

# West Cumberland Hospital & Cumberland Infirmary

2014 to 2017 Travel Plan

December 2014









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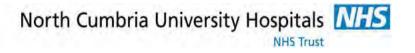
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## 1. Introduction







## 1 INTRODUCTION

## 1.1 Introduction

- 1.1.1 A Travel Plan provides a strategy for managing travel demand and involves a dynamic process of implementation, monitoring and review. It is a package of practical measures with the aim of improving access by all modes of travel, improving choices for everyone. The underlying aim of any Travel Plan is to minimise the number of single occupancy vehicle (SOV) car trips generated by encouraging a shift to more sustainable modes of transport, thereby mitigating the negative impacts of travel.
- 1.1.2 AECOM has been commissioned by North Cumbria University Hospitals NHS Trust (NCUH) to prepare an updated Travel Plan. This Travel Plan provides a framework of objectives and targets for the West Cumberland Hospital and Cumberland Infirmary. The toolkit of measures proposed are sufficiently flexible to meet the needs of the hospital and deliver tangible benefits to facilitate staff and visitor travel to and from the hospitals by sustainable modes of travel.
- 1.1.3 North Cumberland University Hospital NHS Trust (NCUH) serves a population of 340,000 and provides services across Cumbria from two hospitals, the West Cumberland Hospital and the Cumberland Infirmary. Each year the Trust treats more than 400,000 patients, of which 147,000 are follow up patients and 75,000 are treated in Accident and Emergency
- 1.1.4 West Cumberland Hospital has 207 available beds on site, whilst Cumberland Infirmary has 444 available beds. Activity at both hospitals has varied year on year with attendance numbers increasing in 2012/13. The table following illustrates the combined activity on a yearly basis for the West Cumberland Hospital and the Cumberland Infirmary.

Table 1.1: North Cumberland University Hospital NHS Trust Admissions

Admission Type	2010/11	2011/12	2012/13
A & E Attendances	71,414	72,474	75,385
Day Cases	29,385	27,479	28,216
Elective Admissions	7,842	7,584	7,167
Non–Elective Admissions	36,318	36,585	33,286
New Outpatients	71,560	67,010	65,646
Follow-Up Patients	168,510	151,145	147,942
Outpatient Procedures	43,038	58,151	67,475
Total	428,067	410,428	425,117

**1.1.5** The Trust employs 4,054 staff split across the different sites of the Trust as follows:







Table 1.2: North Cumberland University Hospital NHS Trust Staff

	Full Time	Part Time	Total
Cumberland Infirmary	1,423	1,218	2,641
West Cumberland Hospital	689	684	1,373
Other community Hospitals	6	34	40
Total	2,118	1,936	4,054

**1.1.6** The NCUH Trust is teaching hospital Trust which trains doctors, nurses and other health professionals in partnership with the University of Cumbria and the Northern Deanery.

## 1.2 Purpose of the Travel Plan

1.2.1 North Cumbria University Hospitals NHS Trust is committed to promoting sustainable access to its hospitals as a means to enhance accessibility for staff and visitors. The objective of this report is to amalgamate and update the existing Travel Plan documents and provides a holistic plan which encapsulates the West Cumberland Hospital Travel Plan 2011 – 2013, new staff survey information from Cumberland Infirmary, alongside 2014 Staff travel survey data, and 2014 Patient and Visitor survey data covering the period up to 2017. This Travel Plan will be a 'living document' and as such will be subject to continuous review. The NCUH is committed to pursuing opportunities to develop best practice and this is reflected within the content of this document.

## 1.3 Benefits of the Travel Plan

- **1.3.1** The main benefits that can be expected from the Travel Plan are as follows:
  - Being an environmentally responsible institution and satisfying planning requirements;
  - Services that are easier to access by all forms of transport, reducing anxiety and frustration;
  - Increased availability of parking spaces for those who cannot use alternative modes;
  - Being a better neighbour to the surrounding community;
  - Reducing CO2 emissions to deliver on sustainability commitments; and
  - Health benefits to staff and visitors, by an increase in exercise and reduced conflicts between traffic and pedestrians.

## 1.4 History of Travel Planning at West Cumberland Hospital and Cumberland Infirmary

- 1.4.1 A 2011 2013 Travel Plan was produced for the West Cumberland Hospital to support the planning application for the redevelopment of the existing hospital and the provision of associated additional car parking. A staff travel survey was incorporated within the 2011 Travel Plan, with the results indicating that a proportion of staff work and travel between the Trusts sites. This application was approved in August 2011.
- **1.4.2** The hospital building is due for completion in July 2015 but is subject to Planning Conditions relating to the delivery of the Travel Plan. The approval notice dated August 2011 supplies a series of conditions which state,

The approved Travel Plan shall be implemented in full in a timetable to agreed in writing with the Local Planning Authority. The approved Travel Plan shall continue to be implemented as long as any part of the







development is occupied.' Reason, 'In the interests of highway safety and to aid the delivery of sustainable transport objectives.'

'An annual report reviewing the effectiveness of the Travel Plan and including any necessary amendments or measures shall be prepared by the developer / occupier and submitted to the Local Planning Authority for approval in writing. Reason: In the interest of highway safety and to aid the delivery of sustainable transport objectives'.

1.4.3 To date Cumberland Infirmary, in Carlisle has not had a Travel Plan or any up to date surveys, therefore this report has been designed to encompass and present the results of the both sites. This is to ensure that the travel patterns of both sites are captured within the analysis, and that increasing levels of inter-site travel between both hospital sites, are considered.

## 1.5 Travel Plan Structure

- 1.5.1 Following this introductory chapter this Travel Plan comprises of 12 chapters in the following structure:
  - Chapter 2 identifies the policy context concerning the West Cumberland Hospital and Cumberland Infirmary;
  - Chapter 3 summarises the existing conditions at each of the Hospitals;
  - Chapter 4 reviews the accessibility of the West Cumberland Hospital and Cumberland Infirmary in Carlisle;
  - Chapter 5 provides an assessment of current parking conditions and policies, as well as staff and visitor parking charges;
  - Chapter 6 provides information on progress of the Travel Plan to-date;
  - Chapter 7 presents the results of the 2014 staff travel survey;
  - Chapter 8 presents the results of the 2014 patient and visitor travel surveys;
  - Chapter 9 examines the carbon emissions generated by the Trust using the results from the 2014 Staff & Patient Visitor survey;
  - Chapter 10 details the Travel Plan aims, objectives and targets;
  - Chapter 11 outlines the Travel Plan measures,
  - Chapter 12 presents a monitoring and marketing strategy; and
  - Chapter 13 provides a summary and signed commitment to the Travel Plan.



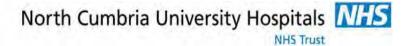




## 2. Policy Context







## 2 POLICY CONTEXT

## 2.1 Introduction

- 2.1.1 This section of the Travel Plan considers the key transport related strategies and policies at national and local level that relate to the NCUH. The key relevant policy documents that have been reviewed include:
  - NICE Guidance PH41:Walking and Cycling: Local Measures to Promote Walking and Cycling as Forms of Travel or Recreation (2012);
  - National Planning Policy Framework (2012);
  - Government White Paper 'Creating Growth, Cutting Carbon Making Sustainable Local Transport Happen (2011):
  - Department of Health 'Health Technical Memorandum 07/03: Transport Management and Car Parking (2006);
  - NHS Carbon Reduction Strategy 'Saving Carbon, Improving Health (2009) & Update (2010);
  - Cumbria and Lake District Join Structure Plan 2001 2016;
  - Cumbria Transport Plan Strategy 2011 2026;
  - Copeland Local Plan 2001 2016;
  - Carlisle Local Plan 2001 2016.

## 2.2 National Policy

National Institute for Health and Care Excellence (NICE) Guidance: 'PH41: Walking and Cycling: Local measures to promote walking and cycling as forms of travel or recreation'.

- 2.2.1 The NICE Guidance PH41 was introduced in November 2012 and provides guidance on how people can be encouraged to increase the amount they walk or cycle for travel or recreation purposes. The guidance is to be used as a tool to assist local authorities, the NHS, developers, employers and those involved in producing travel / sustainability plans to achieve targets for public health, congestion and noise / air pollution.
- **2.2.2** The guidance provides a number of recommendations that should be implemented in order to encourage people to walk and cycle, these include:
  - High level support from the health sector;
  - Ensuring all relevant policies and plans consider walking and cycling;
  - Developing programmes;
  - Personalised Travel Planning;
  - Community wide walking programmes; and
- NICE National Institute for Health and Care Excellence
- Providing individual support, including the use of pedometers.
- **2.2.3** With regards to employers, the Guidance recommends that employers should:
  - Develop strategies to promote walking and cycling in and around the workplace which should be in line with existing local and national initiatives;
  - Liaise with local authority transport departments to improve walking and cycling access to the workplace;







- A travel representative should be assigned to promote and develop schemes that encourage sustainable travel including cycle to work schemes, walking groups and bicycle user groups; and
- Provide site specific information for walking and cycling routes to / from work, including maps and safety information.

### The National Planning Policy Framework

- 2.2.4 The National Planning Policy Framework (NPPF) was published on 27 March 2012, replaced all previous Planning Policy Guidance (PPGs) and Planning Policy Statements (PPSs). The new national policy maintains the emphasis on providing a transport system balanced in favour of sustainable transport modes, giving people a real choice. The NPPF promotes sustainable transportation modes and requires that all developments should maximise efficiency with regards to the movement of people and traffic.
- **2.2.5** The NPPF advises that development plans and opportunities should take into account whether:
  - The opportunities for sustainable transport modes have been taken up depending on the nature and location of the site, to reduce the need for major transport infrastructure;
  - Safe and suitable access to the site can be achieved by all people;
  - Improvements can be undertaken within the transport network that cost effectively limits the significant impacts of the development.
  - The NPPF states that all developments which generate significant amounts of movements should be required to provide a Travel Plan as this will assist with the following:
  - Accommodate the efficient delivery of goods and supplies;
  - Give priority to pedestrian and cycle movements, and have access to high quality public transport facilities;
  - Create safe and secure layouts which minimise conflicts between traffic and cyclists or pedestrians, avoiding street clutter and where appropriate establishing home zones;



- Incorporate facilities for charging plug-in and other ultra-low emission vehicles; and
- Consider the needs of people with disabilities by all modes of transport.

## Transport White Paper – 'Creating Growth, Cutting Carbon – Making Sustainable Local Transport Happen'

- 2.2.6 The Government's strategic policy on transport is set out in the Transport White Paper 'Creating Growth, Cutting Carbon Making Sustainable Local Transport Happen'.
- 2.2.7 It is stated that the White Paper "forms part of our overall strategy to tackle carbon emissions from transport. It sets out what the Government believes is the best way in the short term to reduce emissions at the local level,... principally by encouraging people to make more sustainable travel choices for shorter journeys. This White Paper is about providing the early reduction in carbon emissions that local action is best placed to deliver, while facilitating the access to local jobs that will boost economic growth".









- **2.2.8** With priority to "Encourage sustainable local travel and economic growth by making public transport and cycling and walking more attractive and effective, promoting lower carbon transport and tackling local road congestion".
- 2.2.9 The North Cumbria University Hospitals NHS Trust will encourage the use of non-car modes of travel and reduce the need of travel through its location in respect to local amenities and the measures adopted through the Travel Plan.
- 2.2.10 The White Paper states in the Executive Summary that "two-thirds of all journeys are under five miles many of these trips could be easily cycled, walked or undertaken by public transport. We want to make travelling on foot, by bike or on public transport more attractive. Our work indicates that a substantial proportion of drivers would be willing to drive less, particularly for shorter trips, if practical alternatives were available (British Social Attitudes Survey, 2009). That is what this White Paper is about offering people choices that will deliver that shift in behaviour, in many more local journeys, particularly drawing on what has been tried and tested".

### Department of Health 'Health Technical Memorandum 07/03: Transport Management and Car Parking

- 2.2.11 The Department of Health *Technical Memorandum 07/03: Transport Management and Car Parking* was published in February 2006 and identifies the measures that NHS trusts can adopt when developing Travel Plans and managing transport and car parking.
- 2.2.12 This document examines the policies which have contributed to the current conditions of the transport network and the relationship they have on the healthcare industry. The guidance provides assessment tools and best practice information which should be implemented by NHS trusts when producing Travel Plans.
- **2.2.13** The guidance recommends that NHS Trusts can address any transport related issues by ensuring that:
  - Patients, visitors and staff can safely and easily access the sites; and
  - The effects of their actions with respect to transport do not have an adverse effect upon the environment and the health of the population that they serve.
- **2.2.14** Guidance is provided on how NHS Trusts should produce Travel Plans and it is recommended that the following key topics should be addressed:
  - Staff transport to and from work;
  - Staff transport in the course of work;
  - Patient and visitor travel and access to Trust sites;
  - Public transport availability;
  - Use and type of fleet vehicles;
  - Deliveries and contractors:
  - Peripatetic / community visits;
  - Travel and subsistence rates to be reimbursed, and rewarding small-engine cars or











cycle mileage; and

The needs of disabled people with a physical, mental and / or visual impairment, and the needs of patients, staff or visitors accompanied by young children.

### NHS Carbon Reduction Strategy 'Saving Carbon, Improving Health (2009) & Update (2010)

- 2.2.15 The NHS has developed a strategy (implemented in 2009) that seeks to reduce its 2007 carbon footprint by 10% by 2015 in line with the Government's Climate Change Act. Within the NHS 18% of all the CO2 emitted in a year is from travel. For this reason, the NHS Carbon Reduction Strategy has identified some key actions regarding travel that all NHS hospitals should implement to reduce emissions from travel. These include the following:
  - All Trusts should have a board approved active Travel Plan as part of their Sustainable Development Management Plan;
  - The NHS should consider introducing a flat rate for business mileage regardless of engine size or even modal option (car, cycle and foot); and
  - Mechanisms to routinely and systematically review the need for staff, patients and visitors needs to be established in all NHS organisations.

### 2.3 Regional Policy

2.3.1 To establish the Hospitals' compliance with current sub-regional planning policy the following sections will review the relevant policies from the 'Cumbria and Lake District Joint Structure Plan 2001 – 2016'.

### Cumbria and Lake District Joint Structure Plan 2001 - 2016

- 2.3.2 In April 2006, this document was formally adopted providing strategies and policies for developments and use of land within Cumbria County Council and the Lake District National Park Authority. Both authorities are responsible for the strategic planning of their respective area, a joint Structure Plan has been prepared to ensure that planning is co-ordinated for the whole county.
- **2.3.3** The plan identifies policies for Barrow-in-Furness and other key service centres in the West Cumbria area. *Policy ST10*: Furness and West Cumbria identifies the following measures to be promoted for service centres:
- Planning Cumbria
- The highest priority will be given to measures that secure regeneration;
- Opportunities will be promoted to sustain and enhance employment, secure investment, develop social and community facilities and support the role of town centres; and
- There is a need for development and regeneration in to diversify and improve the quality of life in towns such as Barrow-in-Furness, Maryport and Whitehaven.

Policy L56: Health, Education and Training Facilities







- 2.3.4 The Structure Plan promotes access to health facilities alongside training and education services to ensure retention of young people within Cumbria, attract inward investment and promote confidence across the region. The authorities will support developments or re-developments that follow the policies below:
  - Located in appropriate sites related to their catchment areas;
  - Located usually in town centre areas;
  - Are well served by public transport;
  - Accompanied by Transport Assessments and Travel Plans; and
  - Traffic generation impact upon the local highway network is minimised where possible.

Strategic Transport Networks

2.3.5 Developments should not adversely affect the strategic transport network. The emphasis of local policy is on reducing the need to travel and providing a choice of transport, which is a key element in securing a sustainable pattern of development for the Borough. Section 5.3 notes that it is important that transport provision is made to support access to services and this is key within town centres.

Policy T31: Travel Plans

2.3.6 Travel Plans can increase the use of public transport, walking and cycling to seek to reduce car journeys. They can also seek to address key issues such as road safety, personal security and most notably to help reduce traffic growth. Travel Plans assist in meeting targets for reducing traffic growth, developers should scope early discussions with the relevant local planning authorities to identify at an early stage the scope required for a Travel Plan.

Policy T32: Car Parking Standards

2.3.7 The availability of parking can influence the means of transport and destinations people choose for journeys. Maximum parking guidance has been identified for Hospitals within, 'Parking Guidelines for Cumbria', published in September 1997. Identifying maximum parking standards aim to promote sustainable transport choices and vitality of town centres.

## Cumbria Transport Plan Strategy 2011 - 2026

- 2.3.8 The Cumbria Transport Plan is a 15 year plan which supports Cumbria's agreed vision for the county, set out in the Community Strategy 2008 2028 and the priorities of the Cumbria County Council Plan.
- 2.3.9 The core objectives for transport across Cumbria are to provide a strong sustainable local economy, working in partnership to support local communities. Providing better sustainable access to jobs and services will reduce the need to travel, resulting in lower carbon emissions for the region and improved public health.
- **2.3.10** The key priorities for transport are:
  - The maintenance of Cumbria's roads, pavements, paths and cycle ways;









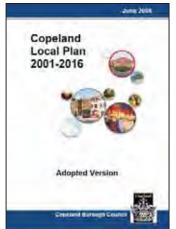
- Making sure strategic road links are able to support the Cumbrian economy;
- Maximising the benefits of the county rail network;
- Using smartcard technology to reduce barriers to people using public transport;
- Enabling more people walking and cycling to school and work.

## 2.4 Local Policy

2.4.1 On 6th June 2006, Copeland BC adopted the 'Copeland Local Plan 2001 – 2016', presenting development principles and guidance for the Borough. The emerging Local Development Framework (LDF) for Copeland will eventually superseded the local plan, at present the Copeland Local Plan 2001 – 2016 is the statuary local planning document.

### Copeland Local Plan 2001 - 2016

- 2.4.2 The Copeland Local Plan Chapter 2 "Local Plan Aims and Objectives", in Section 2.2 identifies the Councils concerns regarding the increasing amount of skilled young workforce migrating from the Borough to seek employment elsewhere. There is a pressing need for regeneration to address the long term economic challenges associated with the Borough. The aims of the local plan are summarised as follows:
  - Secure a stable and balanced population whilst improving public health, safety and quality of life;
  - Protect and enhance landscapes, habitats and the built and natural environments;
  - Make the most efficient use of existing buildings and infrastructure, previously developed land and natural resources; and
  - Promote and facilitate economic regeneration to achieve stable, diverse and self sustaining employment.
- **2.4.3** Chapter 2 further promotes the importance of sustainability within the Borough. There are four key objectives presented in this Chapter, which are as follows:
  - 1) Social progress which recognises the need of everybody;
  - 2) Effective protection of the environment;
  - 3) Prudent use of natural resources; and
  - 4) Maintenance of high and stable levels of economic growth and employment.
- **2.4.4** Chapter 7 of the Local Plan '*Transport*' presents the key transport policies of relevance to the proposed development, which are summarised below:
  - Policy TSP 6: General Development Requirements
- **2.4.5** The Local Plan identifies a need for Travel Plans to provide the following:
  - Have clear targets for reducing car-use and parking and set out how these will be achieved alongside measures to increase the use of public transport, walking and cycling; and









They should provide for improved road safety, personal security and more efficient/environmentally friendly delivery and freight movements.

Policy TSP 7: Transport Assessments and Travel Plans

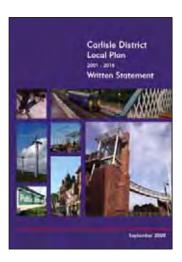
2.4.6 The plan notes the requirement for Transport Assessments and Travel Plans where, "development which is likely to have significant transport implications and all major development proposals above the thresholds set out in Appendix 4 of the Local Plan. Appendix 4 of the Local Plan identifies the criteria of a Travel Plan for health facilities in excess of 2,500 m2. In addition, the plan notes, "any developments which may directly or indirectly impact upon the trunk road network must be accompanied by a Transport Assessment and in the cases indicated, by a Travel Plan."

### Carlisle District Local Plan 2001 - 2016

- 2.4.7 The Carlisle District Local Plan was adopted on 9<sup>th</sup> September 2008 and works in unison with the Cumbria and Lake District Joint Structure Plan 2001 2016. The plan is Sustainable Strategy which aims to:
  - Develop Carlisle's sub-regional role for employment and services without impacting available resources;
  - Balance the need for economic growth with the need to protect and enhance the quality of the environment;
  - Resolve conflict between pressure for an improved transport network and the need to encourage a reduction in vehicular movements within and around the City;
  - Promote opportunities for the rural area to create job opportunities and maintain local facilities;
  - Minimise the dangers of pollution without obstructing economic growth.
- 2.4.8 To achieve the above aims, the land use planning system will be the key approach to accomplish these objectives through adopting the following measures:
  - Local partnerships, with the City Council setting objectives and targets, and involving the local community in determining local priorities, including environmental priorities and providing opportunities for practical action;
  - Integrating land use and transport planning to improve transport efficiency, reduce the need to travel, encourage greater use of public transport and encourage cycling and walking;
  - Monitoring the effectiveness of planning policies in delivering the objectives of sustainable development.



2.5.1 The overriding theme of national policy is that developments must be accessible by sustainable means of transport as well as to all members of the local community. Local policy echoes the sustainability of national policy and provides more detail relevant to West Cumberland Hospital and the Cumberland Infirmary. The local policies illustrate the key challenges experienced within the Borough, including the issue of outward staff migration of skilled staff and the need for employment opportunities within the Borough to retain skilled young professionals.









## 3. Existing Conditions







#### 3 **EXISTING CONDITIONS**

#### 3.1 Introduction

3.1.1 This chapter identifies the existing conditions at West Cumberland Hospital and the Cumberland Infirmary in terms of site location, existing services, local highway network, and accident history. The wider topic of sustainable access is discussed in greater detail in the following chapter.

## **West Cumberland Hospital**

#### 3.2 Site Location

- 3.2.1 West Cumberland Hospital is a hospital in Hensingham, a suburb of Whitehaven in Cumbria, England. Under the management of the North Cumbria University Hospitals NHS Trust, together with the Cumberland Infirmary in Carlisle, it serves 34,000 residents in north Cumbria.
- 3.2.2 Hensigham is a predominantly residential area, on the outskirts of Whitehaven, to the south of the town centre. The figure following illustrates the hospital boundary:



Figure 3.1: West Cumberland Hospital Site Location

#### 3.3 **Services**

3.3.1 West Cumberland Hospital is a major part of West Cumbria, and it has been an established hospital and training facility since 1954. West Cumberland was promised a revamp to upgrade its hospital, and now in 2014 a brand new hospital is being built. The new hospital, on the site of the old building, is due to be completed by the end of the year and will open in 2015.







- 3.3.2 It is proposed that the new hospital buildings will comprise a like-for-like replacement of the existing West Cumberland Hospital, with the following services being provided within the establishment:
  - 24 hour Accident and Emergency.
  - Breast service symptomatic.
  - Cardiology
  - Dermatology
  - Ear, Nose and Throat
  - Endocrine Surgery
  - Gynaecology
  - Medical Illustration
  - Opthalmology
  - Orthodentics
  - Paediatrics
  - Pharmacy
  - Radiology
  - Renal
  - Rheumatology
  - Upper Gi
  - Vascular Surgery
  - Children's & Adolescent Services.
  - Orthopaedics.

- Cancer Services
- Colorectal Services
- Dietetics
- Elderly Care
- Gastroenterology
- Maternity
- Occupational Therapy
- Oral Surgery
- Orthopaedics
- Pain Management
- Physiotherapy
- Rehabilitation
- Respiratory
- Special care baby unit
- Urology
- Respiratory Medicine.
- Geriatric Medicine.
- Oral and maxillofacial Surgery.
- Minor Injuries Unit.

## 3.4 Local Highway Network

- 3.4.1 There are two accesses into the West Cumberland Hospital with the main access and egress located off Homewood Road, whilst a secondary emergency access is situated off Homewood Hill. Both Homewood Hill and Homewood Road connect the hospital to the A595 (Egremont Road), a key arterial route into Whitehaven Town Centre. The primary access from Homewood Road has a separate entrance and exit, facilitating a circular one-way route around the hospital site. The secondary access from Homewood Hill forms a priority junction with Homewood Drive.
- 3.4.2 The A595 (Egremont Road) is a key arterial route from Whitehaven to West Cumberland Hospital. It is worth noting the A595 is a key commuter route for people travelling to work at the Sellafield Nuclear Power Station. Traffic volumes are generally free flowing during the day, however queuing was observed during the peak hours, which is likely to be attributed to the usual traffic profile and a shift change at the power station.

## 3.5 Accident Data

3.5.1 The previous Travel Plan for the West Cumberland Hospital produced by AECOM in 2011 identified 13 accidents in the previous 5 years, 12 of them classified as slight and only one serious accident. There were no fatal accidents registered.







- 3.5.2 Traffic accident data has been obtained from Capita, on behalf of Cumbria County Council for the highway network in the immediate vicinity of the West Cumberland Hospital. The data looks at the number of slight, serious and fatal accidents within a five year period in the latest available 60 months, between 1<sup>st</sup> June 2009 and 31<sup>st</sup> May 2014.
- **3.5.3** The data has been compiled for the following locations:
  - Hensingham Bypass;
  - Hensingham By-pass / Homewood Road;
  - Homewood A595 / Egremont Road:
  - Homewood Road;
  - Egremont Road;
  - Egremont Road / Ruthland Avenue; and
  - Sneckyeat Road.
- 3.5.4 In total, the latest traffic data identifies 25 accidents within the study area, with only 3 of them serious and none of them fatal. The table below illustrates the results of the accident records 1<sup>st</sup> June 2009 and 31<sup>st</sup> May 2014 within the study area:

Table 3.1: West Cumberland Hospital Accident 5 Year Accident Data

Location	No. of Incidents			
Location	No. of incidents	Slight	Serious	Fatal
Hensingham Bypass	1	1	0	0
Hensingham By-pass / Homewood Rd	3	2	1	0
Homewood A595 / Egremont Road	8	1	0	0
Homewood Road	8	7	1	0
Whitehaven	1	1	0	0
Egremont Road	1	1	0	0
Egremont Road / Ruthland Avenue	1	1	0	0
Ruthland Avenue	1	1	0	0
Sneckyeat Road	1	0	1	0
Total	25	22	3	0

- **3.5.5** Full accident data and plans of this study area are contained within **Appendix A** of this report. The following sub-section paragraphs provide a summary description of this full accident data at each of the junctions:
- 3.5.6 In the past five years, 9 accidents have occurred at the Homewood Home roundabout resulting in 7 slight casualties and 1 serious casualty, two of which involved pedestrians or cyclist. There have been various types of collisions showing that the accidents were more likely to be caused by driver error.
- 3.5.7 The types of collisions registered show that the accidents were mainly caused by driver errors. All of the accidents happened within 30 months of each other which equals to a rate of one accident every 5 months.
- **3.5.8** Along the straight part of Homewood Road past the hospital, 7 accidents have been recorded. This has resulted in 6 slight casualties and 2 serious casualties. 3 of the casualties involved pedestrians.





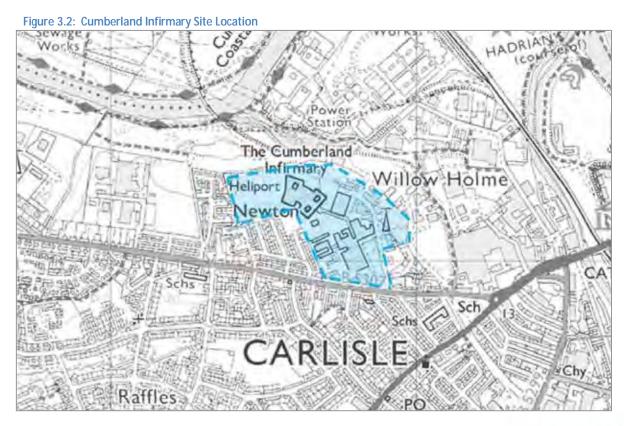


- 3.5.9 Three shunting collisions occurred at the T-junction between A595 Egremont Road and Rutland Road, none of them serious or fatal and with no cyclist or pedestrians involved. Rutland Road is a residential road which has a slight decline into the junction. The review of the junction has proven that there is a good visibility envelope that makes the junction clearly legible for drivers approaching it.
- 3.5.10 Only 5 of the 25 accidents recorded within the area of study had pedestrians or cyclists involved. That figure represents a lower percentage than in the previous report produced by AECOM, 20% against 35%. This data highlights the fact that the area is still safe to be accessed by cyclists and pedestrians. However, in order to contribute to the reduction in the number of incidents in the vicinity of the site, the Trust should consider launching new campaigns to make people aware of the high importance of safety in cars while they continue promoting alternative sustainable means of transport.
- **3.5.11** Please see Chapter 5 for information concerning Parking at the Hospital Site.

## **Cumberland Infirmary**

## 3.6 Site Location

- 3.6.1 Cumberland Infirmary is a hospital in Carlisle, Cumbria England. Under the management of the North Cumbria University Hospitals NHS Trust, together with the West Cumberland Hospital in Hensingham, Whitehaven, they serve 340,000 residents in north Cumbria.
- 3.6.2 The site is situated adjacent to the residential area of Newtown, although an industrial / business estate is located to the immediate North and East of the site. **Figure 3.2** illustrates the hospital boundary.



A=COM





## 3.7 Services

- 3.7.1 The present Cumberland Infirmary was the first UK Private Finance Initiative hospital to be bond financed.

  The £87m hospital, was designed and built by AMEC, and took 29 months to construct.
- 3.7.2 Consolidating the operations of three previous hospitals namely the previous Cumberland Infirmary, Carlisle City General and Carlisle City Maternity, the Cumberland Infirmary provides 444 beds for the local community. The hospital was officially opened by British Prime Minister Tony Blair, on 16 June 2000.
- **3.7.3** Cumberland Infirmary provides a range of services including:
  - Accident and emergency services
  - Cardiology
  - Children's & Adolescent Services
  - Dermatology
  - Ear, Nose & Throat
  - Endocrinology and Metabolic Medicine
  - General Surgery
  - Gastrointestinal and Liver services
  - Geriatric Medicine
  - Gynaecology
  - Maternity service
  - Nephrology

- Orthopaedics
- Ophthalmology
- Oral and Maxillofacial Surgery
- Pain Management
- Rehabilitation
- Rheumatology
- Respiratory Medicine
- Surgery Vascular
- Surgery Breast
- Urology
- Urgent care centre

## 3.8 Local Highway Network

- 3.8.1 There are two vehicular accesses into the Cumberland Infirmary site. The main access is taken from the B5307 Newton Road in the form of a signalised junction with pedestrian crossing facilities and leads to the main Hospital building and GP, 'Out of Hours' Treatment Centre. A secondary access into the hospital is via Infirmary Street, which forms a priority junction with the B5307 Newtown Road. The Infirmary Street access leads to the Radiotherapy department, the Education Centre and the Rehabilitation Services. An internal road connects these accesses and travels around the parameter of the site.
- 3.8.2 The B5307 Newtown Road is a key link between Carlisle City Centre and the residential areas of Belle Bue and Newtown and provides access onto the A595 (towards the west) and the A689 (towards the M6 motorway). In the vicinity of the Infirmary, Newtown Road is a two way street with an ample footpath on both sides of the road which enhances pedestrian movements. Going southbound, adjacent to the access of the Cumberland Infirmary, at the signalised junction, the carriageway widens from one to two lanes to accommodate a turning left lane as well as a lead in cycle track. The cycle lane is highlighted with coloured green surfacing to make drivers aware of it and an advanced stop line is provided before the junction to increase cyclists' safety.







- 3.8.3 A similar layout is also provided in the northbound direction with a designated turn right lane to access the hospital. Additionally on street parking is permitted in the southern side of the road before and after the junction to the infirmary.
- **3.8.4** At the junction of Newtown Road with Infirmary Street, no designated crossing points are provided, just dropped kerbs with brown coloured tactile pavement facilitate the crossing for pedestrians on the minor arm of the junction.

## 3.9 Accident Data

- 3.9.1 Traffic accident data has been obtained from Capita, on behalf of Cumbria County Council for the highway network in the immediate vicinity of the Cumberland Infirmary. The data looks at the number of slight, serious and fatal accidents within a five year period in the latest available 60 months, between 1<sup>st</sup> June 2009 and 31 August 2014.
- **3.9.2** The data has been compiled for the following locations:
  - Newtown Road;
  - Port Road:
  - Church Street;
  - Wigton Road;
  - Caldcotes; and
  - A595 Roundabout/ Caldcotes/ Church street
- 3.9.3 The analysis of the data has shown that 33 accidents have been recorded in total within the study area during the past 5 years from 1<sup>st</sup> June 2009 to the 31<sup>st</sup> May 2014, 31 of which were recorded as slight and 2 as serious. There were no fatal accidents recorded during this period, as illustrated in the table following:

Table 3.2: Cumberland Infirmary Accident 5 Year Accident Data

Location	No. of Incidents			
		Slight	Serious	Fatal
Newtown Road	12	11	1	0
Port Road	5	4	1	0
Church Street	3	3	0	0
Caldcotes	6	6	0	0
A595 Roundabout/Caldcotes/Church Street	7	7	0	0
Total	33	31	2	0

- **3.9.4** Full accident data and plans of this study area are contained within **Appendix A** of this report. The following sub-section paragraphs provide a summary description of this full accident data at each of the areas.
- 3.9.5 Only 5 out of the 12 accidents registered along Newtown Road were in the proximity of a junction, the rest occurred in straight sections of the road with good visibility. The type of incidents recorded in this section the network involved collisions after overtakings and with parked vehicles.







- 3.9.6 On the approach to the A595 Roundabout from Caldcotes, 6 accidents were registered, all of them slight among which 4 of them had pedestrians involved. Accidents involving pedestrians were mainly due to pedestrians crossing at other locations than the designated crossing points.
- 3.9.7 In the A595 Roundabout 7 accidents of slight severity were registered, 4 of which involved cyclists. Cyclists were hit as a result of collisions between two other vehicles or by vehicles accessing the roundabout and not seeing the cyclist.
- 3.9.8 The final accident recorded within the study area occurred on the 3<sup>rd</sup> of March 2014 at Newtown Road at the junction with Grandville Road. The accident was registered serious and it involved a vehicle travelling on Newton Road towards Caldewgate toddler who walked in the carriageway while traffic lights were green for vehicles.
- 3.9.9 Out of the 33 accidents registered within the study area, 12 of them involved collisions with cyclist and in 9 of them pedestrians were affected casualties, which represent 36% and 27% of the total accidents respectively. This high percentage of incidents involving cyclists and pedestrians highlights the need of further measures to improve safety for non motorised users of the road. The use of non designated crossing points is the main cause of incident among pedestrians.
- **3.9.10** The majority of accidents in the vicinity of the proposed site over a five year period have been caused by driver, cyclist or pedestrian error. The proposed infirmary is unlikely to have any detrimental effect on road safety in the area.
- **3.9.11** Please see Chapter 5 for information concerning Parking at the Infirmary Site.

## 3.10 Summary

**3.10.1** Both sites, West Cumberland Hospital and Cumberland Infirmary, are located within a road network in good condition with ample footpaths, cycle lanes & lighting, and between the two hospitals there is provision for over 20 different specialised medical services for the area of Cumberland.

### West Cumberland Hospital

- **3.10.2** West Cumberland Hospital is located in the edge of Whitehaven city centre with an ample highway provision in the vicinity which makes the hospital highly accessible.
- **3.10.3** The Hospital provides a wide variety of specialised medical services such as Radiology, Gastroenterology, and Maternity for the population of West Cumberland.
- 3.10.4 A total of 25 accidents happened in the vicinity of the Hospital in the past 5 years, 22 slight and only 3 serious.

  No fatal accidents were recorded in the area and only 5 of the incidents involved pedestrians or cyclists

## Cumberland Infirmary

3.10.5 As the Cumberland Infirmary is located in the suburbs of Carlisle, the road network in the vicinity have local footways in good condition with dropped kerbs on street corners to improve the mobility and street lighting present throughout.

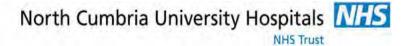






**3.10.6** Like West Cumberland Hospital, Cumberland Infirmary provides over 20 different specialised medical services to the area of North Cumberland.





## 4. Site and Accessibility Audit







## 4 SITE AND ACCESSIBILITY AUDIT

## 4.1 Introduction

**4.1.1** The following chapter considers access opportunities via sustainable modes of transport to the West Cumberland Hospital and Cumberland Infirmary, including access by bus, train, cycling and walking. Staff home locations have also been plotted to identify the true opportunities available to staff to use these modes.

