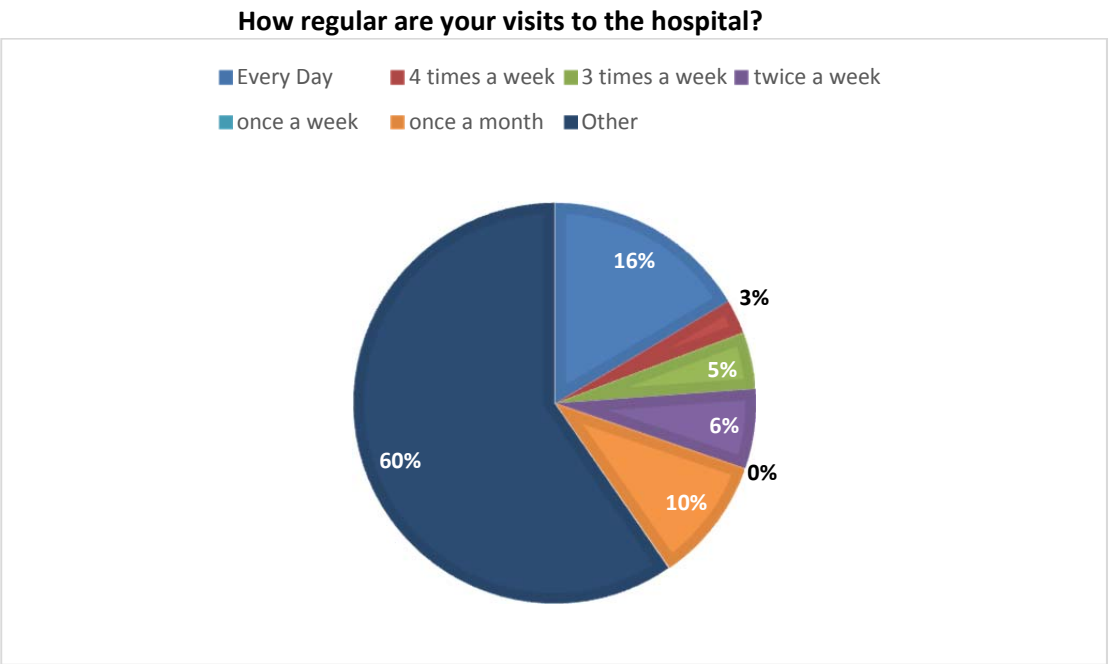


4.46 Considering that the ability to influence patient travel behaviour is very low, responses to travel patterns have been split between visitors and patients.

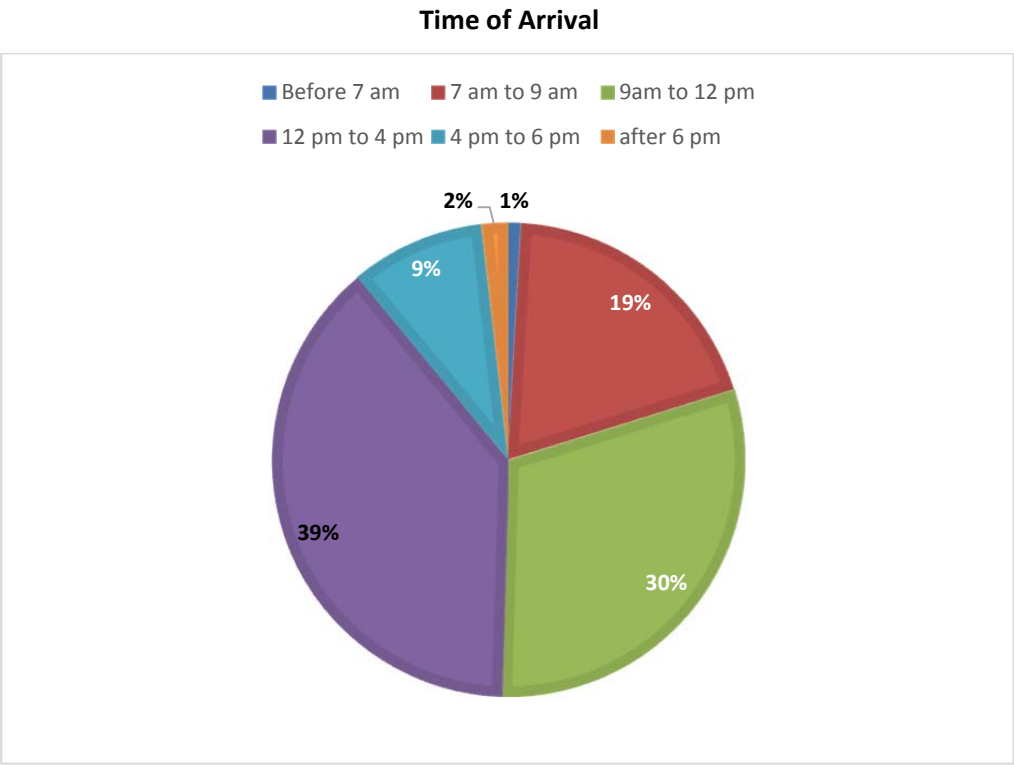
Visitors

4.47 All of the responses contained in this section are from visitors to the hospital.

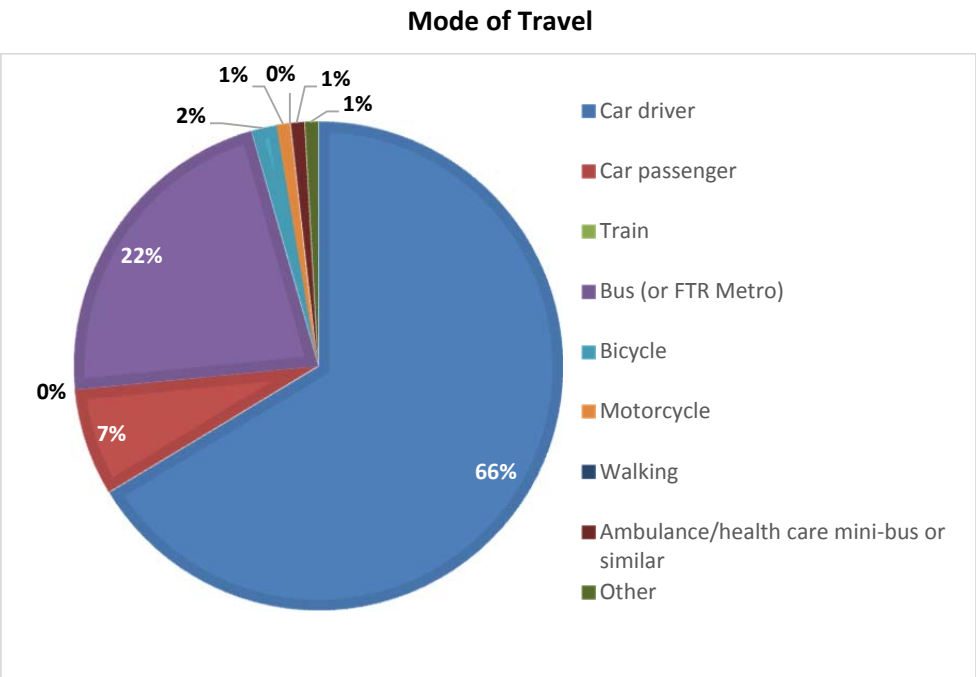
4.48 Question 3 asked how regularly the respondent visits the hospital.



