

Royal Free Hospital: Pears Building

Response to TfL Comments

January 2015

141209/N08

Planning Application Ref: 2014/6845/P

TfL Reference: 14/3478

- 1. This note sets out a response to Transport for London's (TfL) comments in relation to the proposed Pears Building at the Royal Free Hospital (planning ref: 2014/6845/P).
- 2. A Transport Assessment was submitted as part of the planning application package. This included a Travel Plan and Parking Strategy. The Transport Assessment was produced in line with guidance contained in the Department for Transport (DfT) publication 'Guidance on Transport Assessments' (March 2007), and best practice guidance outlined by Transport for London (TfL, 2010). The Travel Plan was produced to accord with TfL's 2013 document 'Travel Planning Guidance'.
- 3. The Pears Building will act as a small element of the overall healthcare facilities at the Royal Free Hospital, and would itself generate low levels of additional transport demand. As part of application there will be improvements and measures to encourage the use of non-car modes of transport (e.g. through an updated Travel Plan) that will be beneficial to all hospital users. However, it is neither feasible nor reasonable to expect this application to address all of the transport concerns associated with the hospital.
- 4. Comments received from TfL are presented in italics, with the response from Vectos below.

Car Parking

"The reduction in the overall number of [visitor/patient] spaces is welcomed and it is acceptable in this circumstance that a peak hour vehicle trip generation study is not included in the Transport Assessment. However, TfL is concerned that the Strategy includes the Hospital seeking alternative parking provision off-site employing park and ride [due to] "a reduction in parking spaces on site and no means to replace them." This will work against the benefits of the claimed parking reduction – for this particular part of the Hospital site – and the impacts on public transport"

There are two potential sites identified for park and ride (Brent Cross Shopping Centre and Morrisons car park in Camden) and the applicant envisages most people will use public transport from there, plus there may be a shuttle bus. This does not seem to be worked up in any detail in the application but TfL is concerned at the potential impact on public transport

- and traffic flows. Without more detailed discussion and impact assessment it cannot support the park and ride idea, nor of it being "promoted to staff, patients and visitors".
- 5. As a result of the development proposals there will be a reduction of 42 parking spaces across the Royal Free Hospital. Due to the nature of hospital travel, in that some patients will require the use of a vehicle to access the hospital site, there will be no net reduction in parking spaces for patient's/visitors. Spaces will be reallocated from staff to patient/visitors to ensure this is the case. Staff parking will be managed through a reduction in permits provided and through the Travel Plan.
- 6. As part of the Parking Strategy, the option of off-site park and ride facilities has been investigated. This will allow patients/visitors and staff who do not live near a public transport hub improved access choices, when before they would simply drive the full journey to the hospital. The park and ride facility has the potential to reduce traffic on the local highway network and relieve parking stress within the hospital.
- 7. Two potential sites have been identified for use where spare parking capacity could be utilised by Hospital staff, patients or visitors. These are:
 - Toys R Us at Brent Cross Shopping Centre; and
 - Morrisons, Chalk Farm.
- 8. Both sites provide easy access to the hospital via public transport, notably via the Northern Line to Belsize Park. The use of a shuttle bus between the sites has also been investigated. The numbers envisaged to use the park and ride facility will not be significant enough to cause capacity issues on the public transport network. Any potential impact will be offset by increased revenue for TfL. It is envisaged that there will only be a handful of shuttle bus trips between the Hospital and Park and Ride sites per day. The park and ride facility will be targeted only to those who live in locations where it is unfeasible to travel the entire journey via public transport.
- 9. Whilst firm details of the park and ride facilities are still being produced, discussions have been held with the car park operators and the principle of using these sites is considered acceptable to all parties. Discussions have also been held with Transport Officers at the London Borough of Camden, who welcome the production of a parking strategy that incorporates a park and ride facility.
- 10. As the parking strategy evolves, the Royal Free Charity would welcome further discussions with TfL to provide the best solution for any future park and ride facility.
 - "Whilst sympathetic to the hospital's concerns that the redevelopment does not create additional parking issues (and accepting that there is high demand for parking on-site and on local roads), the parking strategy should really be aiming for a site-wide reduction from the current large total of 415 parking spaces, particularly in respect of staff parking, which forms more than half of that total".
- 11. Parking provision across the site will reduce by 42 spaces as a result of the development proposals. As discussed, the main aim of the parking strategy is to ensure that the number of patient/visitor parking spaces is not reduced as a result of the proposals. This will be achieved by reallocating staff spaces. Therefore, the parking strategy does aim for a site-

wide parking reduction which will be focused on staff use. The parking strategy will utilise the following tools in order to free up sufficient staff spaces for reallocation to patient/visitor:

- Alternative parking provision two park and ride sites have been identified; Free shuttle buses will be provided
- Removal of permits except in extenuating circumstances this process is already underway; and
- Travel Plan.

"A campus-wide parking strategy is required, which should fit in with Travel Plan aims and targets but should form its own condition – it is suggested that prior to discharge further discussion on securing sustainable travel without harming the effectiveness and efficiency of the Hospital's operation"

12. The parking strategy appended to the Transport Assessment is aimed at the entire Hospital site. It will run in conjunction with the Travel Plan. It is expected that this will form a condition to the planning permission if granted.

Pedestrian and Cycle Access

"Pedestrian provision surrounding the site is mostly good and provides a good level of accessibility to public transport interchanges. However, the applicant has not acknowledged that there is heavy pedestrian use of Rowland Hill and substandard width of footways. The applicant should increase amenity and safety of these pedestrians (consisting staff and medical students walking to their dedicated hospital entrance) especially in view of the turning movements discussed below that this development will introduce to this relatively narrow service road. The applicant should consider setting back the building/wall line so as to facilitate this.

