Travel Planning Support and Development

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Paper E2

Purpose of report:

This paper is for:	Description	Select (X)
Decision	To formally receive a report and approve its recommendations OR a	
	particular course of action	
Discussion	To discuss, in depth, a report noting its implications without formally	
	approving a recommendation or action	
Assurance	Assurance To assure the Board that systems and processes are in place, or to advise a	
	gap along with treatment plan	
Noting	For noting without the need for discussion	х

Previous consideration:

Meeting	Date	Please clarify the purpose of the paper to that meeting using the categories above
Reconfiguration Programme Cmte	22/01/2021	Assurance and Noting
Executive Board – ESB	02/02/2021	Assurance and Noting
Trust Board Committee		
Trust Board		

Executive Summary

Context

On 14th September 2020 Go Travel Solutions were commissioned to work alongside the UHL Travelwise Manager to provide Travel Planning Support and Development for UHL covering the consultation phase of Building Better Hospitals for the Future and help develop long-term investment in sustainable travel for the Trust. Go Travel Solutions are a local specialist sustainable transport consultancy that have strong and strategic relationships with stakeholders in the city and beyond. These include the main local providers of transport services, transport infrastructure, local authorities and major employers.

Questions

- 1. What progress has been made with the work?
- 2. Who will be involved in this work?
- 3. What is required from the Trust?

Conclusion

- 1. Since the last report the Travel Action Plan for Phase 2 has been completed and work is progressing at pace on Phase 3 of the project, this involves providing a priority list of alternatives.
- 2. Go Travel Solutions and the Travelwise Manager have meet directly with various council representative (Leicester City Council, Rutland County Council, Leicestershire County Council). In additional to overarching meetings, specific meetings have been held around bus, cycle developments in the city and partnership working e.g. with Leicestershire County Council in respect of County Hall and Glenfield Hospital. The partnerships are maturing and have the potential to lever in significant benefits to the Trust in the coming years.
- 3. The Trust will be required to provide strategic level support to prioritising sustainable travel for staff, visitors, and patients (where appropriate). The Trust needs to consider a clear route for submission of proposals (both policy and monetary) to ensure partnerships can be given a very clear message i.e. the Trust are in support of sustainable travel options. The Trust for the strategic reasons of carbon emissions, well-being and equality, diversity & inclusion, will benefit from promoting and providing a range of travel choices. Prioritising and providing for just car travel is not sustainable and does not support these strategic ambitions. In addition to this support, there will be a requirement for finances to facilitate changes in travel options and help maximise support from partners.

Input Sought

We would welcome the Trust Board's input regarding acknowledging the information within this paper and recognising next steps i.e. the need for senior level support and finance.

For Reference:

This report relates to the following UHL quality and supporting priorities:

1. Quality priorities

Safe, surgery and procedures Safely and timely discharge Improved Cancer pathways Streamlined emergency care Better care pathways Ward accreditation

2. Supporting priorities:

People strategy implementation Estate investment and reconfiguration e-Hospital [Yes /No /Not applicable] [Yes /No /Not applicable] [Yes /No /Not applicable] [Yes /No /Not applicable] [Yes /No /Not applicable]

[Yes /No /Not applicable] [Yes /No /Not applicable] [Yes /No /Not applicable] More embedded research Better corporate services Quality strategy development [Yes /No /Not applicable] [Yes /No /Not applicable] [Yes /No /Not applicable]

- 3. Equality Impact Assessment and Patient and Public Involvement considerations:
- What was the outcome of your Equality Impact Assessment (EIA)? Not applicable
- Briefly describe the Patient and Public Involvement (PPI) activities undertaken in relation to this report, or confirm that none were required

This work is part of the reconfiguration program that has its own set of engagement activities

- How did the outcome of the EIA influence your Patient and Public Involvement? Not applicable
- If an EIA was not carried out, what was the rationale for this decision? Not required at this point

4. Risk and Assurance

Risk Reference:

Does this paper reference a risk event?	Select (X)	Risk Description:
<i>Strategic</i> : Does this link to a <i>Principal Risk</i> on the BAF?	x	PR 7 – Reconfiguration of estate
Organisational : Does this link to an Operational/Corporate Risk on Datix Register	No	
<i>New</i> Risk identified in paper: What <i>type</i> and <i>description</i> ?	No	
None		

5. Scheduled date for the **next paper** on this topic:

[March 2021]

6. Executive Summaries should not exceed **5 sides**

[My paper does/does not comply]

1. Introduction

The purpose of this paper is to update the Trust Board on progress to date with the Travel Planning Support and Development in support of Building Better Hospitals for Leicester.