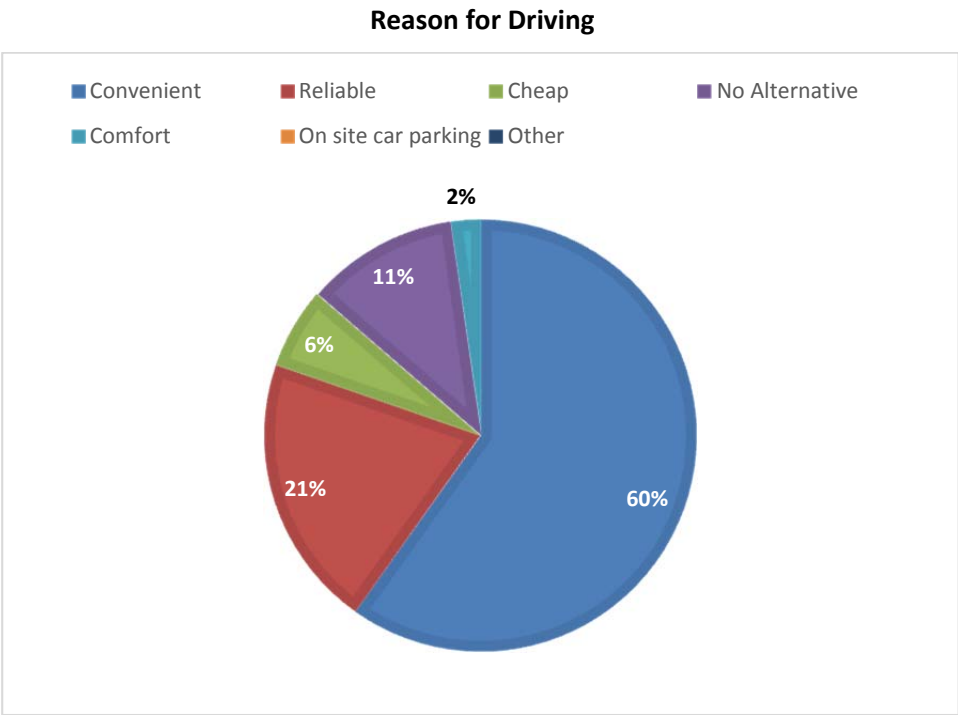
- 4.49 Many of the 'other' responses include regular visits of once or twice a year, and indeed a one-off visit or rarely. This is what you would expect from visitors to a Hospital.
- 4.50 Question 4 asked respondents what time they typically arrive at the hospital. The results are demonstrated in the graph following.



4.51 Question 5 sought to ascertain main mode of travel to the hospital. The following graph demonstrates that 74% of visitors travelled by car, 22% travelled by public transport, and 0% travelled to the hospital on foot, and 0% travelled by train.

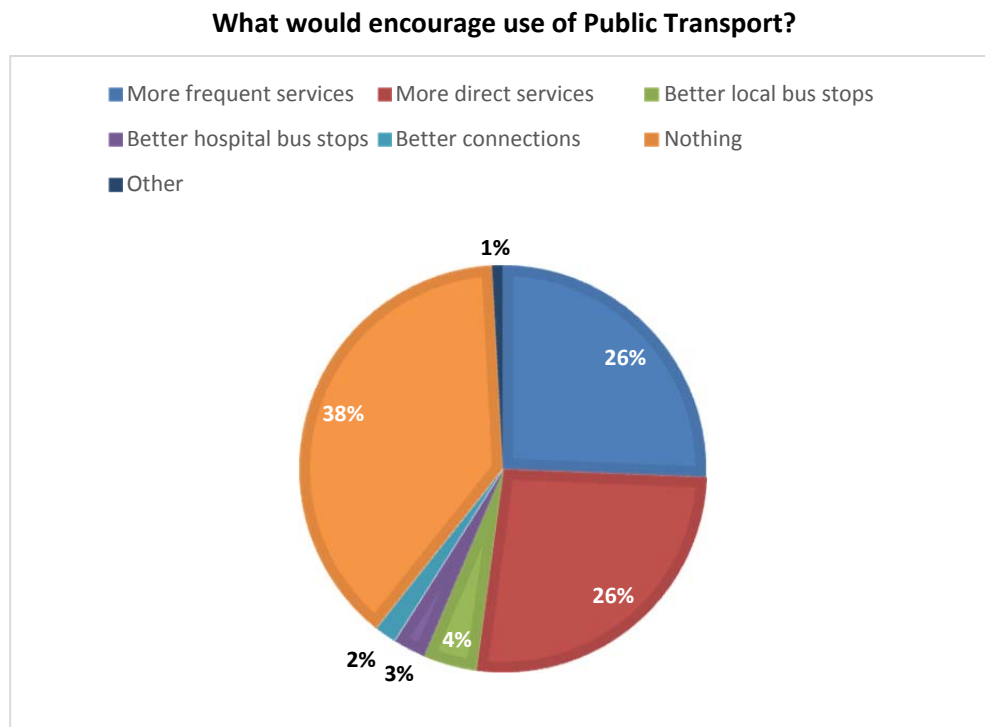


4.52 Questions 6-12 were available only to those who selected 'car driver' as their main mode of travel. Question 6 asked selected respondents were asked their main reason for driving over other modes to the hospital.



4.53 To note, only 11% of respondents suggested that there was no alternative to traveling by car, and 60% answered that convenience was their main reason. By inference, part of this convenience must relate to the plethora of free parking on site.

4.54 Those who identified as drivers were then asked what would encourage them to use public transport.

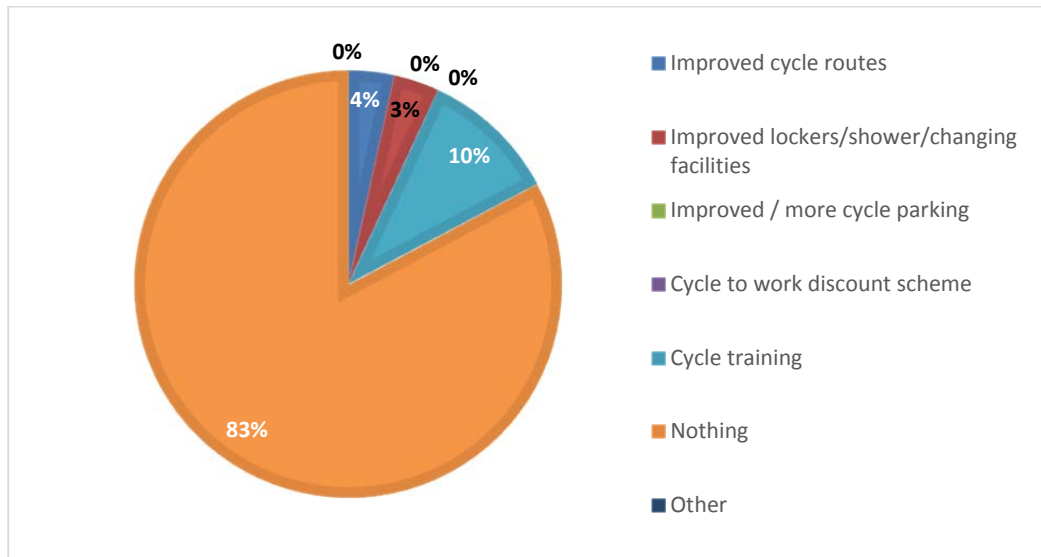


4.55 Only 38% of respondents suggested that nothing would convince them to travel by public transport. More frequent and direct services were the most popular measures that would encourage visitors to travel by public transport at 26% each.

4.56 'Other' responses included cheaper public transport.

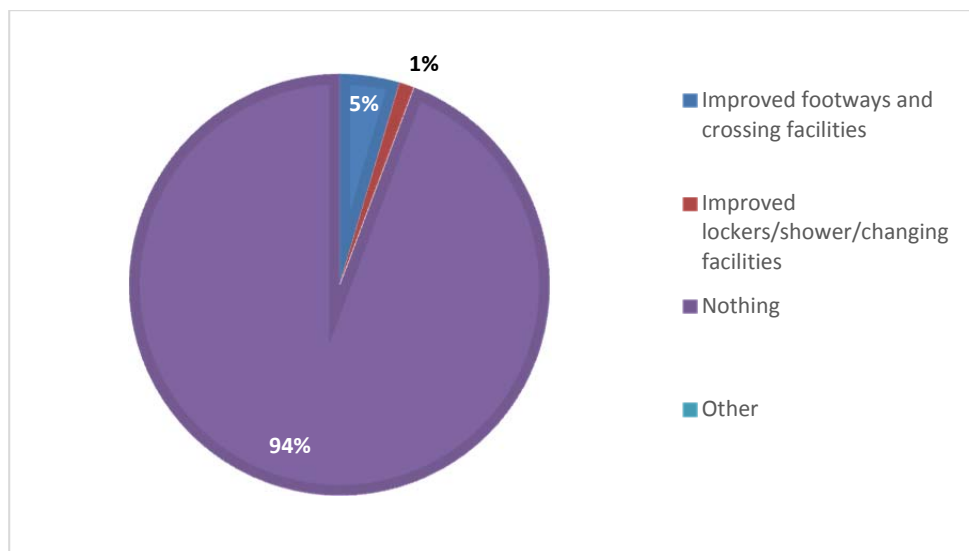
4.57 Respondents were asked what would encourage them to cycle to the hospital.