## **West Cumberland Hospital**

## 4.2 Pedestrian and Cycle Access

- 4.2.1 Walking is the most sustainable form of travel, not only are there benefits to the environment, such as no harmful emissions, there are also individual health benefits and very low associated costs. Pedestrian facilities are an essential part of a development, providing connectivity to existing facilities. Adequate footways and crossing facilities will ensure that journeys on foot will be a viable option. Desire lines also need consideration to ensure that the most direct route to the destination point can be achieved taking into consideration the distance, location of crossing points, available footways and their conditions and perceptions of safety.
- **4.2.2** Currently the Hospital is highly accessible for pedestrians as there is good infrastructure provision across the site, including wide footways, and designated crossing points as illustrated within the photographs below.
- **4.2.3** Walking forms part of any journey undertaken by any means of transport i.e. inter linking with other modes of travel, such as public transport, walking to bus stops, railway stations, taxi ranks and reaching the desired destination point once public transport has been utilised, this also applies to cycling and even car journeys.
- 4.2.4 Pedestrian footpaths are of a sufficient standard and width along Egremont Road and Homewood Road, with street lighting increasing the sense of security for pedestrians. A pedestrian crossing facility is located along Egremont Road, adjacent to the bus stop facility, as illustrated within the photographs below. 'Slow' road markings are located along Homewood Road near the main Hospital entrance to encourage reduced vehicle speeds within the vicinity of the site, thus improving pedestrian safety. The Hospital is located along Homewood Road which is on a steep incline, characteristic of the surrounding geography. Movements by pedestrians are consequently restricted especially to those with mobility issues.





Photograph 4.1: Pedestrian facility



Photograph 4.2: Pedestrian facilities



- **4.2.5** The internal Hospital pedestrian footpaths are positioned for patients, staff and visitors to move around the site safely. Tactile paving and dropped kerbs are located at various crossing points.
- 4.2.6 A zebra pedestrian crossing is located to the south of the main building connecting the Accident and Emergency entrance with the car parks to the south of the site. Hand rail facilities are located strategically across the site to aid pedestrian flow.

Photograph 4.3: Zebra crossing



Photograph 4.4: Pedestrian facilities



- 4.2.7 The DfT 'Local Transport Note 2/08 Cycling Infrastructure Design', states that many utility cycle trips are less than three miles (4.8 kilometres), but for commuter journeys a distance of over five miles (8 kilometres) is not uncommon. As well as benefits in terms of reduced vehicle emissions and health, journey times by cycle can be less than by vehicle in areas where congestion occurs. Also the cycle network may provide more direct routes and off road routes reducing the potential conflicts with vehicles.
- **4.2.8** There are no dedicated cycle routes within the immediate vicinity of West Cumberland Hospital however National Cycle Route 72 is located within 2km of the Hospital and is a predominantly traffic free route that passes through Whitehaven and runs adjacent to the railway track as illustrated in the figure following. This



## North Cumbria University Hospitals MHS

cycling route provides an attractive and safe mode of transport for people travelling from Whitehaven Town Centre towards the hospital. Cyclists can then access the hospital from the cycling route via a number of residential roads.

Figure 4.1: Cycle Route within Vicinity of West Cumberland Hospital Key

4.2.9 Since the last Travel Plan produced in 2011, the available infrastructure for cyclists has been upgraded to promote sustainable transport to the Hospital not only for staff but for patients as well. In 2011, there were only 6 "Sheffield" style racks for cycling parking located at adjacent to the outpatients entrance. Currently, the hospital has a total of 40 spaces, which are all both secure and sheltered. These are illustrated in more detail within the following photographs.

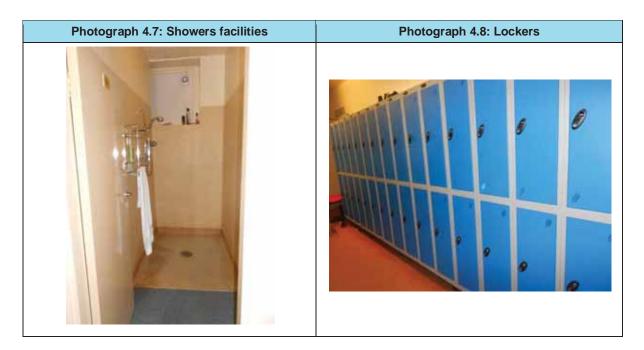








**4.2.10** To further promote sustainable travel to work for staff the Hospital has recently refurbished lockers and shower facilities, available on Block D level 2, as shown the photographs following.



## 4.3 Access by Public Transport

4.3.1 Bus services are within easy access of the West Cumberland Hospital with stops located adjacent to the main hospital entrance on Homewood Road. These bus stops are of a good standard with bus stop markings on the carriageway, hard standing areas, shelters, flags and timetables. Table 4.1 below provides details of the bus services provided at this bus stop. Additionally, Figure 4.2 provides an overview of the available bus routes in the vicinity of the Hospital within Whitehaven.

Table 4.1: Homewood Road Bus Services

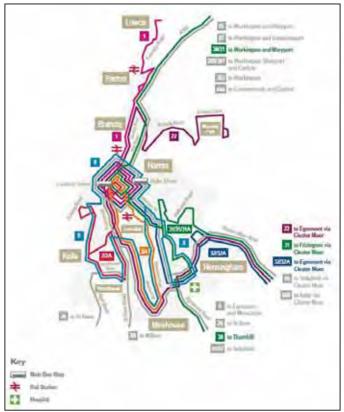
Service Route		Frequency			
No.	Route	Mon- Fri	Sat	Sun	
6	Muncaster – Seascale – Gosforth – Moor Row – Whitehaven	120 mins (AM) No Service (PM)	120 mins (AM) No Service (PM)	120 mins (AM) No Service (PM)	
22	Moresby Parks – Whitehaven – Egremont	60 mins (AM) 120 mins (PM)	60 mins (AM) 120 mins (PM)	120 mins (AM) No Service (PM)	
30	Maryport – Workington – Whitehaven – Egremont – Thornhill	30 mins (AM) 60 mins (PM)	30 mins (AM) 60 mins (PM)	60 mins (AM) No Service (PM)	
32	Whitehaven – Frizington – Asby	60 mins (AM) No Service (eve)	60 mins (AM) No Service (PM)	No Service	
600	Whitehaven – Cockermouth – Wigton – Carlisle	AM only	AM only	No Service	





4.3.2 On-street road markings denote the bus stop location; a raised kerb is also located at the bus stop on the eastern side of Homewood Road to ensure access for buggies and disabled persons. The photographs below illustrate the shelter on Homewood Road.

Figure 4.2: Bus Services in Whitehaven



**4.3.3** Further bus stop facilities are situated along Egremont Road, as illustrated in the photographs below. Bus stop facilities at this location are also sheltered with accompanying road markings. People can access the hospital from these stops via the secondary hospital access on Homewood Hill.







### Rail

4.3.4 Whitehaven and Corkickle Rail Stations are both located within Whitehaven. Both stations are managed by Northern Rail and form part of the Carlisle to Barrow-in-Furness to Lancaster line. Full details about this rail line can be found in the figure, following Rail services from Carlisle to Lancaster and vice-versa operate approximately every 60 minutes in each direction throughout the day.

Figure 4.3: Carlisle to Barrow-in-Furness Train Times (Source: www.northernrail.org)



- **4.3.5** Corkickle Station is located approximately 2km from the Hospital off Station Road and is an unmanned station. The Carlisle to Barrow to Lancaster service only stops at Corkickle Station by request only.
- **4.3.6** Whitehaven Station is located approximately 4 miles from the Hospital and benefits from a staffed ticket office, open Monday Saturday (06:15 19:20) and is closed on Sundays. Whitehaven Station has car parking for 30 vehicles and benefits from cycle storage facilities. The photographs below illustrate the rail stations in greater detail.



## 4.4 Accessibility Review

4.4.1 Accessibility modelling has been undertaken using Accession, the latest industry software modelling package which produces mapping outputs illustrating the accessibility of a site by public transport and







walking. This accessibility plots will provide an indication of areas that can access the Hospital within a reasonable travel time by foot and public transport. An acceptable travel time for both modes of travel is 30 minutes via foot and 1 hour via public transport.

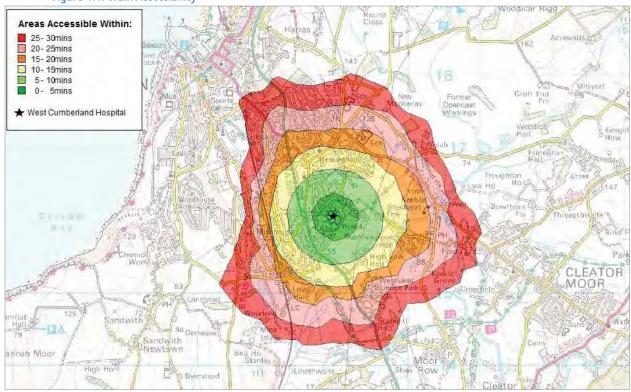
4.4.2 The CIHT Guidelines 'Providing Journeys on Foot' state the acceptable walking distance for people that are not mobility impaired are illustrated within the table, following. With regards to the West Cumberland Hospital, the guidance suggests the preferred maximum commute is 2km. The standard average walking speed is 4.8km/h; therefore a fair assumption is that 30 minutes travel time may be required to access the site on foot.

Table 4.2: CIHT Guidelines: Suggested Acceptable Walking Distances

Town Centre		Commuting /Sight Seeing	Elsewhere
Desirable	200m	500m	400m
Acceptable	400m	1000m	800m
Preferred Maximum	800m	2000m	1200m

4.4.3 An accessibility plot based on a 30 minute travel time on foot has been prepared in the figure following, which illustrates the accessibility of the Infirmary to the surrounding areas. A number of residential areas are located between 10 and 30 minute walk of the infirmary and these include, Willow Home, Morton, Longsowerby, Etterby, Belah, Edentown and Stanwix.

Figure 4.4: Walk Accessibility

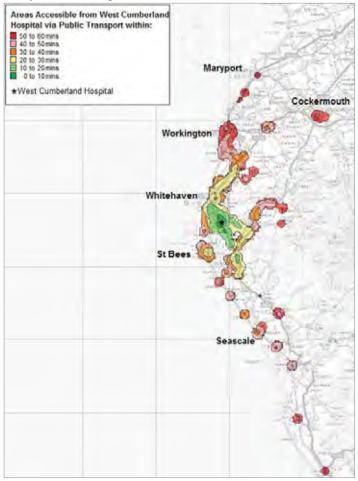






4.4.4 The figure following illustrates areas accessible to West Cumberland Hospital via public transport within a one hour travel time period. The accessibility plots cover a wider geographical area than the walk accessibility plots to reflect the enhanced accessibility through public transport. ACCESSION takes account of walk, time timetable data and frequency of all main modes to produce the accessibility plots.

Figure 4.5: Public Transport Accessibility



The analysis above illustrates that the public transport users can access the hospital from Whitehaven Town Centre 20 minutes travel time St Bees and Seascale can access the hospital within a 30 minute travel time, however towns located further afield including Workington, Cockermouth and Millom require up to an hour travel time.

## 4.5 Journey to Work Analysis

- 4.5.1 An analysis of the 2011 Census Journey to Work (J2W) data has been undertaken to determine the number of people travelling to work in the Output Areas (OAs) that the Hospital lies in. The analysis reviews the number of persons travelling to work by all modes of transport.
- 4.5.2 The figure following illustrates the OA boundaries that the Hospital lies in. There are some residential elements within the OA boundaries; however it is fair to assume that persons travelling to work within the OAs will be predominately working at the Hospital.





Figure 4.6: OA Boundaries

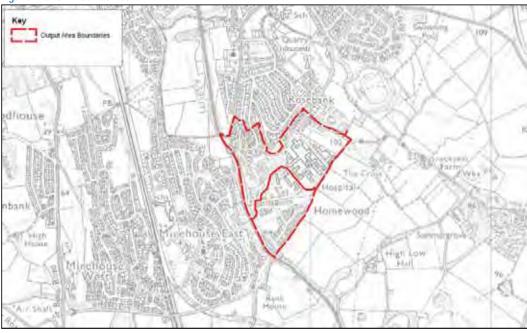


Table 4.3: Preferred mode of Transport (Source: Office for National Statistics, Census data 2011)

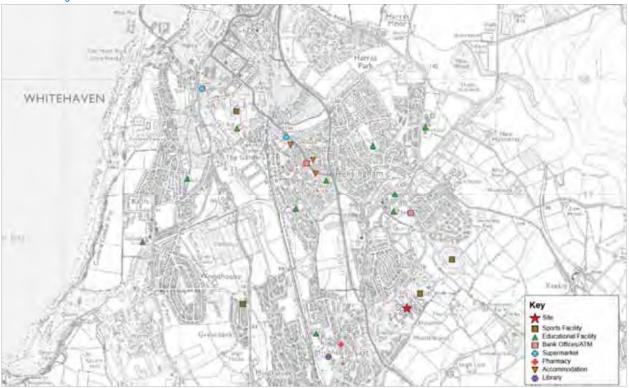
Mode of Transport	Persons travelling to wor	Persons travelling to work within West Cumberland OAs		
mode of Transport	Total	Percentage		
Car – driver	152	52.6%		
Car – passenger	38	13.2%		
On foot	67	23.2%		
Bus	20	6.9%		
Bicycle	0	0%		
Other	2	0.7%		
Train	4	1.4%		
Taxi	3	1%		
Motorcycle	3	1%		

## 4.6 Amenities Plans

4.6.1 West Cumberland Hospital is located to the south of Whitehaven in a rural area. For this reason there are a reduced number of local amenities within a 30 minutes walking distance (2.5km), the majority of which are located to the north of the Hospital. The local amenities are illustrated in the figure following and are summarised in the subsequent table.



Figure 4.7: Amenities Plan



**Table 4.4: Distance to surrounding Amenities** 

Distance	Amenity
> 0.5km	1 Sport Centre
	1 Sport centre;
	1 Pharmacy;
0.5km - 1km	3 Educational Facilities;
	1 Library; and
	1 ATM/ Bank office
	3 Educational Facilities;
1km-1.5km	5 Sports Centres; and
	1 Hotel.
	1 Educational Facilities;
1.5km-2km	1 Supermarket;
1.3KIII-ZKIII	2 Hotel Accommodation; and
	1 Bank offices.
	1 supermarket;
2km-2.5km	3 Educational Facilities; and
	1 Sports Facility.





# **Cumberland Infirmary**

# 4.7 Pedestrian and Cycle Access

4.7.1 Access into the Cumberland Infirmary is taken from Newtown Road, situated to the south of the site. Street lit pedestrian footpaths are provided on both sides of the carriageway with signalised crossing facilities provided at the hospital access / Newtown Road junction as shown in the photographs following. Within the hospital grounds there is a network of footpaths providing links to the various services on-site and car parking areas. These footpaths are well lit, with dropped kerbs and tactile paving provided at access junctions.



4.7.2 There are limited cycle routes within the immediate vicinity of Cumberland Infirmary, however traffic free cycle routes are provided along the A595 Castle Way, approximately 650m from the hospital. The A595 is the primary route from the hospital into Carlisle City Centre. The figure following illustrates the cycling facilities within the vicinity of the Cumberland Infirmary.





Figure 4.8: Cycle Route within Vicinity of Cumberland Infirmary

4.7.3 At present, the Cumberland Infirmary counts with a total of 55 sheltered and unsheltered cycle stands with capacity for 79 cycles, split across the site. The main cycling parking area (31 covered stands) is located by the Main Hospital Building, adjacent to the Administrators' Block, below provides the break down by areas of the covered and uncovered cycle stands.

Table 4.5: Cycle Stands Provision (Source: Cumberland Infirmary)

Location	Stands	Capacity	
Adjacent to main Atrium	Covered	10 stands	20 cycles
Adjacent to main Athum	Uncovered	4 stands	8 cycles
Internal in Main Hospital	Covered	31 stands	31 cycles
Infirmary St Car Park	Uncovered	4 stands	8 cycles
Admin Block	Uncovered	2 stands	4 cycles
Tower Block	Uncovered	4 stands	8 cycles
	Total	55 stands	79 cycles

4.7.4 The location plan showing the extract location of the cycle racks is included in Chapter 5 (Figure 5.2).





# 4.8 Access by Public Transport

#### Bus

4.8.1 Bus services at the Cumberland Infirmary are accessed via the bus stand situated within the hospital grounds adjacent to the main hospital entrance. Additional bus services can be accessed via the bus stops located on Newtown Road. There are a total of 7 bus services operating along Newtown Road located approximately 320m from the main hospital entrance. The bus stops serving the site are of a good standard with bus stop markings on the carriageway, hard standing areas, shelters, seating, flags and timetables. The bus services available along Newtown Road are identified in the table following.

Table 4.6: Newtown Road Bus Services

Service	Route	Frequency			
No.	Route	Mon- Fri	Sat	Sun	
60	Sandsfield Park – City Centre – Harraby – Carleton	10 mins (AM) 60 mins (PM)	10 mins (AM) 60 mins (PM)	60 mins (AM) 60 mins (PM)	
64A	The Beeches – Morton Park – City Centre – Stanwix – Houghton - Asda	60 mins (AM) No Service (PM)	60 mins (AM) No Service (PM)	No Service	
67	Upperby – City Centre – Infirmary – Belle Vue	15 mins (AM) 60 mins (PM)	20 mins (AM) 60 mins (PM)	60 mins (AM) 60 mins (PM)	
68	Upperby – City Centre – Infirmary – Belle Vue	20 mins (AM) 60 mins (PM)	20 mins (AM) 60 mins (PM)	60 mins (AM) 60 mins (PM)	
71/93	Bowness on Soway – Glasson – Burgh by Sands – Carlisle	180 mins (AM) PM Friday Only	AM Only PM (3 Services)	No Service	
500	Wigton – Thursby – Carlisle Infirmary - Carlisle	120 mins (AM) No Service (PM)	No Service	No Service	
508	Windermere – Kirkstone – Patterdale - Penrith	2 Services (AM) No Service (PM)	2 Services (AM) No Service (PM)	AM Only No Service (PM)	





**4.8.2** The figure following illustrates the bus services which operate within the vicinity of the Cumberland Hospital and across Carlisle City Centre.

Table 4.9: Bus Services in Carlisle City Centre



#### Rail

- 4.8.3 The closest rail station to the Cumberland Infirmary is Carlisle Rail Station which is located approximately 2km away. Carlisle Station benefits from a staffed ticket office, open Monday Saturday 08:00 20:00 and Sunday 09:00 20:00 and has provision for car parking for 194 vehicles. Cycle parking is provided at the station in the form of lockers and sheltered wheel racks, situated within the long stay car park and adjacent to Platform 8.
- **4.8.4** Carlisle Station is a major rail station operating services to the local area and major cities throughout the UK. The table following summaries the service route available from this station.







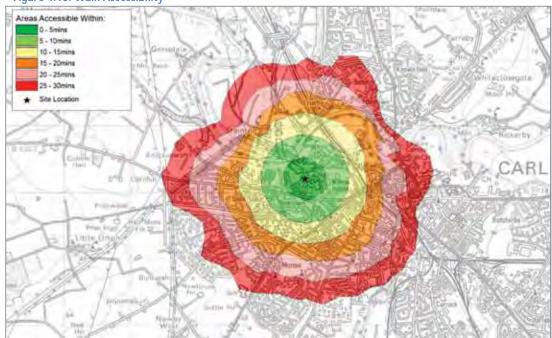
Table 4.7: Carlisle Station Rail Services

Route	Frequency
Carlisle – Hexham - Newcastle	Every 60 mins
Carlisle – Morecambe – Lancaster – Leeds	Every 2 hours
Carlisle – Preston – Birmingham	Every 60 mins
Carlisle – Annan – Dumfries – Glasgow	Every 60 mins
Carlisle – Lockerbie – Edinburgh	Every 60 mins
Carlisle – Barrow-in-Furness – Carlisle	Every 60 mins

## 4.9 Accessibility Review

4.9.1 An accessibility plot based on a 30 minute travel time on foot has been prepared in the figure following which illustrates the accessibility of the Infirmary to the surrounding areas. A number of residential areas are located between 10 and 30 minute walk of the infirmary and these include, Willow Home, Morton, Longsowerby, Etterby, Belah, Edentown and Stanwix.

Figure 4.10: Walk Accessibility



- **4.9.2** In summary, the walking isochrones accession plot illustrates that the hospital and its key services is accessible to wider residential areas, within an acceptable walking time. The layout and orientation of the hospital site has been designed to encourage walking.
- 4.9.3 The location examined within the ACCESSION analysis below, illustrates those areas which are currently accessible, using the existing public transport provision available. This analysis emphasises the excellent Public Transport links from the site. The Infirmary can be reached by public transport from any location in





Carlisle city centre in less than 15 minutes travel time, additional, key locations such as Annan, Gretna, Longtown, Wetheral, Brampton, Wigton, are within 50minutes total journey time including wait time.

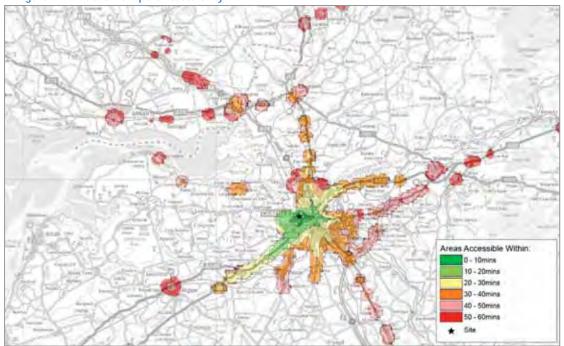


Figure 4.11: Public Transport Accessibility

4.9.4 It can therefore be concluded that the Infirmary is located within an area comprising established public transport facilities. The hospital serves the local community and as such the local walk catchment and the wider hinterland served by public transport will assist in reducing the number of car based trips.

# 4.10 Journey to Work Analysis

- 4.10.1 An analysis of the 2011 Census Journey to Work (J2W) data has been undertaken to determine the number of people travelling to work in the Output Areas (OAs) that the Infirmary lies in. The analysis reviews the number of persons travelling to work by all modes of transport.
- 4.10.2 The figure following illustrates the OA boundaries that the Infirmary lies in. There are some residential elements within the OA boundaries; however it is fair to assume that persons travelling to work within the OAs will be predominately working at the Hospital.



Figure 4.12: OA Boundaries

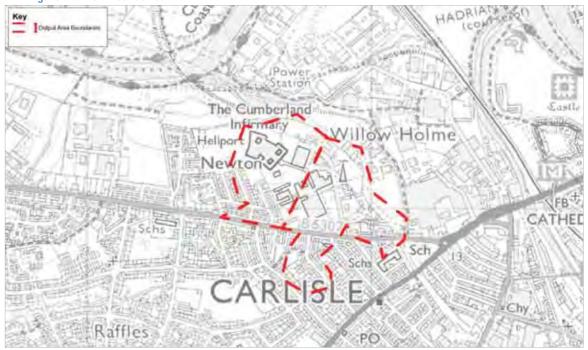


Table 4.8: Preferred mode of transport (Source: Office for National Statistics, Census data 2011)

Mode of Transport	Persons travelling to work within West Cumberland OAs			
mode of Transport	Total	Percentage		
Car – driver	128	41.3%		
Car – passenger	20	6.5%		
On foot	117	37.7%		
Bus	33	10.6%		
Bicycle	6	1.9%		
Other	0	0.0%		
Train	3	1.0%		
Taxi	0	0%		
Motorcycle	3	1.0%		

## 4.11 Amenities Plans

- **4.11.1** The review of the local amenities present in the vicinity of the site shown in the figure below identify the different amenities within a walking distance of approximately 30 minutes (2.5km) from the site. Given Cumberland Infirmary is located to the west of Carlisle City Centre the large majority of the amenities are located to the east of the site.
- **4.11.2** There are several educational facilities in the residential areas surrounding the site. The closest supermarket is located less than 1.5km to the east of the site and in Carlisle City Centre numerous additional shopping areas and bank offices and ATMs can be found as described in the table below.





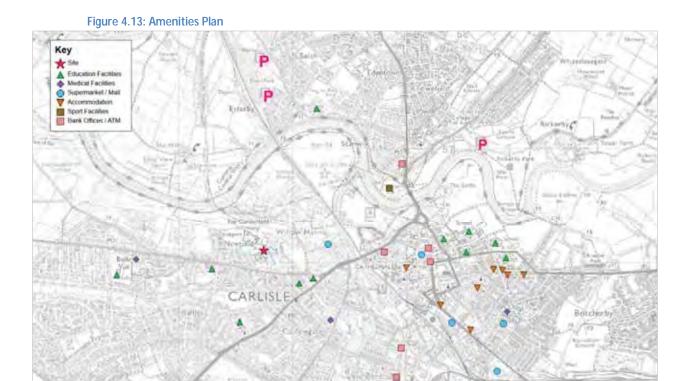
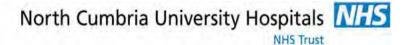


Table 4.9: Distance to surrounding Amenities

Distance	Amenity
> 0.5km	3 Education Facilities.
0.5km - 1km	1 Sainsbury's Superstore; and
U.SKIII - TKIII	1 Medical Facility.
	3 Educational Facilities;
1km-1.5km	5 Banks ATM's;
TRIII-T.SRIII	1 medical facility; and
	1 Hotel.
	7 Educational Facilities;
	1 Sport Facilities;
1.5km-2km	1 Supermarket and 1 shopping centre;
	4 Hotels; and
	2 Bank's.
	2 Supermarkets;
	3 Educational Facilities;
2km-2.5km	1 Sports Facility;
	3 Hotels; and
	2 Public Car Parks.





# 4.12 Summary

- 4.12.1 The ACCESSION access review has demonstrated that both sites are located within an area comprising established public transport facilities and are accessible to wider residential areas within an acceptable walking time.
- **4.12.2** The Journey to Work analysis revealed that the majority of the Staff for both sites used the car as primary mode of transport, followed by staff walking to work.
- **4.12.3** Cumberland Infirmary has a wide variety of local amenities in the proximity of the local facility, including banks, supermarket or schools. The West Cumberland Hospital is located in a more rural area and therefore the number of local amenities adjacent to the site is slightly lower.





# 5. Parking







## 5 PARKING

#### 5.1 Introduction

5.1.1 This chapter of the report describes the current car parking policies at West Cumberland Hospital and Cumberland Infirmary, existing parking conditions, along with how the spaces are allocated between staff, patients, visitors and disabled users. Current parking charges are outlined along with the management of car parks. This chapter will also review occupancy data to understand the current demand for parking.

# 5.2 Car Parking Policy Background

Policy T32: Car Parking Standards

- 5.2.1 This policy is included in the Cumbria and Lake District Joint Structure Plan 2001-2016 which aims to provide strategies and standards for the development of land within Cumbria as well as to ensure a consistent approach throughout Cumbria. As stated in the Structure Plan, 'the availability of parking can influence the means of transport and destinations people choose for journeys'. A more detailed guidance 'Parking Guidelines in Cumbria' was published in September 1997 by the county council including minimum standards for the different land uses as well as for cycling and disabled parking.
- **5.2.2** Policy T32 and 'Parking Guidelines in Cumbria' identify maximum parking standards aiming to promote sustainable transport choices and vitality of Town Centres. The relevant standards applicable to Hospitals have been summarised in **Table 5.1**:

Table 5.1: Cumbria Parking Standards (Source Parking Guidelines for Cumbria, Cumbria County Council)

Use Class C2: Residential Institutions					
Type of	Essential	Essential	Maximum Non-operational Parking		
Development	Operational Parking	Parking for Disabled People	Cars	Motorcycles	Pedal Cycles
Hospitals	50sqm of useable service space per 250sqm gross floor area PLUS turning space PLUS access for ambulance	1 space or a number equivalent to 5% of car requirement whichever is the greater	2 spaces per 3 bed spaces PLUS 3 spaces per consulting room (including accident and emergency) PLUS 1 space per 2 staff	A number equivalent to 5% of car requirement when more than 20 car spaces necessary	1 space per 5 staff PLUS number equivalent to 10% of car requirement with a minimum of 2 spaces





Parking for disabled People (DfT)

5.2.3 Parking for Disabled People prepared by the Department of Transport provides the best practice and guidelines in the recommended location of car parking spaces for disabled users as well as the minimum provision enforceable to any car parking. Table 5.2 and Table 5.3 below respectively describe the recommended maximum walking distances (including wheelchairs) without a rest and the recommended minimum number of designated bays in off street car parks for blue badge holders.

Table 5.2: Recommended Walking distance for disabled car parking users (Source Parking for disabled People (Dft))

Disability	Distance (m)
Visually Impaired	150
Wheelchair users	150
Ambulatory without walking aid	100
Sick Users	50

Table 5.3: Recommended minimum provision of car parking spaces for disabled users (Source Parking for disabled People (DfT))

	Up to 200 bays	Over 200 Bays
Employees and visitors to the hospital	Individual bays for each disabled employee plus 2 bays or 5% of total capacity whichever is greater	6 bays plus 2% of total Capacity

Health Technical Memorandum 07-03 (Def H. 2006)

- 5.2.4 This document aims to provide best practice guidance in assessing the adequate car parking provision for NHS trusts in England taking into account both National and Local Policy Context. Chapter 8 provides guidance on the methodology to be followed to assess the adequate level of car parking for NHS facilities. The following table identifies the requirement at West Cumberland Hospital.
- 5.2.5 The publication has developed criteria based on numerous case studies and provides a useful resource to establish parking numbers and also to define the Travel Planning targets. The total number of parking spaces is based on total staff numbers, number of beds and the number of consulting rooms.





Figure 5.1: Technical Memorandum 07 – 03' (Department of Health, 2006), Car Parking Assessment Tool

5.2.6 The calculation identifies that a total of 329 parking spaces are required for staff for West Cumberland Infirmary and 660 for a total number of staff of 1,317 and 2,641 respectively working at the busiest hours. The defined travel planning targets are to reduce the number of staff and visitors using the car in the next years by approximately by 4% as defined in Chapter 10.

## **West Cumberland Hospital**

## 5.3 Existing Car Parking Provision

- **5.3.1** The 2011 Travel Plan identified a total of 620 available car parking spaces across the West Cumberland Hospital broken down between allocated staff patient and visitor car parking.
- 5.3.2 The site currently has a total of 697 car parking spaces of which 33 are for disabled users, 357 are allocated car parking spaces for staff and 307 for patients and visitors. The parking layout is divided in 6 areas segregating staff car parking form visitors and patients. The total number of Car Parking spaces for the West Cumberland Hospital and the plan showing their location can be found in **Appendix B**. The existing split of parking provision across the site and also how is allocated for staff, patients and visitors and disabled within the following table:





Table 5.4: West Cumberland Hospital Car Parking Provision (Source: West Cumberland Hospital)

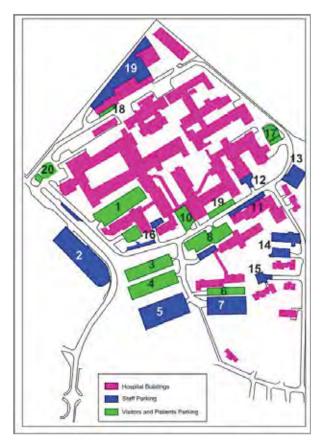
		Car parking spaces		
Zones	Name	Staff	Visitors	Disabled
1	Home Wood Road	63	0	0
2	Main Entrance	0	29	16
	Road Parking	12	0	0
3	Level 1	0	48	0
	Level 2	0	50	0
_	Level 3	100	0	0
	Psychology A	0	46	0
	Psychology B	46	0	0
	Road Parking	5	0	0
4	Nurses Hostel	13	58	4
	Training School	17	0	1
	Post Natal	0	10	2
	Cumbrian Clinic	0	24	0
	Renal	6	0	0
	Homewood Hill	22	0	0
	C.D.U.	2	2	0
_	Accommodation	32	0	0
_	CHOC	8	0	1
	A&E Road	9	1	2
5	Yewdale	0	26	3
	Mortuary	220	3	0
	Workshop	22	0	0
	Outpatients	0	10	4
	Total	357	307	33





5.3.3 The location of car parks in the context of the wider hospital site is illustrated within the figure below. As can be seen from the car parking layout the visitors and patients' car parking are located as close as achievable to the main entrances of the different buildings whereas staff car parks are placed in the periphery of the site.

Figure 5.3: West Cumberland Hospital Layout (Source: NCUHT drawing set up by AECOM in CAD)



## 5.4 Parking Demand Appraisal

- 5.4.1 Based on the guidance provided by The Health Technical Memorandum: Previously discussed in paragraph
   5.25 Transport Management and Car Parking, (Document 07-03, Department of Health, 2006). The calculations define the number of parking spaces through the following criteria
  - 1 parking space for every 4 staff members;
  - 1 space for every 2 beds; and,
  - 3 4 spaces for every consulting room (this assessment will consider 3 spaces for every consulting room as a robust approach)
- 5.4.2 Following the above mentioned criteria 329 car parking spaces for staff members based on 1,317 staff members and 104 for patients and visitors are recommended to be provided based on a total of 207 beds. As shown in Table 5.4 the number of car parking spaces available for patients and visitors (307) and the number of car parking for staff members (357) are adequate to meet the recommendations stated in The Health Technical Memorandum.







# 5.5 Management of Car Parks

5.5.1 The hospital cap park is enforced by the Trust to minimise traffic management issues as well as illegal parking occurring on site. The car park for patients and visitors operates under a pay and display system that charges as shown in the table below.

Table 5.5: West Cumberland Hospital Pay and Display charges

Time	Amount
Up to 1 hour	£1.00
Up to 21/4 hours	£2.00
Up to 3½ hours	£3.00
Up to 10 hours	£5.00
One week permit	£7.50
One month permit	£15
Registered disabled blue badge holders	No charge

- 5.5.2 Additionally, West Cumberland Hospital has allocated a total of 1800 parking permits to NHS staff. The cost of a parking permit at present is £110 for all staff per year. The availability, cost and criteria used to allocate parking permits will be appraised through the Travel Planning process and will be complimented by supporting measures to ensure that alternative modes of transport are viable.
- **5.5.3** Although the site currently has 695 designated car parking spaces, the site visit has shown that vehicles are park in the footways and at locations where parking is not permitted such as on double yellow lines at the main site entry as shown in **Photograph 5.1**.



**5.5.4** To avoid these types of conflicts, the hospital will employ car park enforcement officers, targeting users who reputedly commit any of the following parking offences on site.







- Failure to park in a designated bay;
- Failure to provide the required permit within a required zone;
- Failure to pay and display a valid ticket;
- Failure to display a valid disabled badge when parking in a disabled users only parking bay;
- Extended parking beyond the expiry of a ticket;
- Parking on red lines and in restricted zones that impends the access of emergency vehicles, and
- Parking on yellow lines, hatched areas, pavements or grassed areas.
- 5.5.5 Where repeated car parking offenses occur, a servicing notice and wheel clamping will be issued to the offending vehicle and driver. The vehicle clamp release is £80, when a vehicle is parked in an inappropriate location, an enforcement officer firstly records the details of the vehicle and undertakes a check to determine whether previous offences have been committed and recorded. If no offences have been previously recorded, a notice is left with the vehicle. If the driver has been recorded as committing previous parking offences, the car is then clamped by the trust.
- 5.5.6 The car park has been awarded with the Park Mark, an accreditation scheme which recognises that security and safety measures are in place are in compliance with the police standards. Car parking patrols and CCTV are currently in operation.
- 5.5.7 In order to reduce walking distances for patients and visitors, the car parking are located as close as achievable to the main entrances of the different buildings, whereas staff car parks are placed in the periphery of the site.

#### **Cumberland Infirmary**

### 5.6 Existing Car Parking Provision

- **5.6.1** Cumberland infirmary currently has four main areas of car parking that can be accessed from Infirmary Street.
- 5.6.2 In total, at present the car parking has a provision of space for 1,057 vehicles, 638 allocated for staff members, 367 for patients and visitors and 52 for blue badge holders. This number is broken down between the different areas with parking availability for patients and visitors and staff members as shown in the following table.







Table 5.6: Cumberland Infirmary Car Parking Provision (Source: Cumberland Infirmary)

	Staff	Disabled	Public	Total
Zone A	131	12	188	331
Zone C		19	84	103
Zone D		9	45	54
Zone E	157		6	163
Zone F	5	5		10
Tower rear - Zone K	7		17	24
Tower front - Zone N		6	8	14
Pillars - Zone J	33		4	37
Yard - Zone H	7	1	15	23
Infirmary St - Zone I	298			298
Total	638	52	367	1057

- **5.6.3** Currently the Cumberland Infirmary has little control over its current car parking arrangements which leads to numerous operational issues. As a result of that the Trusts appointed Capital Planning Group to produce a note stating the potential car parking strategy that could mitigate the current operational difficulties.
- 5.6.4 The proposed strategy recommends to create up to 400 new car parking spaces at two different locations. The first proposed new car parking is intended to be located off the western end of Infirmary Street after the internal roundabout located by the main building. The second new car parking is proposed to be located off the northern end of Infirmary Street, adjacent to the existing Heliport. This car parking area is proposed to provide up to 381 new parking spaces to the redeveloped infirmary.
- **5.6.5** Further analysis of the proposed car parking layouts will need to be undertaken previous to construction to ensure their compliance with the relevant design standards.
- 5.6.6 Details of this strategy which was produced by Capital Planning Group in June 2014 is enclosed to this report in Appendix B.
- 5.6.7 Figure 5.2 below shows the existing parking arrangement including the cycling parking facilities, the plan identifies the 10 designated areas for parking across the site as well as the new proposed car parking areas. As described in Table 5.6 the main parking areas for staff members are in Zone A, Zone E and Zone I which are located adjacent to the boundary of the Infirmary compound. Visitor and patient car parking spaces are split throughout the site to minimise the walking distance from the parked car to their final destination.