- 13. An existing footway exists adjacent to the link between Rowland Hill Street and Pond Street. This footway is being diverted slightly as a result of the proposals. As part of this slight diversion, the footway surface will be upgraded and widening will occur in places. The Pears Building will not in itself generate a significant increase in pedestrian movements. The improvements to the footway between Rowland Hill Street and Pond Street are in line with the scale of the proposed scheme.
- 14. Pedestrians using Rowland Hill Street to access the hospital are associated with the existing use of the wider hospital rather than the proposed scheme which is accessed from Hampstead Green Path and Pond Street. The net change in vehicle trips amounts to +19 in the AM peak and +3 in the PM peak which is a maximum of 1 additional movement every 3 minutes at worst. Given that this path serves existing hospital pedestrian traffic and the scheme will not make traffic conditions materially worse it is considered that it would not be reasonable to require improvements to the footpath from this proposed scheme.
- 15. Furthermore, the scheme has been designed to provide the level of accommodation required to secure all the public benefits associated with the new Institute and hospital

accommodation. Setting the wall of the building back would jeopardise the design and delivery of these benefits.

There are currently no formal cycle lanes provided either within the site, or within the vicinity. A number of local roads are designated as suitable for cycling by TfL Cycle Guide 4. Because the applicant has done little detailed work in the TA on assessing and identifying improvements to cycle access which would encourage an increase in cycling for staff, TfL may request funding for cycle accessibility improvements"

16. As part of the proposals, 56 secure cycle parking spaces will be provided which is above the maximum cycle parking standards that are set out by TfL, which sets out a requirement for 43 spaces. This is to encourage greater cycling by staff and visitors. The Pears Building itself will not generate a significant number of additional cyclists, with just approximately 17 two-way trips expected across a daily period. Therefore it is not considered appropriate for this development, which will generate few additional cycling trips, to address pre-existing issues. Notwithstanding the above, the Royal Free Charity is keen to improve cycling facilities across the site, and welcome any input from TfL and third parties.

Servicing

"A delivery and servicing management plan will be produced to coordinate deliveries and ensure that no more than one vehicle arrives at any one time; this should be conditioned"

17. It is expected that a delivery and servicing management will form a condition to the planning permission if granted.

Impact Assessment

- "...considering the nature of the use proposed, it is requested that the applicant undertakes an accessibility audit of the nearest pair of bus stops in accordance with TfL's guidance (http://www.tfl.gov.uk/cdn/static/cms/documents/accessibile-bus-stop-design-guidance.pdf)"
- 18. Given the scale of the development with only approximately 40 additional two-way bus trips over a daily period day, it is not considered reasonable to request an audit of the existing bus stops.
 - "To improve local wayfinding and in accordance with London Plan policy 6.10 Walking, TfL recommends that a contribution be sought from the applicant to introduce Legible London wayfinding signage in the local area".
- 19. The Royal Free Charity will be interested in further details into the Legible London proposals in the area before discussions on a possible contribution. As part of the proposals, the public realm at the junction of Rowland Hill Street and Hampstead Green Path will be improved which will aid wayfinding and provided clarity of the route to the hospital main entrance.

Travel Plan

"The applicant has submitted a draft Travel Plan, the content of which TfL has assessed using ATTrBuTE. This has failed the assessment and I have appended a summary of it for the applicant to work up for submission at the next stage".

- 20. A few minor amendments have been made to the Travel Plan to ensure its compliance with ATTrBuTE. The amended Travel Plan is included in **Appendix A** of this note as is the revised ATTrBuTE score.
- 21. Some aspects of ATTrBuTE are out of date since new TfL Travel Planning Guidance was introduced in 2013. For example, a section on Travel Plan policy is no longer required and, as such, was not included within the Travel Plan. Therefore, within the revised ATTrBuTE test, full marks have been awarded for this section.

Summary

22. This note has provided clarity and/or additional information in a response to comments from Transport for London. Following this, the conclusions of the Transport Assessment remain, in that there the development proposals are acceptable in transport terms.

APPENDIX A

Travel Plan and ATTrBuTE Summary



Royal Free Charity Developments Ltd

Pears Building

Hospital Travel Plan

October 2014



Contents

	Contentsi
1	INTRODUCTION1
	TfL Guidance1
	This Document2
2	SITE LOCATION AND ACCESSIBILITY
	Site Location3
	Accessibility by Non-Car Modes3
	Local Bus Services3
	London Underground Services4
	London Overground Services4
	Walking5
	Cycling6
	Summary6
3	BASELINE TRAVEL PATTERNS
4	OBJECTIVES AND TARGETS9
	Objectives9
	Targets10
	Action Targets10
	Aim Targets10
5	TRAVEL PLAN STRATEGY
	Management
	TPC Responsibilities
	Marketing Strategy14
6	MEASURES AND INITIATIVES
	Introduction15
	General Measures
	Walking15
	Cycling15
	Public Transport16
	Managing Car Use
	Parking Strategy17
	Encourage Mode Shift18
	Car Sharing18
	Other Measures



7	MONITORING AND REVIEW	20
	Monitoring	20
	Reporting	20
8	ACTION PLAN	22

Figures

Figure 1 - Site Location (Strategic Context)
Figure 2 - Site Location (Local Context)



1 INTRODUCTION

- 1.1 Vectos has been commissioned by the Royal Free Charity (RFC) to provide highway and transport advice in relation to proposals for the new Institute of Immunity and Transplantation Building at the Royal Free Hospital (the site), in the borough of Camden, London. The development will be known as the Pears Building.
- 1.2 The full address for the site is; Royal Free Hospital, Pond Street, London NW3 2QG
- 1.3 The Royal Free Hospital is situated on the B518 Pond Street in Hampstead, within the London Borough of Camden. The strategic location of the site is shown in **Figure 1**, whilst the site's location in respect of the local area is shown in **Figure 2**.
- 1.4 In line with their long term sustainability vision, the Royal Free Charity is seeking to ensure that the entire Hospital site is accessible for all staff, researchers, patients and visitors. Therefore, a Travel Plan was produced in 2006 and measures outlined in the document are still implemented today.
- 1.5 The main aim of this Travel Plan is to update the 2006 Travel Plan including objectives, measures and targets. This Travel Plan will put in place the management tools deemed necessary to enable the staff and visitors of the site to make more informed decisions about their travel, which at the same time minimises the adverse impacts of their travel on the environment. This is achieved by setting out a strategy for eliminating the barriers keeping staff and visitors from using sustainable modes which in effect can self-manage single-occupancy vehicle use.
- 1.6 This Draft Travel Plan has been prepared by Vectos in accordance with TfL Guidance 'Travel Planning for New Development in London' which was published in 2011. Once agreed with the London Borough of Camden, the Royal Free Charity will be responsible for taking the travel plan forward.