What would encourage cycling?



4.58 Respondents were also asked what would encourage them to walk to the hospital.

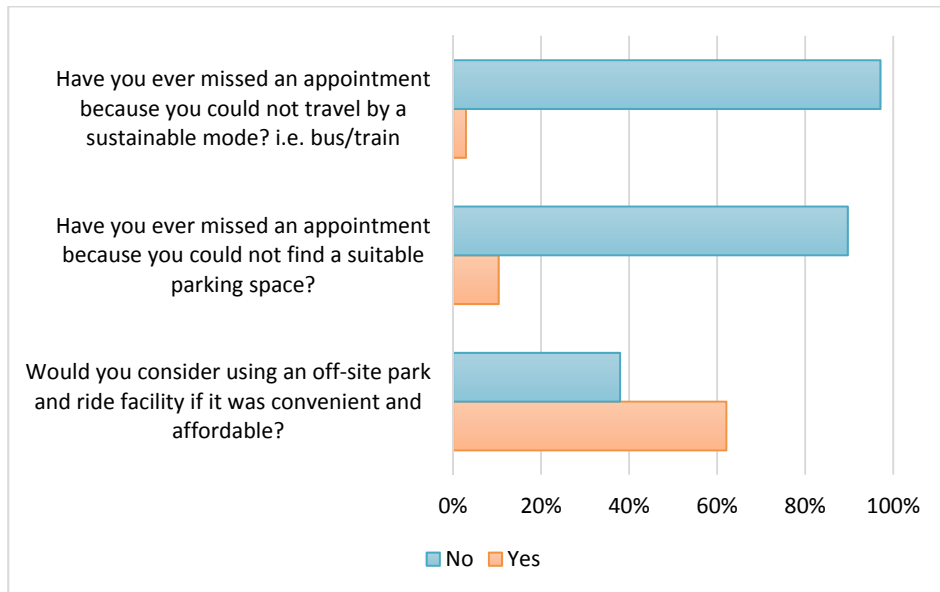
What would encourage walking?



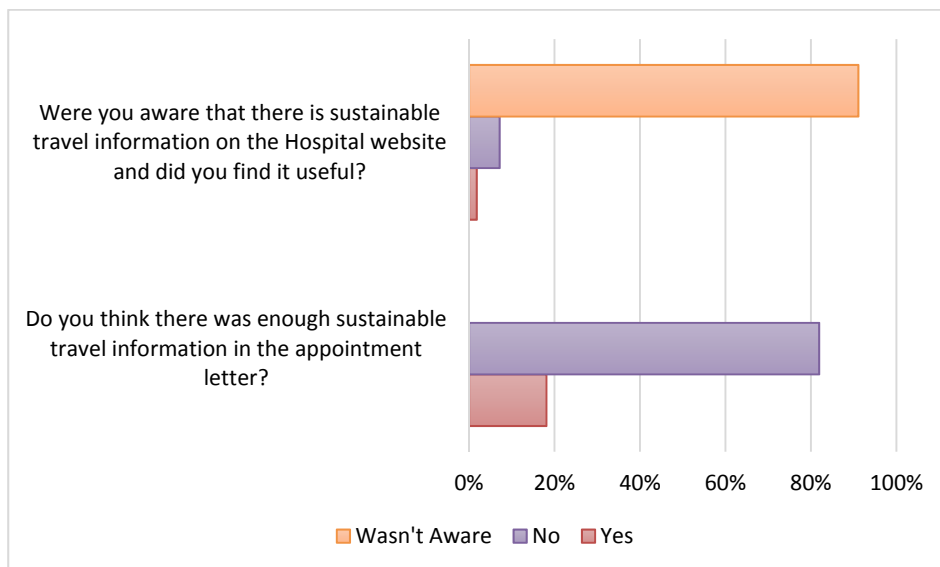
4.59 It is likely that the propensity for visitors to walk or cycle to the hospital is limited in the respect that they may be grief stricken or anxious to visit family /friends.

4.60 All respondents were asked some additional questions about their previous travel experience to the hospital, and their attitude toward park and ride facilities. 60% of people would appear to consider using a Park and Ride facility if it was convenient and affordable.

Additional Questions



4.61 Questions 13 and 14 were available for all to respond to, it asked respondents if they thought there had been enough sustainable travel information on their appointment letter and the hospital website. The results are indicated in the following.



4.62 It is clear from the response that visitors at the hospital did not consider the availability of sustainable travel information sufficient or indeed were not aware of this material. This could be a relatively quick and straightforward thing to change within the Hospitals' material on how to travel to the site.

Summary

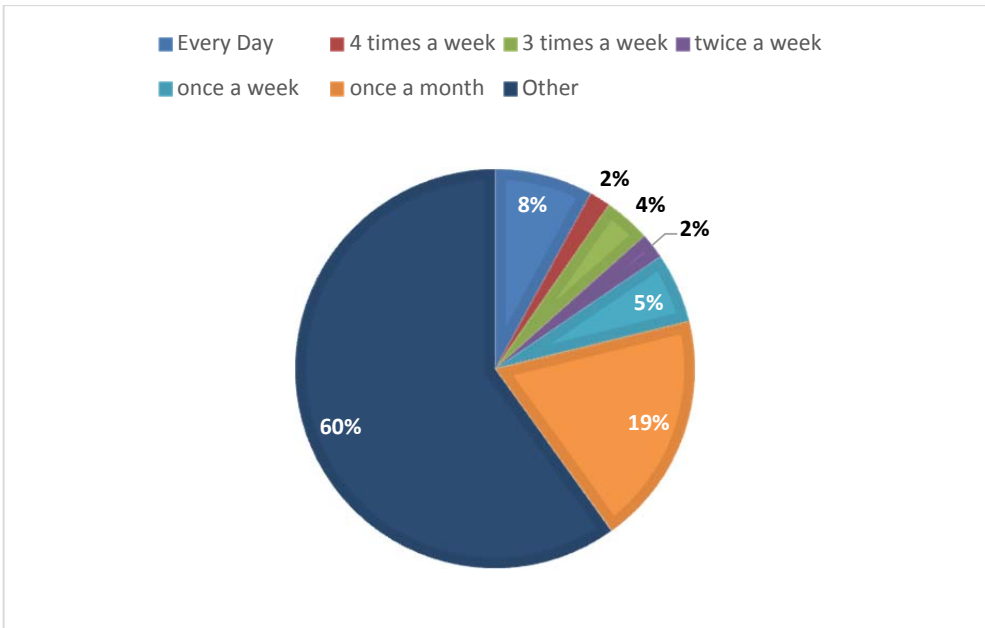
- 4.63 Existing visitor travel patterns have been summarised to represent a 'snapshot' of typical travel behaviour to and from Morriston Hospital. The survey results show that 66% travel to the hospital as a car driver, and that 7% travel as a car passenger. This means that approximately 34% of visitors travel via sustainable modes.
- 4.64 The results show that 40% of visitors travel to the hospital once a month or more frequently, so they are not travelling on a regular basis. Coupled with the response that only 11% of drivers consider themselves to have no alternative for driving, and 60% consider their main reason as comfort, means that there is propensity to encourage more sustainable travel as habit. Moreover, 62% of drivers responded saying that certain measures would encourage them to use public transport to access the site and hence, there may be some potential to increase the use of public transport use amongst visitors.
- 4.65 Contrastingly, the propensity for visitors to walk and cycle to the hospital is low; only 6% and 17% respectively considered any reason to change to these modes of travel. This is likely to a combination of length of journey, commitments such as giving lifts to patients, and perhaps grief stricken / anxious visitors.
- 4.66 All respondents were asked if they had ever missed an appointment because they couldn't find an available parking space, or if they were not able to travel by a sustainable mode; 10% and 3% responded 'yes' respectively. In addition, 62% answered that they would consider using a park and ride if available, convenient, and affordable, indicating that a slight majority of those who currently drive to the hospital do so for lack of other choices, particularly considering that the hospital provides free parking, which a Park and Ride would not.
- 4.67 An action identified in the previous Travel Plan was to include travel information in patient's appointment letters. Although implemented, 82% answered that they did not think there was enough sustainable travel information. In addition, 91% of respondents indicated that they were not aware that there was any sustainable travel information on the hospital website, and only 2% of all respondents were aware and found it useful.