2. Progress to Date

The main areas of progress to date:

- Finalisation of Phase 2 Travel Action Plan with the inclusion of an emerging sustainable travel network for the three UHL sites based on Leicester City Council investment.
- Progression of the Phase 3 Travel Action Plan.
- Meeting of the Steering Group on 15th October, 12th November and 10th December, bringing together external and internal stakeholders e.g. De Montfort University, Leicester City Council, Healthwatch Leicester & Leicestershire, Healthwatch Rutland, Communications, HR and staff side. See appendix 1 for the Terms of Reference and membership for this group.
- Meeting of Forum on 29th October, 26th November and 17th December with terms of reference and membership (see appendix 1) to support effective project delivery including but not limited consisting of representatives from areas such as junior doctors, capital, equality, Leicester Tigers, Highcross etc.
- Meeting internally to look at online channels for the dissemination of information and the creation of an online travel portal for staff and public.
- Meeting internally with the Equality and Diversity lead to ensure the TAP covers EDI issues.
- Internal meeting planned with the salary sacrifice team.
- Meetings have also been held with external bodies such as Leicestershire County Council (this covered what the council can offer generally and partnership working as their base is next to the Glenfield Hospital), Healthwatch Rutland and First. External meetings are planned with Arriva, Centrebus, Cross Country, East Midlands Railway and First.
- 1:1 meetings held to build on existing work and secure of strong interest from Leicester City Council in the UHL project. They have a desire to partner with the UHL in developing an enhanced sustainable travel network serving the hospitals. This includes:
 - Electric rapid transit services serving LRI e.g. from Birstall, Meynells Gorse and Enderby.
 - Investment in electric buses for the hopper, this could happen as early as Spring 2021.
 - Investment in all the Park and Ride services including but not limited to bringing all P&R via the LRI, plus opportunity for extended hours and more frequent services.
 - New park and ride services, including one at Beaumont Leys, with link to GH.
 - Possible Park and Ride on the Leicester General site (see below).
 - Santander Cycles Leicester electric bike docking station at the LRI site to link with up to 50 other central Leicester docking stations (including the train and bus stations) by the end of Spring 2021, with further discussions to extend to GH (as a priority) and LGH.
 - A new cycle parking facility at the LRI.
 - Improvements to existing cycle parking at the LRI.
 - New city centre shuttle serving the LRI and linking with the train and bus stations.
- All the above work has been moved on and prices are now coming forward with regards to achieving all the above. A funding list is being created.
- Funding is secured from the City Council for some cycle related work at the GH and LRI.
- Monies are being bid for through the Captain Tom funding for some additional cycle related work.

- Links being developed with the architects for the reconfiguration project to ensure travel and the related requirements are considered.
- Development of using the new Beaumont Leys Park & Ride as off-site parking for GH. This is planned to be live by early 2022. Interim off-site parking options are being reviewed and developed to support the ICU move to GH in summer 2021.
- The Trust has given the go ahead to work in partnership with Go Travel Solutions for another 12 months, this provides a continuation in the momentum already obtained.

3. Work Plan

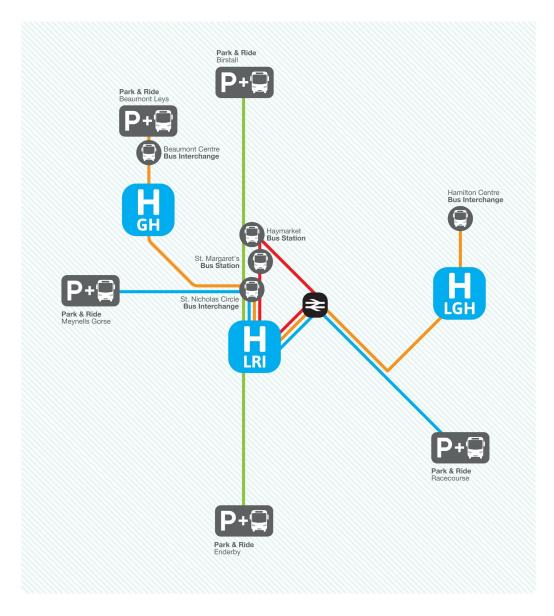
To reflect the requirements of the consultation, the workstream of this commission is divided into three phases. They are:

- Phase 1: Creating a Draft Travel Action Plan for the three sites (completion of Phase 1 Travel Action Plan by end of October 2020).
- Phase 2: Creation and delivery of engagement with stakeholders and development of Travel Action Plan (completion by end of December 2020).
- Phase 3: Reviewing and Finalising Travel Action Plan for the three sites (completion by end of January 2021).
- Phase 4: Delivering and Development of the Travel Action Plan.