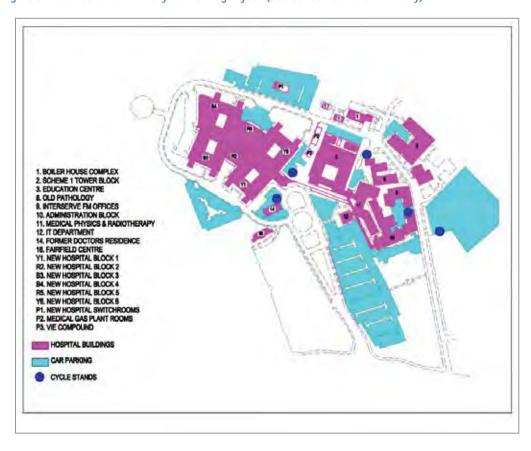


Figure 5.4: Cumberland Infirmary Car Parking Layout (Source: Cumberland Infirmary)

## 5.7 Parking Demand Appraisal

- 5.7.1 The parking demand appraisal follows the same methodology used for West Cumberland Hospital, using the, The Health Technical Memorandum: Transport Management and Car Parking, (Document 07-03, Department of Health, 2006). The results identify the requirement of 660 car parking spaces for staff members and 222 car for patients and visitors resulting in a total of 882 car parking spaces. These results are based on a total of 2,641 staff members and 444 beds. The results of the parking demand toolkit analysis are contained at the end of this report in **Appendix B**.
- 5.7.2 Based on the information provided by Cumberland Infirmary, the existing car parking accommodates in total 1,057 car parking spaces which is sufficient to meet the requirements stated in The Health Technical Memorandum. The split between car parking spaces for staff members and patients and visitors is compliant with the recommendations provided by the standard.

## 5.8 Management of Car Parks

5.8.1 The Cumberland Infirmary also operates as a Pay and Display parking for patient and visitors. The charges being applied for the parking are the same as per the West Cumberland Hospital shown in **Table 5.5** above. Additionally, the trust has allocated 2,631 NHS parking permits including 2,189 for staff, 122 for consultant, 131 for volunteers 90 for volunteers and 99 for outsiders. The cost of a permit is £9.17 or £11.08 per month dependent upon salary. Permits PAYE out of salary.



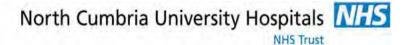




# 6. Travel Plan Progress To Date







## 6 TRAVEL PLAN PROGRESS TO DATE

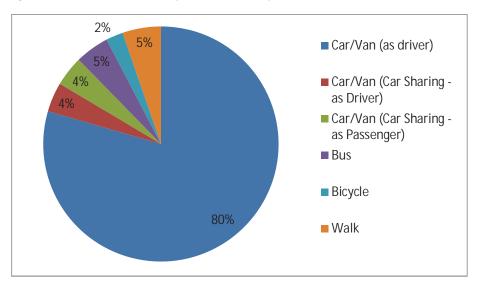
#### 6.1 Introduction

**6.1.1** The following chapter provides information on the history of the Travel Plan progress within the Trust. A full copy of the previous Travel Plan is included in **Appendix C** at the end of this report.

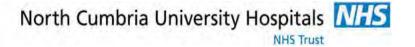
#### 6.2 2011 - 2014 Travel Plan

- 6.2.1 A Travel Plan was progressed in 2011 with a staff survey being undertaken between September December 2010. The staff survey was issued to all staff employed within the North Cumbria University Hospitals NHS Trust to ensure travel behaviour was captured for all staff at West Cumberland Hospital, Cumberland Infirmary and other satellite units across Cumbria. At the time there was approximately 1,565 staff employed at West Cumberland Hospital of which 341 responded to the questionnaire giving a 22% response rate. The survey was completed using a combination of paper surveys and an online survey.
- **6.2.2** The survey results were published in the 2011 Travel Plan which identified the following key findings:
- **6.2.3** Modes of Travel and Journey Details:
  - 80% of respondents travel to work as a car driver, with a further 8% travelling either as a car passenger or car sharer;
  - 5% of respondents indicate that they use public transport (bus) as their main mode of travel to work; and
  - 37.5% of respondents travel over 5km to work whilst 18% travel less than 2km. Of those respondents who
    travel less than 2km, 25% walk.
- **6.2.4** Figure 6.1 illustrates the 2011 staff modal split at the West Cumberland Hospital.

Figure 6.1: West Cumberland Hospital Staff Modal Split (2011)



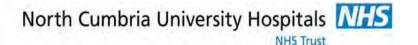




#### 6.2.5 Car Users

- Car drivers were asked why they travel by car to work. 26% of staff chose to travel by car because of the reliability whilst 25% of staff expressed that car use was essential during their working day. A further 33% of respondents stated that there was a lack of alternative travel mode.
- 46% of car drivers park in the hospital car park whilst 19% park in the 'staff parking' area. 80% of staff identified that they have a parking permit for use at West Cumberland Hospital whilst only 2% stated they were not in possession of a parking permit.
- When asked what would encourage users to car share, 29% advised that they would like help in finding a suitable car share partner whilst 18% would like to see a lift home if let down by car sharer and reduced parking charges for car sharers.
- Staffs were asked what incentives could be introduced to promote public transport. They expressed that
  more reliable and direct routes were needed to the hospital and services should be more frequent.
- With regards to cycling, staff advised that they would welcome better facilities including changing rooms and lockers as well as improved cycle parking.
- Car drivers were asked what would encourage them to walk to work, with 49% of respondents stating that
  no measures could promote them to walk as they require their vehicle for work or live too far from the
  hospital.
- 6.2.6 Chapter 11 of this report identifies the measures that have already been implemented to support and encourage the use of sustainable travel as well as it proposes new measures to continue to increase the use of sustainable modes of transport.





# 7. 2014 Staff Travel Survey Responses







## 7 2014 STAFF TRAVEL SURVEY RESPONSES

#### 7.1 Introduction

- 7.1.1 To provide an update for the new 2014 2017 Plan, record current staff travel behaviour at West Cumberland Hospital and Cumberland Infirmary, and to support the development of an updated Travel Plan, AECOM conducted an online survey between July and September 2014. The survey was made available to staff via the hospital intranet, computer screensavers and promoted in the monthly newsletter. Copies of the information supplied, including surveys, are included in **Appendix D** at the end of this report.
- 7.1.2 The Trust encouraged all staff employed at West Cumberland Hospital and the Cumberland Infirmary to complete the survey to ensure travel behaviour was captured for all staff including those who work at various units across Cumbria as it is acknowledged a proportion of staff working predominantly at West Cumberland Hospital work at Cumberland Infirmary or other satellite units.
- **7.1.3** The overall aims of the survey are to establish current staff travel patterns and modal split and the results will be used to identify any improvements required to transport provision to and from the hospitals, as well as promoting healthier living and the use of sustainable transport.

#### 7.2 Results

#### **Background Information**

Where do you usually start your journey to work?

- 7.2.1 The trust staff provided their residential address; this information has been plotted in MapInfo to provide a visual of staffs residential locations. Question 9 of this survey asked staff to state the mode of transport they use to commute to work. This information has also been included within the MapInfo plot as illustrated in Figure 7.1 for West Cumberland Hospital and Figure 7.2 for Cumberland Infirmary. Colour coding has been applied to the staff postcodes, to indicate the various mode of transport used to travel to and from the Hospital.
- **7.2.2 Figure 7.1** shows the majority of staff resides in towns within the vicinity of the Hospital including Whitehaven, Workington and Egremont. A proportion of residents live in smaller settlements of Seascale, Cleator Moor, Gosforth and the rural areas of Cumbria.
- **7.2.3** Figure 7.2 illustrates that the majority of the staff travelling to the hospital live in the vicinity of Carlisle and most of them walk to work. As the Infirmary is well connected to the west coast of England a proportion of the surveyed staff live along the A595 and the A596 in Workington, Cockermouth and Wigton amongst others.





Figure 7.1: Location of West Cumberland Hospital Staff and Mode of Transport used to Commute

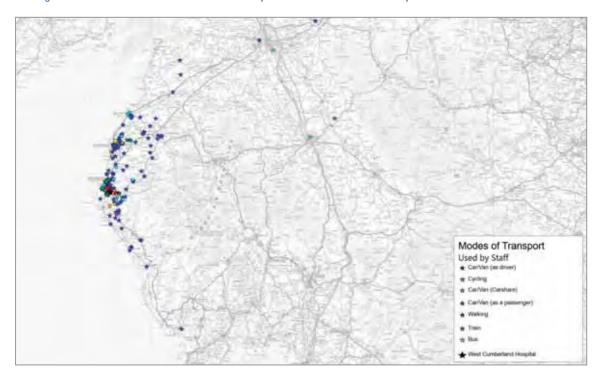
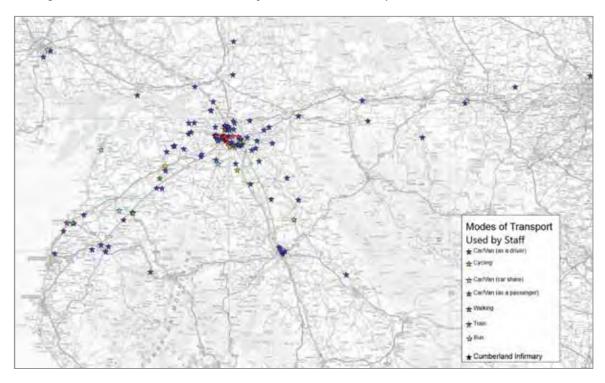


Figure 7.2: Location of Cumberland Infirmary Staff and Mode of Transport used to Commute



At what time (approximately) do you usually leave to travel to work?

7.2.4 Staffs were asked to identify their estimate time of departure when travelling to work. The results have been plotted in **Figure 7.3**, illustrating a peak period when staffs depart between 07:30 – 08:00 hrs, with a total of

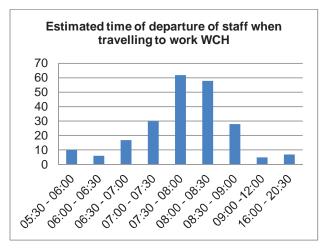


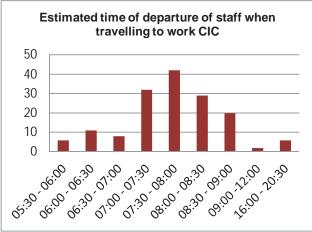




62 and 42 staff leaving during this period for West Cumberland Hospital and Cumberland Infirmary respectively.

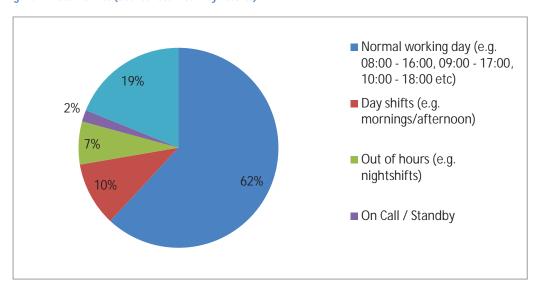
Figure 7.3: The estimated time that staff departs for work





7.2.5 In total 233 staff members noted that they work normal working hours (09:00 to 17:00), and 71 other staff members they specify that they work either in Day/night shift rotation or on call. The responses indicate that a significant proportion of staff working in the Trust arrive regularly during the am peak period, whilst a significant proportion of staff work.

Figure 7.4 Staff Shifts (Source: Staff Survey results)

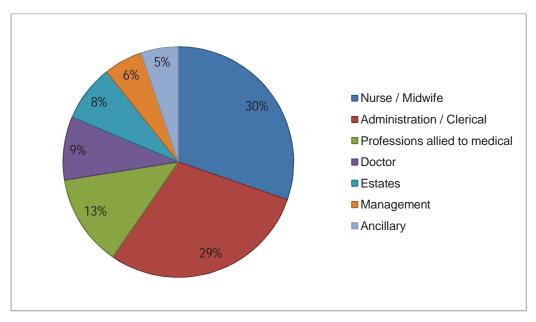


What is your occupation?

7.2.6 Staffs were asked to identify their occupation within the Trust, the results are presented in the pie chart below.



Figure 7.5 Staff Occupations (Source: Staff Survey results)

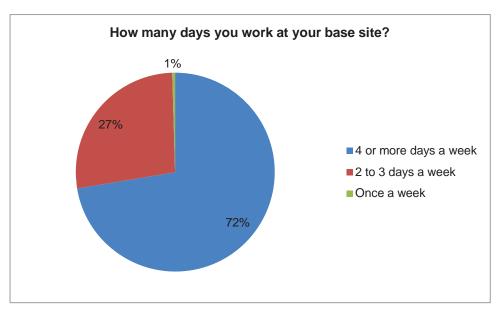


#### Travel Behaviour

How many days do you usually work at your base site?

7.2.7 It is acknowledged a number of staff work in various NHS locations across Cumbria. The survey asked staff to identify the approx number of days they are based at their base medical facility. **Figure 7.5** illustrates the majority of staff members of the trust (72%) answered '4 or more days a week', whilst over a quarter of staff (27%) work '2 to 3 days per week' at their base site.

Figure 7.6 Staff Locations







How many days do you usually work at your base site?

- **7.2.8** The following question aimed to identify the percentage of staff members working at another site to assist the Trust in developing measures to promote sustainable travel.
- 7.2.9 In total, 323 staff responded and the vast majority of the staff members rarely or never work at a different location than their base site (181). In addition, nearly a fifth of staff (43) works at least once a day at a different location than their base site and only 17 staff of the NHS Trust work 4 or more days a week in a different location.

Do you travel anywhere else during your working day?

**7.2.10** 393 staff members responded to this question and less than a third (112) confirmed that they need to travel during their working day.

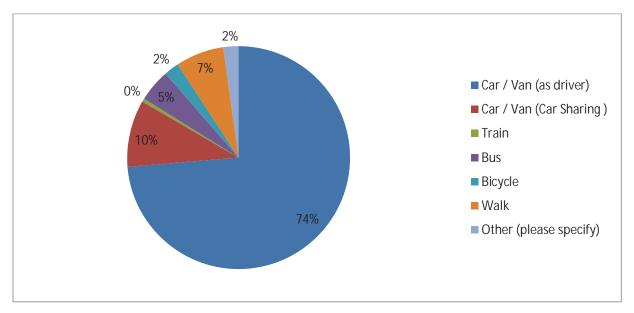
How do you usually travel to/from work?

- 7.2.11 In total, 402 staff indicated the mode of transportation used to travel to and from the two sites. Approximately 74% (296) of respondents stated they travel by car / van as the driver. A small proportion of staff car share to work, with 10% (39) of respondent's car sharing as either the driver or passenger.
- 7.2.12 In addition, 5% (19) of respondents identified they travel by bus to work. Whilst the number of persons travelling via bus is low to the Hospital, it is anticipated the number of staff travelling via public transport would be minimal, given the limited services to and from the sites. On the other hand, Cumberland Infirmary, located in the suburbs of Carlisle benefits from a wider and dense public transport network which allow a larger number of staff to travel to the Infirmary by Public Transport. When the data is analysed separately for the two sites, the results confirm the above, 71.6% of staff use the car as driver to get to Cumberland Infirmary against the 75.5% travelling by car from and to West Cumberland Hospital.
- **7.2.13** Additionally, 7% of respondents stated walking as their main mode of transportation to and from the NHS Trust. In total, just 2 respondents identified they travel to their work place using the Train. The below illustrates the modal splits in the journey to work.





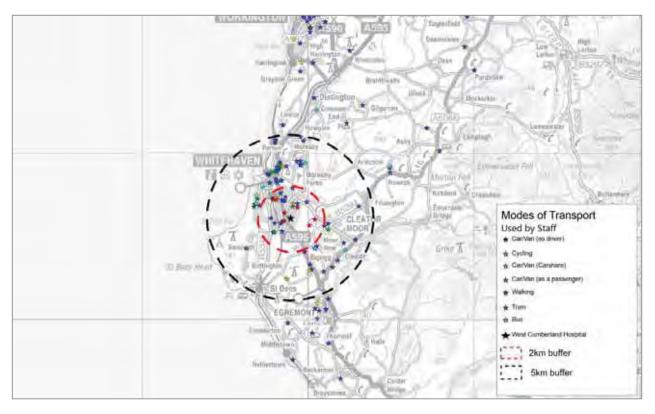
Figure 7.7 Mode of Transport used by Hospital Staff (Source: Staff surveys)



- 7.2.14 The 2014 survey has revealed that the number of car drivers has been reduced by 7% from the results obtained in the 2011 staff survey. In addition, the users of Car sharing and the percentage staff walking have been increased by 6% and 2% respectively. These results lead to believe that the implementation of measures to promote sustainable transport amongst the Hospital staff is slowly shifting the travel behaviour of the staff.
- 7.2.15 Measures have been incorporated in this Travel Plan to promote car sharing amongst staff. Measures will also be prepared to target staff living in close proximity to the Trust sites. As identified in Planning Policy Guidance (PPG) 13: Transport, walking and cycling are the most important modes of transportation particularly at a local level to replace short car trips. Cycling has the greatest potential to replace car trips particularly under 5 kilometres, whilst walking can replace cars trips under 2 kilometres.
- 7.2.16 Figure 7.8 below has been prepared illustrating a five and two kilometre catchment from West Cumberland Hospital, which reflects the recommended cycling and walking catchments in PPG13: Transport. In addition, postcodes of staff have been plotted and colour coded to reflect the mode of transport used to travel to and from the Hospital. This will assist the Trust in targeting households living in vicinity to the Hospital that travel via car, to promote modal shift to more sustainable travel.

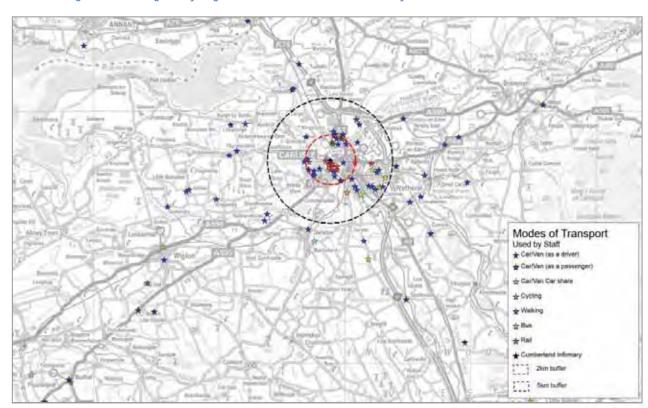


Figure 7.8 Walking and Cycling Catchment for West Cumberland Hospital Staff



**7.2.17** A similar exercise has also been performed for Cumberland Infirmary and the results are presented in the figure below.

Figure 7.9 Walking and Cycling Catchment for Cumberland Infirmary Staff







7.2.18 The total number of persons residing within both a five and two kilometre catchment area has been calculated, as well as the mode of transport used by these staff to access the Hospital. Table 7.1 presents the modal share for staff within a two kilometre catchment for the West Cumberland Hospital and the Cumberland Infirmary, whilst Table 7.2 shows the modal share for staff within a five kilometre catchment.

Table 7.1 Mode of Transport used by Staff living within a 2 kilometre catchment

West Cumberland Hospital				
Mode of Transport	Total	Percentage		
Car / Van as Driver	19	63.4%		
Car / Van (Car Sharing as Passenger)	2	6.7%		
Bicycle	1	3.3%		
Walk	7	23.3%		
Bus	1	3.3%		
Total	30	100%		
Cumberland Infirmary				
Mode of Transport	Total	Percentage		
Car / Van as Driver	15	88.2%		
Car / Van (Car Sharing as Passenger)	1	5.9%		
Bicycle	0	0%		
Walk	0	0%		
Bus	1	5.9%		
Total	17	100%		

- 7.2.19 In total, 30 staff live in a two kilometre catchment from West Cumberland Hospital, as illustrated in **Table 7.1**. The majority of staff travels via private car, with single occupant car drivers accounting for 19% (63.4%), whilst 6.7%% (2) car shares as a passenger. Given the proximity of the Hospital, walking is a key mode of transport used by staff with 23.3% (7) indicating they travel via foot to work. Another form of sustainable transport used by staff is via bike; with 3.3% (1) of staff noted they travel via this mode to work.
- 7.2.20 The results from the West Cumberland hospital show that the percentage of car drivers has been reduced by 1.6% and now 3.3% of the staff members' surveyed living within 2km from the hospital walks to work. The proportion of car sharing has also been increased by 12.7% whereas the proportion of staff cycling to work or walking has been slightly reduced.
- 7.2.21 In terms of the modal split for staff members living within 2km form the Cumberland Infirmary, 15 (88.2%) recognise that they travel by car as a driver and only 5.9% travel by car as a passenger or by bus. No staff members cycled or walk to work, probably due to the rural location of the Infirmary.

Table 7.2 Mode of Transport used by Staff living within a 5 kilometre catchment

West Cumberland Hospital			
Mode of Transport	Total	Percentage	
Car / Van as Driver	18	78.3	







Car / Van (Car Sharing as Passenger)	3	13.0%		
Bicycle	0	0%		
Walk	0	0%		
Bus	2	8.7%		
Total	23	100%		
Cumberland Infirmary				
Mode of Transport	Total	Percentage		
Car / Van as Driver	20	74.1%		
Car / Van (Car Sharing as Passenger)	0	0%		
Bicycle	1	3.7%		
Walk	0	0%		
Bus	6	22.2%		
Total	27	100%		

- 7.2.22 In total, 23 staff indicated they live within a five kilometre radius of West Cumberland Hospital and 27 from The Cumberland Infirmary. Table 7.2 presents the modal share for these staff, illustrating the majority travel via private car (78.3% and 74.1%) to work, whilst only staff from the West Cumberland Hospital 13% (3) stated they car share. None of the staff living within 5km from the sites travel via foot, whilst only one person cycle to work to the Cumberland infirmary. In addition, due to the wider catchment area, 8.7% and 22.2% of staff travel via bus to the West Cumberland Hospital and Cumberland Infirmary respectively.
- 7.2.23 The analysis of modal split of the staff members living within 5km from the hospital has revealed an increase in the proportion of car divers by 3.3% as well as a reduction in the percentage of staff walking and cycling by 15%. However the proportion of bus users has been increased by 5.7%. The comparison between the 2011 TP and the 2014 TP is detailed in further detail in **Figure 7.14**.

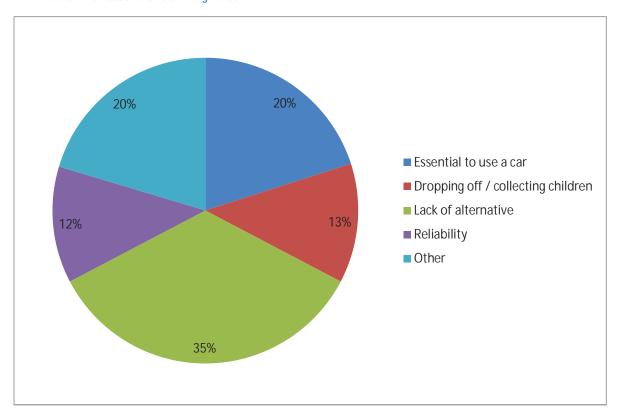




Why do you usually travel to work by car?

7.2.24 Staffs were encouraged to indicate the main reasons why they chose to travel via car to and from work. This would assist the Trust in determine whether measures could be developed to address any staff concerns to promote more sustainable travel.

Table 7.10 Reasons for travelling via car



- **7.2.25** The results illustrated in **Figure 7.10** shows the three key reasons for staff to travel via car are as follows:
  - Essential to use a car during the work day;
  - Dropping children off;
  - Lack of an alternative; and
  - Reliability.
- **7.2.26** Staff members who responded "Other" to this question specified the following main reasons:
  - Long walking distances to and from Bus stops;
  - PT not available at required times;
  - Heavy materials to carry; and
  - More time consuming than the car.
- 7.2.27 The nature of working in a hospital will require staff to use a car as their main mode of travel, particularly for on-call staff. Given the limited bus service provision and the distance from the rail station, 35% of responses are due to the 'lack of an alternative'.





- 7.2.28 Compared to the results obtained in the 2011 TP the option lack of alternative has remained the main reason to the use of the car follow by Essential use in approximately the same proportions. However the reliability of the car (26% in TP 2011) has now been replaced by 'Dropping off/ collecting' children as a third option.
- **7.2.29** What size of engine and type of fuel does your vehicle have/ consume?
- 7.2.30 Staff driving to the Hospital provided the engine size of their vehicle and the type of fuel consumed. The total distance travelled by staff to and from the Hospital was then calculated based upon their residential address, which was provided in the initial question of the survey. The distance travelled will be then used to assess the impact on CO2 emissions resulting from the number of trips to and from the hospital. The methodology used to assess the impact of the Gas emissions is fully described in Appendix E.
- 7.2.31 The outputs will be used as baseline data and following future staff surveys, the Trust will be measure future results against the baseline data. This will assist the Trust in measuring the success of the Travel Plan and its initiatives.

#### Car Parking

Where do you or the driver usually park the vehicle?

- 7.2.32 Staffs travelling via car were asked to identify the locations they park their vehicle. In total, 175 staff members of the West Cumberland Hospital stated they parked in the 'car park', whilst 68 noted they used 'staff parking' a small proportion of staff also identified they used the parking opposite the Hospital on Homewood Road, Maternity car parking and the Mortuary car park. In addition 34 staff members stated that they park in the on street parking available in the vicinity of the Hospital.
- **7.2.33** Additionally, 137 staff members from Cumberland Infirmary confirmed that they use either the staff car parking (35), the hospital car parking (85) or the on street car parking spaces available.

Do you or the people you travel with have a parking permit?

**7.2.34** In total, 316 people identified they have a parking permit for use at West Cumberland Hospital, whilst only 41 staff stated they were not in possession of a parking permit.

**Public Transport** 







If you usually use the bus to travel to/from work, what are the service numbers?

7.2.35 Staffs travelling via bus were asked to identify which service number they used and if they travel via two buses, then staff were asked to identify both service numbers. The results have been summarised in Table 7.3.

**Table 7.3 Bus service Numbers** 

Bus Service Number	Bus 1	Bus 2 (if applicable)
2	1	-
22	2	-
30	11	2
31	1	2
32	-	2
38	-	1
60	2	1
61	1	-
62	2	-
67/68	3	4
76	3	-
300	1	-
X5	-	1

- 7.2.36 The table illustrates service number 30 is the commonly used service with 13 users to travel to West Cumberland Hospital whereas route numbers 67/68 with 7 users is the preferred bus to the Cumberland Infirmary.
- **7.2.37** As part of this question, staffs were asked to identify whether they used a travel card when using public transport. In total, 122 persons responded with 108 stating they don't use a travel card.





Which of the following modes of transport do you occasionally use instead of your main mode?

| Car / Van (Car Sharing) | Car / Van (as driver) | Walk | Bus | Bicycle | None | Other | Train

Figure 7.11 Alternative Mode of transport

7.2.38 The majority of the staff recognises that if their main mode of transport fails, they would car share or use their own car (23% and 18% respectively). In addition to that 17% of the staff members surveyed have confirmed that their alternative mode of transport would be walking, followed by a 13% who would use the bus and a 13% who would cycle. This last three groups represent almost 50% of the staff members, which could be encouraged to use sustainable modes of transport in their day to day journey to work.

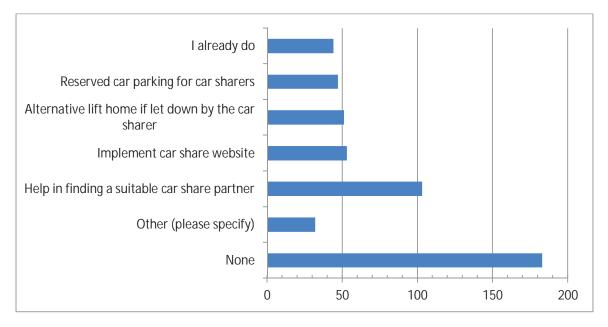
#### Incentives to Promote Sustainable Travel

Which of the following would encourage you to car share for your journey to work?

7.2.39 The survey asked staff to identify whether any potential incentives would encourage staff to car share to and from the Hospital. The survey presented a number of potential incentives and the responses are illustrated in the figure below.



Figure 7.12 Incentives to encourage Car Sharing



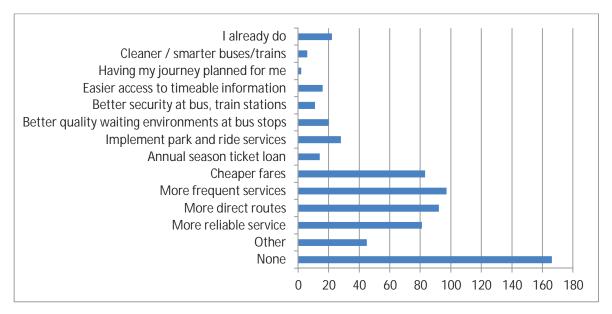
- 7.2.40 The results illustrate that a total of 366 staff responded to the question from which approx 103 respondents would like assistance in finding a suitable car sharing partner similarly to what the 2011 survey already highlighted. Additionally 53 more would be encouraged to car share if there was a database managed by the Trust with potential members of the car sharing scheme. Other potential incentives include an emergency lift home, if let down by car sharing partner, supported by 14% of the staff members.
- **7.2.41** The number of staff already car sharing has increased from the last TP in 2011 however as for the 2011 TP the vast majority of the surveyed staff recognises that no measures will encourage them to car share.

Which of the following would encourage you to use bus or train for your journey to work?

7.2.42 Staff provided feedback with regards to potential initiatives to could encourage more persons to use public transport as part of their journey to work. The responses have been collated and summarised in Figure 7.13. The results illustrate that approximately 100 persons stated that more frequent, more reliable, safer and cheaper fares would encourage them to use bus or train. The most frequent concerns were regarding bus service provision as they are seen as not regular, in particular during the morning peak periods and during shift changes.



Figure 7.13 Incentives to promote public transport



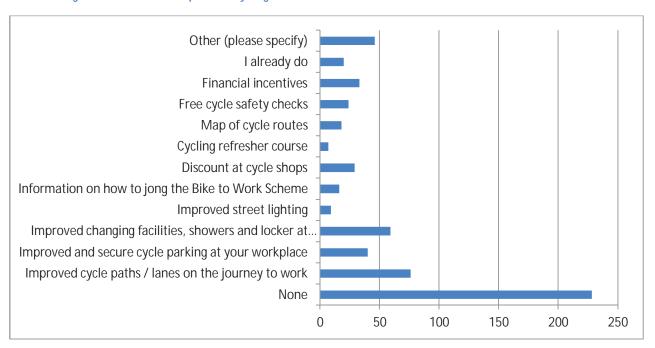
7.2.43 The limited public transport services in Cumbria, particularly to West Cumberland Hospital are reflected in the responses in Figure 7.13. The edge of town location, coupled with the distance to the rail station and irregular bus services are a concern for potential public transport users. Staff would also welcome financial incentives to use public transport via cheaper fares.

Which of the following would encourage you to cycle for your journey to work?

- **7.2.44** This question aimed to identify measures to promote staff to cycle to and from West Cumberland Hospital. The feedback indicated that staff would welcome the following initiatives:
  - Improved changing facilities and lockers;
  - Improved cycle paths / lanes; and
  - Improved security at cycle parking.



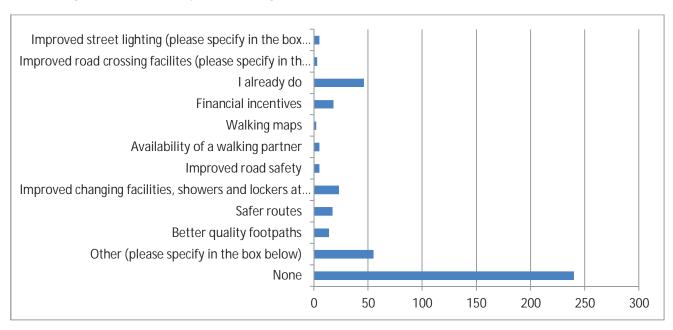
Figure 7.12 Incentives to promote cycling



Which of the following would encourage you to walk for your journey to work?

7.2.45 Staff was asked whether any measures would potentially encourage people to walk as part of their journey to and from their base site. A significant number stated that no measures could promote them to walk, a number of staff noted that often they require their vehicle for work or staff they live too far from the Hospital.

Figure 7.13 Incentives to promote walking







Do you have any comments that might encourage you to use bus or train for your journey to work?

- 7.2.46 The feedback from staff included the need to use the car to drop off and pick up children and the requirement of the car for work purposes. Additionally, as the majority of car users work over 2 days at a different site within the NHS trust, they would welcome Shuttle services between sites.
- 7.2.47 A small proportion of staff welcomed improvements to changing facilities including lockers, showers and a drying room, to encourage more persons to walk or cycle to work. Improvements in the Highways infrastructure for pedestrians and cyclists will also encourage more staff to walk. Those results are consistent and similar to the results provided in the surveys carried out for the 2011 TP.

#### 7.3 Comparison of 2011 and 2014 Modal Split

7.3.1 As stated above, a staff survey was formerly conducted amongst staff at the West Cumberland Hospital between September 2010 and December 2010 and the results presented within a 2011 Implementation Travel Plan Report. It is particularly beneficial to the development of this revised Travel plan that the previous results from the 2011 survey are examined and compared with those from the 2014 survey. This analysis provides an indication as to any staff travel patterns prevalent in both 2008 and 2013, and identifies changes in travel mode splits, which may influence the Travel Plan.

Table 7.4 Comparison of Mode Split of Travel 2011 and 2014

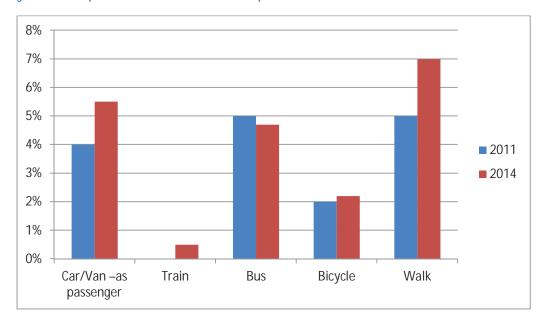
Mode of Travel	Results			
Mode of Travel	2011 Mode Split	2014 Mode Split		
Car/Van –as driver	84%	80.1%		
Car/Van –as passenger	4%	5.5%		
Motorcycle	0%	0%		
Train	0%	0.5%		
Bus	5%	4.7%		
Bicycle	2%	2.2%		
Walk	5%	7%		
Other	0%	0%		

**7.3.2** The results are presented in greater detail, graphically below (car users have been removed from the graphic below due to scale differences):





Figure 7.14 Comparison of 2011 and 2014 Modal Split



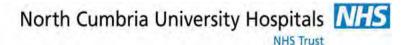
- 7.3.3 Since 2011 survey there has been a decrease in vehicle drivers of approximately 4%, car sharing has increased by 1.5% and walking and cycling have also increased by 2% and 0.4% respectively. Sustainable measures have already been introduced and are having a positive effect on the staff mode choice. The results of the incentives to use alternative modes section of the survey identify further opportunities to continue to introduce additional measures such as:
  - Help finding suitable car sharing partner
  - More direct routes on public transport,
  - Improved cycle lanes paths on the journey to work; and
  - Safer walking routes.

#### 7.4 Conclusion

- 7.4.1 The responses provided by staff at West Cumberland Hospital will assist the Trust in developing a successful Travel Plan. The results of the survey will provide an understanding of the existing travel behaviour of staff, whether any issues or barriers exist that restrict sustainable travel and to identify and initiatives that could reduce vehicular travel.
- 7.4.2 The comparison from the data obtained in the 2011 TP and the results from the 2014 surveys show that there have been small changes in the travel behaviour of the staff members further to the implementation of the 2011 Travel Plan. However there are opportunities to further encourage a shift in staff travel modes to more sustainable ones.
- 7.4.3 The survey revealed that the staff are most likely to switch to sharing their car journeys and they would be interested in using public transport if more reliable, frequent extended services were provided. More help would be needed in founding suitable car share partners and more routes. A direct Shuttle bus service between sites would be a most welcome initiative.







# 8. 2014 Patient & Visitors Travel Survey Responses







#### 8 2014 PATIENT & VISITOR TRAVEL SURVEY RESPONSES

#### 8.1 Introduction

- 8.1.1 In order to understand visitor travel behaviour and issues for travel to the West Cumberland Hospital and Cumberland Infirmary, AECOM produced a survey to interrogate visitors and patients. Whilst the staff survey was sent in digital format through the Hospital and Infirmary NHS intranet, visitors and patients were asked to fill in a paper survey as they could not get access to the NHS intranet. The leaflets were distributed across hospital and left at the reception of the different departments. Patients and visitors were encouraged to fill it and return it to the designated areas. Questionnaire prepared for patients and visitor has been included in Appendix D.
- 8.1.2 A4 posters advertising the survey process and encouraging patients and visitors to fill in the questionnaire were placed across the West Cumberland Hospital. The advertising material can be found in **Appendix D**. All the survey results have been analysed and the conclusions of this analysis are presented below.

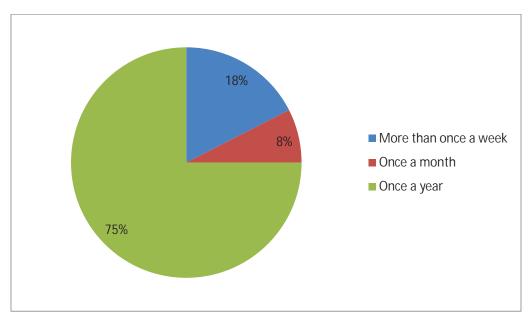
#### 8.2 Results

#### **Background Information**

How frequently would you attend West Cumberland Hospital?