Patients

- 4.68 All of the responses contained in this section are from patients (including outpatients and A&E) at the hospital.

4.69 Question 3 asked how regularly the respondent visits the hospital.

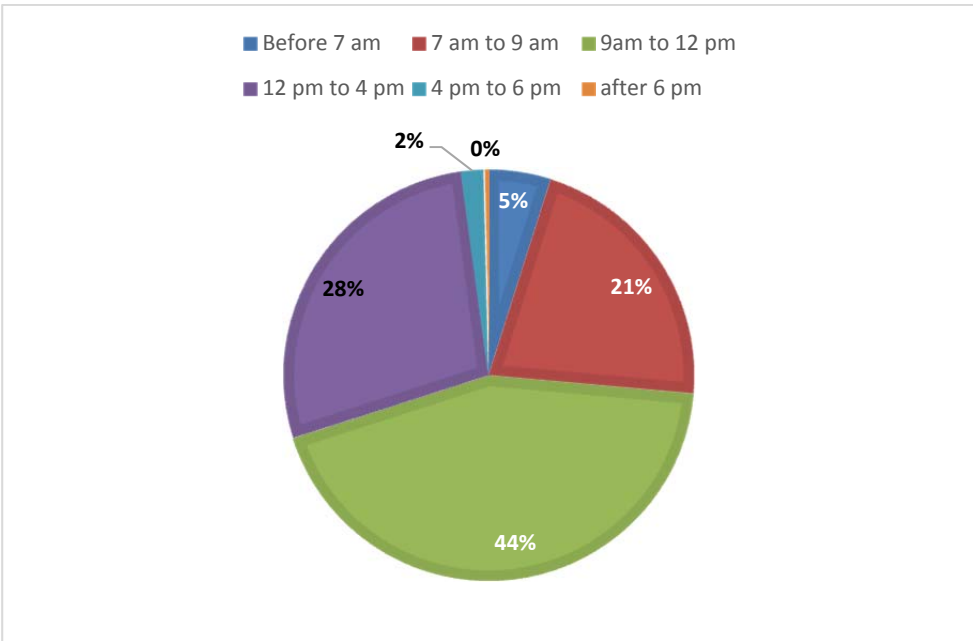
How regular are your visits to the hospital?



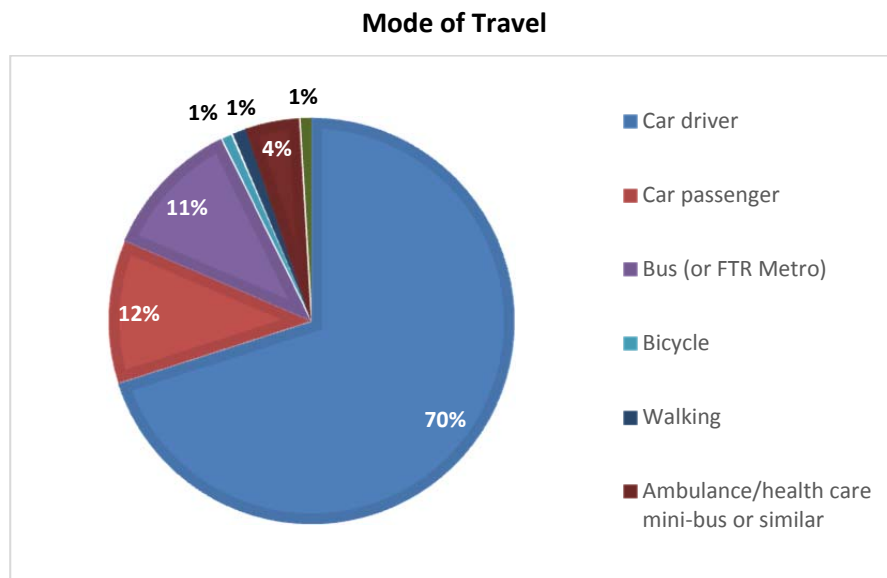
4.70 Many of the 'other' responses include regular visits of 36 times per year, to once or twice a year, and indeed a one-off visit or rarely.

4.71 Question 4 asked respondents what time they typically arrive at the hospital. The results are demonstrated in the graph following.

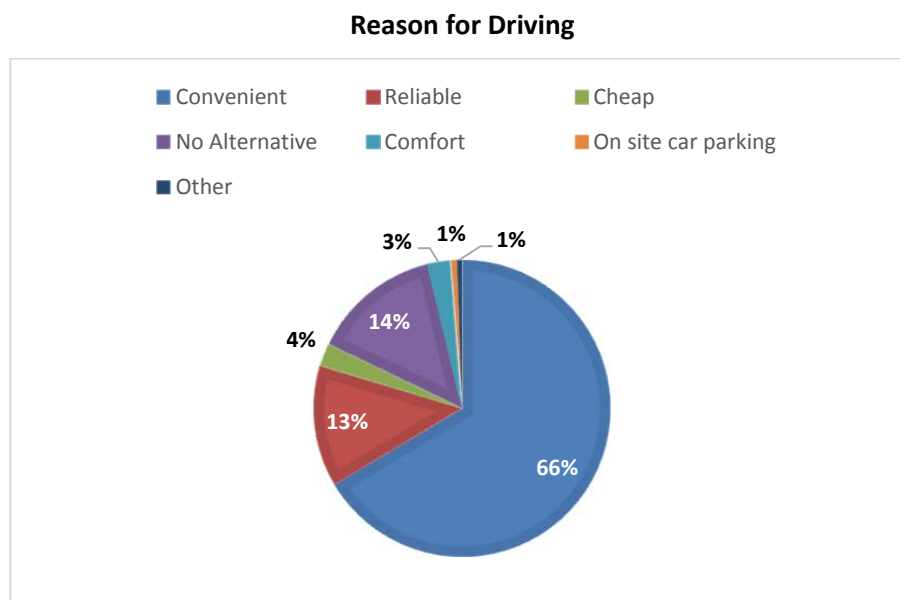
Time of arrival



- 4.72 Question 5 asked respondents what their main mode of travel to the hospital was. The results are illustrated in the graph following. Those who responded 'other', all travelled by taxi.

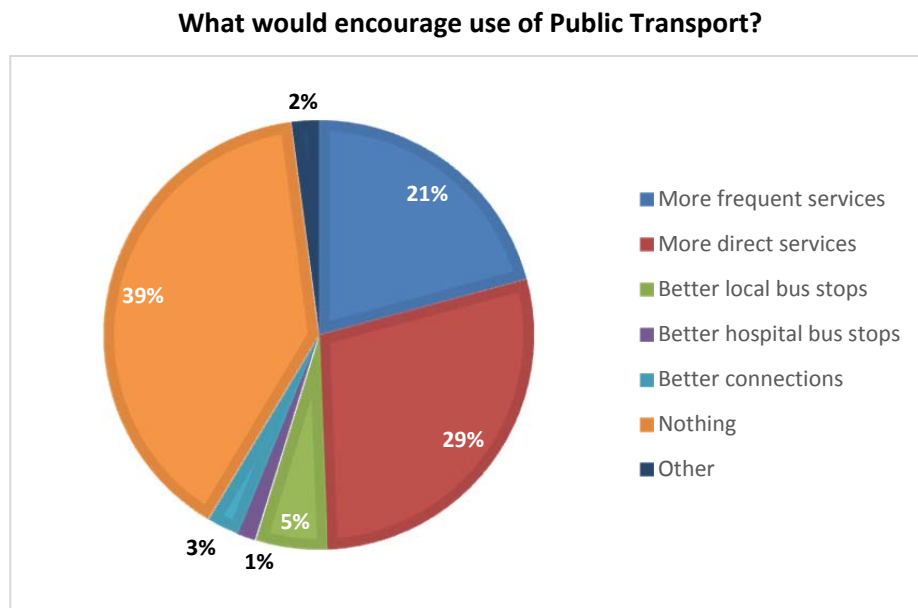


- 4.73 Questions 6-12 were available only to those who selected 'car driver' as their main mode of commuting.
- 4.74 Question 6 asked selected respondents their main reason for driving over other modes to the hospital.