TfL Guidance

1.7 The 2013 TfL document "Travel Planning Guidance" sets out comprehensive advice in preparing and implementing development related Travel Plans across London. This guidance has been adhered to in the preparation of this Travel Plan.



This Document

- 1.8 This Draft Travel Plan has been written as a stand-alone document. Upon receipt of further information, for example staff travel survey results, it will contain all the relevant information needed to effectively implement and monitor the Travel Plan itself.
 - Section 2 Outlines the accessibility of the site
 - Section 3 Sets out the interim baseline travel patterns of the site.
 - Section 4 Sets out the objectives and targets of the Travel Plan
 - Section 5 Outlines the Travel Plan strategy including how it will be managed,
 - and marketing and consultation strategies
 - Section 6 Sets out the proposed measures and initiatives
 - Section 7 Outlines the monitoring and review programme
 - Section 8 Presents the Action Plan



2 SITE LOCATION AND ACCESSIBILITY

2.1 This section of the Travel Plan describes the existing characteristics of the Royal Free Hospital as a whole, with particular reference to the accessibility of the Hospital by non-car modes of transport.

Site Location

- 2.2 The Royal Free Hospital is situated on the B518 Pond Street in Hampstead, within the London Borough of Camden. It is the headquarters of the Royal Free London NHS Foundation Trust, and both clinical and administrative departments are based at the site. The hospital employees around 5,000 staff members, although approximately 3,000 are employed on a part time basis. The Hospital operates 24 hours a day and has an average of around 10,000 visitors per week and over half a million patients per annum.
- 2.3 The Royal Free Hospital site is bound by Pond Street to the north, Fleet Road to the east and Rowland Hill Street to the west and south.
- 2.4 The strategic location of the site is shown in **Figure 1** and in its local context in **Figure 2**.
- 2.5 The Hospital currently has 354 parking spaces, of which 190 spaces are provided for staff use, 148 spaces are provided for patient/visitor use and 16 spaces are non-Trust spaces. As part of on-going development proposals at the Royal Free Hospital, the number of parking spaces is due to decrease to 312 spaces in the future.

Accessibility by Non-Car Modes

Local Bus Services

- 2.6 A total of 12 bus stops are located within 400 metres of the site, which are served by 5 bus routes. Each stop provides shelter, seating and local travel information.
- 2.7 A summary of available bus services is shown in **Table 2.1** below and a plan indicating the location of the stops in the context of the site is presented at **Figure 3**.



Table 2.1 Local Bus Services

Service	Route	Average Service Frequency (minutes)		
Service	Noute	Weekday	Saturday	Sunday
24	Hampstead Heath – Camden Town – Trafalgar	6 – 8	6 – 11	8 – 11
24	Square – Victoria – Pimlico Lancaster Gate – Paddington – Hampstead – 11 Camden Town – Kings Cross – Holborn			
16	Lancaster Gate – Paddington – Hampstead –	11	10 – 15	15 – 20
40	Camden Town – Kings Cross – Holborn			
168	Hampstead Heath – Camden Town – Holborn –	6 – 8	6 – 12	10 – 15
108	Waterloo – Elephant & Castle			
268	Golders green – Hampstead – Belsize Park –	12	12 – 20	12 – 20
200	Swiss Cottage – Finchley Road			
C11	Brent Cross – Cricklewood – West Hampstead –	8	8 – 12	12 – 20
CII	Swiss Cottage – Hampstead Heath - Archway			

London Underground Services

- 2.8 Belsize Park Underground Station is located approximately 300 metres south of the Rosslyn Hill site access. This station is served by the Northern Line (Edgware Branch) which provides a high frequency service into central and southwest London, seven days a week.
- 2.9 Key destinations include Euston, Kings Cross St Pancras, Charring Cross, London Bridge, London Waterloo and Clapham.

London Overground Services

- 2.10 Hampstead Heath Station, operated by London Overground, is located approximately 270 metres from the Pond Street site access, and 450 metres from the Rosslyn Hill access.
- 2.11 The station is served by the Richmond/ Clapham Junction Stratford line. A summary of the first and last trains from Hampstead Heath, and a summary of average frequency are presented in **Table 2.2** and **Table 2.3** respectively.

Table 2.2 Hampstead Heath Overground Services (First & Last Train)

Destination	Monday – Friday		nation Monday – Friday Saturday		Sunday	
	First Train	Last Train	First Train	Last Train	First Train	Last Train
Stratford	06:08	23:33	06:07	23:28	09:10	23:26
Richmond	06:18	00:16	06:17	00:16	09:31	23:36



Table 2.3 Hampstead Heath Overground Services (Service Frequency)

Destination	Average Frequency	Average Frequency	Average Frequency
	Monday – Friday	Saturday	Sunday
Stratford	5 – 10	10	8 – 20
Richmond	6 – 10	10	10 – 15

Public Transport Accessibility Level (PTAL)

- 2.12 The PTAL rating of the development site is 5, although much of the wider Royal Free Hospital site has a PTAL of 4. A PTAL of 5 represents a 'very good' level of accessibility by public transport (based on the TfL PTAL scale).
- 2.13 The output from the TfL PTAL calculator is included at **Appendix A.**

Walking

- 2.14 Good pedestrian facilities are provided on streets surrounding the Royal Free Hospital.
 Footways of sufficient width are provided along both sides of Pond Street and adequate levels of street-lighting are provided. Dropped kerbs with tactile paving are provided at vehicle crossovers and formal Zebra crossings are provided at the junction with South End Road.
- 2.15 Wide footways are provided along both sides of Rosslyn Hill and again, dropped kerbs with tactile paving are provided at vehicle crossovers. Signalised crossings with dropped kerbs and tactile paving are provided at the junction with Pond Street, enabling pedestrians to cross the carriageway safely.
- 2.16 Within the Hospital grounds, a series of footways and zebra crossing points allow for good pedestrian access to the main Hospital. Footways are located along Rowland Hill Street and along the route from Pond Street. There is pedestrian access around the entirety of the Hospital via Rowland Hill Street. Pedestrian movements are low in areas, and this is reflected by a lack of pedestrian facilities.