**8.2.1** Three quarters of the patients and visitors enquired confirmed that they only visit the Hospital once a year. People attending to the Hospital several times per week represent 17% of the total of patients and visitors surveyed. The rest of the patients and visitors surveyed only visit the hospital once a month and no patients confirmed to attend the hospital once a year.

Figure 8.1: Time of departure.



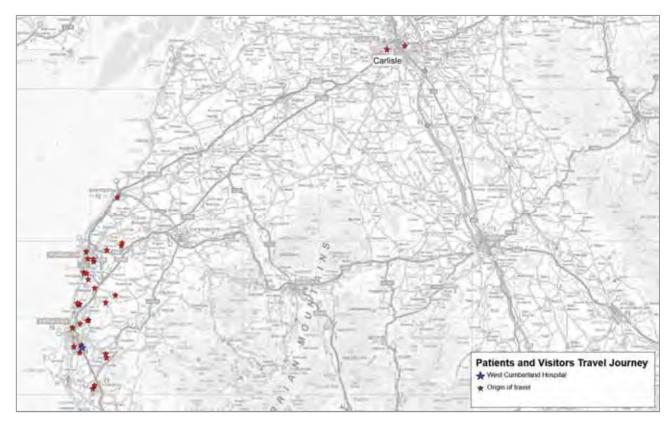




#### **8.2.2** Origin of the Journey?

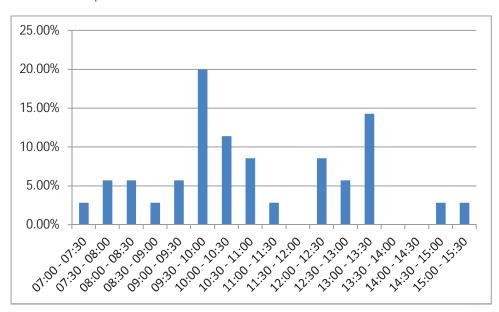
**8.2.3** Within this question of the survey form visitors were asked to provide their home postcode. A scatter plot of postcodes is presented at **Figure 8.2.** 

Figure 8.1: Catchment area for patients and visitors travelling to the hospital.



#### 8.2.4 Time of departure

Figure 8.2: Time of departure.

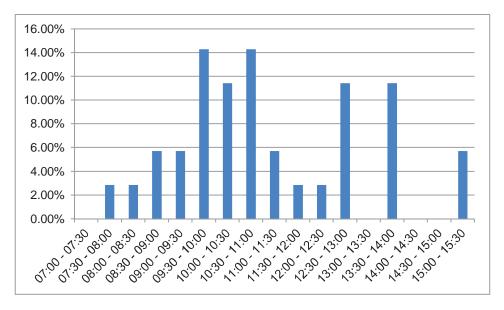






#### 8.2.5 Time of arrival

Figure 8.3: Time of arrival

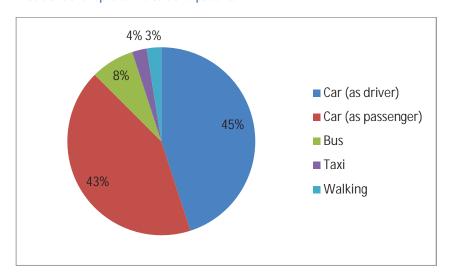


**8.2.6** The analysis of this question combined with the analysis of the time of departure, has allowed to outline the average journey times, during different hours of the day, indicating how the vast majority of the patients and visitors have a journey travel time of less than 30minutes (67%), only a small percentage of the people surveyed would travel for more than 1 hour (9%).

#### Travel Behaviour

- **8.2.7** How did you travel to the hospital? (main method)
- **8.2.8** The purpose of this question was to define modal split for patients and visitors travelling to the West Cumberland Infirmary, results are presented in the figure below.

Figure 8.4: Mode of travel Split for visitors and patients.





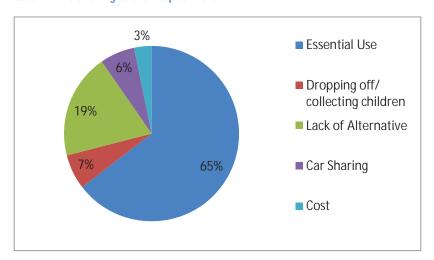


**8.2.9** This illustrates that the majority of visitors and patients (45%) travelled by car a as driver, the next most popular response was that they travelled by car as a passenger (42%). A further 7 % of visitors travelled by bus and 3% used a Taxi or walked. No patients cycled.

Reasons for travelling to the hospital via car?

**8.2.10** The main reasons for using the car were essential use (65%), lack of alternative (19%), dropping off or collecting children (7%) and cost (3%).

Figure 8.5: Reasons for travelling to the hospital via car.

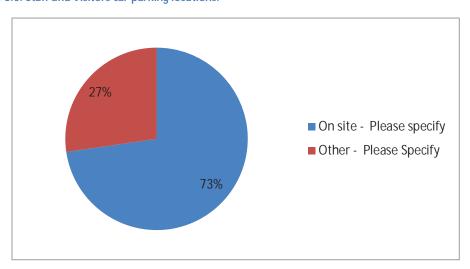


#### Car Parking

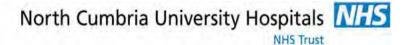
Where do you park?

**8.2.11** The most widely used car park is the hospital car park, 72.7% of respondents indicating that they use this car park. 22.7% of respondents confirmed that they park outside maternity or on road.

Figure 8.6: Staff and Visitors car parking locations.







#### **Public Transport**

If you travelled by bus, which service number did you travel on?

**8.2.12** Those who travelled by bus were asked the combination of buses they used to get to the hospital. Only 2 people confirmed that they travelled to the hospital by bus using bus routes 30 and 31 respectively.

Which bus stop did you get dropped off at?

**8.2.13** The bus users confirmed that their drop-off bus stop was Egremont Road. None of the patients and visitors surveyed used the Homewood Road.

#### Incentives to Promote Sustainable Travel

Which of the following would encourage you to use bus or train for your journey to the hospital?

- **8.2.14** Two thirds of patients and visitors / respondents (67%) at the West Cumberland Hospital stated that cheaper fares would encourage them to use the bus, train or Metrolink as their mode of travel to / from work.
- **8.2.15** The other highest response was; 'provision of a more frequent service' with 33 % citing this as a measure to encourage them to switch travel mode
- **8.2.16** 33% of staff stated no incentive would make them use public transport. These results are summarised in the figure below.

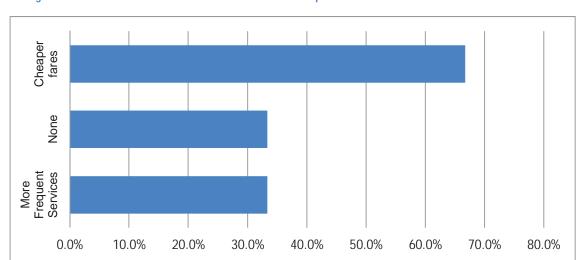


Figure 8.7: Staff and Visitors Incentives to use Public transport.

Which of the following would encourage you to cycle for your journey to the hospital?

- **8.2.17** Patients and visitors were also questioned whether they could be encouraged to cycle to the West Cumberland Hospital and what incentives could be put in place to encourage travel via cycling.
- **8.2.18** The highest level of respondents (67%) stated that improved cycle lanes would encourage them to cycle to work additionally 33% confirmed that nothing could be put in place to encourage them to cycle to work. Other







measures such as secure parking, improved street lighting and a map of cycle routes would not represent an sufficient incentive to patients and visitors to cycle to the hospital.

Which of the following would encourage you to walk for your journey to the hospital?

**8.2.19** All of the respondents stated that both a better quality of footpaths and improved road safety would encourage them to walk to the Hospital.

#### 8.3 Conclusion

**8.3.1** The results of the visitor survey indicate that there is a potential to reduce the car journeys by encouraging alternative modes of transport. The survey has indicated that the majority of patients and visitors travel to the trust by car. It is also noted that bus and is the most popular in terms of alternative modes of transport (occasionally used), confirming that there are still opportunities to further encourage a modal shift.







### 9. Carbon Footprint







#### 9 CARBON FOOTPRINT

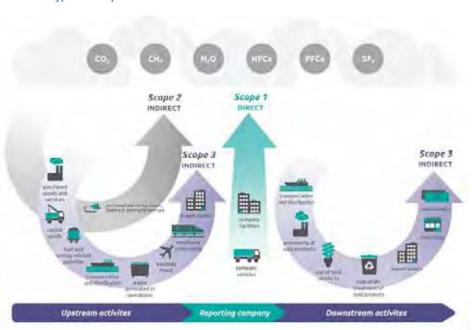
#### 9.1 Introduction

9.1.1 This chapter of the Travel Plan will examine the carbon emissions generated by the Trust using the results from the 2014 Staff and Patient & Visitor survey. The carbon emissions generated by the fleet will also be examined and opportunities identified for the Trust to more accurately calculate the Trust carbon footprint from travel.

#### 9.2 Scope 3 Emissions

- 9.2.1 As stated in the NCUH Trust Annual Report 2012/13, the NHS has aims to reduce its carbon emissions by 10% between 2009 and 2015. A key theme of the Trust meeting these targets will be through the Travel Plan and the collection of Scope 3 emissions data. The Trust will adhere to the Greenhouse Gas Protocol (GHG) which is an internal accounting tool for businesses to understand, quantify and manage greenhouse gas emissions. The GHG Protocol defines the Scope classifications as:
- **9.2.2 Scope 1 Direct Emissions:** Direct emissions resulting from activities within the organisation's control. Includes on-site fuel combustion, manufacturing and process emissions and company vehicles;
- **9.2.3 Scope 2 Indirect Emissions:** Indirect emissions from the generation of purchased or acquired electricity, heating or cooling consumed by the company;
- 9.2.4 Scope 3 Indirect Emissions: All indirect emissions (not included in Scope 2) that occur in the value chain of the company, including both upstream and downstream emission. This can be the employee business travel, outsourced transportation, waste disposal, water usage and employee commuting.
- **9.2.5** Figure 9.1 illustrates the Scope 3 emission types alongside Scope 1 and Scope 2 emissions.

Figure 9.1: GHG Main Types of Scope Emissions









**9.2.6** In the 2011 West Cumberland Hospital Travel Plan, staff surveys were used to generate the approximate amount of Carbon Dioxide, Methane and Nitrous Oxide emitted per day from staff commuting via car to the Hospital. A summary of the results is included in **Table 9.1** below.

Table 9.1: Summary of GHG Emissions - Staff Commuter Trips

Vehicle Type	Total Direct Green House Gas Emissions (kg CO <sub>2</sub> e)	Total Indirect Green House Gas Emissions (kg ${\it CO}_2e$ )	Total Greenhouse Gas Emissions (kg CO <sub>2</sub> e)
Diesel Car	631	112	743
Petrol Car	298	57	355
Total	929	169	1098

- 9.2.7 Following the 2014 Staff Travel Survey, carbon emissions generated by staff commuting to the West Cumberland Hospital and the Cumberland Infirmary following a similar process than in the Travel Plan produced in 2011. The following paragraphs provide an overview and description of the calculations and the results of the emissions currently generated by the trust.
- **9.2.8** Industry standard conversions factors obtained from DEFRA/DECC Greenhouse Gas (GHG) have been applied to generate the approximate amount of Carbon Dioxide, Methane and Nitrous Oxide emitted per day from staff commuting via car to the Hospital.
- 9.2.9 Based on the total of 404 responses, 74% of the staff members confirmed they commute to the trust by car as drivers. Those results were uplifted to reflect the carbon emission for the 3,958 staff members who work in the two sites of the Trust. Indirect GHGs is associated with transportation, extraction and the production of fuels that is not owned or reported by the Trust.
- **9.2.10** The conversion factors as presented in **Tables 9.2** and **9.3**. The staff responses were broken down per fuel consumption type e.g. petrol or diesel, whilst cars were split into either a small, medium and large engine size category.

**Table 9.2 Conversion Factors for Petrol Cars** 

Passenger Road Transport Conversion Factors: Petrol Cars		Multiply	CO <sub>2</sub>	CH <sub>4</sub>	N <sub>2</sub> O	Total Direct GHG	
Size of car	Total units travelled	Units	х	kg CO <sub>2</sub> per unit	kg CO₂e per unit	kg CO₂e per unit	kg CO₂e per unit
Small petrol car, up to 1.4 litre engine	72,467	km	Х	0.25735	0.000225	0.000901	0.258476
Medium petrol car, from 1.4 - 2.0 litres	3,462	km	Х	0.322158	0.000225	0.000901	0.323284
Large petrol cars, above 2.0 litres	462	km	Х	0.465809	0.000225	0.000901	0.466935





**Table 9.3 Conversion Factors for Diesel Cars** 

Passenger Road Transport Conversion Factors: Diesel Cars		Multiply	CO <sub>2</sub>	CH <sub>4</sub>	N₂O	Total Direct GHG	
Size of car	Total units travelled	Units	х	kg CO <sub>2</sub> per unit	kg CO₂e per unit	kg CO₂e per unit	kg CO₂e per unit
Small diesel car, up to 1.7 litre or under	16,617	km	Х	0.233661	0.00008	0.002849	0.23659
Medium diesel car, from 1.7 to 2.0 litre	13,616	km	Х	0.282247	0.00008	0.002849	0.285176
Large diesel car, over 2.0 litre	4,847	km	Х	0.368009	0.00008	0.002849	0.370938

9.2.11 Using these conversion factors, the DEFRA tool has generated both the total amount of 'Direct Greenhouse Gases (GHGs)' and 'Indirect GHGs' emitted from cars commuting to and from West Cumberland Hospital as well as to and from Cumberland Infirmary. The emissions generated have been summarised in Tables 9.4 and 9.5.

**Table 9.4 Greenhouse Gas Emissions for Petrol Cars** 

Size of Car	Total units travelled (km)	Carbon Dioxide (CO <sub>2</sub> ) Emissions kg CO <sub>2</sub>	Methane (CH₄) Emissions kg CO₂e	Nitrous Oxide (N <sub>2</sub> O) Emissions kg CO <sub>2</sub> e	Grand Total Greenhouse Gas Emissions kg CO <sub>2</sub> e
Small petrol car, up to 1.4 litre engine	72,467	11,588	10	41	11,639
Medium petrol car, from 1.4 - 2.0 litres	3,462	693	0	2	695
Large petrol cars, above 2.0 litres	462	134	0	0	134
Total	7,677	12,415	11	43	12,468





**9.2.12** The outputs from **Table 9.2** show in total 50kg of GHGs are daily emitted from petrol cars travelling to and from the both sites.

Table 9.5 Greenhouse Gas Emissions for Diesel Cars

Size of Car	Total units travelled (miles)	Carbon Dioxide (CO <sub>2</sub> ) Emissions kg CO <sub>2</sub>	Methane (CH₄) Emissions kg CO₂e	Nitrous Oxide (N₂O) Emissions kg CO₂e	Grand Total Greenhouse Gas Emissions Total kg CO₂e
Small diesel car, up to 1.7 litre engine	16,617	2,413	1	29	2,443
Medium diesel car, from 1.7 - 2.0 litres	13,616	2,388	1	24	2,413
Large diesel cars, above 2.0 litres	4,847	1,117	0	9	1,126
Total	3,607	5,918	2	62	5,982

- **9.2.13 Table 9.5** illustrates 615kg of GHGs of direct emissions are daily emitted from diesel cars travelling to and from the Trust.
- **9.2.14** Following the 2014 Staff Travel Survey, carbon emissions daily generated by staff commuting to and from the Trust have been calculated with the results summarised in the table following.

Table 9.6: Summary of daily GHG Emissions – Staff Commuter Trips

Vehicle Type	Total Direct Green House Gas Emissions (kg CO <sub>2</sub> e)
Diesel Car	5,982
Petrol Car	12,468
Total	18,450

9.2.15 If this information is factored up to cover the journeys made by staff over the course of a year, this equate to 2,626 tonnes of GHGs emitted from petrol cars and 1,260 tonnes emitted from diesel cars. This totals 3,886 tonnes of GHGs from staff travel (or 1,943 tonnes each way).

#### 9.3 Summary

9.3.1 The 2014 Staff Travel Survey, carbon emissions daily generated by staff commuting to and from the Trust has been 18.45tonnes. Whilst the TP from 2011 only analysed the travel behaviour from staff members from the West Cumberland Hospital, the current TP also includes the study of Cumberland Infirmary, located in a more rural area than West Cumberland Hospital. For that reason the average distance driven by staff members has







been increased compared to the 2011 analysis. Based on the above, it has been considered more realistic to focus on promoting a mode shift from single car occupancy than setting a target for carbon reduction.



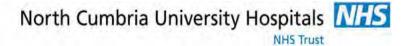




# 10. Travel Plan Aims,Objectives and Targets







#### 10 TRAVEL PLAN AIMS, OBJECTIVES AND TARGETS

#### 10.1 Introduction

- 10.1.1 In this section, the aims and objectives of the West Cumberland Hospital and Cumberland Infirmary Travel Plan are identified. This will then help to set out the framework under which a suitable action plan of Travel Plan measures can be developed. The package of evidence on which the measures and targets are based is the findings of the previous sections, site audit, accession and postcode analysis, as well as the staff and patients and visitors travel survey results.
- 10.1.2 In light of this evidence, it will be possible to formulate a new set of mode share targets specific to the West Cumberland Hospital and the Cumberland Infirmary. This will allow progress towards the realisation of this Travel Plan to be monitored each year for its three year life, and the relative success of the action plan produced to be gauged accordingly.
- 10.1.3 The Travel Plan must have targets and objectives that are quantifiable and measurable over time, as means of assessing whether the methods implemented to influence travel behaviour amongst staff, visitors and patients have been successful. These must be ambitious enough to provide the Hospitals incentives to make every effort to achieving significant changes in travel patterns, yet still be realistic and achievable.
- 10.1.4 The mode splits are presented in the tables and targets set out below for achievement within the life of the Travel Plan. Objectives are less specific, though of equal importance, and discuss the overriding principles behind the targets.

#### 10.2 Aims

- 10.2.1 The aims of this Travel Plan intend to continue to develop and support a range of travel initiatives to be compliant with Cumbria County Councils Transport Policy and support the achievement of the targets outlined in LTP3 (2011-2026) with the final aim of promoting walking, cycling and the use of public transport for staff, patients and visitors. The this Travel Plan aims to fulfil the following aims:
  - To improve the permeability of the hospital for all persons accessing and exiting the site;
  - To encourage staff, visitors and patient travel choice away from the drive alone car which as a result will reduce on-site demand for parking spaces and the impact of traffic in the surrounding communities;
  - To increase the number of staff, visitors and patients travelling by public transport or other sustainable transport modes such as bicycle and walking;
  - Provide readily available information to all staff about the travel options available to them;

#### 10.3 Travel Plan Objectives

- 10.3.1 This Travel Plan will provide a 3 year strategy from the date of adoption. The objectives are intended to be in line with Cumbria County Councils Transport Policy and support the achievement of the targets outlined in Cumbria Transport Plan Strategy 2011 2026. The aspirations of the Travel Plan are:
  - To increase the proportion of travel undertaken by walking, cycling and public transport and to reduce those made by car, particularly lone car journeys;







- To ensure increased modal choice to employees, patients and visitors; and
- To reduce its carbon footprint.

#### 10.4 Mode Share Targets

10.4.1 With these objectives in mind, the following modal share targets are proposed for 3 years after first implementation of the plan. The current and previous mode share and targets set out in the previous Travel Plan for the NHS Trust alongside the 2011 Census data are set out in **Table 10.1** alongside new targets designed to be an achievable improvement on the current situation.

Table 10.1: Target Mode Share

Mode	Mode Share Staff Travel Survey 2010	Mode Share Staff Travel Survey 2014	Method of Travel to Work 2011 Census	Target Mode Share (by 2018)
Car / Van (as driver)	80%	74%		65%
Car / Van (car sharer as driver)	4%	6%	64%	7%
Car / Van (as passenger)	4%	3%		6%
Walking	5%	7%	14%	9%
Bicycle	2%	2%	1470	3%
Bus	5%	5%	16%	8%
Train	0%	1%	1076	2%
Other	0%	2%	1%	0%
Working from home	0%	0%	5%	0%
Total	100%	100%	100%	100%





### 11. Travel Plan Measures







#### 11 TRAVEL PLAN MEASURES

#### 11.1 Introduction

11.1.1 In this section of the Travel Plan, the main recommendations for Travel Planning measures will be made.

These measures include actions to be taken forward by a number of different individuals and groups, specific to each hospital.

#### 11.2 Administration of the Plan

- 11.2.1 In order to implement the Travel Plan a dedicated Travel Plan Co-ordinator (TPC) role will be assigned for the West Cumberland Hospital and the Cumberland Infirmary. The TPC will act as the promoter of the components of the Travel Plan to secure its implementation, including liaising with the local authority and public transport operators, as well as being the key contact point for staff, patients and visitors.
- **11.2.2** In terms of the roles and responsibilities, the TPC will be expected to:
  - Administer/manage the Travel Plan and provide a liaison in implementing the plan with the local authority;
  - Ensure travel awareness amongst staff, patients and visitors;
  - Liaise with staff, patient and visitor management committees or steering groups;
  - Liaise with public transport operators the co-ordinator will initiate contact with bus and train operators early on to negotiate services and fare improvements where possible;
  - Provide a point of contact and travel information;
  - Undertake and implement travel surveys;
  - Promote and encourage the use of travel modes other than the car and car-sharing where appropriate; and
  - Ensure the availability of the most up-to-date travel information.
- 11.2.3 The contact details for the TPCs at West Cumberland Hospital and Cumberland Infirmary are included in Table 11.1 and 11.2.

Table 11.1: West Cumberland Hospital Travel Plan Co-ordinator

West Cumberland Hospital Travel Plan Co-ordinator Contact Details				
Name:	Andrew Adams			
Telephone Number :	01946 523792			
Email Address:	andrew.adams@ncuh.nhs.uk			







Table 11.2: Cumberland Infirmary Travel Plan Co-ordinator

Cumberland Infirmary Travel Plan Co-ordinator Contact Details			
Name:	Andrew Adams		
Telephone Number :			
Email Address:	Andrew.Adams@ncuh.nhs.uk		

#### 11.3 Travel Plan Measures

11.3.1 This section discusses the Travel Plan Measures and Initiatives provided by The Trust. The measures achieved from the previous Travel Plan are presented first. Following to that, measures still outstanding or being progressed along with the new proposed measures are discussed in detail. The proposed measures apply to all sites under The Trust control.

#### Measures Implemented

11.3.2 The three objectives with related measures listed in the previous Travel Plan aiming to encourage the change from car use to sustainable travel behaviour for the West Cumberland Hospital have are discussed in the tables below. Those measures already achieved from the previous 2011 Travel Plan are presented first, followed by those measures still being progressed and new measures, along with dates for completion.

#### 11.3.3 2011 to 2014 Measures Achieved

Table 11.3 – 2011 to 2014 Measures Achieved

2011 to 2014 Measures Achieved				
Measure	Description	Status		
Objective 1 – To reduce the need to travel by car and promote alternatives. Target: To increase the number of				
staff, visitors, and patients walking	ng, cycling, or travelling via public transport			
Car Park Monitoring	Monitor use of parking spaces and allocate priority parking for disabled car users	Achieved		
Deview of existing our parking	Review of existing car parking charges to encourage sustainable travel and raise revenue for re-investment in sustainable travel initiatives.			
Review of existing car parking charges	The public car parking tariff for patients and visitors has been revised to ensure equality for those who visit the hospital most regularly for treatment. Additionally, the Pay and Display fees have been increased to encourage visitors and patients to use more 'sustainable transport modes'. Permits PAYE out of salary.	Achieved		
Permit Applications	The permit application process has been reviewed, by implementing new criteria for the application process, for new permits and renewals. The Trusts tried to implement the measure but the	Achieved		





	measure had little acceptance.	
Surveys of visitors and patients	Surveys of visitors and patients have been undertaken during July to September 2014. The results of this analysis are included within Chapters 7 to 9 of this report.	Achieved
Public Transport Time Table	Internal notice boards advertising public transport modes of travel and timetables have been implemented throughout the site as well s on the intranet of the Trust.	Achieved
	enhance walking and cycling facilities. Target – To increase the	e number of
persons cycling to work.		
Increase the number of cycle stands on site	The number / provision of cycle parking spaces / stands has increased and these are secured and covered.  This measure has been achieved by the construction of different sheltered cycle parking stands adjacent to the hospital entries main accesses to facilitate to commute by cycling.	Achieved
Cycling Awareness Campaigns	Distribution of cycling promotional material to the staff members on the intranet and promotion of cycling events on posters throughout the site for patients and visitors.	Achieved
Provide improved facilities for staff including cycling lockers, drying rooms and showers.	This has included the refurbishment of the shower, cycling lockers and drying room, enhancing staff to cycle or jog to work.	Achieved
Bike to work Scheme	The trust has purchased pool bikes to encourage people to cycle to and from the hospital as well as to allow staff to cycle to meetings or other work appointments outside from the site.	Achieved
	an with other initiatives. Target: To encourage a healthy lifestyle an	nongst staff,
visitors, and patients.		
Electric car	A fleet of electric vehicles has been purchased by the trust to replace diesel and petrol pool vehicles. The electric vehicles allow staff members who need to travel for work purposes to do it in a more sustainable way.	Achieved

#### 11.3.4 Measures in Progress / Outstanding

Table 11.4 – 2011 to 2014 Measures in Progress / Outstanding

2011 to 2014 Measures In progress / Outstanding				
Measure	Description	Status		
Objective 1: To reduce the need to travel by car and promote alternatives. Target: To increase the number of staff, visitors, and patients walking, cycling, or travelling by public transport.				
Organise 'Travel to Work' Events.	Liaise with Cumbria County Council for Cycle Maintenance workshops.	Being Progressed		





## North Cumbria University Hospitals NHS Trust

	Get staff involved in the events such as Travel Challenges where		
	the sites within the Trust will compete to achieve the most journeys		
	made by sustainable means for one month.		
	Creation of a regular cyclist meeting group to discuss ideas and		
Develop Welking / eveling groups	measures. Create groups of walkers and cyclists lead by a volunteer	Being	
Develop Walking / cycling groups.	leader who will guide the walkers/cyclists from the meeting point to	Progressed	
	the Hospital.		
Provide public transport season	Sale tickets on site at a subsidised rate and introducing interest free	Being	
tickets for staff.	loans for the purchase of annual public transport season tickets.	Progressed	
Ctaff and above and find a buildy	A car share user-group will be set up to ensure that any matters		
Staff car share and find a buddy	concerning car sharing are being suitably discussed. The car share	Being	
week.	user group initiative has yet to be implemented by the trust	Progressed	
	Encourage use of a Car Share website for staff, visitors and patients	Daine	
Car Share website creation.	such as www.sharedweels.co.uk or develop a dedicated website	Being	
	specifically for hospital staff.	Progressed	
Parking rationalization	Monitor use of parking spaces and allocate priority parking for car	Being	
Parking rationalisation.	share users.	Progressed	
Promote Park and Ride Scheme	All options to source suitable Park and Ride sites in close proximity		
<ul> <li>Building on previous</li> </ul>	to the Trust will be investigated. Talks will be started with bus	Outstanding	
undertakings.	operators to provide the connection service.		
	Establishment of a circular bus route connecting the Train Station		
Circular Bus services from station	with the Hospital to encourage staff, patients and visitors to	Outstanding	
	commute by public transport.		
Objective 2 – To increase and en	hance walking and cycling facilities. Target – To increase the num	ber of	
persons cycling to work.			
Cycle maintenance checks	Conduct In-work cycle maintenance checks.	Outstanding	
	Train a staff member to assess other staff members on safe cycling		
Identify safer cycling routes to the	routes from and to the Hospital.		
Hospital	Promote the use of cycling by advertising safe cycling routes in the	Outstanding	
	vicinity of the sites.		
	Review the Cycle to Work and Guarantee Scheme, the existing		
Cycle to Work Scheme	uptake and potential to further promote the scheme, via posters and	Outstanding	
	on the hospital intranet		
	Train the TP Co-ordinator in Personalised Travel Planning. Offer		
	staff the possibility to get personalised Travel Plans to advise them		
	on how to save money and get more active by cycling, walking or		
Personalised Travel Planning	using public transport and reducing the use of the car.	Outstanding	
-	AECOM have significant experience in the implementation of PTP		
	schemes and would be happy to assist in undertaking any work		
	required.		





Objective 3: To link the Travel Plan with other initiatives. Target: To encourage a healthy lifestyle amongst staff, visitors, and patients.			
Assess contribution of TP to environmental Objectives	Hold regular meetings between the Environmental Steering Group and the TP Steering Group to evaluate the environmental improvements of the applied measures of the TP.	Outstanding	
Promote health benefits of regular exercise including walking/cycling as part of daily routine	Promotion of the healthy lifestyle benefits  Encourage staff members to adopt healthy life style by distributing pedometers	Outstanding	
Presentation of TP ideas to Staff	Discussions at Board Meeting which is filtered through to TP Steering Group	Outstanding	

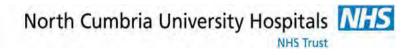
#### 11.3.5 2014- 2017 New measures (Including dates for Completion

Table 11.5 – 2011 to 2014 New Measures (Including dates for completion)

2014 to 2017 New Measures (Including Dates for Completion)			
Measure	Description	Timescale	Owner
Objective 1: To reduce the need to travel by car and promote alternatives. Target: To increase the number of staff, visitors, and patients walking, cycling, or travelling by public transport.			
Management of Spaces	Develop a hierarchy of users of the site by implementing measures such as:  Providing free parking for car sharers; Exclude staff who can realistically travel by public transport, Provide for mobility impaired staff; Provide priority bays for car sharers	October 2014	Andrew Adams
Public transport initiatives	Negotiate discounts on the purchase of public transport tickets to the hospital;	October 2014	Andrew Adams
Shuttle Bus	Provide a regular shuttle bus from the closest city centre and the Park and Ride; the service should at a frequency linked with train timetables. It should be free for staff members and frequent patients or visitors.	October 2014	Andrew Adams
Objective 2 – To increase and enhance walking and cycling facilities. Target – To increase the number of persons cycling to work.			
Walking Buddy	Promote walking for staff living within 2 miles of the hospitals by establishing a walking buddy scheme.	October 2014	Andrew Adams
Cycling training	To enhance the use of cycle, members of staff could receive a cycle training course.	October 2014	Andrew Adams
Cycle to work scheme	Provide financial help to purchase a bike for staff members cycling to work.	October 2014	Andrew Adams







	Claiming mileage for any business travel made using the bike.  Hospital bike to be owned by the Hospital and shared by staff members for business travels		
Free meals / Breakfast Club	Incentivise the use of alternative modes of transport by providing the staff members walking or cycling to work free meals and breakfast deals.	October 2014	Andrew Adams
Promotional Cycle Week	Undertake regular promotional events to encourage members of staff to cycle to work	June 2015	Andrew Adams
Basic Repair Cycle toolkit available at the hospital	Provide toolkits to repair bicycles in the changing areas of the Hospital	October 2014	Andrew Adams
Objective 3: To link the Trave	l Plan with other initiatives. Target: To encourage a l	healthy lifestyle	amonast staff.
visitors, and patients			,
visitors, and patients  Journey Plan	Create personalised Travel Plans for members of staff to plan their journeys from and to the hospital by modes other than car	October 2014	Andrew Adams
	Create personalised Travel Plans for members of staff to plan their journeys from and to the hospital	October 2014  October 2014	





# 12. Travel Plan Monitoring and Marketing







#### 12 TRAVEL PLAN MONITORING AND MARKETING

#### 12.1 Introduction

12.1.1 This section will describe the monitoring and market proposals for the implementation of the Travel Plan. This methodology is designed to ensure that the Travel Plan is a 'living document', continually evolving in line with the latest data on mode share and travel habits.

#### 12.2 Summary of the Timescales

- 12.2.1 The new initiatives identified in Chapter 11 have each been assigned a timescale by which they will be implemented. The target dates of the key initiatives identified are presented in the table below, along with timescales for future review of this Travel Plan. The initiatives identified will be initiated by the Travel Plan Coordinator with the assistance of the Travel Plan Steering group.
- 12.2.2 The Steering Group will be formed by staff members and will meet twice a year to investigate and provide input based on their experience about the progress of the targeted objectives of the Travel Plan. The roles required in the Steering Group include:
  - Travel Plan Co-ordinator;
  - Department Champions (nominated);
  - Staff:
  - Cumbria County Councils Travel Plan Co-ordinator; and,
  - Member of Trust's Board.
- 12.2.3 It is important that this Steering Group is proactive and progresses travel initiatives. In the first instance, it is the responsibility for the Travel Plan Co-ordinator to collate information and take this forward into the workplace. 'Bike to Work' weeks must be advertised and encouraged; the provision of car sharing database should be readily available for staff to use. The use of the hospital intranet would be one successful start to this specific initiative. The most successful travel plans are those that take initial Travel Plan documents (like this one) as outlined and begins to develop their own elements of the plan over time.
- **12.2.4** The Steering Group should be responsible for:
  - Incorporating the TP into the hospital's development plan;
  - Progressing and encouraging sustainable travel initiatives;
  - Involving the Trust's Board in the process and option identification; and,
  - Supporting internal and external travel initiatives





Table 12.1 - 2011 to 2014 New Measures Target Dates/ Timetable

Target Dates	Milestones	Responsibility
March 2015	Re-launch Travel Plan – Launch Event	Andrew Adams
April 2015	Establishment of TP Working Group	Andrew Adams
	Establishment of TP Steering Group	Andrew Addins
May 2015	Personalised Travel Planning among Staff	Andrew Adams
June to September 2015	Bike to work promotion	
	Walk to work promotion	Andrew Adams
	Car Share Promotion	TP Steering Group
	Public Transport Promotion	
October 2015	Annual Re-Survey	Andrew Adams
October 2016	Annual Re-Survey	Andrew Adams
October 2017	New 3 year Travel Plan	Andrew Adams

#### 12.3 Travel Plan Monitoring

- 12.3.1 It is recommended that a period of 3 years be allowed for the Travel Plan to become firmly embedded and for benefits, both economic and sustainable, to become fully measurable. However, in order to comply with Copeland Borough Council Planning Condition 15, once the Travel Plan has been agreed and implemented it will be necessary to review annually. This annual review should include the following:
  - Record of progress of the results against set targets;
  - Revision of the Travel Plan to ensure it reflects best practice and the latest initiatives;
  - Results of annually conducted questionnaires for staff as well as visitors and patients to determine the modal shift and ensure targets previously set are being met. In order to obtain this, online surveys are recommended as they can easily be filled in.

#### 12.4 Management and Implementation

- 12.4.1 In order to specifically implement the revised set of measures contained within this Travel Plan it will be recommendable to have a re-launch event. It is suggested that the r-launch event takes place sometime during March 2015. The launch event will include the provision of Staff Travel Information Packs, the information will describe when the weather starts to improve following the winter period the aims and objectives to the Travel Plan and provide a description of the associated measures/ initiatives and supporting on-site infrastructure. The pack will also include details of relevant public transport information along with the site specific walking and cycling maps. Details of any specific forthcoming events should also be included within this pack.
- 12.4.2 Awareness of the Travel Plan will also be raised by the implementation of appropriate marketing such as the provision of posters and leaflets incorporation relevant descriptions. A regular newsletter will be produced for all staff detailing past and present promotional events. Within this newsletter the progress of the Travel Plan





12.5

## North Cumbria University Hospitals

will be discussed, any new initiative will be advertised and experiences of walkers, cyclists, car sharers and public transport users will be shared.

12.4.3 The resources and budget to the Travel Plan will operate under the remit of the trust. There are opportunities to utilise revenue from parking charges to fund the Travel Plan and its associated initiatives.

Travel Plan Approval and Endorsement

West Cumberland Hospital - Head of Estates and Facilities			
(S. Dougan)	(Signature)	sliely	(Date)
West Cumberland Hospital –Travel Plan Co-ordinator (Andrew Adams)			
A CAdo	(Signature)	5/12/14	(Date)
Cumberland Infirmary - Operational Services Manager-Estates (Carol Johnston)	& Facilities		
Carlonh	(Signature)	5/12/14	(Date)
Cumberland InfirmaryTravel Plan Co-ordinator (Andrew Adams)			
ACAS	(Signature)	5/12/14	(Date)





### 13. Summary







#### 13 SUMMARY

#### 13.1 West Cumberland Hospital

- 13.1.1 The West Cumberland Hospital is located off Homewood Road and Homewood Hill, Whitehaven. The site is situated in a predominantly residential area in Hensingham, to the south of the Whitehaven. The site is under the management of the North Cumbria University Hospitals NHS Trust and together with the Cumberland Infirmary in Carlisle; they serve 340,000 residents in north Cumbria.
- 13.1.2 The Hospital is located along Homewood Road which is on a steep incline, characteristic of the surrounding geography. Movements by pedestrians are consequently restricted especially to those with mobility issues. Pedestrian footpaths are of a sufficient standard and width along Egremont Road and Homewood Road, with street lighting increasing the sense of security for pedestrians.
- 13.1.3 The majority of accidents in the vicinity of the proposed site over a five year period have been caused by driver, cyclist or pedestrian error. The safety of the road is not compromised at any level by the Hospital. Based on the pattern of collisions, the road network does not present any deficiencies.
- 13.1.4 The edge of town location of the Hospital is reflected in the public transport facilities available to access the site. Bus facilities are available and provide connections between Whitehaven and the Hospital. Rail services are infrequent to Corkickle Rail Station, which is located approx two miles from the Hospital.
- 13.1.5 West Cumberland Hospital is located in a rural area in the outskirts of Whitehaven, to the south of the city, therefore there are a reduced number of local amenities within a 30 minutes walking distance (2.5km) to the north of the hospital.
- **13.1.6** The recommended car parking provision according to The Health Technical Memorandum would be 329 car parking spaces for staff members and 104 car parking spaces for patients and visitors.