A more detailed Work Plan can be found in Appendix 2

The key actions in Phase 3 will be:

- Finalising the Travel Action Plan prior to delivery from February 2022.
- Inclusion of further feedback into the Travel Action Plan from the consultation feedback.
- Prioritising the investment required from the Travel Action Plan including identifying match funding.
- Securing pledges of support from external stakeholders (local authorities/transport operators/major employers).
- Progressing internal Trust engagement and buy-in including identifying of shared objectives.
- Designing of web based travel portal for staff and public.
- Finalising branding on the new Hospital Hopper buses.
- Developing plans to support the travel demands generated by the ICU move to GH.
- Developing plans for Park & Ride from LGH for up to 6 years.
- Developing work plan for phase 4.



Above is an Illustration of the planned network of electric rapid transit services by 2023. This would be delivered as a partnership between Leicester City Council and the UHL. Currently the only services that exist of the above that serve the hospitals are the Hospital Hopper and the Park & Ride from Enderby.

4. Feedback to date

There has been a variety of feedback from the different consultation methods, below is a list of the comments raised and the changes that have been made.

Suggestions already covered within the TAP

- Increase/improve the public transport options.
- Consider Park & Ride or shuttle buses to the hospitals.
- Increase the Hopper hours and frequency.
- Ensure that sustainable travel options are considered and included in the plan.
- Consider people without access to a car.
- Improve cycle parking including security.

- Improve showers and changing facilities.
- Consider inter-site travel.
- Improve travel information sharing.
- Improve signage.
- Make improvements to/include car parking within the development plans.
- Look at car parking charges.
- Ensure that parking charges are comparable to public transport.

Suggestions that have been added into the TAP

- Ensure that disability and equality issues are actioned.
- Include Drop-off points for drivers with no desire to park.
- Encourage e-bikes as these are more accessible to a wider range of people and can negate or reduce need for as many changing facilities
- Include e-charging for bikes and cars
- Consider payment by means such as phone or phone app.
- Direct partnership engagement with Rutland County Council.
- Including information about travel to staff before starting.
- Direct partnership with Leicestershire Partnership Trust.
- New <u>section</u> to be added *Priorities*. To ensure that key items such as showers and changing are not missed during the design phase.
- Create videos of cycle routes between the sites.
- Plans for cycle storage need to be more ambitious than the status quo.
- Highlight that EV vehicles are covered by the Salary Sacrifice scheme.
- Advertise initiatives on payslips.

Feedback not acted upon

- Phone and video consultations: already taken care of with the configuration plans.
- Centralisation versus devolution: beyond the scope of our involvement.
- Specific comments regarding maternity provision: beyond the scope of our involvement.
- Add a brief <u>section/statement</u> on e-scooters: currently not legal to use in Leicester.

5. Project risks

The Trust has historically not fully supported investment in sustainable travel and this is a major risk for this project. If the UHL is going to secure the maximum investment in transport from Leicester City Council, the UHL need to compliment the support from the authority. This commitment needs to be via senior level buy in and financial support.

Here are examples of the commitments that may need to be made:

- Development of a Parking Strategy that aligns with and supports the provision of Park & Ride services.
- Prioritising promotion of sustainable travel to staff, visitors, and patients (where appropriate).

A proactive approach to sustainable travel is totally consistent with the strategic priorities of the Trust to enhance health outcomes, reduce its carbon footprint, support its people and the communities around.

Below is a summary of the key project risks. This register will be updated throughout as new risks emerge and mitigating measures are deployed.