- 4.75 To note, only 14% of respondents suggested that there was no alternative, and 66% suggested convenience was their main reason for traveling by car.

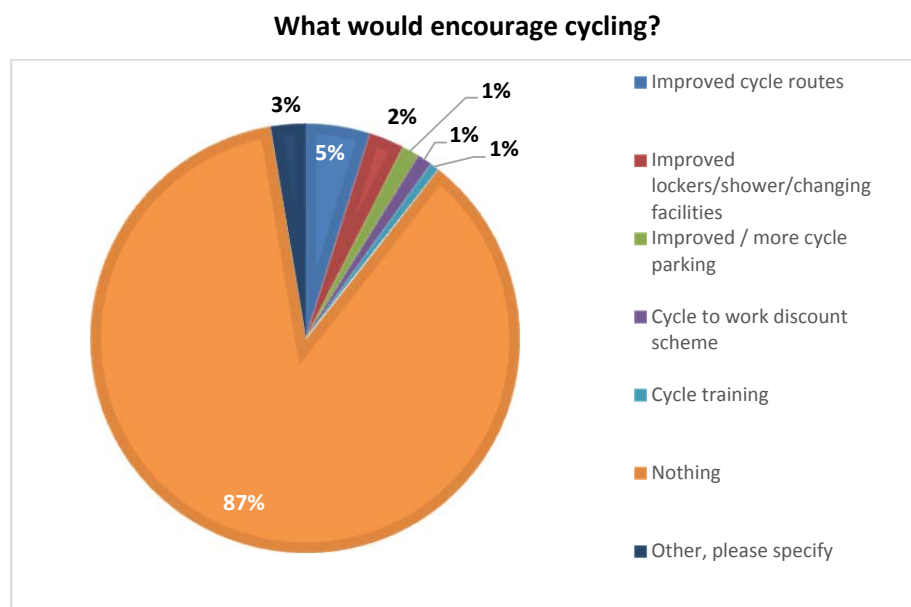
- 4.76 Those who identified as drivers were then asked what would encourage them to use public transport.



- 4.77 Only 39% of respondents suggested that nothing would convince them to travel by public transport; indeed 29% suggested more direct services, and 21% more frequent services would encourage them to use public transport.

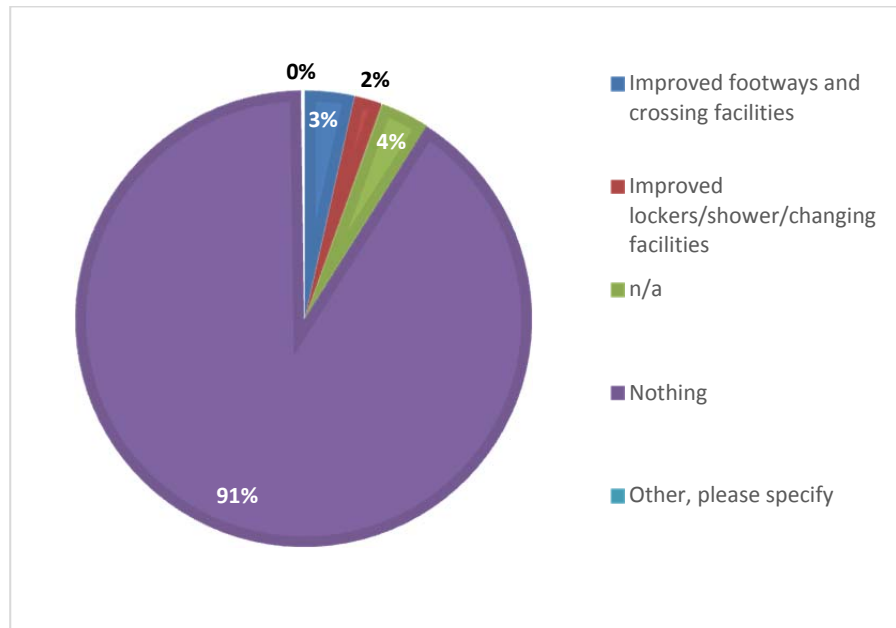
- 4.78 'Other' responses included cheaper public transport.

- 4.79 Respondents were asked what would encourage them to cycle to the hospital.



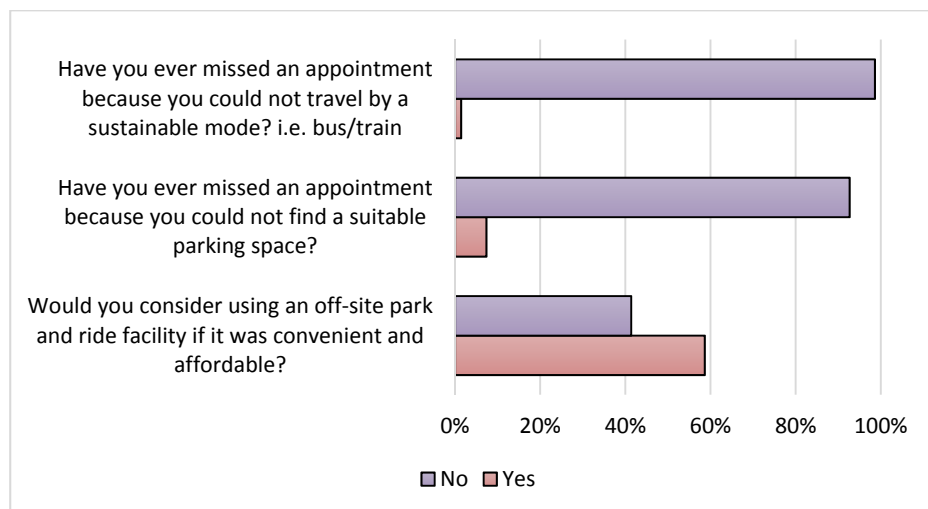
- 4.80 Respondents were also asked what would encourage them to walk to the hospital.

What would encourage walking?

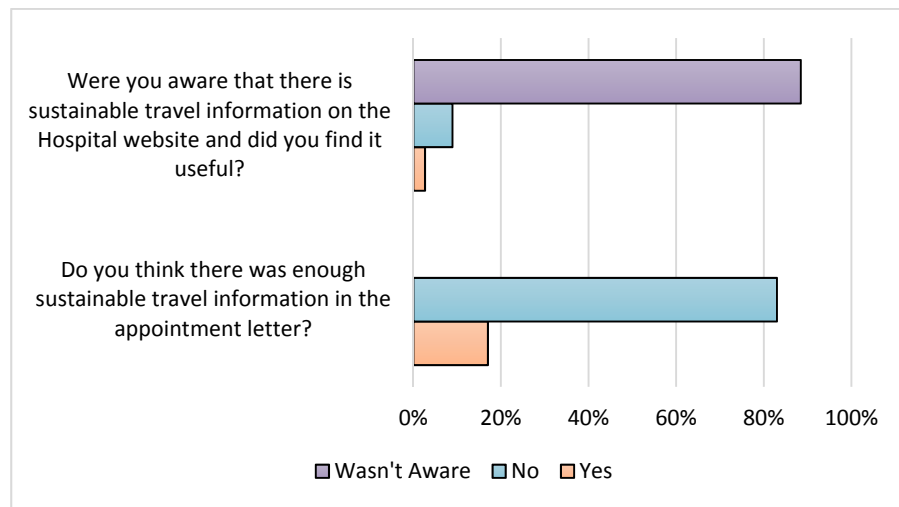


- 4.81 The propensity for patients to walk to the hospital is limited in the respect that they are likely to be receiving treatment.
- 4.82 All respondents were asked some additional questions about their previous travel experience to the hospital, and their attitude toward park and ride facilities. The majority answered that they have not missed an appointment because of being unable to find a parking space, or due to problems travelling by sustainable modes. Almost 60% consider a Park and Ride to be a viable alternative to their current travel method but in reality Park and Ride is unlikely to be viable when parking is available for free within the Hospital

Additional Questions



- 4.83 Questions 13 and 14 were available for all to respond to, it asked respondents if they thought there had been enough sustainable travel information on their appointment letter and the hospital website. The results are indicated in the graph following.