#### 13.2 Cumberland Infirmary

- 13.2.1 Cumberland Infirmary is a hospital in Carlisle, Cumbria England, situated adjacent to the residential area of Newtown and to the South and West of an industrial / business estate. The site is under the management of the North Cumbria University Hospitals NHS Trust.
- 13.2.2 The hospital was officially opened by British Prime Minister Tony Blair, on 16 June 2000 and since then it has been providing a range of medical services including Accident and emergency services; Cardiology; Surgery; Geriatric Medicine; Maternity service; and Endocrinology and Metabolic Medicine among others
- 13.2.3 Cumberland Infirmary can be accessed from Newtown Road which is provided with street lighting, pedestrian footpaths on both sides of the carriageway with signalised crossing facilities at the hospital. These footpaths are ample to enhance pedestrian movements, with dropped kerbs and tactile paving provided at access junctions to increase mobility. Additionally free cycle routes are provided along the A595 Castle Way, approximately 650m from the hospital.







- 13.2.4 The analysis of the accident data has shown that 33 accidents have been recorded in total within the study area during the past 5 years from 31 of which were recorded as slight and 2 as serious. There were no fatal accidents recorded during this period, as illustrated in the table following. The area Full accident data and plans of this study area are contained within **Appendix A** of this report. Based on those results, the highway network is considered safe and the site is unlikely to have any detrimental impact on the operation of the surrounding highway network.
- 13.2.5 The site is highly accessible by bus with a total of 7 bus services operating along Newtown Road. The bus stops are located approximately 320m from the main hospital entrance and are signalised with bus stop markings on the carriageway, hard standing areas, shelters, seating, flags and timetables.
- **13.2.6** Approximately 2km from the infirmary is located Carlisle Station, closest station which provides services to the local area and major cities throughout the UK.
- 13.2.7 The accessibility plots prepared for the Infirmary were based on a 30 minute travel time on foot and a 60 minute journey in public transport. A number of residential areas are located between 10 and 30 minute walk of the infirmary. The town centre of Carlisle can be reached in less than 15minutes travel time by public transport.
- 13.2.8 There are several local points of interest within a walking distance of approximately 30minutes (2.5km) from the site. The closest supermarket is located less than 1.5km to the east of the site and in Carlisle city centre numerous additional shopping areas and, offices and ATMs are less than 2.5km away from the hospital.
- **13.2.9** Based on the recommendations provided by The Health Technical Memorandum and the total number of staff working part time and full time an adequate provision of car parking spaces of 660 for staff members and 222 for patients and visitors would be reasonable.

#### 13.3 Staff Surveys

- **13.3.1** A total of 407 surveys were filled in by Staff members from the West Cumberland Hospital and from the Cumberland Infirmary.
- 13.3.2 The majority of the staff resides in the vicinity of their base site, however there is a portion of the staff members who live in small towns within the vicinity of the Hospital including Whitehaven and Egremont for the West Cumberland Hospital and Workington and Cockermouth for Cumberland Infirmary.
- 13.3.3 The AM peak traffic period is similar for both sites, staff have stated that they depart between 07:30 08:30 hrs which supports the fact that the majority of the staff works normal working hours.
- As a general rule of thumb the majority of the staff uses the car as main mode to commute to work, however, a reduction in the number of car drivers of 7% has occurred compared to the results obtained in 2011. In addition, staff walking to the hospital has been increased by 6% and 2% respectively. These results lead to believe that the implementation of measures to promote sustainable transport amongst the Hospital staff is slowly shifting the travel behaviour of the staff.







13.3.5 The majority of the staff stated that no measures could promote them to walk, a number of staff from both sites noted that often they require their vehicle for work or staff they live too far from the their base site.

## 13.4 Visitors and Patients Survey

13.4.1 The majority of the Patients and visitors surveyed (67%) confirmed that they only visit the Hospital once a year and the most popular mode of transport is by Car as a driver (45%) or as a passenger (43%) followed by an 8% which used the bus to get to the Hospital. The main reason for this modal split is that the surveyed patients and visitors recognise the car as essential to commute to the Hospital. A high proportion of visitors also highlighted the lack of alternative to get to the Hospital.

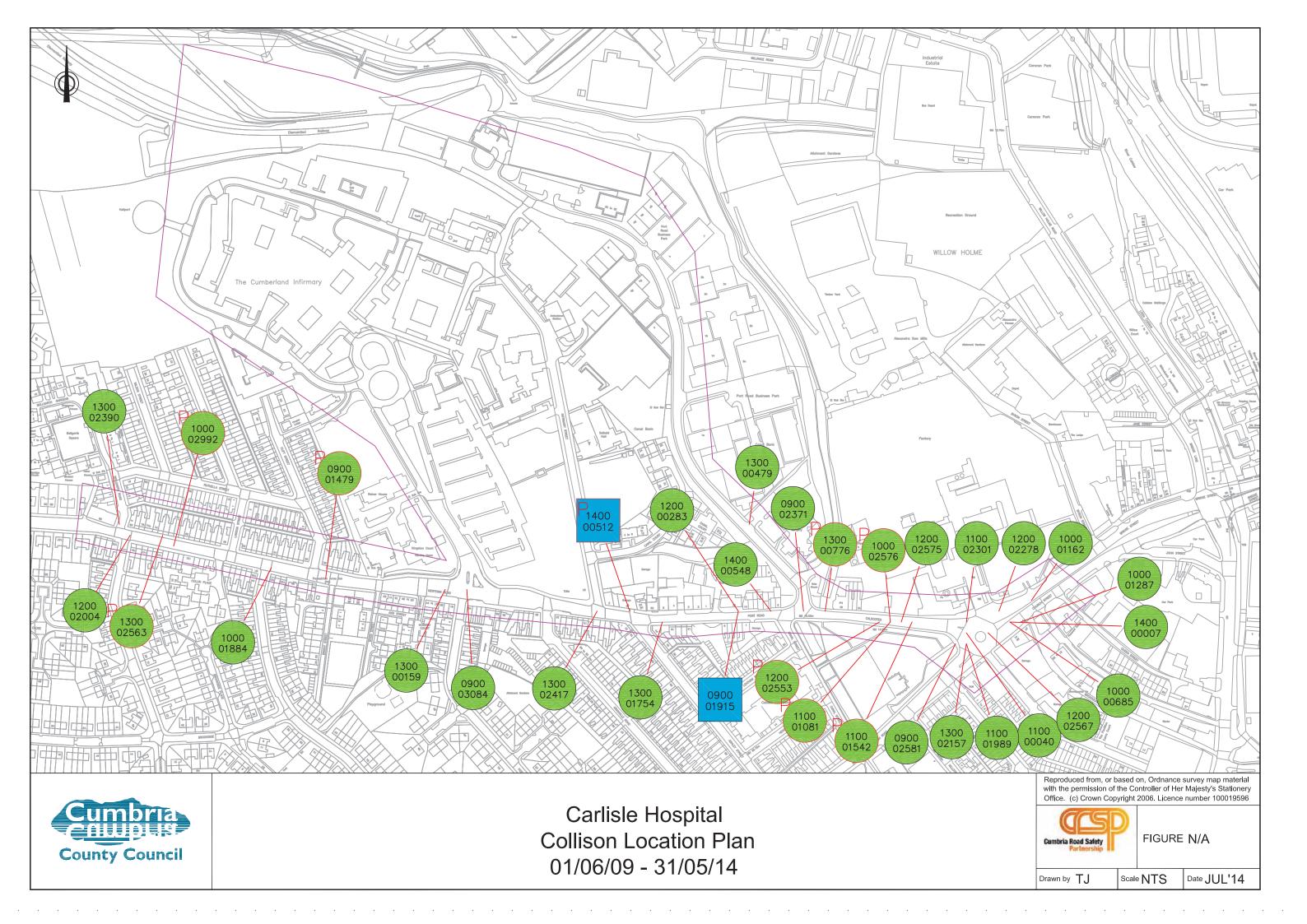






## APPENDIX A ACCIDENT DATA





SEVERITY District Carlisle SLIGHT Ref.No 090001479	Carlisle Ho		Grid Reference 338660 / 555930 Police Officer Attend: Yes
Date 19/06/2009 Day Friday Time 07:44 Weather Fine without high winds Road Surface Dry Street Lighting Daylight	Road B5307 Location B5307 Outside The Pedest  Description Pedestrian Casualty Ran Into The Road F of Accident	k By V1.	
SITE DETAILS  Speed Limit  Carriageway  Junction Detail  Junction Control  2nd Road Number  Pedestrian Facilities  None within 50 metres  No physical crossing facility within 5	CARRIAGEWAY HAZARDS None		
Junct. location of veh. at 1st impact  Veh left carriageway?  Hit object in c'way?  Hit object off c'way?  First point of impact  Veh registration no.  Drivers age  Did not leave carriageway  None  Front  Other veh.hit (ref.no)  Drivers age  Not at or within 20:  Other veh.hit (ref.no)  Breath test  Negati	ay not in restricted lane m of junction  0 Hit and run Not hit and run	Cas No 1 Cas Class Pedestria Severity SLIGHT Age 13 y Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from driv Ped Location In carriageway, cr Ped Direction to South bound School Pupil Yes on way to or Roadworker injured Not applicable Other Details	m Veh ref No 1  TS Sex Male Post code  PSV Passenger? Not a passenger  Cycle Helmet  ver's nearside  rossing elsewhere  from school

SEVERITY District Carlisle	Carlisle Ho	spital	Grid Reference	339040 / 555900
SERIOUS Ref.No 090001915	Accident Date BETWEEN '01-Jun-2009' AND '31-N	Police Officer Attend:	No - reported over the counter	
Date 01/06/2009 Day Monday Time 15:05	Road B5307 Location B5307 Outside 18 Port Ro	ad, Carlisle		
I Road Surface Dry I	Description V1 Travelling East On Port Oad When Stof Accident	truck V2, A Pedal Cycle, Also Travelling East.	V1 Fts.	
SITE DETAILS  Speed Limit  Carriageway  Junction Detail  Junction Control  2nd Road Number  Pedestrian Facilities  None within 50 metres  No physical crossing facility within 50  VEHICLES INVOLVED  2		CASUALTIES INVOLVED		
Junct. location of veh. at 1st impact Not at or within 20m  Veh left carriageway? Did not leave carriageway  Hit object in c'way? None  Hit object off c'way? None  First point of impact Nearside  Veh registration no. Other veh.hit (ref.no)  Drivers age 30 yrs Sex Male Breath test Driver not carriageway  Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other	y not in restricted lane of junction  2 Hit and run Hit and Run ot contacted Driving Lic	Cas No 1 Cas Class Driver or Severity SERIOUS Age 27 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured Other Details	s Sex Male	f No 2 Post code of a passenger
Veh.No. 2 Vehicle type Pedal Cycle Manoeuvre Going ahead other  Veh. direction from West to East Towing Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway Junct. location of veh. at 1st impact Not at or within 20m Veh left carriageway? Left carriageway nearside Hit object in c'way? None Hit object off c'way? None First point of impact Offside Veh registration no. Other veh.hit (ref.no) Drivers age 27 yrs Sex Male Breath test Not App Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other	y not in restricted lane of junction  1 Hit and run Not hit and run Driving Lic			

SEVERITY	District Carlisle			Carlisl	le Hosp	pital	C:ID C	220100 / 555000
	District Carlisle Ref.No 090002371		A CLASS A DETENDING A COOL LAND IN A			Grid Reference	339100 / 555900	
SLIGHT	Ref. No 0900023/1	Accio	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'			Police Officer Attend:	Yes	
Date	15/09/2009 Day Tuesday	Road I	J1431 Location Port F	Road Carlisle			•	
Time	16:20	rouu (	1431 Location Fort	touu, curnsic				
Weather	Fine without high winds	Descripti	on Pedal Cycle Came d	own Port Road	l Industr	rial Estate, Breaks Did Not Work at Junction	with Port Road and Bike C	'allided into V1
Road Surface	Dry	of Accid	•	own ron noud	maasti	iai Estate, Breaks Bia 1101 Work at Valietion	With I off Road and Bike C	onded into VI
Street Lighting	., 8	01110010						
	SITE DETAILS							
Speed Limit	30 MPH		SPECIAL SITE COND	ITIONS				
Carriageway	Single carriageway		None					
Junction Detail	T or staggered junction							
Junction Contr			CARRIAGEWAY HAZ	ARDS				
2nd Road Num	nber B5307			a IRDS				
Pedestrian Fac	None within 50 metres		None					
	No physical crossing facility within	50 metre						
VEHICLES IN	NVOLVED 2		!			CASUALTIES INVOLVED	1	
Veh.No. 1	Vehicle type Car		Make	Model		Cas No 1 Cas Class Driver or 1	Rider Veh re	ef No 2
Manoeuvre	Waiting to go ahead but held up					Severity SLIGHT Age 16 yr		Post code
Veh. direction		wing? No	tow or articulation			,		
Skidded	No skidding, jack-knifing or overturning	0 111	o to to or dividualisti			Car Passenger? Not a passenger Seat Belt Not applicable	PSV Passenger? No Cycle Helmet	ot a passenger
Veh location a	at impact (restricted lane) On main carriagev	way not in	restricted lane			Seat Belt Not applicable Ped Movement Not applicable	Cycle Heililet	
Junct. location	of veh. at 1st impact Approaching junc	tion or wai	ting			Ped Location Not applicable		
Veh left carria	geway? Did not leave carriageway					Ped Direction to Not applicable		
Hit object in c'						School Pupil Other		
Hit object off						Roadworker injured		
First point of in						Other Details		
Veh registratio				Not hit and r	run	·		
Drivers age Left Hand Driv	,		Driving Lic					
Journey purpos		oreign regi	stered venicie					
Veh.No. 2	Vehicle type Pedal Cycle		Make	Model				
Manoeuvre	Going ahead other							
Veh. direction		wing? No	tow or articulation					
Skidded	Skidded	2 111						
Veh location a	at impact (restricted lane) On main carriage	way not in	restricted lane					
Junct. location	Junct. location of veh. at 1st impact  Approaching junction or waiting							
Veh left carria								
Hit object in c'								
Hit object off o								
First point of in			· ·	37.41				
Veh registratio	on no. Other veh.hit (ref.no)			Not hit and r	run			
Drivers age Left Hand Driv			Driving Lic					
Journey purpos		oreign regi	SIGIOU VOINCIE					
Journey purpos	Communing to/110m work							
E II D ( II					22 1 1			L ( D C )

SEVERITY District Carlisle	Carlisle Hos	spital	Grid Reference	339240 / 555870		
<b>SLIGHT</b> Ref.No 090002581	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Police Officer Attend:	No - reported over the counter			
Date 22/09/2009 Day Tuesday Time 16:10	Road A595 Location A595 - Wigton Road Roundabout At B5307 Newtown Road Turnoff					
Weather Fine without high winds Road Surface Dry Street Lighting Daylight	Description V1 Drove Round Roundabout And Turned Off Failing To Notice A Pushbike On The Nearside Knocking Him Off The Bike. of Accident					
Street Lighting Daylight  SITE DETAILS  Speed Limit 30 MPH  Carriageway Roundabout  Junction Detail Roundabout  Junction Control Give way or uncontrolled  2nd Road Number B5307  Pedestrian Facilities None within 50 metres  No physical crossing facility within 5  VEHICLES INVOLVED 2  Veh.No. 1 Vehicle type Car  Manoeuvre Turning left  Veh. direction from East to West Towi  Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) On main carriagewa  Junct. location of veh. at 1st impact Leaving roundabou  Veh left carriageway? Did not leave carriageway  Hit object in c'way? None  Hit object off c'way? None  First point of impact Nearside  Veh registration no. Other veh.hit (ref.no)  Drivers age 61 yrs Sex Male Breath test Not rec  Left Hand Drive Unknown Foreign veh. Not for  Journey purpose Other  Veh.No. 2 Vehicle type Pedal Cycle  Manoeuvre Turning left  Veh. direction from East to West Towi  Skidded No skidding, jack-knifing or overturning	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None  Make Model  ing? No tow or articulation ay not in restricted lane it  4 Hit and run Driving Lic reign registered vehicle  Make Model  ing? No tow or articulation	CASUALTIES INVOLVED  Cas No 1 Cas Class Driver or Severity SLIGHT Age 32 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	Rider Veh re	ef No 2 Post code ot a passenger		
Junct. location of veh. at 1st impact Leaving roundabou Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Offside Veh registration no. Other veh.hit (ref.no) Drivers age 32 yrs Sex Male Breath test Not Ap	1 Hit and run Not hit and run					

SEVERITY District Carlisle		Carlisle	Hospital	Grid Reference	338790 / 555920
SLIGHT Ref.No 090003084	Accid	dent Date BETWEEN '01-Jun-2009' AND '3	Police Officer Attend:	Yes	
Date 28/11/2009 Day Saturday Time 10:44	Road E	35307 Location B5307 Newtown Road,			
Weather Fine without high winds Road Surface Wet/Damp Street Lighting Daylight	Descripti of Accide	-	d. At Signalised Juntion V1 Commenced To Turn cured/	Right Into Peel Street Cro	sssing The Path Of West
SITE DETAILS Speed Limit 30 MPH		SPECIAL SITE CONDITIONS			
Carriageway  Junction Detail  Junction - more than 4 arms (not a r	oundaboı	None			
Junction Control Automatic traffic signal 2nd Road Number U		CARRIAGEWAY HAZARDS None			
Pedestrian Facilities None within 50 metres Pedestrian phase at traffic signal jui	nction	None			
VEHICLES INVOLVED 2			CASUALTIES INVOLVED	2	
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriage Junct. location of veh. at 1st impact Mid junction - on Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Drivers age 61 yrs Sex Male Breath test Not purpose Other  Veh.No. 2 Vehicle type Car Manoeuvre Going ahead other Veh. direction from Southeast to Northwest To Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriage Junct. location of veh. at 1st impact Mid junction - on Veh left carriageway? Left carriageway nearside Hit object in c'way? None Hit object off c'way? Other permanent object First point of impact Veh registration no. Other veh.hit (ref.no Drivers age 33 yrs Sex Male Breath test Not purpose) Left Hand Drive Unknown Foreign veh. Not purpose Not purpose Sex Male Breath test No	way not in roundabou  2 crovided (moreign reginated wing? Not way not in roundabout)  1 crovided (moreign reginated wing)	Hit and run Not hit and run nedical reas Driving Lic stered vehicle  Make Model  to tow or articulation  restricted lane at or main road  Hit and run Not hit and run nedical reas Driving Lic	Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	PSV Passenger? N Cycle Helmet  Rider Veh r	Post code fot a passenger  ef No 2 Post code ot a passenger
Journey purpose Journey as part of work			X 1 2014		L ( D CN ) accessed

	Carlisle Ho	spital			
SEVERITY District Carlisle		Grid Reference	339290 / 555890		
SLIGHT   Ref.No 100000685	Accident Date BETWEEN '01-Jun-2009' AND '31-N	Police Officer Attend:	Yes		
Date         03/03/2010         Day         Wednesday           Time         17:00	pad A595 Location A595 Church Street, Caldewgate, Carlisle				
Road Surface Dry	Description V1 Travelling Westbound, Whilst Changi of Accident	ing Lanes Has Run Into The Rear Of V2 Whic	h As A Result Has Hit The	Rear Of V3.	
Street Lighting Daylight SITE DETAILS					
	CRECIAL CITE CONDITIONS				
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS				
Carriageway  Dual carriageway	None				
Junction Detail Not at or within 20 metres of junction					
Junction Control	CARRIAGEWAY HAZARDS				
2nd Road Number	None				
Pedestrian Facilities None within 50 metres					
No physical crossing facility within 50	) metre				
VEHICLES INVOLVED 3		CASUALTIES INVOLVED	1		
Junct. location of veh. at 1st impact  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 22 yrs  Sex Female  Breath test Negative  Left Hand Drive  Unknown  Foreign veh. Not fore  Journey purpose  Other  Veh.No. 2  Vehicle type  Car  Manoeuvre  Going ahead other  Veh. direction from  East to West  Towin  Skidded  No skidding, jack-knifing or overturning  Veh location at impact (restricted lane)  Junct. location of veh. at 1st impact  Not at or within 20m  Veh left carriageway?  Did not leave carriageway  Hit object off c'way?  None  Hit object off c'way?  None  First point of impact	y not in restricted lane  2 Hit and run Not hit and run e Driving Lic eign registered vehicle  Make Model  192 No tow or articulation y not in restricted lane n of junction	Cas No 1 Cas Class Driver or Severity SLIGHT Age 41 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	s Sex Female	of No 2 Post code of a passenger	
Veh registration no. Drivers age 41 yrs Sex Female Breath test Negative Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other	1 Hit and run Not hit and run e Driving Lic eign registered vehicle				

Veh.No. 3 Vehicle type Car Make Model Manoeuvre Going ahead other Veh. direction from East to West Towing? No tow or articulation Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway not in restricted lane Not at or within 20m of junction Junct. location of veh. at 1st impact Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Back Hit and run Not hit and run Veh registration no. Other veh.hit (ref.no) 2 Drivers age 42 yrs Sex Male Breath test Negative Driving Lic Left Hand Drive Foreign veh. Not foreign registered vehicle Unknown Journey purpose

Other

Full Details 22-July-2014 Accident Ref.No 100000685

SEVERITY District Carlisle	Carlisle Hos	pital	Grid Reference 339310 / 555910		
SLIGHT Ref.No 100001162	Accident Date BETWEEN '01-Jun-2009' AND '31-M				
SEIGHT	Accident Date BET WEEN 01-Jun-2007 AND 51-M	ay-2014	Police Officer Attend: Yes		
Date 25/05/2010 Day Tuesday	Road A595 Location A595 Cadewgate, Carlisle		•		
Time 16:20	Road A393 Location A393 Cadewgate, Carnste				
Weather Fine without high winds	Description V's 4,3 & 2 Stationary Held Up In Traffic.	V1 Fails To Stop Intime And Collides With I	Rear Of V2 Causing The 'Domino Effect' Shunt		
Road Surface Dry	of Accident Collision.	viii i dina i o diop initino i ind comues viiii i	or va causing the Bommo Breet on an		
Street Lighting Daylight					
SITE DETAILS	Chedral date compations				
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS				
Carriageway Dual carriageway	None				
Junction Detail Not at or within 20 metres of junction Junction Control					
2nd Road Number	CARRIAGEWAY HAZARDS				
Pedestrian Facilities None within 50 metres	None				
	0 metre				
No physical crossing facility within 5	o mene				
VEHICLES INVOLVED 4		CASUALTIES INVOLVED	3		
Veh.No. 1 Vehicle type Car	Make Model	Cas No 1 Cas Class Driver or 1	Rider Veh ref No 2		
Manoeuvre Going ahead other		Severity SLIGHT Age 19 yr	s Sex Male Post code		
Veh. direction from West to East Towin	ng? No tow or articulation	Car Passenger? Not a passenger	PSV Passenger? Not a passenger		
Skidded No skidding, jack-knifing or overturning		Seat Belt Unknown Cycle Helmet Ped Movement Not applicable			
	ny not in restricted lane				
Junct. location of veh. at 1st impact Not at or within 20r Veh left carriageway? Did not leave carriageway	n of junction	Ped Location Not applicable			
Veh left carriageway? Did not leave carriageway Hit object in c'way? None		Ped Direction to Not applicable			
Hit object off c'way? None		School Pupil Other			
First point of impact Front		Roadworker injured	Rider Veh ref No 3		
Veh registration no. Other veh.hit (ref.no)	2 Hit and run Not hit and run	Cas No 2 Cas Class Driver or l Severity SLIGHT Age 34 yr			
Drivers age 21 yrs Sex Male Breath test Negative					
	reign registered vehicle	Car Passenger? Not a passenger	PSV Passenger? Not a passenger		
Journey purpose Other	M.I. M.I.I.	Seat Belt Unknown Ped Movement Not applicable	Cycle Helmet		
Veh.No. 2 Vehicle type Car  Manoeuvre Slowing or stopping	Make Model	Ped Location Not applicable			
Manoeuvre Slowing or stopping Veh. direction from West to East Towi	ng? No tow or articulation	Ped Direction to Not applicable			
Skidded No skidding, jack-knifing or overturning	48: INO IOW OF AFFICUIATION	School Pupil Other			
	ay not in restricted lane	Roadworker injured			
Junct. location of veh. at 1st impact  Not at or within 20r	-	Cas No 3 Cas Class Passenger	Veh ref No 3		
Veh left carriageway? Did not leave carriageway	•	Severity SLIGHT Age 9 yrs			
Hit object in c'way? None		Car Passenger? Front seat passenge	er PSV Passenger? Not a passenger		
Hit object off c'way? None		Seat Belt Unknown	Cycle Helmet		
First point of impact Back		Ped Movement Not applicable			
Veh registration no.  Drivers age 19 yrs Sex Male  Other veh.hit (ref.no)  Breath test Negativ	1 Hit and run Not hit and run Ve Driving Lic	Ped Location Not applicable			
,	reign registered vehicle	Ped Direction to Not applicable			
Journey purpose Other	organication venion	School Pupil Other			
A Larless Office		Roadworker injured			
E IID ( )	22.1.1	1	A '1 (D CN 100001160		

Veh.No. 3 Vehicle type Car Make Model Manoeuvre Slowing or stopping Veh. direction from West to East Towing? No tow or articulation Skidded No skidding, jack-knifing or overturning On main carriageway not in restricted lane Veh location at impact (restricted lane) Not at or within 20m of junction Junct. location of veh. at 1st impact Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Back Veh registration no. Other veh.hit (ref.no) Hit and run Not hit and run Driving Lic Drivers age 34 yrs Breath test Not requested Sex Female Left Hand Drive Foreign veh. Not foreign registered vehicle Unknown Journey purpose Other Veh.No. 4 Vehicle type Car Make Model Manoeuvre Slowing or stopping Veh. direction from West to East Towing? No tow or articulation Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway not in restricted lane Junct. location of veh. at 1st impact Not at or within 20m of junction Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Back

Other veh.hit (ref.no)

Negative

Foreign veh. Not foreign registered vehicle

Breath test

3

Veh registration no.

Left Hand Drive

Journey purpose

Drivers age 40 vrs

Sex Male

Unknown

Other

Full Details 22-July-2014 Accident Ref.No 100001162

Hit and run Not hit and run

Driving Lic

Other Details

1				Carlis	le Hosi	nital	l	
SEVERITY	District Carlisle		Carlisle Hospital			Grid Reference	339300 / 555890	
SLIGHT	Ref.No 100001287	Accio	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'			Police Officer Attend:	Yes	
Date Time	17/06/2010 Day Thursday 17:35	Road A	A595 Location A859	Church Street,	, Carlisle	e @ 40 Yards East Of Caldewgate Roundabo	ut.	
Weather Road Surface	Fine without high winds Dry	Description of Accident		Into V2, In Slo	ow Mov	ving Traffic.		
Street Lighting	g Daylight SITE DETAILS		1					
Smood Limit			SPECIAL SITE COND	ITIONS				
Speed Limit	30 MPH			IIIONS				
Carriageway	Dual carriageway	_	None					
Junction Detail	,	1			-			
Junction Contr 2nd Road Num			CARRIAGEWAY HAZ	ZARDS				
			None					
Pedestrian Fac								
	No physical crossing facility within	50 metre						
VEHICLES IN	NVOLVED 2					CASUALTIES INVOLVED	1	
	No skidding, jack-knifing or overturning on the impact (restricted lane) On main carriagewent of veh. at 1st impact Not at or within 20 ageway? Did not leave carriageway way? None c'way? None impact Front on no. Other veh.hit (ref.no) 32 yrs Sex Female Breath test Negat ve Unknown Foreign veh. Not for	yay not in of junc	o tow or articulation restricted lane tion  Hit and run Driving Lic stered vehicle	Model  Not hit and i	run	Cas No 1 Cas Class Driver or Severity SLIGHT Age 42 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details		Post code
Veh. direction		ing? No	tow or articulation					
Skidded	No skidding, jack-knifing or overturning	2 111						
	nt impact (restricted lane) On main carriagew							
Junct. location	n of veh. at 1st impact Not at or within 20	m of junc	tion					
Veh left carria								
Hit object in c'								
Hit object off								
First point of i			***: 4	37 . 1				
Veh registratio		1	Hit and run Driving Lic	Not hit and i	run			
Drivers age Left Hand Driv	,							
Journey purpos		neign iegi	SICIEU VEHICIE					
Journey purpos	Ouici					1		
E 11 D 4 3					22 T I			L . D CN 100001207

SEVERITY District Carlisle	Carlisle I	Hospital	Grid Reference 338610 / 555940			
<b>SLIGHT</b> Ref.No 100001884	Accident Date BETWEEN '01-Jun-2009' AND '31	Police Officer Attend: Yes				
Date 08/08/2010 Day Sunday Time 12:15	Road B5307 Location Newtown Road, Carlisle	pad B5307 Location Newtown Road, Carlisle At Junction With Bower Street.				
Weather Fine without high winds Road Surface Dry Street Lighting Daylight	· ·	owing Traffic Travelling In Opposite Direction To d With Rear Nearside Of V2. V1 Fts And Later A	o Pass. V1 Pulled Out Of Bower Street To Travel Arrested Opl.			
SITE DETAILS  Speed Limit 30 MPH  Carriageway Single carriageway	SPECIAL SITE CONDITIONS None					
Junction Detail T or staggered junction  Junction Control Give way or uncontrolled  2nd Road Number  Junction Detail T or staggered junction  Give way or uncontrolled	CARRIAGEWAY HAZARDS					
Pedestrian Facilities  None within 50 metres  No physical crossing facility within	None None					
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	2			
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriages Junct. location of veh. at 1st impact Entering main roa Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None	Make Model owing? No tow or articulation eway not in restricted lane ad	Cas No 1 Cas Class Driver or Severity SLIGHT Age 45 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured				
Journey purpose     Other       Veh.No.     2     Vehicle type     Car       Manoeuvre     Waiting to go ahead but held up       Veh. direction from     East to West     Town       Skidded     No skidding, jack-knifing or overturning	foreign registered vehicle  Make Model  owing? No tow or articulation  eway not in restricted lane	Cas No 2 Cas Class Passenger Severity SLIGHT Age 47 yr Car Passenger? Front seat passeng Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured Other Details	rs Sex Female Post code			
Veh left carriageway? Hit object in c'way? Hit object off c'way? None Hit object off c'way? None First point of impact Veh registration no. Drivers age 45 yrs  Did not leave carriageway None None Back Other veh.hit (ref.no) Breath test Negar	o) 1 Hit and run Not hit and run					

SEVERITY District Carlisle	Carlisle Hos	Carlisle Hospital		
<b>SLIGHT</b> Ref.No 100002576	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Police Officer Attend:	339180 / 555890 No - reported over the counter	
Date 05/11/2010 Day Friday Time 16:40 Weather Fine without high winds Road Surface Wet/Damp Street Lighting Dark: street lights present and lit	Road B5307 Location B5307 Port Road, Carlisle  Description Pedestrian Began To Cross On Crossing, of Accident Knocking Her To The Ground.	As She Was Half Way Across V1, Travelling	Into The Town Centre, Ha	s Collided With Her
SITE DETAILS  Speed Limit  30 MPH  Single carriageway  Function Detail  Function Control  Find Road Number  Pedestrian Facilities  None within 50 metres  Pelican, puffin, toucan or similar	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None	1		
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriagev Junct. location of veh. at 1st impact Not at or within 20 Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Nearside Veh registration no. Other veh.hit (ref.no) Drivers age 54 yrs Sex Female Breath test Negati	) 0 Hit and run Not hit and run	Cas No 1 Cas Class Pedestriar Severity SLIGHT Age 37 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from driv Ped Location On ped. crossing fa Ped Direction to South bound School Pupil Other Roadworker injured Not applicable Other Details	Veh ros S Sex Female PSV Passenger? No Cycle Helmet er's nearside	ef No 1 Post code ot a passenger

SEVERITY District Carlisle	Carlisle Hos	spital	Grid Reference 338520 / 555960
<b>SLIGHT</b> Ref.No 100002992	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Police Officer Attend: Yes	
Date 23/12/2010 Day Thursday Time 11:23 Weather Fine without high winds Road Surface Wet/Damp Street Lighting Daylight	Road B5307 Location B5307 Newtown Road, Car Description V1 Travelling On Newtown Road Out Of of Accident	rlisle Outside No. 64  The City. Wing Mirror Of V1 Strikes Pedestr	rian Who Steps Out Into The Road.
SITE DETAILS  Speed Limit 30 MPH  Carriageway Single carriageway  Junction Detail Not at or within 20 metres of junction  Junction Control  2nd Road Number  Pedestrian Facilities None within 50 metres  No physical crossing facility within 5	CARRIAGEWAY HAZARDS None		
Junct. location of veh. at 1st impact  Veh left carriageway?  Hit object in c'way?  Hit object off c'way?  First point of impact  Veh registration no.  Drivers age 62 yrs  Not at or within 20  Other veh.hit (ref.no)  Breath test  Negati	ay not in restricted lane m of junction  0 Hit and run Not hit and run	Cas No 1 Cas Class Pedestriar Severity SLIGHT Age 46 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from driv Ped Location In carriageway, creed Direction to Northbound School Pupil Other Roadworker injured Not applicable Other Details	n Veh ref No 1 rs Sex Male Post code PSV Passenger? Not a passenger Cycle Helmet ver's offside - masked rossing elsewhere

CIVITNITY	Carlisle H	Iospital			
SEVERITY District Carlisle		Grid Reference 339250 / 555880			
<b>SLIGHT</b> Ref.No 110000040	Accident Date BETWEEN '01-Jun-2009' AND '31	-May-2014'	Police Officer Attend: Yes		
Date 06/01/2011 Day Thursday Time 17:19	pad A595 Location A595 Caldecotes Roundabout, Carlisle				
Weather Fine without high winds Road Surface Wet/Damp		Vay Intending To Travel Onto Newtown Road. V	/2 Approaches Roundabout From Newtown Road		
Street Lighting Dark: street lights present and lit	7. 7. Column				
SITE DETAILS					
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS				
Carriageway Roundabout	None				
Junction Detail Roundabout					
Junction Control Give way or uncontrolled	CARRIAGEWAY HAZARDS				
2nd Road Number B5307	None				
Pedestrian Facilities None within 50 metres	<u> </u>				
No physical crossing facility within 50	metre				
VEHICLES INVOLVED 3		CASUALTIES INVOLVED	1		
	Make Model  g? No tow or articulation  y not in restricted lane  undabout or main road	Cas No 1 Cas Class Driver or Severity SLIGHT Age 46 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured			
Veh registration no. Other veh.hit (ref.no)	0 Hit and run Not hit and run	Other Details			
- *	vided (medical reas Driving Lic				
Left Hand Drive Unknown Foreign veh. Not fore	eign registered vehicle				
Journey purpose Other  Veh.No. 2 Vehicle type Car	Make Model	$\dashv$			
Manoeuvre Going ahead other	iviare iviouei				
Veh. direction from West to East Towing	g? No tow or articulation				
Skidded No skidding, jack-knifing or overturning	5. No low of afficulation				
	y not in restricted lane				
	undabout or main road				
Veh left carriageway? Did not leave carriageway					
Hit object in c'way? None					
Hit object off c'way? None					
First point of impact Nearside					
Veh registration no.  Other veh.hit (ref.no)	3 Hit and run Not hit and run				
Drivers age 51 yrs Sex Female Breath test Not requ Left Hand Drive Unknown Foreign veh. Not fore					
	agn registered venicle				
Journey purpose Commuting to/from work		$\dashv$			

Veh.No. 3 Vehicle type Pedal Cycle Make Model Manoeuvre Going ahead other Veh. direction from West to East Towing? No tow or articulation Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway not in restricted lane Mid junction - on roundabout or main road Junct. location of veh. at 1st impact Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Nearside Hit and run Not hit and run Veh registration no. Other veh.hit (ref.no) 2 Drivers age 46 yrs Sex Female Breath test Not Applicable Driving Lic Left Hand Drive Foreign veh. Not foreign registered vehicle Unknown