Cycling

- 2.17 There are currently no formal cycle lanes provided either within the site, or within the vicinity. However, a number of local roads are designated as suitable for cycling by TfL Cycle Guide 4. A plan indicating recommended routes within the vicinity of the site is presented in Figure 4.
- 2.18 A total of 130 cycle parking spaces are located in various areas within Royal Free Hospital Site. The majority of these are Sheffield stands.
- 2.19 The Royal Free London NHS Foundation Trust has implemented a Cycle to Work scheme which involves giving staff tax breaks, so that staff members are able to purchase a bicycle through a salary sacrifice scheme.

Summary

2.20 The Royal Free Hospital is situated within a very accessible location, which is reflected by the high PTAL (5- 'Very Good'). There are a number of bus, Overground and Underground routes which combine to provide a variety of high frequency services to a number of destinations. Pedestrian provision surrounding the site is good, providing a good level of accessibility to these public transport interchanges and a range of local facilities.



3 BASELINE TRAVEL PATTERNS

- 3.1 This section will set out the interim baseline modal split for the site in order to allow targets for the travel plan to be made.
- 3.2 As part of the 2006 Travel Plan, a staff travel survey was undertaken in October 2006 and was distributed via the internal mail system or was available to download online. A total of 464 employees responded, representing a 10% response rate across the hospital. The majority of the respondents worked full time (68%) and almost a fifth stated that they worked part time (17%). A further 9% work flexible hours and 6% work fixed hour shifts.
- 3.3 The travel survey asked participants to state which mode of transport they usually use to travel to work and the number of days per week they used that mode. Following the initial baseline survey, a target mode split was produced, with the aim of achieving it by the end of the Travel Plan monitoring period (2011). The 2006 results of the survey and the 2011 target mode split are presented in **Table 3.1** below.

Table 3.1 – Staff Travel Survey Results and Target Mode Split

Mode	Observed Mode Split (2006)	Target Mode Split (2011)	Staff Members*
Train/Underground	36%	37%	1480
Bus	19%	20%	800
Car Driver (SOV)	5%	3%	120
Car Driver (Share)	3%	3%	120
Car Passenger	2%	2%	80
Park and Ride	7%	6%	240
Motorcycle/Scooter	2%	2%	80
Walk	18%	18%	720
Cycle	7%	8%	320
Other	1%	1%	40
Total	100%	100%	4,000

^{*} Based on 80% of staff being on site at any one time. As staff work shifts, it is common place that 20% are not on site. Trips are spread out across the day due to shift patterns.

3.4 It can be observed from the summary of 2006 survey results presented above that the majority of staff members use sustainable modes of transport to travel to/ from the site and just 5% drive to the hospital. By 2011, the target was to reduce the car driver mode split to 3%.



- 3.5 As part of this updated Travel Plan, an updated survey of staff travel patterns will be undertaken. This will be iTRACE/TRICS compliant, and will give up to date baseline information on the modal split for the site which can be a useful guide in the setting of new, realistic targets for modal shift over the life of the Travel Plan.
- 3.6 The staff survey will cover at least the following aspects:
 - Home location
 - Mode of transport to/from the development
 - Work patterns
 - Attitudes to use of non-car modes
 - Measures that would encourage use of public transport etc.
- 3.7 The modal share from the 2011 target, as outlined in Table 3.1 will be used to derive interim Travel Plan targets. If, after the baseline travel surveys have been carried out, it is found that the expected modal share is not accurate, the targets will be adjusted based on the actual modal share.



4 OBJECTIVES AND TARGETS

- 4.1 This section sets out the overarching objectives for this Travel Plan, as well as targets for the short and medium term. It includes indicators through which progress towards meeting the targets will be measured. Further information on monitoring and review of the Travel Plan can be found in **Chapter 6**.
 - Objectives are the high-level aims of the Travel Plan. They help to give the Travel Plan direction and provide a clear focus.
 - Targets are the measurable goals by which progress will be assessed. The Travel Plan sets out targets which the development will seek to reach within the period covered by this Framework Travel Plan. In addition, interim targets have been set.

Objectives

4.2 The Travel Plan's overriding objective is:

"To engage with and encourage staff and visitors to use more sustainable ways of travelling to / from the hospital through more effective promotion of active modes and public transport use. This will minimise the impact of the site and the proposed development on the surrounding highway network."

- 4.3 The sub-objectives are:
 - Sub-objective 1: To increase awareness of the advantages and availability of sustainable/ active modes of transport;
 - Sub-objective 2: To promote the health and fitness benefits of active travel to all users and improve the health and well-being of staff;
 - Sub-objective 3: To introduce a package of physical and management measures that will
 facilitate travel by sustainable modes; and therefore,
 - Sub-objective 4: To reduce unnecessary use of the car for the journey to and from the site and address parking and access at the hospital.



Targets

- Targets are measurable goals by which the progress of the travel plan will be assessed.
 Targets are essential for monitoring the progress and success of the travel plan. Targets should be 'SMART' Specific, Measurable, Achievable, Realistic and Time-related.
- 4.5 Targets come in two forms Action and Aim Targets. Action Targets are non-quantifiable actions that need to be achieved by a certain time, while Aim Targets are quantifiable and generally relate to the degree of modal shift the plan is seeking to achieve.