Risk	Mitigation	Severity (low/medium/high)
Covid-19 – reducing attractiveness of public transport in short to long term	Go Travel Solutions (GTS) to engage with transport authorities and bus operators to supply latest travel guidance and promotions of measures to help make public transport safe to use	High
Internal UHL project conflict, which compromises TAP in delivering long- term positive sustainable change because of short-term project focus e.g. car parking requirements.	GTS to provide business case for sustainable travel to senior managers at UHL. UHL to review policies and practices that undermine sustainable travel and prioritise sustainability.	High
Historic low priority given to sustainable travel at UHL - reflected in the culture and decision-making process	GTS to provide business cases for sustainable travel to senior managers at UHL. UHL to facilitate opportunities to review policies and practices that undermine sustainable travel.	High
National pro-parking policy at hospitals promoted by government - leading to policies of free parking making sustainable travel less attractive and undermining business case for new parking provision	GTS though its national links to make case for a parking policy to be applied at hospitals that does not undermine sustainable travel. UHL to likewise lobby through their partnerships.	High
Lack of funding to deliver investment needed in sustainable travel (e.g. cycle hubs, enhanced bus network), particularly given the Reconfiguration Programme does not come with budget for transport provision and the Trust being in financial special measures.	GTS to maximise support from public sector partners and transport providers through collaborations and engaging with other strategic employers. UHL to review different ways of funding sustainable travel measures.	High
Lack of future attractive public transport offer because of Covid-19 undermining the business model for the operation of bus and train services.	Engage with Leicester City Council as the local transport authority to secure the strongest public transport offer through the partnership being developed.	Medium
Focus of NHS on responding to Covid-19 , leading to policies promoting counter to sustainable travel and reducing capacity to introduce a prosustainable travel approach.	GTS to provide business case for sustainable travel measures and be sensitive to NHS capacity. UHL to provide up to date position on capacity.	Medium
Non receipt of data - leading to less informed/smart measures	Development of engagement with multiple contacts within UHL.	Low

Risk	Mitigation	Severity (low/medium/high)
	UHL to provide multiple contacts.	

6.Conclusion

Work is progressing well and the Travel Action Plan has been through many iterations and can now be used to inform the various groups in a controlled manner.

The Trust must recognise the risks of this work as detailed in section 5. The benefits of this project for the Trust are high but the profile outside of reconfiguration is not high and therefore when trying to engage with other internal partners, the sign up is low.

Project	Meeting	Group Membership	Role of Group
Group	frequency		
Task Group	Weekly	UHL: Ruth GTS: Ian, Robin + others as and when required	 Management of the different tasks of each phase Identification and scoping of resource requirements
Review Group	Monthly	UHL: Justin, Ruth, Nigel GTS: Robin, Ian, Cliff	 Review against milestones and key deliverables of project plan Project risk review Project evaluation Approvals for next phase of GTS commissioning
Steering Group	Every 4 weeks – 4 times during project	Core UHL and GTS team plus External Uni of Leicester De Montfort University Healthwatch (Rutland & Leicester/Leics) Leicester City Council Leics County Council Rutland Council Arriva First Centrebus Ride On Internal Estates HR Comms Patient Rep	 Recognised engagement channel as part of Reconfiguration consultation Catalyst for co-creation on transport measures to enhance accessibility Sounding board for different solutions proposed by UHL/GTS
Forum	Every 4 weeks – 3 times during project	Core UHL and GTS team External - including • Leicester City Football Club • East Midlands Railway • CrossCountry • East Midlands Chamber • Leicester College Internal - including • Junior doc rep • Consultant rep • Equality lead • Health & safety • Receipt and distribution • Staff engagement & well-being • Capital • Payroll • Salary sacrifice • Volunteers	 Forum for co-creation of transport measures to enhance accessibility Recommending of measures for Steering Group and as part of future Travel Action Plan Gathering of wider transport feedback and concerns as part of Reconfiguration Programme

Appendix 1 – Terms of Reference

Appendix 2 – Work Plan for Phase 3 of 3

Updating of Travel Action Plan and creation of final Phase 3 Travel Action Plan
Securing of internal UHL senior buy-in
Securing of partnership with Leicester City Council
Securing of partnership with Leicestershire County Council
Securing of partnership with Rutland County Council
Securing of partnership with public transport operators
Securing of partnership with major employers in proximity to UHL sites
Sign-off of Phase 3 Travel Action Plan
Creation of business case(s) for additional UHL investment
Report for Reconfiguration Programme Committee on 22-1-21
Steering Group on 14-1-21
Forum on 21-1-21
Outline design of sustainable travel portal for staff, visitor and patients
Reviewing of consultation feedback
Finalising Hospital Hopper branding
Developing plans to support the travel demands generated by the ICU move to GH
Developing plans for Park & Ride from LGH for up to 6 years