Commuting to/from work

Journey purpose

Full Details 22-July-2014 Accident Ref.No 110000040

Time 21:20 Weather Fine without high winds Road Surface Wet/Damp De	Accident Date BETWEEN '01-Jun-2009' AND Dad B5307 Location B5307 Calcotes, Carl	Police Officer Attend. 1 CS
Date 20/05/2011 Day Friday Time 21:20 Weather Fine without high winds Road Surface Wet/Damp Street Lighting Daylight  SITE DETAILS Speed Limit 30 MPH Carriageway Single carriageway Junction Detail Not at or within 20 metres of junction Junction Control 2nd Road Number Pedestrian Facilities None within 50 metres Zebra crossing  VEHICLES INVOLVED 2	pad B5307 Location B5307 Calcotes, Carlescription V2 Parked Within Zig Zags Of Peder Accident  SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None	lisle Near Pedestrian Crossing.  estrian Crossing. Casualty 1 Alights From V2 And Commences To Cross Road And Is Struck By V1.  CASUALTIES INVOLVED 1
Time 21:20 Weather Fine without high winds Road Surface Wet/Damp Street Lighting Daylight  SITE DETAILS Speed Limit 30 MPH Carriageway Single carriageway Junction Detail Not at or within 20 metres of junction Junction Control 2nd Road Number Pedestrian Facilities None within 50 metres Zebra crossing	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None	estrian Crossing. Casualty 1 Alights From V2 And Commences To Cross Road And Is Struck By V1.  CASUALTIES INVOLVED 1
Road Surface Wet/Damp of Street Lighting Daylight  SITE DETAILS  Speed Limit 30 MPH  Carriageway Single carriageway  Junction Detail Not at or within 20 metres of junction  Junction Control  2nd Road Number  Pedestrian Facilities None within 50 metres  Zebra crossing  VEHICLES INVOLVED 2	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None	CASUALTIES INVOLVED 1
Speed Limit Carriageway Single carriageway Junction Detail Not at or within 20 metres of junction Junction Control 2nd Road Number Pedestrian Facilities None within 50 metres Zebra crossing  VEHICLES INVOLVED 2	None  CARRIAGEWAY HAZARDS  None	
Carriageway Junction Detail Not at or within 20 metres of junction Junction Control 2nd Road Number Pedestrian Facilities None within 50 metres Zebra crossing  VEHICLES INVOLVED 2	None  CARRIAGEWAY HAZARDS  None	
Junction Detail Not at or within 20 metres of junction  Junction Control  2nd Road Number  Pedestrian Facilities None within 50 metres  Zebra crossing  VEHICLES INVOLVED 2	CARRIAGEWAY HAZARDS None	
Junction Control 2nd Road Number Pedestrian Facilities None within 50 metres Zebra crossing  VEHICLES INVOLVED 2	None	
2nd Road Number Pedestrian Facilities None within 50 metres Zebra crossing  VEHICLES INVOLVED 2	None	
Zebra crossing  VEHICLES INVOLVED 2		
Zebra crossing  VEHICLES INVOLVED 2	Make Model	
	Make Model	
Veh.No. 1 Vehicle type Car	Make Model	Cas No. 1 Cas Class Bodostrian Vah raf No. 1
Manoeuvre Going ahead other  Veh. direction from Southeast to Northwest Towing?  Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) On main carriageway in Junct. location of veh. at 1st impact Not at or within 20m or Veh left carriageway? Did not leave carriageway  Hit object in c'way? None  Hit object off c'way? None  First point of impact Nearside  Veh registration no. Other veh.hit (ref.no)  Drivers age 19 yrs Sex Female Breath test Negative  Left Hand Drive Unknown Foreign veh. Not foreig Journey purpose Commuting to/from work  Veh.No. 2 Vehicle type Car  Manoeuvre Parked  Veh. direction from Parked to Parked Towing?  Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) On main carriageway in Junct. location of veh. at 1st impact Not at or within 20m or Veh left carriageway? Did not leave carriageway  Hit object in c'way? None  Hit object off c'way? None  First point of impact Did not impact  Veh registration no. Other veh.hit (ref.no)  Drivers age 36 yrs Sex Female Breath test Not request Left Hand Drive Unknown Foreign veh. Not foreig	not in restricted lane  O Hit and run Not hit and r Driving Lic gn registered vehicle  Make Model  No tow or articulation not in restricted lane of junction  O Hit and run Not hit and r sted Driving Lic	Severity SLIGHT Age 35 yrs Sex Female Post code  Car Passenger? Not a passenger PSV Passenger? Not a passenger  Seat Belt Unknown Cycle Helmet Ped Movement Crossing from driver's nearside Ped Location In zig-zag lines at crossing approach Ped Direction to Northeast bound School Pupil Other Roadworker injured Not applicable  Other Details

SEVERITY District Carlisle	Carlisle Ho	Ospital Grid Reference 339200 / 555890	
SLIGHT         Ref.No         110001542	Accident Date BETWEEN '01-Jun-2009' AND '31-M		
Date 15/02/2011 Day Tuesday Time 08:22 Weather Fine without high winds Road Surface Dry	Road B5307 Location B5307 Caldecotes, Carlisle  Description V1 Collided With Pedestrian On Zebra Cof Accident		
Street Lighting Daylight  SITE DETAILS  Speed Limit 30 MPH  Carriageway Single carriageway  Junction Detail Not at or within 20 metres of junctio  Junction Control  2nd Road Number  Pedestrian Facilities None within 50 metres	SPECIAL SITE CONDITIONS None		
Zebra crossing  VEHICLES INVOLVED 1		CASUALTIES INVOLVED 1	
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriagev Junct. location of veh. at 1st impact Not at or within 20 Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Offside Veh registration no. Other veh.hit (ref.no) Drivers age 17 yrs Sex Female Breath test Negati	0 Hit and run Not hit and run	Cas No 1 Cas Class Pedestrian Veh ref No 1 Severity SLIGHT Age 56 yrs Sex Male Post code  Car Passenger? Not a passenger PSV Passenger? Not a passenger Seat Belt Unknown Cycle Helmet Ped Movement Crossing from driver's offside - masked Ped Location On ped. crossing facility Ped Direction to Northbound School Pupil Other Roadworker injured Not applicable  Other Details	

SEVERITY District Carlisle	Carlisle Hosp	pital	C.ID.C	220250 / 555070
SEVERITY District Carlisle SLIGHT Ref.No 110001989	A II (D ( DETWEENIOL L 2000) AND 121 M	2014	Grid Reference	339250 / 555870
SLIGHT RELING 110001989	Accident Date BETWEEN '01-Jun-2009' AND '31-Ma	Police Officer Attend:	No - reported over the counter	
Date 14/09/2011 Day Wednesday Time 16:55 Weather Fine without high winds Road Surface Dry Street Lighting Daylight	om Wigton Road And Collides With V2, Ped	al Cycle Who Was Travell	ling Round The	
SITE DETAILS				
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS			
Carriageway Roundabout	None			
Junction Detail Roundabout	110110			
Junction Control Give way or uncontrolled	CARRIAGEWAY HAZARDS			
2nd Road Number A595				
Pedestrian Facilities None within 50 metres	None			
No physical crossing facility within 50	) metre			
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1	
Junct. location of veh. at 1st impact  Veh left carriageway?  Hit object in c'way?  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 49 yrs  Sex Male  Journey purpose  Veh.No. 2  Vehicle type  Going ahead other  Veh. direction from  Northeast to West  Skidded  No skidding, jack-knifing or overturning  Veh location at impact (restricted lane)  Junct. location of veh. at 1st impact  Veh left carriageway?  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 49 yrs  Sex Male  Breath test  Driver no.  Other veh.hit (ref.no)  On main carriageway  Mid junction - on row  Veh left carriageway?  None  Hit object off c'way?  None  First point of impact  Nearside  Veh registration no.  Other veh.hit (ref.no)  Drivers age 49 yrs  Sex Male  Breath test  Not App	y not in restricted lane  2 Hit and run Not hit and run not contacted Driving Lic eign registered vehicle  Make Model  1 Hit and run Not hit and run  Not hit and run	Cas No 1 Cas Class Driver or Severity SLIGHT Age 49 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	s Sex Male	ef No 2 Post code ot a passenger

SEVERITY District Carlisle	Carlisle Hospita	l	Grid Reference	339250 / 555890	
SLIGHT   Ref.No 110002301	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2	014'	Police Officer Attend:	Yes	
Date 22/10/2011 Day Saturday Time 09:55	Road B5307 Location B5307 Newtown Road Entry Of Carrs Roundabout, Caldewgate, Carlisle.				
Weather Fine without high winds Road Surface Dry Street Lighting Daylight  Description of Accident V2 Is Stationary Wating To Enter Roundabout From Newtown Road. V1, Psv, Is Position Behinf V2. V2 Begins To Enter Roundabout of Accident And Is Forced To Brake. V1 Following Fails To See V2 Braking And Collides With Rear Of V2.					
SITE DETAILS  Speed Limit Carriageway Junction Detail Junction Control 2nd Road Number Pedestrian Facilities  SITE DETAILS 30 MPH Roundabout Give way or uncontrolled A595 None within 50 metres No physical crossing facility within 50	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None				
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1		
Junct. location of veh. at 1st impact  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 38 yrs  Sex Male  Breath test  Negativ  Left Hand Drive  Unknown  Foreign veh. Not fore  Journey purpose  Journey as part of work  Veh.No. 2  Vehicle type  Car  Manoeuvre  Slowing or stopping  Veh. direction from  Southwest to Northeast  Towin  Skidded  No skidding, jack-knifing or overturning  Veh location at impact (restricted lane)  Junct. location of veh. at 1st impact  Entering roundabout  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None	ng? No tow or articulation  y not in restricted lane t  2 Hit and run Not hit and run Driving Lic eign registered vehicle  Make Model  ng? No tow or articulation y not in restricted lane	Cas No 1 Cas Class Driver or F Severity SLIGHT Age 30 yrs Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured her Details	s Sex Male	f No 2 Post code t a passenger	
First point of impact Back  Veh registration no.  Drivers age 30 yrs Sex Male Breath test Negativ	1 Hit and run Not hit and run re Driving Lic eign registered vehicle				

SEVERITY District Carlisle	Carlisle Hospi	ital	Grid Reference	339040 / 555900		
SLIGHT   Ref.No   120000283	Accident Date BETWEEN '01-Jun-2009' AND '31-May	v-2014'	Police Officer Attend:	No - reported over the counter		
Date 03/02/2012 Day Friday Time 08:55	Road B5307 Location B5307 Port Road, Carlisle	pad B5307 Location B5307 Port Road, Carlisle				
Weather Fine without high winds Road Surface Dry  Description V2 Was Driving In Traffic On Port Road Towards Mevities Roundabout. Traffic Was Slow Moving And Conjested. V1 Situated of Accident Immediately Behing V2 In Traffic Oueue. V1 Has Driven Into The Rear Of V2 At Low Speed.						
Street Lighting Daylight SITE DETAILS	1					
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS					
Carriageway Single carriageway	None					
Junction Detail  Not at or within 20 metres of junction						
Junction Control						
2nd Road Number	CARRIAGEWAY HAZARDS					
Pedestrian Facilities None within 50 metres	None					
No physical crossing facility within 50	50 metre					
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1			
Junct. location of veh. at 1st impact  Veh left carriageway? Did not leave carriageway  Hit object in c'way? None  Hit object off c'way? None  First point of impact  Veh registration no.  Drivers age 26 yrs Sex Male  Journey purpose  Other  Veh.No. 2 Vehicle type Car  Manoeuvre  Slowing or stopping  Veh. direction from  West to East  Towir  Skidded  No skidding, jack-knifing or overturning  Veh location at impact (restricted lane)  Junct. location of veh. at 1st impact  Not at or within 20m  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Back  Veh registration no.  Drivers age 24 yrs  Sex Male  Not at or within 20m  Other veh.hit (ref.no)  Breath test  Driver no  Other veh.hit (ref.no)  Drivers age 24 yrs  Sex Male  Breath test  Driver no  Other veh.hit (ref.no)  Drivers age  Other veh.hit (ref.no)  Drivers age  Did not leave carriageway  Other veh.hit (ref.no)  Drivers age  Did not leave carriageway  Other veh.hit (ref.no)  Drivers age  Driver no  Other veh.hit (ref.no)  Drivers age  Did not leave carriageway  Other veh.hit (ref.no)  Drivers age  Driver no  Other veh.hit (ref.no)  Drivers age  Driver no  Other veh.hit (ref.no)  Drivers age  Driver no  Other veh.hit (ref.no)  Driver no  Other veh.hit (ref.no)  Drivers age  Driver no  Other veh.hit (ref.no)	ay not in restricted lane m of junction  2 Hit and run Not hit and run not contacted Driving Lic reign registered vehicle  Make Model  ing? No tow or articulation ay not in restricted lane	Cas No 1 Cas Class Driver or I Severity SLIGHT Age 24 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	s Sex Male	ef No 2 Post code ot a passenger		

			Carl	isle Hos	snital	<u> </u>	
SEVERITY	District Carlisle		Cur 1000 1100p. un			Grid Reference	338480 / 555970
SLIGHT	Ref.No 120002004	Accid	lent Date BETWEEN '01-Jun-2009' AN	D '31-M	1ay-2014'	Police Officer Attend:	Yes
Date Time	10/09/2012 Day Monday 14:06	Road I	nd B5307 Location B5307 Newtown Road, Carlisle				
Weather Road Surface Street Lighting	, , ,	Description of Accid		_	oad Into The Main Road, Newtown Road, And tion. This Caused Vehicle 2 To Collide With		2 Which Was Heading
Speed Limit	SITE DETAILS 30 MPH		SPECIAL SITE CONDITIONS				
Carriageway Junction Detail			None	_			
Junction Contr 2nd Road Num	nber U		CARRIAGEWAY HAZARDS None				
Pedestrian Fac	None within 50 metres No physical crossing facility within	50 metre	rvone				
VEHICLES IN	NVOLVED 2		ı	1	CASUALTIES INVOLVED	2	
Manoeuvre Veh. direction Skidded Veh location a Junct. location Veh left carria	Veh. direction from Northwest to Southeast Towing? No tow or articulation  Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) On main carriageway not in restricted lane  Junct. location of veh. at 1st impact Entering main road  Veh left carriageway? Left carriageway nearside  Hit object in c'way? None				Cas No 1 Cas Class Driver or Severity SLIGHT Age 50 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured	rs Sex Female	ef No 1 Post code ot a passenger
First point of in Veh registratio Drivers age Left Hand Driv Journey purpos Veh.No. 2 Manoeuvre Veh. direction Skidded Veh location a	on no.  50 yrs Sex Female Breath test Negative Unknown Foreign veh. Not foreign veh. Not foreign veh. See Other  Vehicle type Car Going ahead other	ving? No	Make Model tow or articulation	d run	Cas No 2 Cas Class Driver or Severity SLIGHT Age 24 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured		Post code
	of veh. at 1st impact Approaching junct geway? Did not leave carriageway way? None c'way? None mpact Front on no. Other veh.hit (ref.no) 24 yrs Sex Female Breath test Negat ve Unknown Foreign veh. Not for	ion or was  0 ive	Hit and run Not hit and Driving Lic	1 run	Other Details		
Full Datails				22 July	2014		Jont Pof No. 120002004

SEVERITY District Carlisle	Carlisle Ho	spital	G : ID 6			
SEVERITY District Carlisle SLIGHT Ref.No 120002278	A: Jane Data DETWEEN IN 1 - 2000 AND 12 A	A 2014!	Grid Reference 339280 / 555900			
SLIGHT Rel. 10 120002278	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Police Officer Attend: Yes				
Time 12:15	Road A595 Location A595 Caldewgate, Carlisle	ad A595 Location A595 Caldewgate, Carlisle				
I Road Surface Dry		e Turning Left Onto Main Carriageway. V2 Ang Him To Fall Off His Cycle And Cause Injur	A Pedal Cycle Using The Footpath Towards The ry.			
SITE DETAILS						
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS					
Carriageway Dual carriageway	None					
Junction Detail Using private drive or entrance						
Junction Control Give way or uncontrolled	CARRIAGEWAY HAZARDS					
2nd Road Number U						
Pedestrian Facilities None within 50 metres	None					
No physical crossing facility within 50	metre					
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1			
Veh.No. 1 Vehicle type Van/Goods < 3.5t  Manoeuvre Moving off  Veh. direction from West to East Towing Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway Junct. location of veh. at 1st impact Approaching junction Veh left carriageway? Did not leave carriageway Hit object in c'way? None  Hit object off c'way? None  First point of impact Nearside  Veh registration no. Other veh.hit (ref.no)  Drivers age 69 yrs Sex Male Breath test Negative Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Journey as part of work  Veh.No. 2 Vehicle type Pedal Cycle  Manoeuvre Going ahead other  Veh. direction from North to South Towing Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) Footway (pavement)  Junct. location of veh. at 1st impact Approaching junction Veh left carriageway? Did not leave carriageway  Hit object in c'way? None  Hit object off c'way? None  First point of impact Front  Veh registration no. Other veh.hit (ref.no)  Drivers age 40 yrs Sex Male Breath test Not App	y not in restricted lane n or waiting  0 Hit and run Not hit and run Driving Lic eign registered vehicle  Make Model  g? No tow or articulation  n or waiting  0 Hit and run Not hit and run	Cas No 1 Cas Class Driver or Severity SLIGHT Age 40 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details				
Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other						

CEVERITY	Carlisle Hos	pital		1
SEVERITY District Carlisle SLIGHT Ref.No 120002553			Grid Reference	339170 / 555890
<b>SLIGHT</b> Ref.No 120002553	Accident Date BETWEEN '01-Jun-2009' AND '31-M	ay-2014'	Police Officer Attend:	Yes
Date 19/11/2012 Day Monday Time 21:41	Road B5307 Location B5307 Caldcotes, Carlisle		1	
	Description Pedestrian Casualty Has Stumbled In To T f Accident	The Path Of Oncoming V1. V1 Has Clipped	The Leg Of Casualty Causin	ng Him To Fall.
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS			
Carriageway Single carriageway Junction Detail Not at or within 20 metres of junction	None			
Junction Control	CARRIAGEWAY HAZARDS			
2nd Road Number	None			
Pedestrian Facilities None within 50 metres  No physical crossing facility within 50	metra			
No physical crossing facility within 50	metre	T'		
VEHICLES INVOLVED 1		CASUALTIES INVOLVED	1	
Veh.No. 1 Vehicle type Car Manoeuvre Going ahead other Veh. direction from West to East Towing Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway Junct. location of veh. at 1st impact Not at or within 20m Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Other veh.hit (ref.no) Drivers age 56 yrs Sex Male Breath test Negative Left Hand Drive Unknown Foreign veh. Not foreignurney purpose Commuting to/from work	onot in restricted lane of junction  Hit and run Driving Lic	Cas No 1 Cas Class Pedestrian Severity SLIGHT Age 37 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from driv Ped Location In carriageway, croped Direction to Unknown School Pupil Other Roadworker injured Not applicable Other Details	rs Sex Male PSV Passenger? No Cycle Helmet ver's nearside ossing elsewhere	Post code

SEVERITY District Carlisle	Carlisle Hospi	ital	Grid Reference	220270 / 555990		
SLIGHT Ref.No 120002567	Accident Date BETWEEN '01-Jun-2009' AND '31-May	, 2014'	Oliu Kelelelice	339270 / 555880		
SEIGHT 120002507	Accident Date BET WEEN 01-Jun-2009 AND 31-May	Police Officer Attend:	No - reported over the counter			
Date 23/11/2012 Day Friday Time 07:15	Road A595 Location A595 Roundabout on Church	toad A595 Location A595 Roundabout on Church Street, Carlisle				
Weather Fine without high winds Road Surface Dry Street Lighting Daylight	Description V1 Pulled Out Of Wigton Road Behind Bus of Accident Wheel Of Cyclist Causing Cyclist To Come		Turning On To Caldcotes.	V1 Clipped Rear		
SITE DETAILS						
Speed Limit 60 MPH	SPECIAL SITE CONDITIONS					
Carriageway Single carriageway	None					
Junction Detail Roundabout						
Junction Control Give way or uncontrolled	CARRIAGEWAY HAZARDS					
2nd Road Number U	None					
Pedestrian Facilities None within 50 metres						
No physical crossing facility within 5	50 metre					
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1			
Junct. location of veh. at 1st impact Leaving roundabou Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Did not impact Veh registration no. Other veh.hit (ref.no) Drivers age ? yrs Sex Male Breath test Negative Left Hand Drive Unknown Foreign veh. Not for Journey purpose Other  Veh.No. 2 Vehicle type Pedal Cycle Manoeuvre Going ahead other Veh. direction from North to South Towin Skidded No skidding, jack-knifing or overturning	ay not in restricted lane  1  0 Hit and run Not hit and run ve Driving Lic reign registered vehicle  Make Model  ing? No tow or articulation  ay not in restricted lane	Cas No 1 Cas Class Driver or I Severity SLIGHT Age 20 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured Other Details	s Sex Male	ef No 2 Post code ot a passenger		
Hit object in c'way? None Hit object off c'way? None First point of impact Veh registration no. Drivers age 20 yrs Sex Male  None Other veh.hit (ref.no) Breath test Not Ap	0 Hit and run Not hit and run pplicable Driving Lic reign registered vehicle					

CEVEDITY D' C C C C	Carlisle Ho	spital	
SEVERITY District Carlisle		•	Grid Reference 339190 / 555890
<b>SLIGHT</b> Ref.No 120002575	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Police Officer Attend: Yes	
Date 13/11/2012 Day Tuesday Time 18:25	Road B5307 Location Caldcotes, Carlisle, Cumbr	ria	
Weather Fine without high winds Road Surface Wet/Damp Street Lighting Dark: street lights present and lit	Description V2 Was Stationary In Queuing Traffic On of Accident Damage To Same.	n Caldcotes At The Pedestrial Crossing. V1 Ha	as Collided With The Rear End Of V2 Causing
SITE DETAILS	and and another and another and		
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS		
Carriageway Single carriageway	None		
Junction Detail Not at or within 20 metres of junction			
Junction Control	CARRIAGEWAY HAZARDS		
2nd Road Number	None		
Pedestrian Facilities None within 50 metres			
No physical crossing facility within 5	50 metre		
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1
Junct. location of veh. at 1st impact  Veh left carriageway?  Hit object in c'way?  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 30 yrs  Left Hand Drive  Veh.No. 2  Vehicle type  Veh. direction from  Skidded  No skidding, jack-knifing or overturning  Veh location at impact (restricted lane)  Junct. location of veh. at 1st impact  Veh left carriageway?  Hit object in c'way?  Hit object off c'way?  None  First point of impact  Not at or within 20r  Not at or within 20r  None  First point of impact  Back  Veh registration no.  Drivers age 17 yrs  Sex Female  Not at or within 20r  Other veh.hit (ref.no)  Breath test  Driver in the properties of the properti	ay not in restricted lane m of junction  2 Hit and run not contacted Driving Lic reign registered vehicle  Make Model  ing? No tow or articulation ay not in restricted lane	Cas No 1 Cas Class Driver or Severity SLIGHT Age 17 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured Other Details	

				Carlis	le Host	pital		
SEVERITY	District Carlisle					•	Grid Reference	338770 / 555920
SLIGHT	Ref.No 130000159	Accio	dent Date BETWEEN '01	Jun-2009' AND	) '31-Ma	Police Officer Attend:	Yes	
Date Time	27/01/2013 Day Sunday 09:40	Road I	35307 Location Newton	own Road, Carl	lisle			
Weather	Fine with high winds	Danaminati	Vahiela 1 Was Trav	alling Doven Na	awtown	Road Towards Peel Street, Veered Onto The	Opposite Side Of The Wa	y And Collided With
Road Surface	Dry	Description of Accide		•		Road Towards Feet Street, Veeted Onto The	opposite side of the wa	y And Conided with
Street Lighting	, <u>, , , , , , , , , , , , , , , , , , </u>	01710010						
	SITE DETAILS							
Speed Limit	60 MPH		SPECIAL SITE COND	ITIONS				
Carriageway	Single carriageway		None					
Junction Detail	J	1			_			
Junction Contr			CARRIAGEWAY HAZ	ZARDS				
2nd Road Num			None					
Pedestrian Fac								
	No physical crossing facility within	50 metre						
VEHICLES IN	NVOLVED 3				•	CASUALTIES INVOLVED	1	
Veh.No. 1	Vehicle type Car		Make	Model		Cas No 1 Cas Class Driver or	Rider Veh re	ef No 1
Manoeuvre	Going ahead other					Severity SLIGHT Age 76 yr	s Sex Male	Post code
Veh. direction	West to East	ring? No	tow or articulation			Car Passenger? Not a passenger	PSV Passenger? No	ot a nassenger
Skidded	No skidding, jack-knifing or overturning					Seat Belt Unknown	Cycle Helmet	or a passenger
	at impact (restricted lane) On main carriagew	-				Ped Movement Not applicable		
	n of veh. at 1st impact Not at or within 20	m of junc	tion			Ped Location Not applicable		
Veh left carriag Hit object in c'						Ped Direction to Not applicable		
Hit object off of						School Pupil Other		
First point of in						Roadworker injured		
Veh registratio		0	Hit and run	Not hit and	run	Other Details		
Drivers age			Driving Lic					
Left Hand Driv	ve Unknown Foreign veh. Not fo	reign regi	istered vehicle					
Journey purpos								
Veh.No. 2	Vehicle type Car		Make	Model				
Manoeuvre Valudirection	Parked	. 0 37						
Veh. direction	I direct to I direct	ring? No	tow or articulation					
Skidded Veh location a	No skidding, jack-knifing or overturning at impact (restricted lane)  On lay-by/hard sho	ulder						
	of veh. at 1st impact  Not at or within 20		tion					
Veh left carria		and June						
Hit object in c'								
Hit object off o	c'way? None							
First point of in								
Veh registratio		0		Not hit and	run			
Drivers age Left Hand Driv			Driving Lic					
	0	neign regi	istered venicle					
Journey purpos	se Other							
E 11 D 4 7					22 1 1			I D CN 120000170

Veh.No. 3 Vehicle type Car Make Model Manoeuvre Parked Veh. direction from Parked to Parked Towing? No tow or articulation Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On lay-by/hard shoulder Not at or within 20m of junction Junct. location of veh. at 1st impact Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Back Hit and run Not hit and run Veh registration no. Other veh.hit (ref.no) Drivers age 50 yrs Sex Male Breath test Not requested Driving Lic Left Hand Drive Foreign veh. Not foreign registered vehicle Unknown

Journey purpose

Other

Full Details 22-July-2014 Accident Ref.No 130000159

			Carlisl	e Hospital			
	District Carlisle				Grid Reference	339050 / 555980	
SLIGHT	Ref.No 130000479	Accident Date BETWEEN '0	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'			No - reported over the counter	
Date Time	06/03/2013 Day Wednesday 11:00	Road U1431 Location Por	d U1431 Location Port Road Industrial Estate, Carlisle				
Weather Road Surface Street Lighting	Fine without high winds Dry Daylight	Description V1 Has Turned in of Accident	to a Junction Cros	ssing V2's Path which Has Caused Rider of V2 to Sv	werve and Fall off Vehicle.		
Speed Limit Carriageway	SITE DETAILS  30 MPH  Single carriageway	SPECIAL SITE CON None	IDITIONS				
Junction Detail Junction Control 2nd Road Numbe Pedestrian Facilit	· ·	CARRIAGEWAY H.	AZARDS				
redestrian racint	None within 50 metres No physical crossing facility within 5	0 metre					
VEHICLES INV	OLVED 2			CASUALTIES INVOLVED	) 1		
Veh location at ir Junct. location of Veh left carriage Hit object in c'wa Hit object off c'w First point of imp Veh registration in Drivers age 70 Left Hand Drive Journey purpose Veh.No. 2 Manoeuvre Veh. direction from Skidded 1 Veh location at in 10 Veh location	No skidding, jack-knifing or overturning mpact (restricted lane) On main carriageway Approaching juncti way? Did not leave carriageway None vay? None Other Did not impact no. Other veh.hit (ref.no) Other Unknown Foreign veh. Not for Other  Vehicle type M/cycle 50 - 125cc Going ahead other Om North to South Towi No skidding, jack-knifing or overturning mpact (restricted lane) On main carriageway on the south of the south of the strength of the strength of the south of t	on or waiting  0 Hit and run not contacted Driving Li reign registered vehicle  Make  ng? No tow or articulation ay not in restricted lane	n Not hit and r	Cas No 1 Cas Class Driver or Severity SLIGHT Age 25 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details		Post code	
Hit object off c'w First point of imp Veh registration i Drivers age 25 Left Hand Drive Journey purpose	vay? None pact Did not impact no. Other veh.hit (ref.no) 5 yrs Sex Male Breath test Driver	0 Hit and ru not contacted Driving Li reign registered vehicle	n Not hit and I	un			

SEVERITY District Carlisle	Carlisle Hospital		Grid Reference 339120 / 555900
<b>SLIGHT</b> Ref.No 130000776	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Police Officer Attend: Yes	
Date 16/04/2013 Day Tuesday Time 15:35	Road B5307 Location Caldcotes, Carlisle		
Weather Fine without high winds Road Surface Dry Street Lighting Daylight	Description Collision Occured Between Driver And P of Accident	Pedestrian.	
SITE DETAILS  Speed Limit 30 MPH  Carriageway Single carriageway  unction Detail Not at or within 20 metres of junction	SPECIAL SITE CONDITIONS None		
Junction Control  2nd Road Number  Pedestrian Facilities None within 50 metres  Zebra crossing	CARRIAGEWAY HAZARDS None		
VEHICLES INVOLVED 1		CASUALTIES INVOLVED	) 1
Junct. location of veh. at 1st impact  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age  45 yrs  Not at or within 20th  None  Other veh.hit (ref.no)  Dreath test  Negative	ay not in restricted lane n of junction  0 Hit and run Not hit and run	Severity SLIGHT Age 4 yrs  Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from driv Ped Location On ped. crossing f Ped Direction to East bound School Pupil Yes on way to or f Roadworker injured Not applicable  Other Details	PSV Passenger? Not a passenger Cycle Helmet ver's offside - masked cacility from school

SEVERITY District Carlisle	Carlisle Hospital	Grid Reference 338970 / 555890				
SLIGHT Ref.No 130001754	Accident Date BETWEEN '01-Jun-2009' AND '31-May-20	114'				
	Treetaent Bate BET WEET, OT van 2009 Tive 31 Way 20	Police Officer Attend: Yes				
Date 15/08/2013 Day Thursday Time 16:50	Road B5307 Location Port Road, Carlisle					
Weather Fine without high winds						
Road Surface Dry	Description V1 Has Been Travelling Allong. V1 Has Moved Out To Pass V3 Cyclist, Travelling In The Same Direction. V3 Has Collided With V1 of Accident And Somehow Bounced Onto Opposite Side Of Cariageway Colliding With V2.					
Street Lighting Daylight	or recident					
SITE DETAILS	CDECIAL CITE COMPUTIONS					
Speed Limit 30 MPH Carriageway Single carriageway	SPECIAL SITE CONDITIONS					
Carriageway Single carriageway Junction Detail Not at or within 20 metres of junction	None					
Junction Control						
2nd Road Number	CARRIAGEWAY HAZARDS					
Pedestrian Facilities None within 50 metres	None					
No physical crossing facility within 50	) metre					
VEHICLES INVOLVED 3		CASUALTIES INVOLVED 1				
Junct. location of veh. at 1st impact  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 68 yrs Sex Male  Left Hand Drive  Unknown  Journey purpose  Other  Veh.No. 2  Vehicle type Car  Manoeuvre  Going ahead other  Veh. direction from  East to West  Towin  Skidded  No skidding, jack-knifing or overturning	ng? No tow or articulation  y not in restricted lane n of junction  O Hit and run Not hit and run uested Driving Lic eign registered vehicle  Make Model  y not in restricted lane  y not in restricted lane	as No 1 Cas Class Driver or Rider Veh ref No 3 everity SLIGHT Age 25 yrs Sex Female Post code ar Passenger? Not a passenger PSV Passenger? Not a passenger eat Belt Not applicable Cycle Helmet ed Movement Not applicable ed Location Not applicable ed Direction to Not applicable chool Pupil Other oadworker injured er Details				
Veh registration no.  Drivers age 57 yrs Sex Female Breath test Not requ	0 Hit and run Not hit and run uested Driving Lic eign registered vehicle					

Veh.No. 3 Vehicle type Pedal Cycle Make Model Going ahead other Manoeuvre Veh. direction from West to East Towing? No tow or articulation Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway not in restricted lane Not at or within 20m of junction Junct. location of veh. at 1st impact Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Offside Hit and run Not hit and run Veh registration no. Other veh.hit (ref.no) 0 Drivers age 25 yrs Sex Female Breath test Negative Driving Lic Left Hand Drive Foreign veh. Not foreign registered vehicle Unknown

Journey purpose

Other

Full Details 22-July-2014 Accident Ref.No 130001754

		Carlisle Hos	nital	1	
SEVERITY District Carlisle	Carnsie nospitai		Grid Reference	339250 / 555870	
<b>SLIGHT</b> Ref.No 130002157	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'			Police Officer Attend:	Yes
Date 16/09/2013 Day Monday Time 07:20	Road A595 Location A595 Cald	dewgate, Carlisle			
Weather Fine without high winds	D VI Pulled Out Of Innetic	on Onto Doundah	out Calliding With V2 Padal Cyala		
I Road Surface Dry I	Description V1 Pulled Out Of Junctic of Accident	on Onto Roundado	out Colliding With V2, Pedal Cycle.		
Street Lighting Daylight	of Accident				
SITE DETAILS					
Speed Limit 30 MPH	SPECIAL SITE CONDITIO	ONS			
Carriageway Roundabout	None				
Junction Detail Roundabout					
Junction Control Give way or uncontrolled	CARRIAGEWAY HAZARI	DS			
2nd Road Number U	None	-~			
Pedestrian Facilities None within 50 metres	None				
Zebra crossing					
VEHICLES INVOLVED 2	•		CASUALTIES INVOLVED	1	
Junct. location of veh. at 1st impact  Veh left carriageway?  Hit object in c'way?  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 57 yrs  Left Hand Drive  Journey purpose  Commuting to/from work  Veh.No. 2  Vehicle type  Manoeuvre  Turning left  Veh. direction from  Southeast to Northwest  Skidded  No skidding, jack-knifing or overturning  Veh location at impact (restricted lane)  Junct. location of veh. at 1st impact  Veh left carriageway?  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 31 yrs  Sex Female  Breath test  Negative  Other veh.hit (ref.no)  On main carriageway  Mid junction - on rou  Other veh.hit (ref.no)  Breath test  Negative  Towing  None  First point of impact  Front  Veh registration no.  Other veh.hit (ref.no)  Breath test  Negative	y not in restricted lane  0 Hit and run No e Driving Lic eign registered vehicle  Make Mod ag? No tow or articulation y not in restricted lane undabout or main road  0 Hit and run No e Driving Lic	ot hit and run	Cas No 1 Cas Class Driver or Severity SLIGHT Age 31 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	s Sex Male	ef No 2 Post code ot a passenger
Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Commuting to/from work			_		
E HD ( 'I		22 1 1	****		1 . D CN 120002155

SEVERITY SLIGHT  Date	District Carlisle Ref.No 130002390	Accie		Carlisle	Hospital	Grid Reference	338470 / 555980
	Ref.No 130002390	Accie					
Date			Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'			Police Officer Attend:	Yes
Time	29/10/2013 Day Tuesday 11:53	Road I	Road B5307 Location Junction Newtown Road/Bellgarth Gardens, Carlisle.				
Weather Road Surface Street Lighting	Fine without high winds Dry Daylight	Descript of Accid		ong, When V1	Turned At Junction Clipping Cyclist Causing Him	n To Fall Off.	
Speed Limit	SITE DETAILS 30 MPH		SPECIAL SITE CONDITION	ONS			
Junction Detail	Carriageway Junction Detail Junction - more than 4 arms (not a roundable of the state of the sta		None				
			CARRIAGEWAY HAZAR None	RDS			
	No physical crossing facility within	50 metre					
VEHICLES IN	IVOLVED 2			•	CASUALTIES INVOLVED	1	
	No skidding, jack-knifing or overturning impact (restricted lane) On main carriages of veh. at 1st impact Approaching junct geway? Did not leave carriageway way? None 'way? None mpact Front no. Other veh.hit (ref.no) 82 yrs Sex Male Breath test Nega te Unknown Foreign veh. Not fee Other  Vehicle type Pedal Cycle Going ahead other	way not in tion or wa 0 tive foreign reg	Hit and run N Driving Lic istered vehicle  Make Mo	Not hit and rui	Cas No 1 Cas Class Driver or Severity SLIGHT Age 51 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details		Post code
Skidded Veh location at	No skidding, jack-knifing or overturning impact (restricted lane) On main carriages of veh. at 1st impact Approaching junc geway? Did not leave carriageway way? None 'way? None npact Offside no. Other veh.hit (ref.no) 51 yrs Sex Male Breath test Not re Unknown Foreign veh. Not fer	way not in tion or wa 0 equested	iting Hit and run N Driving Lic	Jot hit and rui	n		