Action Targets

- 4.6 The key action targets are set out below:
 - Extend the brief of the current Transport Plan Co-ordinator, Frank Wuggening to manage the action targets list;
 - Launch the Travel Plan Hospital wide;
 - Complete an updated staff travel survey within three months of the launch of the Travel Plan;
 - Complete monitoring surveys on years 1, 3 and 5 on the anniversary of the baseline travel survey.
 - Monitoring survey will occur within one month of the anniversary of the updated baseline survey

Aim Targets

- 4.7 The aim targets of this Travel Plan are focused on staff employed at the hospital, although consideration will also be made to patients and visitors.
- 4.8 **Table 4.1** outlines the Aim Targets set out for the site. The targets are set to measure progress towards the main objectives over five years. This Travel Plan will seek to achieve interim targets within three years of the launch of the Travel Plan.
- 4.9 The baseline figures are taken from the interim modal split, as detailed in **Section 3**. This is based on previous travel surveys at the hospital and targets as set out in the 2006 Travel Plan. It should be acknowledged that the targets may change as a result of the initial baseline survey untaken upon the launch of this Travel Plan. They may also evolve over time as results



from on-going monitoring become available. This will be discussed with London Borough of Camden and TfL Travel Planning Officers.

4.10 The Travel Plan targets that form part of this Travel Plan are outlined below.

Table 4.1 - Travel Plan Targets

			Mode Split	
Target	Indicator	Baseline (Year 0)	Interim (Year 3)	Final (Year 5)
Staff				
Achieve a 1% reduction in the mode share for Car Driver	Modal Split monitoring surveys	3%	2%	2%
Achieve a 1% increase in the mode share for sustainable travel modes	Modal Split monitoring surveys	80%	81%	81%
Visitors				
Increase the awareness of public transport options available to access the site	Snapshot surveys	-	-	-
Increase the awareness of cycling and walking as viable options available to access the site	Snapshot surveys	-	-	-

- 4.11 The above target seeks to reduce car use by one third and shifting these car users onto sustainable modes of transport. Where possible, walking and cycling will be encouraged.
- 4.12 Given the transient nature of hospital visitors, no specific targets will be set for patients or visitors. However a range of measures will be implemented to encourage as far as possible the use of non-car transport modes to/from the site.
- 4.13 The primary purpose of the Travel Plan is to limit unnecessary or unsustainable car journeys (particularly those with single occupants) to and from the development. While increasing levels of sustainable modes are important, specific targets for these modes are not entirely necessary as car use reduction is the main objective.
- 4.14 The modal split will be amended once the updated iTRACE/TRICS compliant baseline travel survey has been undertaken. Targets will be finalised and written into the Travel Plan once



the travel surveys have been completed, the results analysed and discussions have been held with London Borough of Camden Travel Plan officers.

4.15 The Travel Plan Coordinator (see Section 5) will be responsible for populating the iTRACE database with the survey results, site details and subsequent results from the monitoring survey.



5 TRAVEL PLAN STRATEGY

Management

- 5.1 The Travel Plan Coordinator (TPC), Frank Wuggenig is responsible for managing the day-to-day running of the Travel Plan. The TPC role is supported by senior management who provide access to employer specific information and tools to assist with the implementation of measures, undertaking monitoring surveys as well as avenues for the provision of information to staff members regarding the Travel Plan and sustainable travel options.
- 5.2 The TPC role is also supported by two Travel Plan Champions. The role of the Travel Plan Champion is to assist with the preparation of the Travel Plan and disseminate information to staff members.
- 5.3 It should be noted that the TPC undertakes the management of the Travel Plan in addition to their normal duties. The TPC will be allowed the time necessary to enable this Travel Plan to achieve its objectives.
- 5.4 It is expected that upon implementation of the Travel Plan and during monitoring and reporting times the TPC will be busiest and may need to spend more time on the Travel Plan. It is also expected that as the Travel Plan progresses the level of input required by the TPC will reduce.

TPC Responsibilities

- 5.5 The TPC is responsible for the administration of the Travel Plan, the implementation of measures, and for the on-going monitoring and review of the Travel Plan.
- 5.6 The TPC will report to management regarding the implementation and progression of the Travel Plan.
- 5.7 Administration of the Travel Plan will involve the maintenance of the necessary systems, data and paperwork, consultation and promotion associated with the implementation of the Travel Plan. The duties are permanent and regular updating of the Travel Plan document is part of the responsibility of the nominated persons.



- A filing system will be established and maintained, for recording all correspondence relating to the Travel Plan, the results of periodic monitoring and the results of each review (see **Section 7**).
- 5.9 As noted above, the TPC will also be responsible for populating the iTRACE database.

Marketing Strategy

- 5.10 Marketing and awareness raising strategies will both engage with staff and raise the profile of different travel options, including the benefits of more sustainable or efficient travel. In order to maximise the success of the strategies whilst optimising resources, it is considered effective to tailor the campaigns to those who would be most receptive, such as those living on high frequency public transport routes or those within walking distance of the site.
- 5.11 Staff at the Hospital will be made aware of the existence of the Travel Plan upon the commencement of their employment. The details of the Travel Plan, its objectives in enhancing the environment and the role of individuals in achieving the objectives of the Travel Plan will be explained upon acceptance of job offers and noted in job interviews or similar. The existence of the Travel Plan and its purpose will also be communicated to existing staff.
- 5.12 Contact details of the TPC will be advertised in the event that staff wish to discuss specific matters directly.
- 5.13 The following could be used as a means of disseminating information to staff to promote events/campaigns/promotions/services/initiatives:
 - Travel Plan Champion
 - Staff notice boards
 - Payslips
 - Staff Newsletters
 - Induction pack



6 MEASURES AND INITIATIVES

Introduction

6.1 This section of the Travel Plan outlines the specific physical and management measures to be implemented as part of the Travel Plan. The implementation of the listed measures, which include awareness initiatives and infrastructure provision, is the core of the Travel Plan. The timescales for the implementation of the measures is outlined within the Action Plan at the end of this document. The Action Plan also identifies who is responsible for implementing each measure.

