

Travel Action Plan (formerly Travel Planning Support and Development)

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Paper D

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	To assure the Board that systems and processes are in place, or to advise a gap along with treatment plan	X
Noting	For noting without the need for discussion	

Previous consideration:

Meeting	Date	Please clarify the purpose of the paper to that meeting using the categories above
Reconfiguration Programme Cmte	21/05/2021	Noting
Executive Board – ESB	01/06/2021	Assurance
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 covering the consultation phase of Building Better Hospitals for the Future and to help travel options to the hospital sites for the Trust. This initial engagement ran to the end of January 2021. During this time, a Travel Action Plan (TAP) was developed (through Phases 1 to 3) and an effective engagement programme with internal and external stakeholders established.

Due to the progress made in developing the TAP, Go Travel Solutions engagement was extended in February 2021 through to the end of January 2022. The priorities for this extended engagement are now on the delivery/Phase 4 of the TAP in partnership with the UHL Travelwise Manager.

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. The TAP was approved by the Reconfiguration Trust Board on 4th March 2021. This contains a set of 14 priorities for the next 12 months. The focus now of this work is developing a business case for these different priorities (where required) and delivering the priorities.
2. The UHL Trust are now in receipt of a directive on national parking policy changes. Trusts are now obliged to provide free parking for specific categories of patients e.g. blue badge holders, parents of children staying overnight, frequent users (3+ times per week for at least 3 months) and also for night-staff. The management of these changes is currently being worked on. The changes in parking policy run contrary to the aims of the TAP because they will increase the demand for car parking. Leicester City Council, as the Local Transport Authority and the proposer of the Working Parking Levy, have been made aware of these changes.
3. Commitment has now been given by the Trust to Centrebus for a +2 year extension on the Hospital Hopper contract. This will be helpful in securing ongoing support for the TAP from Leicester City Council.

Input Sought

For the June Trust Board meeting there is no specific input sought. This report is provided to update the Trust Board on the continued significant progress being made and provide opportunity for the Board to review this progress and provide their feedback.

For Reference:

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

1. Quality priorities

Safe, surgery and procedures	[Yes /No /Not applicable]
Safely and timely discharge	[Yes /No /Not applicable]
Improved Cancer pathways	[Yes /No /Not applicable]
Streamlined emergency care	[Yes /No /Not applicable]
Better care pathways	[Yes /No /Not applicable]
Ward accreditation	[Yes /No /Not applicable]

2. Supporting priorities:

People strategy implementation	[Yes /No /Not applicable]
Estate investment and reconfiguration	[Yes /No /Not applicable]
e-Hospital	[Yes /No /Not applicable]
More embedded research	[Yes /No /Not applicable]
Better corporate services	[Yes /No /Not applicable]
Quality strategy development	[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:
Strategic: Does this link to a Principal Risk on the BAF?	x	PR 7 – Reconfiguration of estate
Organisational: Does this link to an Operational/Corporate Risk on Datix Register	No	
New Risk identified in paper: What type and description ?	No	
None		

5. Scheduled date for the **next paper** on this topic: [September 2021]
6. Executive Summaries should not exceed **5 sides** [My paper does comply]

Executive Summary

Update on the Travel Action Plan (TAP)

1. Progress to Date

- Approval of the TAP (at Phase 3 completion) by the Reconfiguration Trust Board on 4th March 2021.
- 14 priorities identified in the TAP for the next 12 months. Of these, one priority is complete and significant progress has been made on five other priorities. On all the other priorities, work has started.
 - Complete – PlusBus ticketing on the Hospital Hopper is now available. This allows travel by train and on the Hospital Hopper using just a rail ticket.
 - In progress:
 - Installation of e-bike docks (x2) at GH.
 - Improvements to cycle sheds are now in place for staff at LRI and a new shed has been installed at the GH.
 - Work has begun on the installation of Automatic Number Plate Recognition technology to some of the car parks at the LRI and GH.
 - Allocation of car park 2A at LGH as a Park & Ride site for three years initially, with investment being secured from Leicester City Council. This will provide a new facility for the public travelling from the east Leicestershire and Rutland.
- Significant stakeholder engagement continues. Of note since the last Trust Board Report there have been the following meetings:
 - Internal TAP Delivery Group - this focused on how to improve online travel information for the staff and public (TAP Priority P&M4). See Appendix 1 for a summary of membership of the Internal and External UHL TAP Delivery Groups.
 - Healthwatch Leicester & Leicestershire, Healthwatch Rutland and Patient Partners – a positive meeting with the respective organisations took place, providing an update on TAP progress and providing an opportunity for them to provide their feedback.
 - UHL and Leicester City Council Transport Partnership – progressing the joint projects at all three sites to help enhance travel options.