- 4.84 It is clear from the response that patients at the hospital were not aware of any travel information.

Summary

- 4.85 Existing patient travel patterns are shown here as a 'snapshot' of typical patient travel behaviour to and from Morriston Hospital. The survey results show that 70% travel to the hospital as a car driver, and that 12% travel as a car passenger. Therefore, currently 18% are travelling by sustainable modes (with 11% using public transport).
- 4.86 The results show that 40% of patients travel to the hospital once a month or more, so they are not travelling on a regular basis.
- 4.87 Patients are most likely to be receiving treatment and may not physically be capable of using other modes of transport and so the reality is that this target audience is unlikely to change modes of travel to the Hospital.
- 4.88 An action identified in the previous Travel Plan was to include travel information in patient's appointment letters. Although implemented, 83% answered that they did not think there was enough sustainable travel information. Likewise, 88 % indicated that they were not aware that there was any sustainable travel information on the hospital website, and only 3% of all respondents were aware and found it useful.

5 STRATEGIES & POLICIES

Introduction

- 5.1 This section considers the development and the Travel Plan against the backdrop of current national and local policy, specifically in relation to sustainable travel and the aim of reducing single occupancy vehicular trips and reliance on the private car. It also considers current guidance relating to the production of Travel Plans.

National Policy

Planning Policy Wales (Edition 4, February 2011)

- 5.2 Planning Policy Wales sets out the land use planning policies of the Welsh Government. This is supplemented by a series of Technical Advice Notes.

Technical Advice Note 18 (Transport)

- 5.3 The Planning Policy Wales Technical Advice Note for Transport (TAN 18), states that sustainable development should be achieved by:
- integration of transport and land use planning;
 - integration between different types of transport; and
 - integration of transport policy with policies for the environment, education, social justice, health, economic development and wealth creation.

Department for Transport Guidance

- 5.4 The Department for Transport [DfT] have produced a number of documents providing guidance on Travel Plans, including *'Good Practice Guidelines: Delivering Travel Plans through the Planning Process (2009)'*.
- 5.5 These guidelines include a Travel Plan pyramid, which sets out five key tiers to a successful Travel Plan. This Pyramid is reproduced in **Figure 1**.

Figure 1 – Travel Plan Pyramid



- 5.6 Considering the above tiers, the first tier considers site location. This is seen as a key element by the guidance and one that underpins *‘all the other aspects of accessibility of the site’*.
- 5.7 The second tier *‘comprises the fundamental characteristics that need to be incorporated into the design of the site from an early stage in order to reduce the need to travel and support walking, cycling and bus use’*. This effectively relates to the physical measures that can be delivered as part of the development to ensure it ties into the sustainable transport network as effectively as possible.
- 5.8 The third tier puts in place *‘the resource to facilitate and develop the measures in the plan’*. This effectively means the identification of a suitable person to lead the Travel Plan process and ensure the effective management and development of the Travel Plan.
- 5.9 The fourth tier then goes on to consider *‘the services that will need to be obtained for the site’* and primarily relates to the ‘soft’ travel planning measures, whilst the fifth and final tier looks at *‘promotion, marketing and awareness raising to ensure adequate take-up of these services and to communicate the travel plan’*.
- 5.10 Department for Transport (DfT) guidance in relation to travel plans is set out in ‘Good Practice Guidelines: Delivering Travel Plans through the Planning Process’. This document sets out the required design and content of travel plans, and the management, monitoring and review procedures required to ensure a travel plan is effective.

Regional Policy

Joint Transport Plan for South West Wales 2015-2020

- 5.11 The Joint Transport Plan for South West Wales 2015-2020 replaced the Regional Transport Plan at the beginning of 2015, it covers four Local Authorities in South West Wales including the City and County of Swansea.
- 5.12 The overarching vision of the Local Transport Plan is; *‘to improve transport and access within and beyond the region to facilitate economic regeneration, reduce deprivation and support the development and use of more sustainable and healthier modes of transport’.*
- 5.13 The relevant objectives set out by this document include:
- To improve the efficiency and reliability of the movement of people... within and beyond South West Wales to support economic growth in the City Region;
 - To improve access for all to a wide range of services and facilities including employment and business... [and] health care;
 - To improve the sustainability of transport by improving the range and quality of, and awareness about, transport options, including those which improve health and wellbeing;
 - To improve integration between policies, service provision and modes of transport in South West Wales; and
 - To implement measures which will protect and enhance the natural and built environment and reduce the adverse impact of transport on health and climate change.

Local Policy

City and County of Swansea Unitary Development Plan (adopted November 2008)

- 5.14 The City and County of Swansea UDP was adopted in 2008.
- 5.15 Chapter 5 of the UDP is named ‘Improving Accessibility’ and states the goal to;
- Maximise access opportunities for all by the most appropriate modes of transport to, from and within the area.*
- 5.16 This document states the need to facilitate modal shift towards more sustainable travel, therefore public transport, walking and cycling options must be attractive as a realistic

alternative to the car. It is suggested that 2 miles is an appropriate distance to choose alternative travel to the car.

- 5.17 The UDP sets out the need for all developments such as this, to incorporate a Travel Plan. It is noted that Travel Plans normally include measures such as; increasing public transport use, walking and cycling use, and well as car sharing and controls on parking.

BREEAM (Guidance)

- 5.18 As of 1st of July 2008, the Department of Health require, as part of the Outline Business Case approval, that all new builds achieve an Excellent and all refurbishments achieve a 'Very Good' rating under BREEAM Healthcare.
- 5.19 The new development at Morriston Hospital will be fully DDA compliant, which considers access and other needs for disabled/ mobility impaired uses.

6 TRAVEL PLAN FRAMEWORK

Management

- 6.1 The appointment of a Travel Plan Coordinator (TPC) is one of the most important aspects of any Travel Plan. ABMUHB will appoint a TPC to manage the Travel Plan, although the role of TPC will not be their full time position.
- 6.2 The TPC role will be appointed on agreement of this Travel Plan with the City and County of Swansea Council and the TPC contact details will be passed on to the relevant Officer.
- 6.3 The TPC will be responsible for all aspects of the Travel Plan. His or her primary functions will be as follows:
- Liaison with the local planning and highway authority;
 - Liaison with local bus companies with a view to maintenance and possible enhancement of services;
 - Monitoring and improving the car share scheme;
 - Investigate, develop and promote sustainable transport measures to staff;
 - Monitoring of car park management schemes;
 - Monitor and review progress of the Travel Plan and produce associated reports; and
 - Maintenance of all necessary systems, data and paperwork.
- 6.4 Increasing the travel awareness of staff so that they can make informed travel choices is seen as a key role of the TPC particularly as these are the main target audience that this Travel Plan can influence. This may be achieved through means such as publicity information, staff workshops and other suitable media. The TPC will be given sufficient time and resources to effectively undertake their duties and implement the Travel Plan. The TPC should work closely with Travel Plan Officers at the City and Council of Swansea.
- 6.5 Personalised travel planning will be offered for each member of staff which will detail the potential sustainable travel alternatives to travelling by personal motor vehicles.