General Measures

Walking

- 6.2 The TPC will report the results of the travel survey to the LB Camden and will liaise with the Travel Plan Officer to establish the potential for improvements to existing off-site facilities. In addition, the TPC will:
 - Provide staff patients and visitors with information and advice concerning safe walking routes to the site;
 - Promote the availability of lockers, showers and storage areas that can be used by pedestrians;
 - Negotiate discounts on footwear/ accessories;
 - Provide pedometers to staff that live within two miles of the hospital;
 - Develop marketing materials to highlight the health benefits of walking to work and explore the possibility of using such schemes as '10,000 steps a day campaign.'

Cycling

- 6.3 The TPC will report the results of the travel survey to the Cycling Officer at LB Camden/TfL and will liaise with Officers to establish the potential for improvements to existing off-site facilities. They will also:
 - Promote the health benefits of cycling to staff



- Ensure staff are aware of the pool bikes, lockers, storage and shower facilities available for use;
- Seek to ensure that cycle routes are appropriately maintained through regular dialogue with the Borough Cycling Officer;
- Raise awareness of the 'tax breaks for bikes' initiative which allows staff to purchase a bicycle as part of a salary sacrifice scheme, saving up to 40%;
- Explore with local bicycle retailers the possibility of providing discounts on cycling equipment to staff, the take-up of which would be monitored;
- Explore the possibility of social cycling events, for example lunch time or after work cycle rides or participation in national or local events;
- Investigate demand for cycle training and facilitate its provision if sufficient demand is shown;
- Determine whether there is sufficient demand for a Bicycle User Group and facilitate its creation if demand is shown.
- As part of the development of the Pears Building, 56 additional cycle parking spaces will be provided. This will include showers, lockers and changing facilities.

Public Transport

- 6.5 Up-to-date details of bus, train and taxi services, including route information and service frequencies, will be permanently on display in communal areas within the site. Details of National Rail and TfL Journey Planner websites and enquiry phone numbers will also be displayed.
- 6.6 The TPC will promote the availability of public transport season ticket loans, which allow staff to benefit from the cost savings associated with a season ticket, whilst paying in monthly instalments taken directly from their salary.
- 6.7 They will also liaise with TfL to ensure that issues periodically raised by staff and visitors are considered, for example, extension of services in mornings and evenings where services could be perceived to be lacking.
- 6.8 All staff upon commencement of their employment will be provided with Travel Packs. These will include the following information:



- Name and contact details of the TPC
- An introduction to the Travel Plan, its purpose etc, and a summary document
- Public transport information (including bus and underground services)
- Information regarding season ticket loans
- Any hospital policy related to travel
- Cycling and walking maps for the local area
- Details of any cycle discounts
- Local taxi company details

Managing Car Use

Parking Strategy

- As a result of the reduction in parking supply due to development proposals at the Royal Free Hospital, a comprehensive parking strategy will be implemented at the Hospital. Where possible, the loss of parking will be focused on staff rather than patient/visitors. The parking strategy that is shown in full in **Appendix B**.
- 6.10 The main aim of the parking strategy is to encourage modal shift away from the private vehicle in order to reduce the demand for parking across within the Hospital site. Four methods will be applied to achieve the aim of the strategy:
 - Reallocation of spaces Part of the south car park, which is currently used by staff only will be reallocated to patients and visitors.
 - Alternative Parking Provision Two locations are being investigated as potential sites for a park and ride into the hospital. The sites are Brent Cross Shopping
 Centre and Morrisons in Chalk Farm. Both sites are within walking distance of the Northern Line on the London Underground Network, which provides direct access to Belsize Park, the closest station to the Royal Free Hospital. As shuttle bus will also be provided to transport staff, patients and visitors to the hospital.
 - Demand Management review of staff permits will be undertaken, to identify
 where savings can be made. Staff members who can get to the hospital via
 alternative means will be requested to give up their right to a permit.



• Travel Plan – This Travel Plan aims to encourage and incentivise staff members, patients and visitors to travel to the Hospital by non-car modes. This will reduce car parking demand throughout all car parks.

Encourage Mode Shift

- 6.11 The TPC will encourage staff to use sustainable modes of transport as well as discouraging the car travel so that staff are aware that there are viable alternatives available. The TPC will be responsible for promoting the following car parking management measures:
 - Encourage the use of smarter working techniques to reduce the need to travel on
 Trust business;
 - Encourage the use of sustainable modes of travel and highlight where there are benefits over the private car;
 - Raise awareness of the impact of car use;
 - Consider increasing car parking charges for staff in line with the cost of public transport.

Car Sharing

6.12 Car sharing schemes are more likely to be successful on a long term basis when there is a high demand from staff. The TPC will therefore investigate the potential to form a car sharing database with other organisations such as Camden PCT and UCL Medical School. The TPC will also promote existing car sharing databases such as Liftshare (https://london.liftshare.com/).

Other Measures

- 6.13 Travel Awareness type measures should play a key part of the Travel Plan, there are a number of ways that this can be achieved however, the list below is for example only and not a requirement:
 - Personalised travel information provided for those that request it;
 - Consider the feasibility of offering staff a compressed working week to reduce the need to travel to/ from the site five days per week;
 - Investigate the feasibility of home-working for certain members of staff;



 Commuter Challenges – finding the quickest mode for the journey to work with a number of staff using various modes leaving from one or more common destinations.