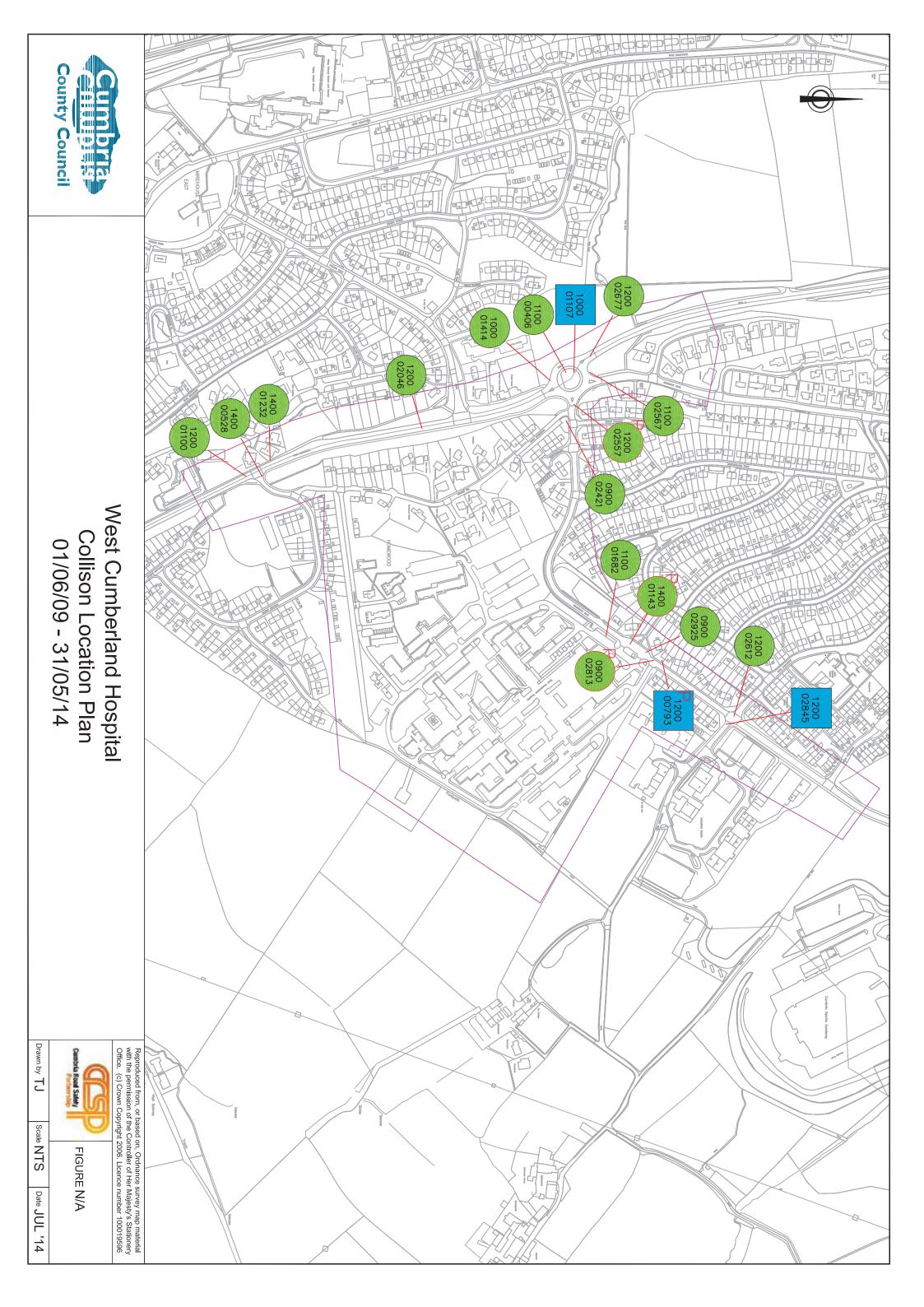
SEVERITY District Carlisle	Carlisle Hosp	pital	Grid Reference	338910 / 555900		
<b>SLIGHT</b> Ref.No 130002417	Accident Date BETWEEN '01-Jun-2009' AND '31-Ma	Police Officer Attend:	No - reported over the counter			
Date 20/09/2013 Day Friday Time 07:45	Road B5307 Location Newtown Road Jct Infirmary	Road B5307 Location Newtown Road Jct Infirmary Street, Carlisle				
Weather Unknown Road Surface Dry Street Lighting Daylight	Description Cyclist Travelling Newtown Road Towards of Accident Street On Nearside And Allowed Vehicles	s City Centre A Wagon Passed Her In Same I To Turn Right Into Jct From Opposite Carria				
SITE DETAILS  Speed Limit 30 MPH  Carriageway Single carriageway  Junction Detail Other junction  Junction Control Give way or uncontrolled  2nd Road Number U  Pedestrian Facilities None within 50 metres	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None					
No physical crossing facility within	50 metre					
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriagev Junct. location of veh. at 1st impact Leaving main road Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Nearside Veh registration no. Other veh.hit (ref.no) Drivers age 60 yrs Sex Male Breath test Drive Left Hand Drive Unknown Foreign veh. Not for Journey purpose Journey as part of work  Veh.No. 2 Vehicle type Pedal Cycle Manoeuvre Going ahead other Veh. direction from West to East Tow Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriagev Junct. location of veh. at 1st impact Approaching junct Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Other veh.hit (ref.no) Drivers age 30 yrs Sex Female Breath test Drive	2 Hit and run Not hit and run root contacted Driving Lic oreign registered vehicle  Make Model  wing? No tow or articulation  way not in restricted lane tion or waiting  1 Hit and run Not hit and run	Cas No 1 Cas Class Driver or Severity SLIGHT Age 30 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured Other Details	Rider Vehre S Sex Female	ef No 2 Post code of a passenger		

SEVERITY District Carlisle	Carlisle Ho	ospital	Grid Reference 338510 / 555970		
SLIGHT Ref.No 130002563	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Police Officer Attend: Yes			
Date 13/11/2013 Day Wednesday Time 08:30 Weather Fine without high winds Road Surface Dry	Road B5307 Location B5307 Newtown Road, Carlisle  Description Child Pedestrian Ran Out Of His House And Directly Into The Side Of V1.  of Accident				
Street Lighting  Daylight  SITE DETAILS  Speed Limit  Carriageway  Junction Detail  Junction Control  2nd Road Number  Pedestrian Facilities  None within 50 metres  None within 50 metres	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None				
No physical crossing facility within :  VEHICLES INVOLVED 1	30 metre	CASUALTIES INVOLVED	) 1		
Junct. location of veh. at 1st impact  Veh left carriageway? Hit object in c'way? Hit object off c'way? First point of impact Veh registration no. Drivers age  Joid not leave carriageway None None Nearside Other veh.hit (ref.no) Breath test Negati	yay not in restricted lane om of junction  0 Hit and run Not hit and run	Cas No 1 Cas Class Pedestriar Severity SLIGHT Age 10 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from driv Ped Location In carriageway, cro Ped Direction to Unknown School Pupil Yes on way to or f Roadworker injured Not applicable Other Details	PSV Passenger? Not a passenger Cycle Helmet ver's nearside - maske ossing elsewhere  Trom school		

CEVEDITY D. C. C. C.	Carlisle Hos	spital		
SEVERITY District Carlisle SLIGHT Ref.No 140000007			Grid Reference	339290 / 555890
<b>SLIGHT</b> Ref.No 140000007	Accident Date BETWEEN '01-Jun-2009' AND '31-N	Police Officer Attend:	No - reported over the counter	
Date 01/01/2014 Day Wednesday Time 13:50	Road A595 Location A595 Church Street, Carlis	sle.		
I Road Surface Wel/Damp	Description V2 Was Stationary At Traffic Lights. V1 of Accident	Has Failed To Stop, Colliding With The Rear	Of V2.	
SITE DETAILS Speed Limit 30 MPH Carriageway Dual carriageway	SPECIAL SITE CONDITIONS			
Junction Detail  Junction Control  Automatic traffic signal	ndaboi None			
2nd Road Number U	CARRIAGEWAY HAZARDS  None			
Pedestrian Facilities None within 50 metres Pelican, puffin, toucan or similar				
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1	
Junct. location of veh. at 1st impact Approaching junction Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Other veh.hit (ref.no) Drivers age 30 yrs Sex Male Breath test Driver rows Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other  Veh.No. 2 Vehicle type Car Manoeuvre Waiting to go ahead but held up Veh. direction from East to West Towing Skidded No skidding, jack-kniffing or overturning Veh location at impact (restricted lane) On main carriageway Junct. location of veh. at 1st impact Approaching junction Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Back Veh registration no. Other veh.hit (ref.no) Drivers age 34 yrs Sex Female Breath test Driver rows	on or waiting  O Hit and run Not hit and run not contacted Driving Lic eign registered vehicle  Make Model  Model  No tow or articulation  by not in restricted lane	Cas No 1 Cas Class Driver or Severity SLIGHT Age 34 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details		Post code

SEVERITY District Carlisle	Carlisle	Carlisle Hospital Grid Reference 338940 / 555900		
SERIOUS Ref.No 140000512	Accident Date BETWEEN '01-Jun-2009' AND '3	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'		
			Police Officer Attend: Yes	
Date 03/03/2014 Day Monday Time 14-44	Road B5307 Location Newtown Road, Carlish	e		
Time 14:44 Weather Fine without high winds				
Road Surface Dry		n Road Towards Caldewgate Carlisle. When Ap		
Street Lighting Daylight	of Accident Hospital The Lights Were On Green I	However A Small Child Failed To Stop At The Cr	ossing. The Casualty walked in	
SITE DETAILS				
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS			
Carriageway  Junction Detail  Single carriageway  Junction - more than 4 arms (not a ro	None			
Junction Detail Junction - more than 4 arms (not a ro Junction Control Automatic traffic signal	oundabot			
2nd Road Number U	CARRIAGEWAY HAZARDS			
Pedestrian Facilities Control by other authorised person	None			
Pelican, puffin, toucan or similar				
•				
VEHICLES INVOLVED 1		CASUALTIES INVOLVED	1	
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageve Junct. location of veh. at 1st impact Approaching junct Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Other veh.hit (ref.no) Drivers age 26 yrs Sex Male Breath test Negati	) 0 Hit and run Not hit and ru	Cas No 1 Cas Class Pedestrian Severity SERIOUS Age 3 yrs Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from driv Ped Location On ped. crossing f Ped Direction to South bound School Pupil Other Roadworker injured Not applicable Other Details	Sex Male Post code  PSV Passenger? Not a passenger  Cycle Helmet  ver's nearside  acility	

SEVERITY District Carlisle						
SLIGHT   Ref.No 140000548	Accident Date BETWEEN '01-Jun-2009' ANI	2'21 May 2014'	Grid Reference	339070 / 555900		
SLIGHT 140000340	Accident Date BET WEEN 01-Jun-2009 AND	J 31-May-2014	Police Officer Attend:	No - reported over the counter		
Date 21/02/2014 Day Friday Time 09:24	Road B5307 Location Newtown Road, Car	pad B5307 Location Newtown Road, Carlisle				
Weather Fine without high winds Road Surface Wet/Damp Street Lighting Daylight		After Pulling Away From The Bus Stop, Then Brake After Overtaking It. Due To The Bus Braking Hard				
SITE DETAILS						
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS					
Carriageway Single carriageway	None					
Junction Detail Not at or within 20 metres of junction						
Junction Control	CARRIAGEWAY HAZARDS					
2nd Road Number	None					
Pedestrian Facilities None within 50 metres	<del></del>					
No physical crossing facility within 5	0 metre					
VEHICLES INVOLVED 2	•	CASUALTIES INVOLVED	) 1			
Junct. location of veh. at 1st impact Not at or within 20r Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Did not impact Veh registration no. Other veh.hit (ref.no) Drivers age 63 yrs Sex Male Breath test Driver of the Left Hand Drive Unknown Foreign veh. Not for Journey purpose Other  Veh.No. 2 Vehicle type Car Manoeuvre Overtaking on nearside Veh. direction from West to East Towing Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway Junct. location of veh. at 1st impact Not at or within 20r Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Did not impact Veh registration no. Other veh.hit (ref.no) Drivers age ? yrs Sex Not know Breath test Driver of the properties of the prope	ay not in restricted lane m of junction  O Hit and run Not hit and not contacted Driving Lic reign registered vehicle  Make Model  ng? No tow or articulation ay not in restricted lane		Sex Female	ef No 1 Post code eated passenger		



SEVERITY District Copeland		West Cumber	land Hospital	Grid Reference	298530 / 516130
<b>SLIGHT</b> Ref.No 120002677	Acci	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'			Yes
Date 06/12/2012 Day Thursday Time 18:00	Road	A Location A595 Hensingham By-	Pass.	•	
Weather Raining without high winds Road Surface Wet/Damp Street Lighting Daylight	Descript of Accid		ue to Roadworks Closing One Lane. Ýüýüv1 Colli	ided with Rear of V2 at SI	ow Speed, Pushing V2
SITE DETAILS  Speed Limit Carriageway Junction Detail Junction Control 2nd Road Number Pedestrian Facilities None within 50 metres No physical crossing facility within		SPECIAL SITE CONDITIONS Roadworks  CARRIAGEWAY HAZARDS None			
Veh.No. 1 Vehicle type Car  Manoeuvre Waiting to go ahead but held up  Veh. direction from South to North To  Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) On main carriage  Junct. location of veh. at 1st impact Not at or within 2  Veh left carriageway? Did not leave carriageway  Hit object in c'way? None  Hit object off c'way? None	way not in		CASUALTIES INVOLVED  Cas No 1 Cas Class Driver or Severity SLIGHT Age 26 y.  Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other	Rider Veh rs Sex Female	ref No 1 Post code Jot a passenger
First point of impact Front  Veh registration no. Other veh.hit (ref.no Drivers age 26 yrs Sex Female Breath test Nega Left Hand Drive Unknown Foreign veh. Not it  Journey purpose Other  Veh.No. 2 Vehicle type Car  Manoeuvre Waiting to go ahead but held up	wing? Noway not in 20m of junctive	Make Model o tow or articulation restricted lane ction  Hit and run Not hit and run Driving Lic	Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured Other Details	rs Sex Female	ref No 2 Post code Not a passenger
Eull Dataile			July 2014		ident Per No. 12000277

Veh.No. 3 Vehicle type Car Make Model Manoeuvre Waiting to go ahead but held up Veh. direction from Towing? No tow or articulation South to North Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway not in restricted lane Not at or within 20m of junction Junct. location of veh. at 1st impact Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Back Veh registration no. Other veh.hit (ref.no) Hit and run Not hit and run 0 Drivers age 56 yrs Sex Male Breath test Negative Driving Lic Left Hand Drive Foreign veh. Not foreign registered vehicle Unknown Journey purpose Other

Full Details 22-July-2014 Accident Ref.No 120002677

EVERITY District Copeland REPORT Ref. No 100001107	West Cumber	•	Grid Reference 298550 / 516110		
	Accident Date BETWEEN '01-Jun-2009' AND '3	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'			
22/05/2010 Day Saturday 22:06	Road A595 Location A595 Hensingham By-F	Pass/Homewood Road Roundabout, Hensingham,	Whitehaven		
ther Fine without high winds I Surface Dry Lighting Dark: street lights present and lit					
SITE DETAILS  d Limit 40 MPH  iageway Single carriageway  tion Detail Roundabout	SPECIAL SITE CONDITIONS None				
tion Control Give way or uncontrolled Road Number U strian Facilities None within 50 metres No physical crossing facility with	CARRIAGEWAY HAZARDS None in 50 metre				
HICLES INVOLVED 1		CASUALTIES INVOLVED	1		
ded Skidded location at impact (restricted lane) On main carriag t. location of veh. at 1st impact Entering rounda left carriageway? Left carriageway straight ahead at object in c'way? Central island of roundabout object off c'way? Road sign/traffic signal point of impact Front registration no. Other veh.hit (ref.n ers age 27 yrs Sex Female Breath test Neg	junction	Cas No 1 Cas Class Driver or Severity SERIOUS Age 27 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details			

SEVERITY District Copeland	West Cumberlar	West Cumberland Hospital		
<b>SLIGHT</b> Ref.No 110000406	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Police Officer Attend: Yes		
Date 24/02/2011 Day Thursday Time 02:30	Road A595 Location A595 Roundabout - Hensi	ngham By-Pass		
Weather Fine without high winds Road Surface Dry Street Lighting Dark: street lights present and lit	Description V1 - Only Vehicle Involved - Travelling of Accident Wrong Way Round. Vehicle Collides W	South On A595. Driver Lost Control On Appr 7ith Kerb And Barrier On Roundabout.	roach To Roundabout Taking Roundabout The	
SITE DETAILS  Speed Limit 40 MPH  Carriageway Single carriageway  Junction Detail Roundabout  Junction Control Give way or uncontrolled	SPECIAL SITE CONDITIONS None			
2nd Road Number B5295 Pedestrian Facilities No physical crossing facility within	CARRIAGEWAY HAZARDS None 50 metre	<b>.</b>		
VEHICLES INVOLVED 1		CASUALTIES INVOLVED	1	
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriagev Junct. location of veh. at 1st impact Mid junction - on Veh left carriageway? Did not leave carriageway Hit object in c'way? Kerb Hit object off c'way? Other permanent object First point of impact Front Veh registration no. Other veh.hit (ref.no) Drivers age 24 yrs Sex Male Breath test Negati		Cas No 1 Cas Class Passenger Severity SLIGHT Age 16 yr Car Passenger? Rear seat passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured Other Details	S Sex Male Post code	

SEVERITY District Copeland	West Cumberland Hospital	Grid Reference 298550 / 516130		
SLIGHT   Ref.No	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'	Police Officer Attend: Yes		
Date 17/11/2011 Day Thursday Time 06:30	pad B5295 Location B5295/A595 Roundabout, Hensingham, Whitehaven			
Weather Fine without high winds Road Surface Wet/Damp	Description Vehicle 2 (Pedal Cycle) Entered Roundabout from A595 Heading South Towards Sellafield. Vehicle 1 Entered Roundabout from 6 Accident Egremont Road Colliding with Cyclist on Roundabout.			
SITE DETAILS  Speed Limit 40 MPH  Carriageway Roundabout  Junction Detail Roundabout  Junction Control Give way or uncontrolled  2nd Road Number A595  Pedestrian Facilities None within 50 metres	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None			
No physical crossing facility within 50	metre			
VEHICLES INVOLVED 2	CASU	JALTIES INVOLVED 1		
Junct. location of veh. at 1st impact Entering roundabout Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Offside Veh registration no. Other veh.hit (ref.no) Drivers age ? yrs Sex Male Breath test Driver n Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other  Veh.No. 2 Vehicle type Pedal Cycle Manoeuvre Going ahead other Veh. direction from North to South Towin Skidded No skidding, jack-kniffing or overturning	Severity SLIGH Car Passenger? Seat Belt Ped Movement Ped Location Ped Direction to School Pupil Roadworker injure Other Details  1 Hit and run Not hit and run or not in restricted lane  1 Hit and run Not hit and run ested Driving Lic In the severity SLIGH Car Passenger? Seat Belt Ped Movement Ped Location Ped Direction to School Pupil Roadworker injure Other Details	Not a passenger Not applicable Not applicable Not applicable Not applicable Not applicable Other  PSV Passenger? Not a passenger Cycle Helmet Not applicable Other		

SEVERITY District Copeland	W	Vest Cumberland	d Hospital	Grid Reference	298560 / 516080
SLIGHT Ref.No 100001414	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'				Yes
			Police Officer Attend:	1 65	
Date 30/06/2010 Day Wednesday Time 08:20	Road A595 Location Homewood A595/Egremont Road Roundabout.				
Weather Fine without high winds	Description V2 - Motor Cycle - Travelling From The South Towards Whitehaven Enters Onto Actual Roundahout In Nearside Lane. V1 On Offside				
I Road Surface Dry		out In Offside Land	e. V2 Collides With Rear Offside Of V2.		
SITE DETAILS					
Speed Limit 40 MPH	SPECIAL SITE CONDITION	ONS			
Carriageway Roundabout	None				
Junction Detail Roundabout					
Junction Control Give way or uncontrolled	CARRIAGEWAY HAZAF	RDS			
2nd Road Number B5295	None				
Pedestrian Facilities None within 50 metres	<del></del>				
No physical crossing facility within 50	metre				
VEHICLES INVOLVED 2			CASUALTIES INVOLVED	1	
Veh.No. 1 Vehicle type Car	Make Mo	odel	Cas No 1 Cas Class Driver or 1	Rider Veh re	f No 2
Manoeuvre Going ahead other			Severity SLIGHT Age 49 yr	s Sex Male	Post code
Veh. direction from South to East Towin	g? No tow or articulation		Car Passenger? Not a passenger	PSV Passenger? No	ot a passenger
Skidded No skidding, jack-knifing or overturning			Seat Belt Not applicable	Cycle Helmet	
Veh location at impact (restricted lane)  Junct. location of veh. at 1st impact  Entering roundabout	y not in restricted lane		Ped Movement Not applicable		
Veh left carriageway? Did not leave carriageway			Ped Location Not applicable		
Hit object in c'way? None			Ped Direction to Not applicable School Pupil Other		
Hit object off c'way? None			School Pupil Other Roadworker injured		
First point of impact Nearside			Other Details		
Veh registration no. Other veh.hit (ref.no)	2 Hit and run N	Not hit and run	Other Betans		
Drivers age 47 yrs Sex Female Breath test Negative Left Hand Drive Unknown Foreign veh. Not fore					
Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Taking pupil to/from school	eign registered vehicle				
Veh.No. 2 Vehicle type M/cycle 125 - 500cc	Make Mo	odel	1		
Manoeuvre Going ahead other					
Veh. direction from South to North Towin	g? No tow or articulation				
Skidded No skidding, jack-knifing or overturning					
Veh location at impact (restricted lane)  On main carriageway	y not in restricted lane				
Junct. location of veh. at 1st impact Entering roundabout					
Veh left carriageway? Did not leave carriageway					
Hit object in c'way? None					
Hit object off c'way? None First point of impact Offside					
Veh registration no. Other veh.hit (ref.no)	1 Hit and run N	Jot hit and run			
Drivers age 49 yrs Sex Male Breath test Negative					
	eign registered vehicle				
Journey purpose Other			1		

SEVERITY SLIGHT	District Copeland Ref.No 120002557		West Cumberland Hospital  Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'	
Date Time Weather Road Surface Street Lighting	21/11/2012 Day Wednesday 15:25 Fine without high winds Dry Daylight	Road U4400 Location Homewood Road, Wh  Description Vehicle 1 Entered Roundabout, Tool of Accident	itehaven  c First Exit and Collided with Pedestrian Crossing	Near Junction.
Speed Limit Carriageway Junction Detail Junction Contro 2nd Road Numb Pedestrian Facil	per U	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None  50 metre		
Veh location at	Vehicle type Car Turning left from North to East Tow No skidding, jack-knifing or overturning impact (restricted lane) On main carriagew of veh. at 1st impact Leaving roundabo eway? Did not leave carriageway vay? None way? None mact Front no. Other veh.hit (ref.no) eyyrs Sex Not know Breath test Driver te Unknown Foreign veh. Not for		Cas No 1 Cas Class Pedestrian Severity SLIGHT Age 10 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from drive Ped Location In carriageway, croped Direction to East bound School Pupil Yes on way to or face Roadworker injured Not applicable Other Details	n Veh ref No 1 rs Sex Female Post code PSV Passenger? Not a passenger Cycle Helmet ver's offside ossing elsewhere

SEVERITY District Copeland			West Cumb	erland Hospital	Grid Reference	298610 / 516100
<b>SLIGHT</b> Ref.No 090002421	Accident	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'			Police Officer Attend:	Yes
Date 04/09/2009 Day Friday Time 08:45	Road U44	Road U4400 Location Homewood Road, Whitehaven				
Weather Fine without high winds Road Surface Dry Street Lighting Daylight	Description Vehicle 1 Slows to a Stop on Hill, then Rolls Forward and Collides with Vehicle 2. of Accident					
SITE DETAILS						
Speed Limit 30 MPH		SPECIAL SITE CONDI	ITIONS			
_			IIIONS			
5 mgre varrage		None				
Junction Detail Not at or within 20 metres of junction	·					
Junction Control		CARRIAGEWAY HAZ	ZARDS			
2nd Road Number		None				
Pedestrian Facilities None within 50 metres		vone				
No physical crossing facility within 50	0 metre					
VEHICLES INVOLVED 2				CASUALTIES INVOLVE	D 1	
Veh.No. 1 Vehicle type Car  Manoeuvre Slowing or stopping  Veh. direction from East to West Towin  Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) On main carriagewa  Junct. location of veh. at 1st impact Not at or within 20n  Veh left carriageway? Did not leave carriageway  Hit object off c'way? Parked vehicle  Hit object off c'way? None  First point of impact Front  Veh registration no. Other veh.hit (ref.no)  Drivers age 29 yrs Sex Female Breath test Not req  Left Hand Drive Unknown Foreign veh. Not for Journey purpose Taking pupil to/from school  Veh.No. 2 Vehicle type Car  Manoeuvre Slowing or stopping  Veh. direction from East to West Towin  Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) On main carriagewa  Junct. location of veh. at 1st impact Not at or within 20n  Veh left carriageway? Did not leave carriageway  Hit object in c'way? None  Hit object off c'way? None  First point of impact Back	2 quested reign registe	Hit and run Driving Lic ered vehicle  Make  Ow or articulation  stricted lane	Model  Not hit and r		yrs Sex Female	ef No 2 Post code ot a passenger
Veh registration no. Drivers age 39 yrs Sex Female Breath test Not req Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other		Driving Lic	Not hit and r			

SEVERITY District Copeland	West Cumberland	l Hospital	Grid Reference 298620 / 515920
SLIGHT Ref.No 120002046	Accident Date BETWEEN '01-Jun-2009' AND '31-Ma	Police Officer Attend: Yes	
Date 18/09/2012 Day Tuesday Time 18:16	Road A Location A595 Whitehaven		
Weather Fine without high winds Road Surface Dry Street Lighting Daylight	Description V1 Has Collided with V2 Whilst Stationar of Accident	y in Queue of Traffic Following Primary Roa	d Traffic Collision.
SITE DETAILS  Speed Limit Carriageway Junction Detail Junction Control 2nd Road Number Pedestrian Facilities None within 50 metres No physical crossing facility within 50	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None		
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1
Veh.No. 1 Vehicle type Car  Manoeuvre Going ahead other  Veh. direction from North to South Towing Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway Junct. location of veh. at 1st impact Not at or within 20m Veh left carriageway? Did not leave carriageway Hit object in c'way? None  Hit object off c'way? None  First point of impact Front  Veh registration no. Other veh.hit (ref.no)  Drivers age 51 yrs Sex Female Breath test Negative Left Hand Drive Unknown Foreign veh. Not foreign yeh. Not foreign yeh. Not foreign yeh. Not foreign yeh. Veh.No. 2 Vehicle type Car	y not in restricted lane of junction  2 Hit and run Not hit and run e Driving Lic	Cas No 1 Cas Class Driver or 1 Severity SLIGHT Age 31 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	
Manoeuvre Going ahead other  Veh. direction from North to South Towing  Skidded No skidding, jack-knifing or overturning	g? No tow or articulation y not in restricted lane of junction  1 Hit and run Not hit and run briving Lie		

SEVERITY District Copeland	West Cumberland	d Hospital	Grid Reference 298660 / 515730	
SLIGHT Ref.No 140001232	Accident Date BETWEEN '01-Jun-2009' AND '31-M	fay-2014'	Police Officer Attend: Yes	
Date 31/05/2014 Day Saturday Time 11:10 Weather Fine without high winds Road Surface Dry Street Lighting Daylight  Road A595 Location A595 Egremont Road, Whitehaven.  Police Officer Attend: Yes  Road A595 Location A595 Egremont Road, Whitehaven.  Description of Accident Tyre, Causing Rider To Lose Control Of V2 And Fall Off.				
SITE DETAILS  Speed Limit 40 MPH  Carriageway Single carriageway  Junction Detail Not at or within 20 metres of junction  Junction Control  2nd Road Number  Pedestrian Facilities None within 50 metres	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None			
Pelican, puffin, toucan or similar  VEHICLES INVOLVED 2		CASUALTIES INVOLVED		
Veh.No. 1 Vehicle type Car  Manoeuvre Going ahead other  Veh. direction from South to North Towir  Skidded No skidding, jack-knifing or overturning  Veh location at impact (restricted lane) On main carriagewa  Junct. location of veh. at 1st impact Not at or within 20m  Veh left carriageway? Did not leave carriageway	y not in restricted lane	Cas No 1 Cas Class Driver or Severity SLIGHT Age 60 yr Car Passenger? Not a passenger Seat Belt Not applicable Ped Movement Not applicable Ped Location Not applicable		
Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Drivers age 29 yrs Sex Male Breath test Negativ	0 Hit and run Not hit and run e Driving Lic eign registered vehicle	Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details		
Junct. location of veh. at 1st impact  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 60 yrs  Not at or within 20m  Not at or within 20m  Other veh.hit (ref.no)  Breath test  Not pro-	y not in restricted lane			

SEVERITY District Copeland	West Cumberland Hospital	Grid Reference 298680 / 515700			
<b>SLIGHT</b> Ref.No 120001100	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'	Police Officer Attend: Yes			
Date 15/05/2012 Day Tuesday Time 08:00	Road A Location A595 Egremont Road/Rutland Avenue Junction. Whitehaven.				
Weather Fine without high winds Road Surface Dry Street Lighting Daylight	Description V1 Travelling North on the A595 Collided with Rear of V2, Also Opposite Carriageway and Collided Head on with V5 which was	Northbound on the A595 but Stationary/Slowing. V1 Veering into a Travelling South on A595. the Force of Impact			
SITE DETAILS  Speed Limit 40 MPH  Carriageway Single carriageway  Junction Detail T or staggered junction  Junction Control Give way or uncontrolled  2nd Road Number U  Pedestrian Facilities None within 50 metres	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None				
Pelican, puffin, toucan or similar					
VEHICLES INVOLVED 5	CASU	JALTIES INVOLVED 1			
Veh.No. 1 Vehicle type Car  Manoeuvre Going ahead other  Veh. direction from South to North Towing Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway Junct. location of veh. at 1st impact Approaching junction Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Other veh.hit (ref.no) Drivers age 39 yrs Sex Female Breath test Negative Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other  Veh.No. 2 Vehicle type Car	Severity SLIGH  Car Passenger? Seat Belt Ped Movement Ped Location Ped Direction to School Pupil Roadworker injure  Other Details	Not a passenger Unknown Not applicable Not applicable Not applicable Other  PSV Passenger? Not a passenger Cycle Helmet Not applicable Other			
Manoeuvre Slowing or stopping  Veh. direction from South to North Towing Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway Junct. location of veh. at 1st impact Approaching junction Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Back Veh registration no. Other veh.hit (ref.no) Drivers age 33 yrs Sex Female Breath test Negative Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Commuting to/from work	No tow or articulation  not in restricted lane a or waiting  4 Hit and run Not hit and run Driving Lic				

Veh.No. 3 Vehi	icle type Car			Make		Model
	Slowing or stopping	20		Wake		Wiodei
	South to North	•	wing?	No tow or art	ioulation	
1			wing	No tow of art	iculation	
	lding, jack-knifin					
Veh location at impact (r		On main carriage	-		ine	
Junct. location of veh. at		Approaching junc	ction or	waiting		
Veh left carriageway?	Did not leave ca	ırrıageway				
Hit object in c'way?	None					
Hit object off c'way?	None					
First point of impact	Back				***.	
Veh registration no.	C 361	Other veh.hit (ref.no	/	1	Hit and run	Not hit and run
Drivers age 24 yrs	Sex Male	Breath test Nega			Driving Lic	
Left Hand Drive	Unknown	Foreign veh. Not f	toreign i	registered vehi	cle	
Journey purpose	Journey as part	of work				
	icle type Car			Make		Model
	Slowing or stopping	•				
	South to North		wing?	No tow or art	iculation	
	lding, jack-knifin					
Veh location at impact (r		On main carriage			ane	
Junct. location of veh. at	-	Approaching junc	ction or	waiting		
Veh left carriageway?	Did not leave ca	ırriageway				
Hit object in c'way?	None					
Hit object off c'way?	None					
First point of impact	Back					
Veh registration no.		Other veh.hit (ref.no	, -	3	Hit and run	Not hit and run
Drivers age 17 yrs	Sex Male	Breath test Nega			Driving Lic	
Left Hand Drive	Unknown	Foreign veh. Not f	foreign i	registered vehi	cle	
Journey purpose	Commuting to/f	rom work				
	icle type Car			Make		Model
	Going ahead other	•				
Veh. direction from	North to South	To	wing?	No tow or art	iculation	
Skidded No skid	lding, jack-knifin	g or overturning				
Veh location at impact (r		On main carriage	way not	in restricted la	ane	
Junct. location of veh. at	1st impact	Approaching junc	ction or	waiting		
Veh left carriageway?	Did not leave ca	ırriageway				
Hit object in c'way?	None					
Hit object off c'way?	None					
First point of impact	Front					
Veh registration no.		Other veh.hit (ref.no	, ,	•	Hit and run	Not hit and run
Drivers age 21 yrs	Sex Male			ontacted	Driving Lic	
Left Hand Drive	Unknown	Foreign veh. Not i	foreign i	registered vehi	cle	
Journey purpose	Other					

 Full Details
 22-July-2014
 Accident Ref.No
 120001100

SEVERITY District Copeland	West Cumberland	Hospital	Grid Reference	298680 / 515720
SLIGHT Ref.No 140000528	Accident Date BETWEEN '01-Jun-2009' AND '31-May	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'		
	1100 act to 2017 1221 ( 01 van 2007 11 12 01 11 au	Police Officer Attend:	Yes	
Date 05/03/2014 Day Wednesday Time 09:24	Road A595 Location A595 Rutland Avenue, White	haven		
Road Surface Dry	Description Vehicle 2 Was Travelling North Along A59: of Accident Vehicle 1 And Vehicle 2 Slowed Down. Ve			lowing In Front Of
Street Lighting Daylight SITE DETAILS	<u> </u>			
Speed Limit 40 MPH	SPECIAL SITE CONDITIONS			
Carriageway  Junction Detail  Single carriageway  Not at or within 20 metres of junction	None			
Junction Control				
2nd Road Number	CARRIAGEWAY HAZARDS			
Pedestrian Facilities None within 50 metres	None			
No physical crossing facility within 50	metre			
The physical elossing lacinty within 50				
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	1	
Junct. location of veh. at 1st impact  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 21 yrs Sex Female  Left Hand Drive  Unknown  Journey purpose  Other  Veh.No. 2  Vehicle type  Car  Manoeuvre  Slowing or stopping  Veh. direction from  North to South  Towin  Skidded  No skidding, jack-knifing or overturning	y not in restricted lane  of junction  OHit and run Not hit and run eDriving Lic eign registered vehicle  Make Model  g? No tow or articulation y not in restricted lane	Cas No 1 Cas Class Driver or I Severity SLIGHT Age 21 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured Other Details	s Sex Female	f No 1 Post code it a passenger
First point of impact Back  Veh registration no. Other veh.hit (ref.no)  Drivers age 49 yrs Sex Female Breath test Negative	0 Hit and run Not hit and run e Driving Lic eign registered vehicle			

SEVERITY District Copeland	West Cumberland	d Hospital	Grid Reference	200000 / 51/150
SEVERITY District Copeland SLIGHT Ref.No 110001682	Accident Date BETWEEN '01-Jun-2009' AND '31-M	Iav-2014'		298880 / 516150
	Treddent Bate BET WEET OF Van 2007 THE ST M	Police Officer Attend:	Yes	
Date 10/07/2011 Day Sunday Time 11:00	Road U4400 Location West Cumberland Hospital,	, Whitehaven		
Weather Fine without high winds	Description Vehicle 1 Travelling on Road Heading ou	at of Hospital Grounds. Vehicle 2 Reversed out	t of Parking Space and Coll	lided with Vehicle 1
Road Surface Dry	of Accident Force of Collision Caused Vehicle 2 to Co		t of Furking Space and Con	naca with vehicle 1.
Street Lighting Daylight SITE DETAILS				
Speed Limit 20 MPH	SPECIAL SITE CONDITIONS			
Carriageway Single carriageway	None			
Junction Detail Not at or within 20 metres of junction				
Junction Control	CARRIAGEWAY HAZARDS			
2nd Road Number				
Pedestrian Facilities None within 50 metres	None			
No physical crossing facility within 50	50 metre			
VEHICLES INVOLVED 3		CASUALTIES INVOLVED	1	
Junct. location of veh. at 1st impact  Veh left carriageway?  Did not leave carriageway  Hit object in c'way?  None  Hit object off c'way?  None  First point of impact  Veh registration no.  Drivers age 30 yrs Sex Male  Left Hand Drive  Unknown  Journey purpose  Other  Veh.No. 2  Vehicle type  Car  Manoeuvre  Reversing  Veh. direction from  Southwest to Northeast  Towir  Skidded  No skidding, jack-knifing or overturning	ay not in restricted lane m of junction  2 Hit and run Not hit and run Driving Lic reign registered vehicle  Make Model  ing? No tow or articulation  ay not in restricted lane m of junction  1 Hit and run Not hit and run	Cas No 1 Cas Class Passenger Severity SLIGHT Age 30 yr Car Passenger? Front seat passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	s Sex Male	of No 2 Post code of a passenger
Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other	reign registered vehicle			

