

Considerations for hospital travel plans

DESCRIPTION: Hospitals are active 24 hours a day with the coming and going of ambulances, patients, visitors, staff, suppliers, contractors as well as vehicles delivering community-based healthcare. A travel plan can be an effective transport management tool for a hospital and can deliver a range of benefits.

- Reduced congestion on and around the site and precinct.
- Improved transport options for staff, patients and visitors.
- Better access for emergency vehicles.
- Improved reliability of deliveries.
- Reduced demand for parking.
- Demonstrated commitment to environmental sustainability.

While most hospital Travel Plans primarily focus on staff travel, patients can also benefit by improved access to the site, better ability to keep appointments and a reduction in the number of unnecessary journeys.

Liverpool Hospital	Southmead Hospital, UK
The NSW Liverpool Hospital Sustainability Taskforce was established in 2011 in response to state wide sustainability targets and the interests of hospital staff in reducing the hospital's carbon footprint. The Travel Plan was developed in response to increasing transport pressures. But it was also identified as a 'positive opportunity to improve staff health by increasing physically active commuting like walking, cycling and public transport'. Liverpool Hospital Travel Plan Annual Report, 2013	 The aims and objectives of the Travel Plan are: To reduce the number of single occupancy vehicle journeys made to the hospital by private car; To improve travel choices and make them safe and accessible to all; and To encourage healthy, environmentally sustainable travel choices. 2013-18 Southmead Hospital, Bristol Travel Plan

Developing a Travel Plan for a hospital will need consideration of some specific issues including:

Issue	Description
Community impact	Because of the size of hospitals and the often-constrained on-site parking, considerable vehicle parking often spills over onto adjacent streets which can impact negatively on the local community. Benefits of a Travel Plan can be to reduce local congestion and build relationships with the neighbouring community. Consider working with the Local Council's Local Traffic Committee to address any concerns.
Community transport vehicles	If these operate from the hospital, it will be important to determine the role they may play and if they have any specific access requirements. Community transport vehicles should be included in the site audit/ survey.
Cross-site travel	Depending on the size of the hospital or precinct, efforts could be made to ensure a higher proportion of cross-site trips are made on foot or by active travel modes of transport or a shuttle service. As part of their Travel Plans, hospital precincts have provided staff with access to electric shuttle buses, electric bicycles or free bicycles to move around the precinct.
Delivery and supply vehicles	The regular and on demand movements of delivery vehicles will need to be considered. There may be opportunities to consolidate some of these deliveries, but any changes to deliveries will need to be agreed in collaboration with hospital management and the customer for those deliveries. A separate audit of these movements may be required.
Emergency vehicle access	Using the Travel Plan to ensure local area congestion is minimised and access of emergency vehicles is not compromised could be a key benefit. Understanding emergency vehicle access requirements using a site audit is an important consideration.
Governance	Senior management and Local Health District (LHD) Board support, and a good decision making/governance framework is critical for a successful Travel Plan. Establishing good governance is especially important in a precinct where the approval processes of multiple organisations must be considered.
Many staff are not desk based	Travel surveys, activities and engagement need to suit staff working a variety of shifts and job requirements. For example, if staff do not regularly access emails, consider distributing travel surveys with payslips, via personal devices, on staff notice boards or in lunch rooms.

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Multi-organisational precincts	Some sites have more than one hospital or health facility within the precinct. Ideally, a Travel Plan would be prepared in partnership with all precinct organisations so that activities compliment and support each other. Consistent application of parking requirements within a single precinct is an important factor.
	Operating as a precinct increases the ability to influence public transport and roads management organisations to improve services to the precinct. It can also be more economic to collectively invest in improved facilities like end of trip facilities, bus waiting rooms, precinct shuttle buses, carpooling systems and real-time transport information, that benefit the visitors of all users of the precinct.
Parking and travel requirements for the mobility impaired	The needs of mobility impaired travellers should be given due consideration, and sufficient access for these travellers maintained. Data collected, including site audits and travel surveys, should ensure the scale of the requirement is quantified. If cycling in the precinct is significant, there may be a need to consider separating (physically or via clear labelling) cycle lanes from walking corridors to increase safety for both modes of movement.
Patient travel to/from site	The hospital will need to consider whether to include patient/visitor travel in the Travel Plan either as background information or as travel that can be modified over time. If it is to be included, a survey or analysis of patient and visitor travel will be required. Activities will need to consider the medical/accessibility requirements of patients and visitors. Patients may have impaired mobility and need short-term drop-off facilities and mobility parking spots. Safe, accessible walking infrastructure should be appropriately designed to suit the visually impaired.
	In the longer term, patient models-of-care are changing to short, frequent visits rather than overnight stays. This will increase transport demand. Hospital operating policies can be used to shift timing of appointments out of peak periods where possible and to reduce the number of unnecessary journeys, for example by working with local GPs, Residential Aged Care Facilities and community centres and adopting telehealth initiatives to deliver health care at a distance using tools such as web-based videoconferencing, remote telemonitoring of patients in their home, and use of wearable technologies and apps on personal devices.
Parking considerations	If parking rules are used to incentivise behavioural change, resources must be allocated towards enforcement to maximise impact of these rules. Automated traffic counts at car parks / hospital entrances can provide valuable data on vehicle usage.
Policies and guidelines	As public sector institutions, hospitals must abide by NSW Government policies, directives and requirements including the NSW Health hospital car parking fees policy directive (PD2013_031) and Property NSW office design requirements (M2012-20). New developments should also consider Green Star, an internationally-recognised sustainability rating system run by the Green Building Council Australia.
Staff churn	With many part time and casual staff, there can be a significant churn in employees. This means that Travel Plan messages need to be communicated repeatedly and often and should be added to induction materials for new staff.
Staff demographics	A significant percentage of hospital staff are female. This can elevate the importance of safety and lighting for public walk-ways and cycle ways in the precinct. Women and men may have family commitments and have the need to pick up/drop off children or others on the way to/from work which may prevent active travel.

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Staff working shifts	Many hospital staff work shifts which can create challenges and opportunities, as well as a number of travel 'surges' throughout the day and night which may need to be considered. If a key goal of the Travel Plan is to reduce congestion, its scope and activities can focus on the morning and afternoon peak transport periods, with mid-day, evening and night timeframes a lesser priority. Timing of staff shifts and patient appointments can be considered so that they do not coincide with peak rush hour times when possible. Flexible work policies and practices can be considered, primarily for office-based staff.
24/7 operation of the site	Travel Plan activities will need to accommodate and facilitate travel at all times, and ensure transport options and access to the transport options are safe and secure, including at night.
Visitors to the site	The scale of visitor travel, and how they travel, could be an important influence on local traffic conditions. Charging for visitor parking spaces has been introduced in many locations. Private hospital buses have also been introduced by some hospitals.