7 MONITORING AND REVIEW

Monitoring

- 7.1 The Travel Plan will be monitored on a three year cycle, and reviewed annually on the anniversary of the initial baseline travel survey. This survey will follow the established TRICS survey methodology to ensure its compatibility with iTRACE (the Travel Plan project management tool used by London Borough's).
- 7.2 As noted in Section 3, the baseline travel survey will be undertaken in upon the launch of the Travel Plan. This baseline survey represents the start of the Travel Plan for monitoring purposes and is known as Year 0.
- 7.3 The final monitoring survey will be undertaken at Year 5. At the completion of this 5 year cycle the Travel Plan will be completely reviewed.
- 7.4 Additional monitoring of comments received by staff/patients and visitors on the operation and implication of the Travel Plan will also be monitored. This is useful in judging whether the implementation or proportion of certain measures needs to be modified.
- 7.5 Information gathered through the monitoring process will be recorded for input to the annual review (outlined below). The information will be made available to officers at the London Borough of Camden.

Reporting

7.6 The TPC will compile a Review Report each year outlining the results of the annual review.

The report will also incorporate the results of on-going monitoring throughout the preceding period. The report will be issued to London Borough of Camden upon completion.



Funding

7.7 Funding for the monitoring programme of the Travel Plan will be provided for the Royal Free London NHS Foundation Trust.



8 ACTION PLAN

- 8.1 The Action Plan outlined below in **Table 8.1** sets out the measures included within the Travel Plan that are directed at influencing staff travel.
- **8.2** The Action Plan will be revised annually following each Travel Plan Review.



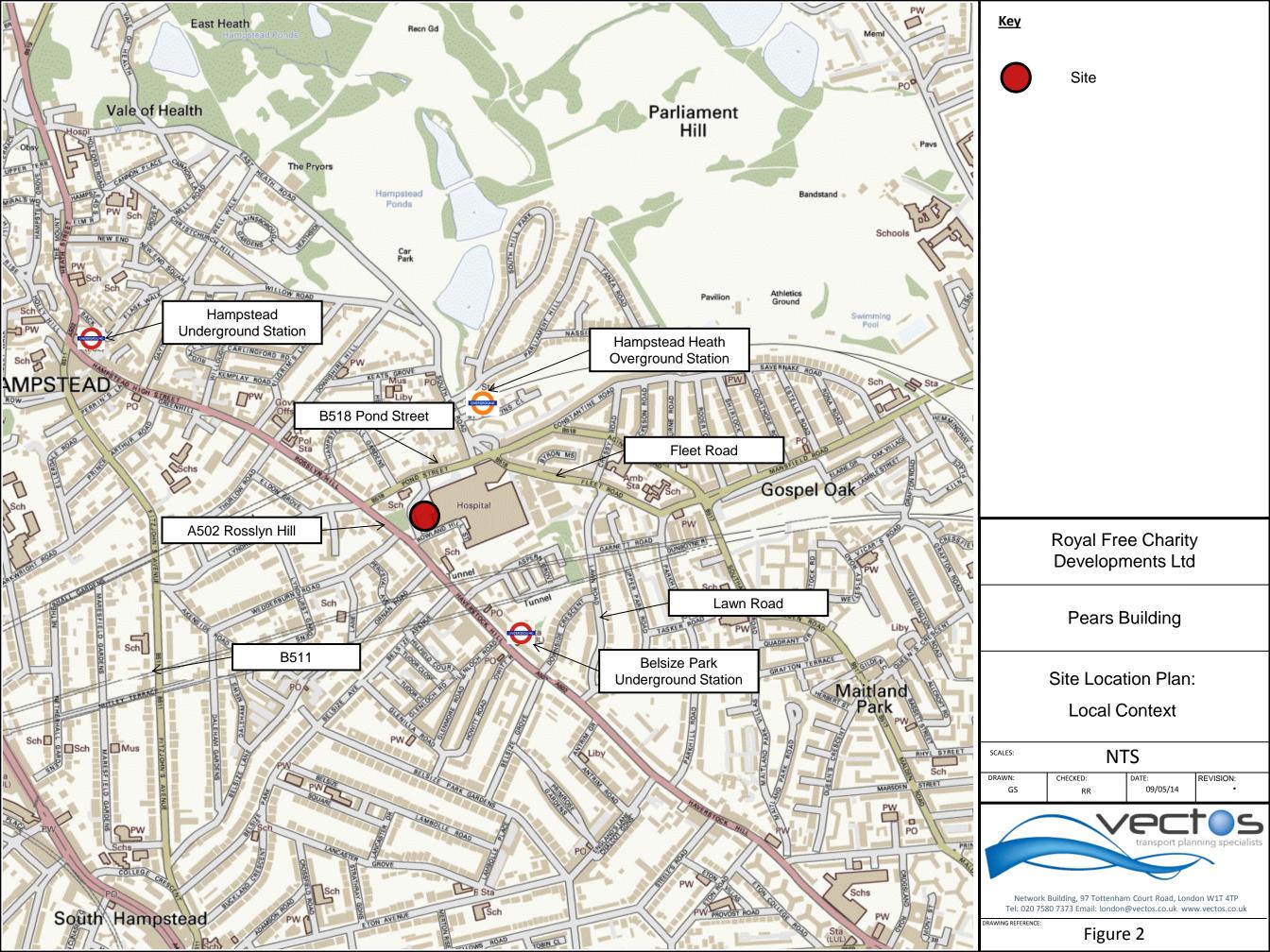
Table 8.1 Action Pla	an for Travel Plan Measures					
Measures	Notes	Timescales	Method of Monitoring	Responsibility		
nformation Provision	nformation Provision					
Sustainable Travel Notice Board	The Sustainable Travel Notice Board will outline the sustainable options for travelling to the site for both staff and visitors	Upon completion of new unit. Ensure existing units provide noticeboards	N/A	TPC		
Personalised Travel Planning Sessions for staff	The TPC will offer travel planning services at induction sessions for staff	When necessary upon recruitment	The TPC will keep a record of which staff have utilised the service as well as the nature of the service (group, one on one).	TPC		
Provide staff with information regarding walking and cycling routes, public transport accessibility, facilities such as lockers, showers and the availability of staff pool bikes	This information will be provided on communal staff and visitor notice boards as well as being disseminated through newsletters, emails etc Travel packs will also be provided for new staff at the unit	Ongoing and updated when necessary	N/A	ТРС		
Cycling						
Negotiate a discount on bicycles and accessories	TPC to contact local cycle providers and negotiate discounts	When possible	TPC to monitor uptake of discount	TPC		
Encourage cycling through awareness events such as National Bike Week and promoting the health benefits associated with cycling	Events to be promoted by email and notices in prominent locations. The Travel Plan Champion will also assist with promoting these events	Ongoing promotion of health benefits, events occur on an individual basis	TPC to monitor uptake	TPC		
Cycle Parking	An additional 56 spaces and associated showers, lockers and changing facilities will be provided as part of the development of the Pears Building	Upon completion of development	N/A	TPC		
Continue the Bicycle User Group	Group of interested cyclists to promote and improve cycling for staff	On-going	Report back to the TPC and activities to be included in the monitoring reports	TPC		