Marketing and Consultation

Staff

- 6.6 All staff will be made aware of the existence of the Travel Plan prior to the commencement of their employment, or when implemented, as well as during new employees' induction. The details of the Travel Plan, its objectives in enhancing the environment and the role of individuals in achieving these objectives will be explained thoroughly.
- 6.7 A Staff Induction programme has been developed and implemented by the Health Board and all new members are required to attend and participate at the start of their employment with the organisation. This Travel Plan as well as up to date sustainable transport information and any other relevant transport information will be included in the Induction programme.
- 6.8 The Induction Programme will also be used as an opportunity for new staff to discuss with the TPC their individual transport needs for the journey to work and the sustainable options available to them (individual travel planning). The TPC will be able to provide a detailed and individual sustainable travel plan with routing and timetable information for staff, as needed. Most staff will be aware of their sustainable travel options, for others however it may not be straight forward and the TPC will be available to help identify the best methods of sustainable travel for them.
- 6.9 Contact details of the TPC will be advertised in the event that staff wish to discuss specific matters directly.
- 6.10 The following could be used as a means of disseminating information to staff to promote events/campaigns/promotions/services/initiatives:
- Staff notice boards;
 - Staff newsletters;
 - Digital Induction packs;
 - Leaflet drops in staff pigeon holes or lockers (where applicable); and
 - Internet / Intranet (where applicable).

Patients/ Visitors

- 6.11 Patients / visitors will be made aware of all suitable travel options available to them with their appointment letter, this could take the form of a web-link to the travel section of ABMUHB / Morriston Hospital website. This was apparent from the patient / visitor feedback.
- 6.12 A sustainable travel notice board will be placed at the main reception to provide visitors with up to date sustainable travel information to allow them to make a choice when they travel to the hospital. This information would also be available on the travel section of ABMUHB / Morriston Hospital website.

7 OBJECTIVES AND TARGETS

- 7.1 This Travel Plan has one primary objective, to increase the number of staff travelling to work by sustainable means. This is because this is the easiest demographic to influence as staff travel to the hospital frequently, compared to visitors and patients.
- 7.2 The secondary objective is to encourage, as much as possible, patients & visitors to travel to the hospital by a sustainable mode of transport. Where possible, the Travel Plan will also seek to reduce unnecessary travel, especially by private motorised vehicles.
- 7.3 The objectives for Morriston Hospital staff are:
- To ensure that a sustainable travel ethos is introduced, advertised and adhered to;
 - Introduce a package of physical and management measures that will help facilitate existing and future staff travel by sustainable modes; and therefore
 - Encourage staff travel to work by sustainable modes e.g. car sharing.
- 7.4 The objectives for Morriston Hospital patients and visitors are:
- To ensure that a sustainable travel ethos is emphasised and advertised appropriately; and therefore
 - Encourage visitors and patients to travel to the hospital where appropriate by sustainable modes.

Targets

- 7.5 The target for the Travel Plan will be to reduce the number of car commuters with a particular focus increasing carsharing and public transport use, bearing in mind the existing travel patterns.
- 7.6 For visitors the 'snapshot' survey revealed that currently 66% drive to the hospital, and 7% travel as a passenger in a car. It was shown that 83% of patients travel in a car (including car driver, car passenger, and 1% taxi).
- 7.7 There is limited inclination to encourage patients to change their travel habits, considering they are most likely unwell and receiving treatment.

- 7.8 Therefore, the targets will be set only for visitors and staff. 73% of visitors currently travel by car to the hospital. This is a reasonable modal split figure to begin with considering the possible circumstances surrounding their visit, and the target will be to maintain this standard, and seek to improve this further by creating further awareness of sustainable travel to the hospital.
- 7.9 The current level of staff travelling by single occupancy vehicle (88%) is considered to be high but not untypical of this type of development, yet it is above the average in the ward of Morriston (70%; taken from the 2011 Journey to Work census data). It is however akin to single occupancy car travel to the site in 2005 but higher than the 2008 data relating to staff travel.
- 7.10 Apart from the customary extenuating circumstances, it is evident from the survey answers that there are a mixture of reasons as to why car is the regular choice for staff commuters, these are:
- Free parking available on site;
 - Staff that are 'on-call' require last minute and rapid transport;
 - Many staff require transport between UMBHB sites during the day (and often have to transport many files with them) and as such, require private transport; and
 - Some staff live quite far away from the hospital and may not also be on a route which allows them to commute sustainably in a reasonable period of time.
- 7.11 The target for this travel plan will be to reduce the percentage of staff travelling to work by single occupancy vehicle by 10% between now and the next 5 years; with the main focus being on carsharing, increasing the uptake of public transport and perhaps considering in more detail the way in which, and the number of staff travelling between different sites. For example, there may be an opportunity to consider the viability of staff pool cars, electric vehicles perhaps, subject to the likely demand and costs.
- 7.12 Overall the modal shift target from private singularly occupied car is considered to be challenging because of the WG directive on free parking on site but it is important to set a reasonable target to work towards.
- 7.13 Reductions in car based travel are likely to decline over time based on the measures proposed in this Travel Plan.

8 TRAVEL PLAN MEASURES

Staff

- 8.1 All staff will be encouraged to travel to work by sustainable means. This will be achieved through a range of 'hard' and 'soft' measures, as detailed in the following.

Digital Induction Pack

- 8.2 A digital Travel Plan Induction Pack will be made available to all staff and could be located on the internal intranet. This will highlight the aims of the Travel Plan and publicise the various transport options available to staff, similar to the information contained on notice boards. The TPC will assist in planning non-car journeys. All staff will be made available, and any new staff will be informed during their induction.
- 8.3 The Travel Plan Induction Pack will cover the following topics, with illustrated route maps for the relevant public transportation:
- Timetables and route maps for public transport. This should include isochrone maps showing schedules journey times and timetable information which correspond to schools opening hours;
 - Cycling and walking maps for the local area and the contact details of local and national cycling organisations, such as Sustrans;
 - Details of the Trust's carsharing scheme; and
 - Details for any community travel sites and community forum sites.
- 8.4 This list is not exhaustive and information or ideas within reason which the council consider relevant may be included.

Carsharing

- 8.5 The Trust Car Sharing Scheme currently incorporates Morriston Hospital in its West Division. As of 2008 the division had 112 members registered. Unfortunately at the time of the last Travel Plan (2008), it was not possible to maintain the reserved spaces for carsharers. However dedicated carshare parking spaces will be reintroduced as part of this Travel Plan and these spaces will be situated at the nearest points to the main entrance points of the buildings. These spaces will be monitored by the TPC for unauthorised staff use.

- 8.6 Information on the staff notice boards and in the induction packs will encourage the use of car sharing by staff, as well as on the staff Intranet. The information will promote the Abertawe Bro Morgannwg car share database as well as Liftshare and BlaBla Car; www.liftshare.co.uk and www.blablacar.co.uk.

Public Transport

- 8.7 There are a number of modern and well-positioned bus stops located within the site. The TPC will liaise with the bus operator to ensure that the bus timetable information remains accurate and up to date. This will be of great benefit for existing and potential bus passengers.
- 8.8 First Bus currently offer a 15% discount scheme for regular users and this is seen as an excellent financial incentive for staff to use sustainable transport to travel to work. This should be promoted by the TPC to increase staff awareness and take up.

Cycling

- 8.9 The TPC will start a cycle users group which will primarily promote cycling to work amongst staff. The group will meet to discuss all cycling matters including, but not limited to, cycle parking, access, showers and changing facilities and the cycle to work scheme.
- 8.10 Cycle parking will be provided as part of all new buildings, the new building will provide 32 new cycle parking spaces for exclusive use by staff in addition to those already provided on the site, however the hospital will commit to providing addition or improved cycle parking where demand outstrips supply. This will be monitored by the TPC visually and through feedback by the cycle users group.
- 8.11 Shower and changing rooms will also be provided in the new building to allow staff to cycle and walk to work and be able to change on site, without unnecessary inconvenience. Furthermore, lockers will be provided to ensure the safety of staff belongings.
- 8.12 AMBHB already operates a salary-sacrifice based cycle purchase scheme, in line with current Government guidance. All Morriston staff can purchase bicycles (and cycle equipment) up to the value of £1,000. There are many benefits to this type of scheme, however the main benefits are an interest free loan and financial saving through the payment of less tax and national insurance. This scheme will be continue to be actively promoted and will continue to be offered to staff.

Park and Ride

- 8.13 Landore Park and Ride could provide a convenient multimodal method of travel to the hospital for those living in, or to the south west of Swansea. It is possible to reach the hospital via a 10 minute walk and using the number 4 service, which results in a total journey time of approximately 30 minutes.
- 8.14 However, despite these excellent Park and Ride services it is highly unlikely that anyone would use this due to free parking at the hospital.