2. Work Plan and Priorities

- Phase 4 delivery is now underway. See Appendix 2 for a summary of the Work Plan.
- Links are being developed to ensure the TAP dovetails with other UHL projects and specifically those focused on the Reconfiguration Programme. For example, contact established with BDP to ensure master planning is consistent with the TAP recommendations.
- Separate meetings will continue throughout 2021 with Patient Partners and Healthwatch Leicester & Leicestershire and Healthwatch Rutland to ensure they are aware of progress to date, plans going forward and have opportunity to provide their feedback.
- Development of business plans for the TAP priorities are being developed. The TAP priorities through to January 2022 are as follows:

TAP Ref	TAP Action	Progress status
C11	Introduction of improved cycle storage	In progress – new sheds in place – access system to be complete
C16*	Investment in a Santander Cycles docking stations (x2) at GH	In progress - funding secured – installation taking place at GH
P&M4	Create new travel webpages for staff and public	In progress – being discussed with Comms – potential need for new staffing resource in facilities
P&M8	Carry out an annual Staff Travel Survey.	To be progressed – plan to include within scope of BDP work
P&M10	Carry out Public Travel Surveys when appropriate.	To be progressed – plan to include within scope of BDP work
PP3	Introduce Personalised Travel Planning to staff	To be progressed – initial plan to use zero cost resource available through Leicester City Council
PT3	Provide staff discounts for sustainable travel	Business case to be presented for three year membership of the SmartGo travel discount scheme
PT7*	Increase frequency of the Hospital Hopper	Business case to be presented
PT11*	Increase P&R hours to cover 06:00 until 21:30 Monday to Friday	Business case to be presented – identification of whether any co-funders
PT12	Inclusion of Hospital Hopper on PlusBus scheme	Complete
PT14*	Introduce additional temporary off-site parking for GH	In progress – potential of Park & Stride from County Hall
PT15*	Introduce additional bus capacity between GH and new Beaumont Leys Park & Ride	Business case to be presented
PT16*	Introduce 3-year P&R from LGH	In progress – awaiting official confirmation on use of car park
SP7	Introduce a car park management system.	In progress - ANPR being installed

* Projects in partnership with Leicester City Council.

4. Project risks

Below is a summary of the current risks. There are no new risks to report. In the last Trust Board report the new national pro-parking policy from government was added. This remains a high risk to the success of the TAP.

One risk has been removed. At the time of the last meeting, the +2 year extension of Centrebus Hospital Hopper contract had not been confirmed. This has now been confirmed. If it had not been secured, it put at risk the multi-million pound transport investment from Leicester City Council in support of the UHL TAP.

Risk	Mitigation	Severity (low to high)
Covid-19 – reducing attractiveness of public transport and car sharing in short to long term	GTS to engage with transport authorities and bus operators to supply latest travel guidance and promotions of measures to encourage safe use of public transport and car sharing.	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 weaken sustainable travel.	High
Past low priority given to sustainable travel at UHL - evidence of change now taking place	GTS to provide business case for sustainable travel to senior managers at UHL. UHL to review policies and practices that weaken 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	The Trust to make representation locally and nationally on the detrimental impacts of the new parking policy.	High
Lack of dedicated funding to deliver investment needed in sustainable travel (e.g. cycle hubs, enhanced bus network), particularly given 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. Maximise benefit of new National Bus Strategy.	Medium
Focus of NHS on responding to Covid-19 , leading to policies promoting counter to sustainable travel and reducing capacity to introduce a pro-sustainable 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. UHL to provide multiple contacts.	Low

Appendix 1

Internal UHL TAP Delivery Group	
Membership	
TAP project team (Ruth, Justin, Ian, Cliff and Robin) and Nigel Bond/UHL sponsor	
Patient Partners	
HR	
Comms	
Payroll/salary sacrifice	
Consultant rep	
Junior doctor rep	
Receipt and distribution	
Health and Safety	
Capital	
Equality, Diversity and Inclusion	
Well-being	
Staff engagement	
Terms of Reference	
<i>On behalf of the area of UHL/specialism they represent:</i>	
1. Support the delivery of key actions of the Travel Action Plan	
2. Facilitate co-production of actions	
3. Provide feedback on the TAP as part of its monitoring and evaluation	
External UHL TAP Delivery Group	
Membership	
All external stakeholders (see below) plus TAP project team (Ruth, Justin, Ian, Cliff and Robin) and Nigel Bond/UHL sponsor	
Terms of Reference	
<i>On behalf of the organisation/specialism they represent:</i>	
1. Support the delivery of key actions of the Travel Action Plan	
2. Facilitate co-production of actions	
3. Provide feedback on the TAP as part of its monitoring and evaluation	
External key stakeholders	
Public Transport Operators	Arriva
	Centrebus
	Cross Country
	East Midlands Railway
	First
Authorities	Leicester City Council (including Santander Cycles Leicester)
	Leicestershire County Council
	Rutland County Council
Employers	De Montfort University
	Leicester College
	Leicester Tigers
	Leicestershire Partnership NHS Trust
	University of Leicester