Table 8.1 Action Pla	an for Travel Plan Measures			
Walking				
Negotiate a discount on footwear and accessories	TPC to contact local providers and negotiate discounts	When possible	TPC to monitor uptake of discount	TPC
Provide pedometers to staff living within two miles of the hospital	Encourage staff to measure how many steps they walk per day to	Ongoing	N/A	TPC
Health benefits of walking to be promoted (10,000 Steps a Day)	Promoted in conjunction with the organisation of walk to work days	Spring and Summer (annually)	NA	TPC
Public Transport				
Promote availability of public transport season ticket loans	Information disseminated through noticeboards, emails, travel packs and through the Travel Plan Champion	Ongoing	TPC to monitor uptake	TPC
Managing Car Use				
Implementation of Parking Strategy	Parking Strategy to mitigate against reduction in parking supply	Ongoing	TPC, permit provision	TPC
Encourage the use of smarter working techniques	Includes video conferencing, conference calls etc. This should reduce the need to travel on Trust business	Ongoing	Include questions regarding business travel in staff surveys	TPC
Explore the potential to restrict the use of parking permits	Permits provided based on whether a car is essential for undertaking Trust business	When possible	As part of parking strategy	TPC
Consider increasing car parking charges in line with the cost of public transport	To improve the perceived benefits of public transport	When possible	TPC to collect feedback from staff members and monitor staff car parking levels	TPC
Other				
Staff commuter challenges	Race to find out which mode of transport will be fastest to reach the workplace	Upon commencement of the Travel Plan	TPC to monitor participation and interest	TPC
Investigate the feasibility of compressed working weeks and home working	Reduce the number of journeys staff are required to make to/ from the site. The TPC should liaise with management to ensure this could be a feasible option	When possible	TPC to monitor uptake and interest	TPC

FIGURES





ATTrBuTe

Travel plan name	Royal Free Hospital
Planning application reference number	2014/6845/P
Name of travel plan author	Robert Roughan, Vectos
Email address of travel plan author	robert.roughan@vectos.co.uk
Telephone number of travel plan author	0207507373
Name of travel plan assessor	Robert Roughan
Job title/role of travel plan assessor	
Plan Type	Strategic level Full Travel Plan (occupiers known)

The development		3/3
Does the travel plan include a) full address of the development? b) contact details for the person responsible for preparing the travel plan?	Address is included at paragraph 1.2. Contact details for Vectos are on the front cover.	2
Does the travel plan include details of the number of users expected on site (including employees, residents, deliveries and visitors)?	Paragraph 2.2	1
Policy		2/2
Does the travel plan include reference to relevant national, regional and local / borough a) transport and spatial policy? b) travel planning guidance?	Since the introduction of TfL's most recent travel plan guidance (November 2013) a policy section is no longer required as part of a Travel Plan. Therefore, full marks have been given for this section, as it should no longer form part of the ATTrBuTE Test	2
Site assessment		5/5
To what extent does the travel plan clearly describe the accessibility and quality of a) existing transport networks? b) existing travel initiatives available to all users?	NONE	5
Surveys		2/3
Does the travel plan propose the following? a) TRAVL compliant site user travel and freight surveys? b) an agreed date with the borough for the surveys to take place?	Date will be agreed upon implementation of Travel Plan	1

Is a baseline modal split (actual trip numbers and percentage of all trips) estimated for the site?	Table 3.1	1
Objectives		2/3
Does the travel plan include objectives which reflect a) Mayoral policy & strategic guidance? b) local / borough policy and guidance? c) the challenges and opportunities specific to the site?	NONE	2
Targets		2/2
Are there targets linking directly to each objective?	Set in Section 6	1
Have targets been set for three and five years after occupation?	Table 4.1. 4.12 Given the transient nature of hospital visitors, no specific targets will be set for patients or visitors. However a range of measures will be implemented to encourage as far as possible the use of non-car transport modes to/from the site.	1
TP Co-ordinator		3/3
Has a travel plan co-ordinator been identified or is there agreement upon when a co-ordinator will be in place?	NONE	1
Have the travel plan co-ordinator roles and responsibilities been made clear; and is the amount of time they will spend on the plan sufficient?	NONE	2
Measures		8/8
Is an action plan provided which includes a) short / medium / long term actions? b) timescales and responsibilities?	NONE	2
To what extent do the measures a) support the objectives of the travel plan? b) reflect the context of the site?	NONE	6
Monitoring		2/2
Is it clear who is responsible for monitoring?	NONE	1
Is a clear monitoring programme that adheres to the standardised approach included?	NONE	1
Securing and enforcement		1/1
Is it clear how the travel plan will be secured?	NONE	1
Funding		6/6
Have funding streams been identified for the	NONE	3

a) travel plan co-ordinator post? b) measures? c) monitoring programme?		
Has a sufficient budget been set for the a) travel plan co-ordinator post? b) measures? c) monitoring programme?	NONE	3
Total - PASS		36