Emergency Ride Home

- 8.15 Morriston Hospital will facilitate an 'emergency ride home' system whereby any member of staff who has travelled to work by non-car mode will be taken home in the case of an emergency, usually by taxi.

Personalised Travel Planning

- 8.16 The TPC will offer a free travel planning service to all staff on request. This will also be offered on all inductions for new staff.
- 8.17 The TPC will be able to draw on advice from journey planning websites such as Transport Direct (www.transportdirect.org.uk).
- 8.18 Personalised travel planning (PTP) has been proven to have an effect on travel behaviour in other hospital sites across the UK. One such example includes Queen's Medical Centre, Nottingham, where Sustrans saw a 56% increase in employees cycling, and a 4% reduction in employee car journeys, all through cycle focussed PTP. A factsheet for the influence Sustrans made at Queen's Medical Centre is included in **Appendix B**. Whilst the location and demographics of the hospital in Nottingham may be different compared with Morriston Hospital, it is evident that PTP can provide significant opportunity to influence travel behaviour and should be considered as part of Morriston Hospital's Travel Plan strategy.

Walking Routes Explored to the South

- 8.19 The questionnaire surveys have identified that walking routes into the Hospital site from south and east of the site, may be beneficial and attractive for a proportion of staff that live locally. This may be a relatively quick and cost effective way of improving accessibility and sustainable linkages to the Hospital and should be explored further.

9 MONITORING AND REVIEW

- 9.1 The Travel Plan and staff travel will be monitored annually for at least five years on the anniversaries of the initial baseline travel survey, which was undertaken in April and May of 2015. The baseline travel survey will be used to compare future travel patterns (incorporating the new building), with those recorded in the 2015 survey of the existing buildings. The baseline survey undertaken represents the start of the Travel Plan for monitoring purposes and is known as Year 0. The results of all surveys will be shared with The City and County of Swansea Council as part of ongoing discussions and the annual review process.
- 9.2 If the target, identified in Section 6, is not being met, the Travel Plan will continue to be monitored for a further 3 years, i.e. Year 7, 8 and 9, bringing the total monitoring period to 8 years. However it is envisioned that the monitoring programme will help to identify what is causing the targets to not be met. Rectifying problems in achieving targets could involve implementing additional or alternative measures or simply adjusting targets to more realistic levels.
- 9.3 The monitoring will be undertaken in-house by the TPC, and will be used to judge whether the implementation or application of certain measures needs to be modified.
- 9.4 Additionally, the TPC will arrange for monitoring of the office car park on a daily basis to ensure that there is no unauthorised use any member of staff, particularly in the carshare spaces. The uptake of all sustainable travel initiatives, will also be monitored along with the level of usage of cycle stands.
- 9.5 The TPC will also monitor the use of the car share schemes and the cycle purchase scheme.

Review

- 9.6 The Travel Plan will be reviewed annually after all data has been compiled. This is to show whether the targets, as set out in Section 6, are being met and whether the measures implemented are having the desired effect on staff travel. These reviews can highlight areas which need to be addressed.
- 9.7 The second stage involves the TPC undertaking a full and comprehensive review of the Travel Plan at Year 5. This review will involve completely updating the Travel Plan document to

take into account changes to transport availability, staff changes, changes in travel patterns, and revisions to targets and measures.

- 9.8 Any on-going monitoring of measure uptake will be included within the review.

Reporting

- 9.9 The TPC will, if required, compile an annual Monitoring Report outlining the results of the monitoring review. The report will also incorporate the results of on-going monitoring throughout the preceding period. The report will be issued to the City and County of Swansea Council and retained for record.

- 9.10 The monitoring report will include the following aspects:

- Site name and address;
- A summary of the Travel Plan;
- How and when monitoring information was gathered;
- Whether travel patterns are meeting objectives and targets; and
- Proposals to further develop the Travel Plan and make revisions to measures and targets if targets are not being met.

10 ACTION PLAN

Action Type	Action	Responsibility	Timeframe	Notes
Management	Appointment of Travel Plan Coordinator (TPC)	Abertawe Bro Morgannwg	Prior to the new building becoming occupied	This is preferable to be completed as soon as possible.
	Update of company digital staff induction pack	Abertawe Bro Morgannwg / TPC	Within 3 months of occupation of the new building	This will involve updating the existing digital TP for the new office building and include the content of this document.
Baseline Travel Patterns	Baseline staff travel survey (in-house)	TPC	ASAP	Already completed as part of this document
Implementation	Implementation of sustainable travel initiatives	TPC	On-going	This is to be implemented immediately for existing staff, and during staff induction periods to ensure that sustainable travel habits start early.
Monitoring, Review & Reporting	Monitoring of measures and initiative take-up	TPC	On-going	This will involve regular monitoring of vehicle and cycle parking use, car share scheme use, and uptake of other measures implemented.
	Review of measures and initiative take-up	TPC	Annually	This will involve reviewing the collected data and understanding whether the sustainable travel initiatives are being utilised effectively.
	Reporting of measures and initiative take-up	TPC	Annually	The Travel Plan document will be reviewed and revised if necessary.

APPENDIX A

CERDDWCH | GWAITH
WALK TO WORK



 Gorsaf fysiau / Bus station

 Arhosfa fysiau / Bus stop

Llwybr troed / Foot path

Llwybrau beicio / Cycle routes

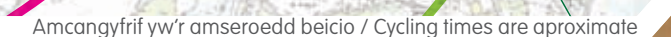
Ar y ffordd / On road

Llwybr arfaethedig / Proposed

Di-draffig / Traffic free



BEICIO I'R GWAITH BIKE TO WORK




Teithio egnïol

→ Cadwch yn iach, gwariwch lai, teimlwch yn dda a mwynhewch eich llwybrau lleol. Gall cerddedau beicio'n rheolaidd lleihau'r perygl o ddioddef nifer o gyllfyrnau yn cynnwys clefyd coronaidd y galon, diabetes a chanser, yn ogystal â lleihau'r risg o fynd yn ordaw.

→ I gael argymhellion a chynghor ar gynnywys cerddedau beicio yn eich trefn ddyddiol cofrestrwch gyda'r Cymudwr Byw:

www.sustrans.org.uk/activecommuter

APPENDIX B



Workplace Engagement Nottingham University Hospitals NHS Trust

Photos: Employees actively travelling to work.

“I received my bike last August. I am much fitter, cycling 4.5 miles to work daily really makes a difference.”

Consultant Obstetrician at Queen's Medical Centre, Nottingham

The challenge

The NHS is the largest employer in the UK, with employees working in high pressure environments for long hours. Employee health, concentration and fitness is therefore of vital importance. Benefits from healthy employees such as lower absenteeism, presenteesim and staff turnover can also make significant cost savings for the NHS.

From previous initiatives, Nottingham University Hospitals Trust (NUHT) identified a number of areas where promoting Active Travel could be improved, including:

- better uptake in Cycle to Work Scheme
- potential updating of cycle facilities
- greater reach of information and advice about cycling and walking
- the potential for fresh input to promote active travel to hospital employees.

Sustrans solution

Sustrans, working in partnership with NUHT's Health and Wellbeing programme, delivered a dynamic selection of cycle related events and activities, as well as developing bespoke information and training, plus a programme of cycle infrastructure improvements.

As a result of embedding a Sustrans officer within the hospital, the hospital now runs a hugely successful Cycle to Work Scheme. The hospital has also invested money to significantly improve its cycling infrastructure and has fully integrated cycling into the NUHT's transport plan.

New cycle routes between the hospital's three sites have been mapped. As a result of these combined initiatives, employee car journeys have been reduced and bike journeys are up!

Key facts

Project Funder: Local Sustainable Transport Fund & Nottingham University Hospitals Trust



5,642
individuals
engaged by the project



56%
increase in
employees cycling



90
new bike
parking spaces



4%
reduction in
employee car journeys

Contact us

For more information on our workplaces work call 0117 915 0100
email workplaces@sustrans.org.uk, or visit www.sustrans.org.uk/workplaces

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