 Veh.No.
 3
 Vehicle type
 Car
 Make
 Model

 Manoeuvre
 Parked

 Veh. direction from
 Parked to Parked
 Towing?
 No tow or articulation

Skidded No skidding, jack-knifing or overturning

Veh location at impact (restricted lane)

On main carriageway not in restricted lane

Junct. location of veh. at 1st impact Not at or within 20m of junction

Veh left carriageway? Did not leave carriageway

Hit object in c'way? None
Hit object off c'way? None
First point of impact Nearside

Veh registration no. Other veh.hit (ref.no) 2 Hit and run Not hit and run

Drivers age 35 yrs Sex Female Breath test Not requested Driving Lic

Left Hand Drive Unknown Foreign veh. Not foreign registered vehicle

Journey purpose Commuting to/from work

Full Details 22-July-2014 Accident Ref.No 110001682

SEVERITY District Copeland	West Cumberla	nd Hospital	Grid Reference 298890 / 516180			
<b>SLIGHT</b> Ref.No 140001143	Accident Date BETWEEN '01-Jun-2009' AND '31-J	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'				
Date 19/05/2014 Day Monday Time 12:33	Road U4400 Location Homewood Road	oad U4400 Location Homewood Road				
Weather Fine without high winds Road Surface Dry Street Lighting Daylight		h Had Temporary Roadworks on Nearby Paver king it into Pedestrian Causing Pedestrian to Fal	ment and Temporary Barriers for Pedestrians to ll over Sustaining Cut/G			
SITE DETAILS  Speed Limit 40 MPH Carriageway Roundabout Junction Detail Junction Control 2nd Road Number Pedestrian Facilities No physical crossing facility within 5	SPECIAL SITE CONDITIONS Roadworks  CARRIAGEWAY HAZARDS Object in carriageway					
VEHICLES INVOLVED 1	1	CASUALTIES INVOLVED	1			
Junct. location of veh. at 1st impact Leaving roundabout Veh left carriageway? Did not leave carriageway Hit object in c'way? Roadworks Hit object off c'way? None First point of impact Nearside Veh registration no. Other veh.hit (ref.no) Drivers age 51 yrs Sex Male Breath test Negati	ay not in restricted lane  t  0 Hit and run Not hit and run	Cas No 1 Cas Class Pedestriar Severity SLIGHT Age 57 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Walking - facing tr Ped Location Unknown or other Ped Direction to East bound School Pupil Other Roadworker injured Not applicable Other Details	rs Sex Female Post code  PSV Passenger? Not a passenger  Cycle Helmet raffic			

SEVERITY District Copeland	West Cumberland	d Hospital	Grid Reference	298900 / 516200
SLIGHT   Ref.No	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'		Police Officer Attend:	No - reported over the counter
Date 05/11/2009 Day Thursday Time 15:00 Weather Fine without high winds Road Surface Dry Street Lighting Daylight  Road U4400 Location Homewood Road/West Cumberland Hospital, Whitehaven  Description Vehicle 1 Pulling out of Bus Stop on left Hand Side Travelling up Hill. Vehicle 1 then Pulled across Carriageway into Hospital Car Park.  Vehicle 2 Travelling Downhill Collided with Nearside of Vehicle 1.				
SITE DETAILS  Speed Limit Carriageway Single carriageway Junction Detail Junction Control Junction Control 2nd Road Number Pedestrian Facilities None within 50 metres No physical crossing facility within 50	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None	T'		
Junct. location of veh. at 1st impact Cleared junction or we Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Nearside Veh registration no. Other veh.hit (ref.no) Drivers age 58 yrs Sex Female Breath test Driver not Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other  Veh.No. 2 Vehicle type Car Manoeuvre Going ahead other Veh. direction from Northeast to Southwest Towing Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway	y not in restricted lane vaiting  2 Hit and run Not hit and run ot contacted Driving Lic sign registered vehicle  Make Model  g? No tow or articulation y not in restricted lane	CASUALTIES INVOLVED  Cas No 1 Cas Class Driver or 1 Severity SLIGHT Age 58 yr  Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	Rider Veh re s Sex Female	ef No 1 Post code ot a passenger
Junct. location of veh. at 1st impact Approaching junction Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Drivers age ? yrs Sex Female Breath test Driver no Left Hand Drive Unknown Foreign veh. Not fore Journey purpose Other	1 Hit and run Not hit and run ot contacted Driving Lic			

SEVERITY District Copeland SLIGHT Ref.No 090002813		West Cumberland Hospital  Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'	
Date 03/09/2009 Day Thursday Time 18:10 Weather Fine without high winds		aven (Entrance to West Cumberland Hospital) into Path of Vehicle 1 and Collision Occurred.	
Road Surface Dry Street Lighting Daylight	of Accident		
SITE DETAILS  Speed Limit  Carriageway  Junction Detail  Junction Control  2nd Road Number  Pedestrian Facilities  None within 50 metres  No physical crossing facility within	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None  50 metre		
VEHICLES INVOLVED 1		CASUALTIES INVOLVED	1
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageve Junct. location of veh. at 1st impact Cleared junction of Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Other veh.hit (ref.no) Drivers age 32 yrs Sex Female Breath test Negati	0 Hit and run Not hit and run	Cas No 1 Cas Class Pedestrian Severity SLIGHT Age 12 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Crossing from driv Ped Location In carriageway, cro Ped Direction to East bound School Pupil Other Roadworker injured Not applicable Other Details	PSV Passenger? Not a passenger Cycle Helmet ver's nearside pssing elsewhere

SEVERITY District Copeland	West Cumberla	West Cumberland Hospital				
<b>SERIOUS</b> Ref.No 120000793	Accident Date BETWEEN '01-Jun-2009' AND '31-May-2014'		Police Officer Attend: Yes			
Date 11/04/2012 Day Wednesday Time 10:34	Road U4400 Location Homewood Road/Wch En	Road U4400 Location Homewood Road/Wch Entrance, Whitehaven.				
Weather Fine without high winds Road Surface Dry Street Lighting Daylight	Description V1 was Travelling Straight down the Hil out onto the Road and into the Path of the		tpath and is Believed to Have Intentionally Dived			
SITE DETAILS  30 MPH  Carriageway  Junction Detail  Junction Control  2nd Road Number  Pedestrian Facilities  Single carriageway  T or staggered junction  Give way or uncontrolled  U  None within 50 metres  No physical crossing facility within stages and stages are stages.	SPECIAL SITE CONDITIONS None  CARRIAGEWAY HAZARDS None					
VEHICLES INVOLVED 1		CASUALTIES INVOLVED	) 1			
Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriagew Junct. location of veh. at 1st impact Approaching junct Veh left carriageway? Did not leave carriageway Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Other veh.hit (ref.no) Drivers age 69 yrs Sex Male Breath test Negati	0 Hit and run Not hit and run	Cas No 1 Cas Class Pedestrian Severity SERIOUS Age 38 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Unknown or other Ped Location Unknown or other Ped Direction to Northwest bound School Pupil Other Roadworker injured Not applicable Other Details	rs Sex Male Post code PSV Passenger? Not a passenger Cycle Helmet			

SEVERITY District Copeland	West Cumberlan	d Hospital	Grid Reference 298980 / 516310	
SLIGHT   Ref.No   120002612	Accident Date BETWEEN '01-Jun-2009' AND '31-M			
Date 29/11/2012 Day Thursday Time 17:15 Weather Fine without high winds Road Surface Dry Street Lighting Dark: street lights present and lit  SITE DETAILS  Red U4400 Location Homewood Road/Sneckyeat Road, Whitehaven.  Description Kv2 Has Been Travelling Uphill. V1 Has Exited the Junction from Sneckyeat Industrial Estate, Colliding with V2.  SITE DETAILS				
Speed Limit 30 MPH Carriageway Single carriageway Junction Detail Other junction	SPECIAL SITE CONDITIONS None			
Junction Control 2nd Road Number  Pedestrian Facilities  No physical crossing facility within 5	CARRIAGEWAY HAZARDS None			
VEHICLES INVOLVED 2		CASUALTIES INVOLVED	2	
Junct. location of veh. at 1st impact Cleared junction or Veh left carriageway? Left carriageway offside Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Drivers age 42 yrs Sex Male Breath test Negative Left Hand Drive Unknown Foreign veh. Not for Journey purpose Other  Veh.No. 2 Vehicle type Car Manoeuvre Going ahead other Veh. direction from West to East Towing Skidded No skidding, jack-kniffing or overturning Veh location at impact (restricted lane) On main carriageway Veh left carriageway? Left carriageway nearside Hit object in c'way? None Hit object off c'way? None First point of impact Front Veh registration no. Drivers age 23 yrs Sex Female Breath test Negative	ay not in restricted lane waiting  0 Hit and run Not hit and run Driving Lic reign registered vehicle  Make Model  ing? No tow or articulation ay not in restricted lane on or waiting  0 Hit and run Not hit and run	Cas No 1 Cas Class Driver or Severity SLIGHT Age 42 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Cas No 2 Cas Class Driver or Severity SLIGHT Age 23 yr Car Passenger? Not a passenger Seat Belt Unknown Ped Movement Not applicable Ped Location Not applicable Ped Direction to Not applicable School Pupil Other Roadworker injured  Other Details	rs Sex Male Post code PSV Passenger? Not a passenger Cycle Helmet  Rider Veh ref No 2	

	West Cu	mberland Hospital			
SEVERITY District Copeland			Grid Reference 298990 / 516300		
<b>SERIOUS</b> Ref.No 120002845	Accident Date BETWEEN '01-Jun-2009' A	ND '31-May-2014'	Police Officer Attend: Yes		
Date 13/12/2012 Day Thursday Time 07:19	Road 1/4399 Location Sneckyeat Road, Whitehaven				
Weather Fine without high winds	***************************************		IV IV. I VAV. II		
Road Surface Wet/Damp	Description V1 Pulled out of Industrial Esta of Accident Direction.	te into Path of V2. V2 Swerved to the Offside of V1 a	nd Impacted Head on to V3 Heading in Opposite		
Street Lighting Dark: street lights present and lit	of Accident Breetion.				
SITE DETAILS					
Speed Limit 30 MPH	SPECIAL SITE CONDITIONS				
Carriageway Single carriageway	None				
Junction Detail Crossroads					
Junction Control Give way or uncontrolled 2nd Road Number  U	CARRIAGEWAY HAZARDS				
	None				
No physical crossing facility within 50	ou metre				
VEHICLES INVOLVED 3		CASUALTIES INVOLVE	D 2		
Veh.No. 1 Vehicle type Car	Make Model	Cas No 1 Cas Class Driver or	r Rider Veh ref No 2		
Manoeuvre Turning left		Severity SERIOUS Age 31 y	Yrs Sex Male Post code		
Veh. direction from South to West Towin	ing? No tow or articulation	Car Passenger? Not a passenger	PSV Passenger? Not a passenger		
Skidded No skidding, jack-knifing or overturning		Seat Belt Not applicable	Seat Belt Not applicable Cycle Helmet		
Veh location at impact (restricted lane)  Junct. location of veh. at 1st impact  Entering main road	ay not in restricted lane	Ped Movement Not applicable			
Veh left carriageway? Did not leave carriageway		Ped Location Not applicable			
Hit object in c'way? None		Ped Direction to Not applicable			
Hit object off c'way? None		School Pupil Other Roadworker injured			
First point of impact Did not impact		Cas No 2 Cas Class Passenge	er Veh ref No 3		
Veh registration no. Other veh.hit (ref.no)	0 Hit and run Not hit a	nd run Severity SLIGHT Age 3 yr			
Drivers age 43 yrs Sex Male Breath test Negativ					
	reign registered vehicle	Car Passenger? Rear seat passeng Seat Belt Unknown	er PSV Passenger? Not a passenger Cycle Helmet		
Journey purpose Commuting to/from work  Veh.No. 2 Vehicle type M/cycle > 500cc	Make Model	Ped Movement Not applicable	Cycle Helliet		
Manoeuvre Going ahead other	WICHCI WIOUCI	Ped Location Not applicable			
Veh. direction from East to West Towin	ing? No tow or articulation	Ped Direction to Not applicable			
Skidded Skidded		School Pupil Other			
	ay not in restricted lane	Roadworker injured			
-	oundabout or main road	Other Details			
Veh left carriageway? Did not leave carriageway					
Hit object in c'way? None					
Hit object off c'way? None First point of impact Front					
First point of impact Front  Veh registration no. Other veh.hit (ref.no)	0 Hit and run Not hit a	nd run			
Drivers age 31 yrs Sex Male Breath test Negative		nu run			
	reign registered vehicle				
Journey purpose Commuting to/from work					
E II D 4 T		22 T 1 2014	A '1 AB CM 10000045		

Veh.No. 3 Vehicle type Car Make Model Manoeuvre Going ahead other Veh. direction from West to East Towing? No tow or articulation Skidded No skidding, jack-knifing or overturning Veh location at impact (restricted lane) On main carriageway not in restricted lane Mid junction - on roundabout or main road Junct. location of veh. at 1st impact Veh left carriageway? Left carriageway nearside Hit object in c'way? Kerb Hit object off c'way? None First point of impact Front Veh registration no. Other veh.hit (ref.no) Hit and run Not hit and run 0 Drivers age 28 yrs Sex Male Breath test Negative Driving Lic Left Hand Drive Foreign veh. Not foreign registered vehicle Unknown Journey purpose Other

Full Details 22-July-2014 Accident Ref.No 120002845





# APPENDIX B PARKING STRATEGY



Capital Planning Group 9th June 2014

Car Parking Strategy - Trust-wide

# 1. INTRODUCTION

The Trust appears to have little or no control over its current car parking arrangements at its two principal sites; West Cumberland Hospital, Whitehaven (WCH) and the Cumberland Infirmary, Carlisle (CIC).

This approach leads to a multitude of operational difficulties for each hospital; manifesting themselves in large volumes of complaints, frustrated/distressed patients, scores of DNA's or missed appointments and disaffected staff.

The paper describes potential solutions to the Trusts car parking arrangements and seeks the support of the Capital Planning Group to develop these proposals for onward agreement at EMT and Trust Board.

Both CIC and WCH have common issues but the solutions suggested, are different because of the individual characteristics of each site.

### 2. PRINCIPLE REQUIREMENTS OF THE STRATEGY

- We provide car parking spaces in sufficient numbers for each site, split proportionately between patients, staff and visitors
- We recognise specific needs of the Equality Act
- We provide adequate space for bicycles, buses, materials loading and unloading, drop offs etc
- We segregate spaces i.e. staff and visitors
- Introduce a car parking policy which is fair and equitable for all
- A charging regime which is consistent with the Trust values and people's ability to pay
- Exceptions for special groups.

# 3. <u>CIC</u>

The overriding and immediate requirement is 4-fold:-

- Increase in absolute terms the numbers of spaces available
- Designate spaces so patients parking is as close as practical to hospital entrances and an expectation that staff can be accommodated on the periphery of the site
- Introduce more rigorous car park management regime consistent with other NHS Trusts.
- Link car parking strategies with the Trusts green initiatives.

# Proposal

The immediacy is more spaces (and as per the attached sketch) upwards of 400 spaces appear to be achievable in the two locations identified.

Capital funding is restricted so the proposal is for the Trust to divest itself of a portion of land; the receipt therefrom being used to create the parking.

### **Next Steps**

- · Carry out a thorough analysis of car parking needs for the site
- Identify and describe any planning restrictions with Carlisle County Council
- Negotiate and re-align the PFI demise.

### 4. WCH

The overriding requirement is identifying space allocations (the right numbers, the right place during and post construction).

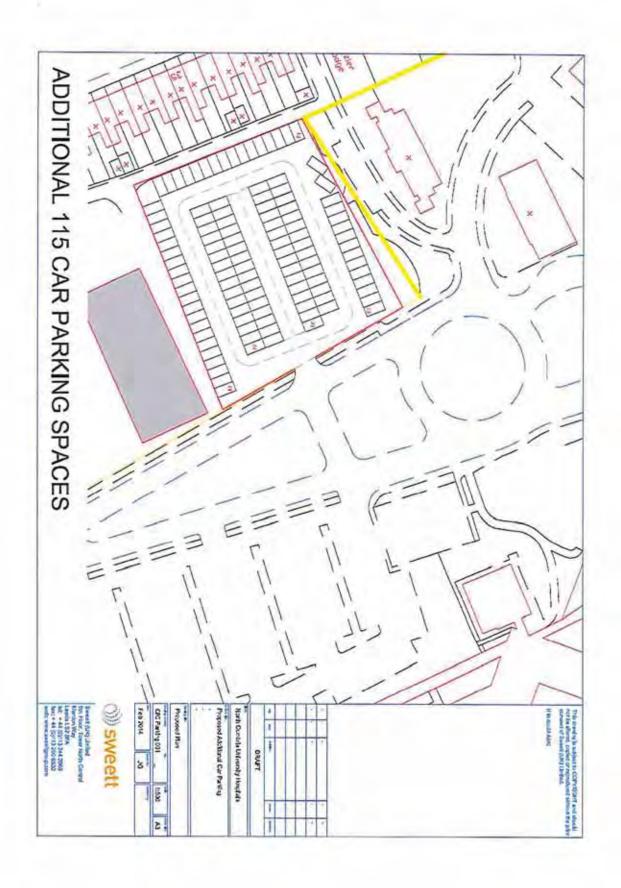
To fully evaluate this, a piece of work needs to be done with the Project Team (WCH) to *understand* this issue from Phase 1 to Phase 2.

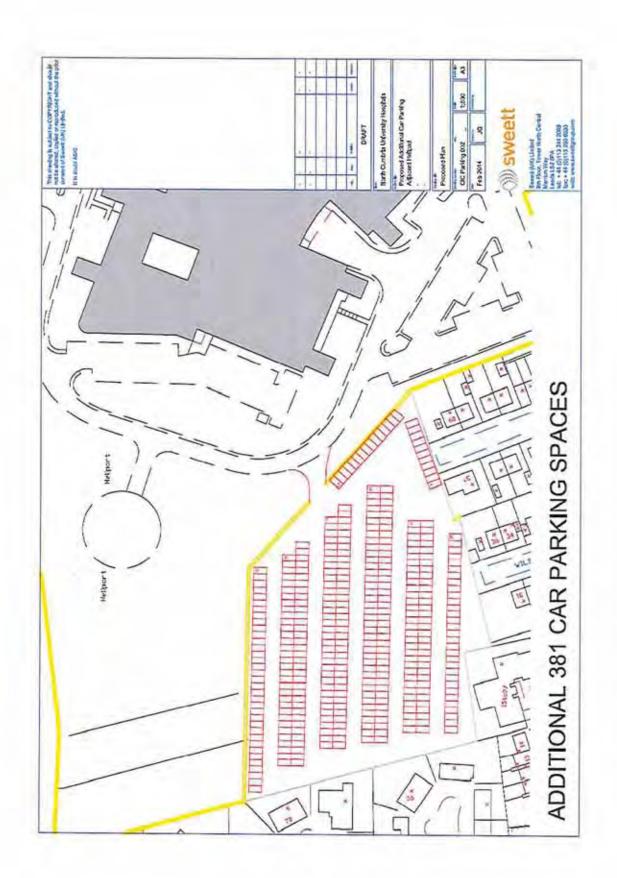
#### **Next Steps**

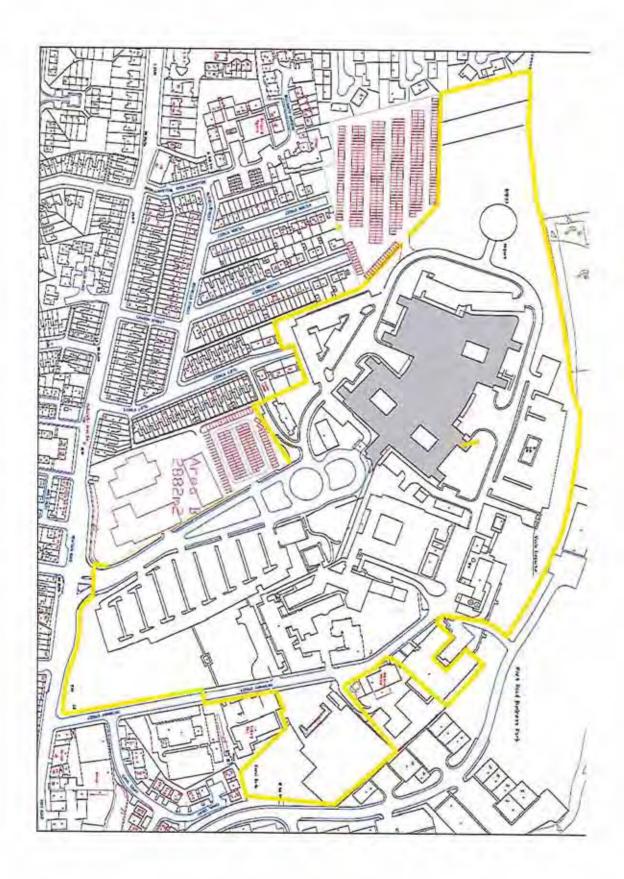
- Carry out a thorough analysis of car parking needs for the site
- Understand immediate requirements.

Steven Bannister Interim Director of Estates and Facilities

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04/07/2014

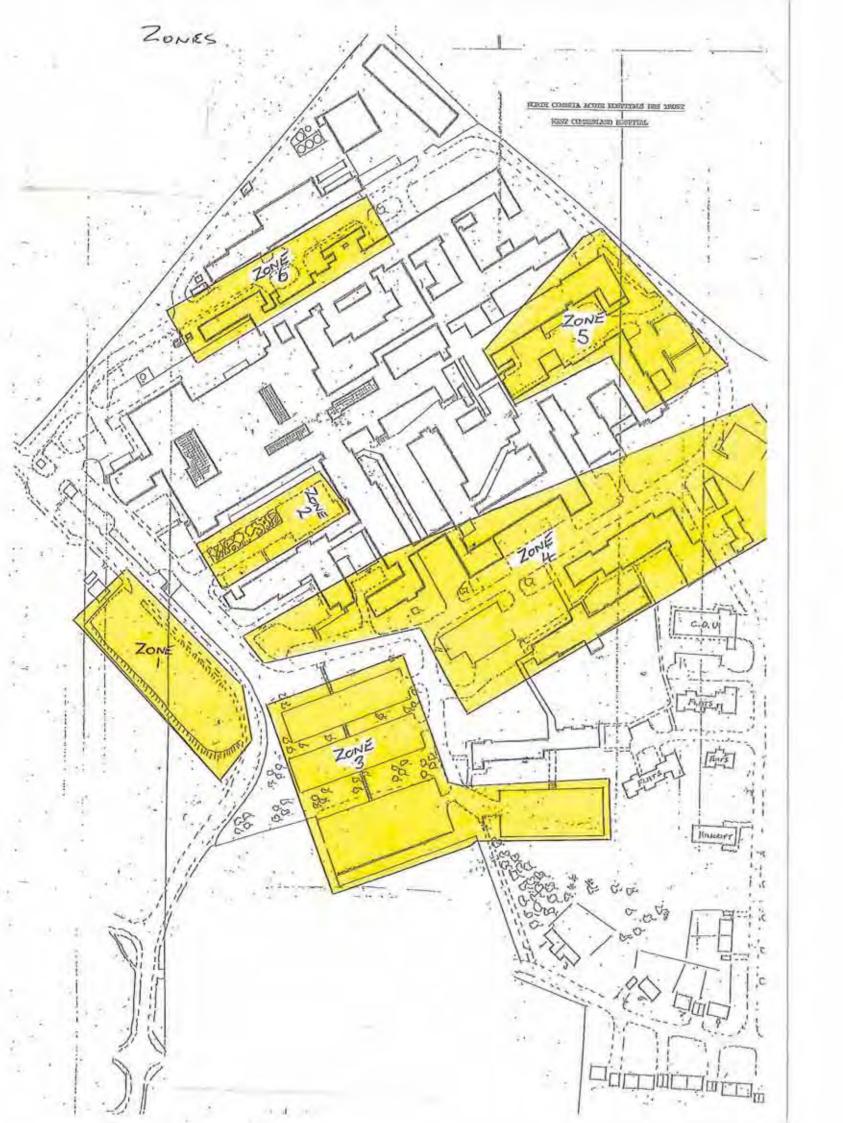
West Cumberland Hospital Car Parking TOTAL.

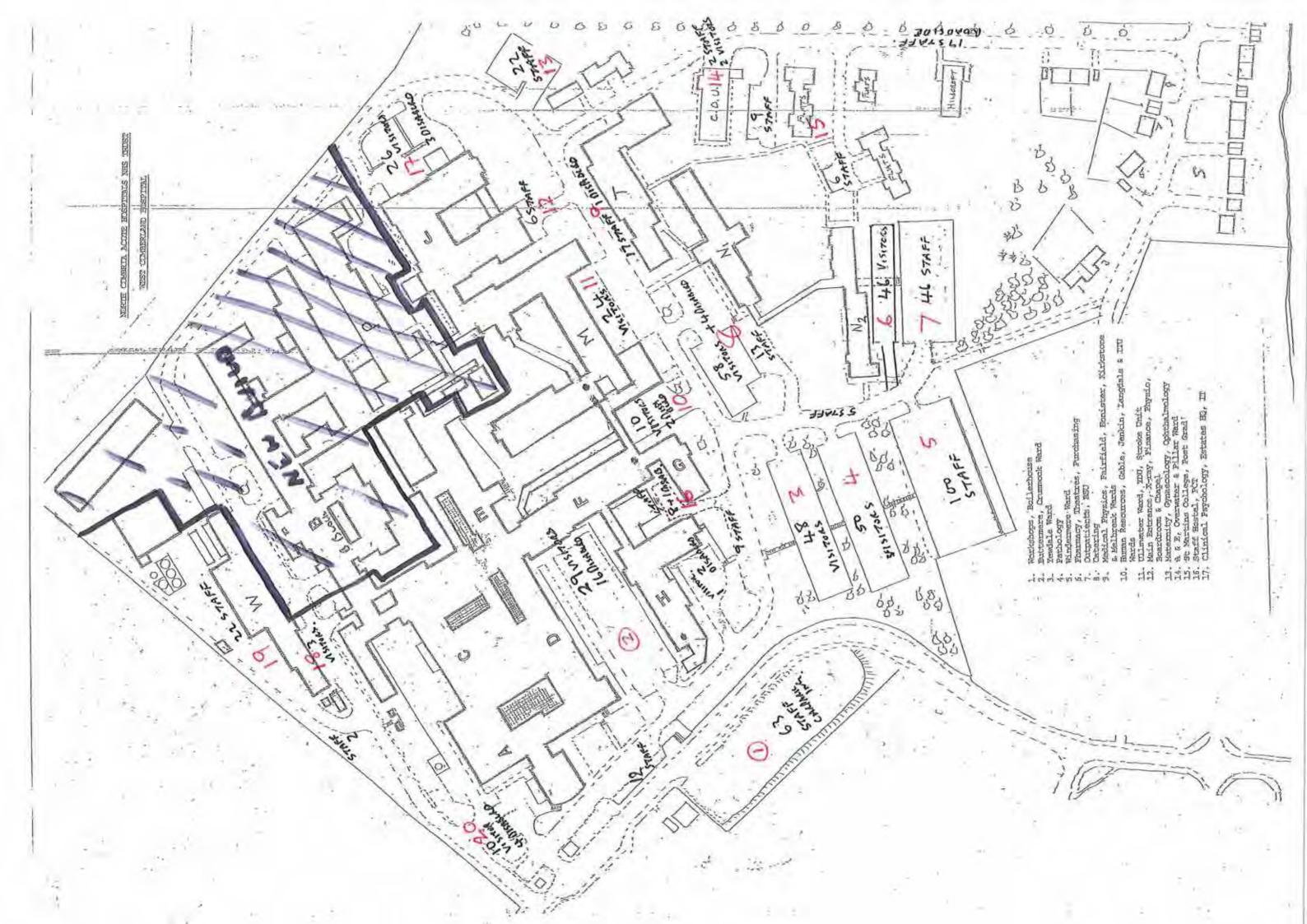
Carpark Zones	Car Park Number	Car park Name	Staff	Visitors	Disabled
Zone 1	Car Park One	Home Wood Road	63	0	
Zone 2	Car Park Two	Main entrance	0	29	16
		Road Parking	12	0	
Zone 3	Car Park Three	Level 1	0	48	0
	Car Park Four	Level 2 0		50	C
	Car Park Five	Level 3 100		0	C
	Car Park Six	Psychology A 0		46	0
	Car Park Seven	Psychology B 46		0	0
		Road Parking	5	0	
Zone 4	Car Park Eight	Nurses Hostel	13	58	4
	Car Park Nine	Training School	17	0	1
	Car Park Ten	Post natal	0	10	
	Car Park Eleven	Cumbrian Clinic	0	24	2
	Car Park Twelve	Renal	6	0	0
	Car Park Thirteen	Homewood Hill	22	0	0
	Car Park Fourteen	C.D.U	2	0	0
	Car Park Fiveteen	Accommodation		0	0
	Car Park Sixteen	CHOC 8		0	1
		A & E Road	9	1	2
Zone 5	Car Park Seventeen	Yewdale	0	26	3
Zone 6	Car Park Eighteen	Mortuary	0	3	0
	Car Park nineteen	Workshop		0	0
	Car Park twenty	Outpatients	0	10	4
		Total	357	305	33

04/07/2014

West Cumberland Hospital Car Parking SUB TOTAL

Carpark Zones	Car Park Number	Control of the Contro		Visitors	Disabled
Zone 1	Car Park One	Home Wood Road	63	0	0
		Sub total	63	0	0
Zone 2	Car Park Two	Main entrance	0	29	16
		Road Parking	12	0	0
		Sub total	12	29	16
Zone 3	Car Park Three	Level 1	0	48	0
	Car Park Four	Level 2		50	0
	Car Park Five	Level 3	100	0	0
	Car Park Six	Psychology A	0	46	0
	Car Park Seven	Psychology B	46	0	0
		Road Parking	5	0	0
	14.1	Sub total	151	144	0
Zone 4	Car Park Eight	Nurses Hostel		58	4
	Car Park Nine	Training School	17	0	1
	Car Park Ten	Post natal	0	10	2
	Car Park Eleven	Cumbrian Clinic	0	24	0
	Car Park Twelve	Renal	6	0	.0
	Car Park Thirteen	Homewood Hill	22	0	0
	Car Park Fourteen	C.D.U	2	2	0
	Car Park Fiveteen	Accommodation	32	0	0
	Car Park Sixteen	CHOC	8	0	1
		A & E Road	9	1	2
		Sub total	109	95	10
Zone 5	Car Park Seventeen	Yewdale	0	26	3
		Sub total	0	26	3
Zone 6	Car Park Eighteen	Mortuary	0	3	0
	Car Park nineteen	Workshop 22		0	0
	Car Park twenty	Outpatients	0	10	4
		Sub total	22	13	4









### APPENDIX C 2011 WHC TRAVEL PLAN





# West Cumberland Hospital Travel Plan



Prepared by:

Shaun Grima Consultant Checked by:

Andrew Taylor Senior Consultant

Approved by:

Andrew Brookfield Associate Director

### West Cumberland Hospital Travel Plan

Rev	v No	Comments	Checked by	Approved	Date
				by	
	1	Initial Travel Plan	AT	AB	07.12.09
	2	Alan Davidson's comments	AT	AB	29.01.10
	3	Update following staff travel surveys	AT	AB	19.04.11
4	4	Update following car parking revisions	AT	AB	10.06.11

Telephone: Website: http://www.aecom.com

Job No: 60101773

Reference: WCH-ACM-ZZ-ZZ-GN-S-XX-1009 P02 West Cumberland Hospital Travel Plan

Date Created: 07.12.09

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# 1 Introduction

### 1 Introduction

### 1.1 **Foreword**

This Travel Plan has been prepared by AECOM on behalf of North Cumbria University Hospitals NHS Trust (the Trust) and seeks to encourage and facilitate sustainable travel by reducing single occupancy vehicular trips to and from the Hospital. The report incorporates national, regional and local planning policy and guidance on Travel Plans.

The plan details the Sustainable Transport Initiatives to be provided and implemented by the Trust. Measures and targets have been set for a reduction in car travel to the Hospital and these targets will be monitored against the results obtained from future patient, visitor and staff surveys.

### 1.2 **Background**

The Trusts services are provided from two hospitals; the West Cumberland Hospital and Cumberland Infirmary. The total number of staff at West Cumberland Hospital is 1,565 with 612 people employed part time and 953 people working full time. The Trust provides a range of services for a population of approximately 324,000. The catchment area that West Cumberland Hospital serves includes the West Cumbria region, which incorporates the following key towns; Allerdale, Carlisle, Copeland, Eden, Millom and Whitehaven.

### 1.3 Activity

West Cumberland Hospital has 802 available beds on site. Activity at the Hospital has increased year on year, Table 1.1 illustrates the combined activity for Cumberland Infirmary and West Cumberland Hospital on a yearly basis from 2007 – 2010.

Admission Type	2007/08	2008/09	2009/10
A&E Attendances	70,949	68,779	72,353
Day Cases	25,856	26,729	28,543
Elective Admissions	9,227	8,733	9,121
Non-Elective Admissions	36,929	36,858	37,412
New Outpatients	82,291	85,670	85,151
Follow – Up Patients	179,761	186,314	185,943
Total	405,013	413,083	418,523

Table 1.1 Trust Activity 2007 - 2010 (Source: 'Annual Reports and Accounts 2009/10')

As illustrated in Table 1.1, the figures identify a trend of increasing number of yearly total admissions. The Trust is expecting this trend to continue for both West Cumberland and the Cumberland Infirmary Hospital in the future.

### 1.4 **Travel Plan Co-ordinator**

The Travel Plan Co-ordinator for the Trust is Grahame Pinches, his contact details are as follows:

Sustainable Environment Manager, North Cumbria University Hospitals NHS Trust,

Tel: 01946 523 791, Fax: 01946 523 546.

Grahame will be the main contact for the Hospital Travel Plan Steering Group. Representatives from each of the Hospital departments will be invited to attend steering group meetings.

### 1.5 Report Structure

This report contains seven further chapters and these are as follows:

- Chapter 2 discusses National, Regional and Local Policy and details the Purpose of the Travel Plan;
- Chapter 3 provides information on the existing conditions on site;
- Chapter 4 discusses the accessibility review using ACCESSION and the Journey to Work assessment;
- Chapter 5 details the Travel Plan questionnaire surveys for staff, patients and visitors;
- Chapter 6 presents the findings from the staff surveys;
- Chapter 7 details the Travel Plan aims, objectives and measures;
- Chapter 8 outlines the targets, monitoring and review dates;
- Chapter 9 summarises with a 'Way Forward' approach for the Hospitals Travel Plan;
- Appendix A illustrates the travel surveys for staff;
- Appendix B details the travel surveys for patients and visitors;
- Appendix C illustrates the application form for a parking permit; and,
- Appendix D details the traffic accident statistics for the latest five years within the vicinity of the Hospital.

2 Policy and Purpose of the Travel Plan

### 2 Policy and Purpose of the Travel Plan

### 2.1 Introduction

This Chapter outlines the relevant national, regional and local transport policies that influence a Hospital development. To conclude this Chapter, a summary of a Travel Plan purpose and potential benefits are discussed.

### 2.2 **National Policy**

The main source of national planning policy is 'Planning Policy Guidance Note 13: Transport' and also the White Paper entitled 'The Future of Transport' published in July 2004. Further guidance is detailed within 'Securing the Future: Delivering UK Sustainable Development Strategy.'

DETR (1998) White Paper: 'A New Deal for Transport: Better for Everyone'

In 1998, the Department of Environment, Transport and the Regions (DETR) published its Transport White Paper titled 'A New Deal for Transport: Better for Everyone'. This outlined the Government's transport policies for the future, with an emphasis on the need for a sustainable and integrated transport system; travel by foot, bicycle and public transport all being encouraged.

Key initiatives within the White Paper include quality partnerships with public transport operators, the preparation of LTPs, road user charging, workplace and non-workplace parking charges and the preparation of travel plans.

DETR (2000): 'Travel Plan Resource Pack for Employers'

This publication has provided guidance to enable agencies to effectively develop, implement and monitor travel management strategies. The advice states that effective travel plans, specify clear objectives, set realistic targets and utilise established monitoring procedures.

DETR (2000): 'Transport 2010: The Ten Year Transport Plan'

This important national transport policy document outlined a £180 billion funding packages for transport improvements up to the year 2010.

A £60 billion allocation towards local transport schemes and the £60 billion funding of railway improvements highlights Central Government's commitment to upgrading the transport network, with a particular emphasis on the funding of sustainable transport schemes.

ODPM and DfT (2002): 'Using the Planning Process to Secure Travel Plans'

In July 2002, the Office of the Deputy Prime Minister (ODPM) and the DfT released best practice guidance on securing travel plans through the planning process.

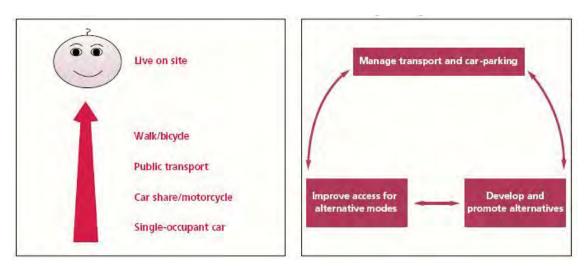
The document provides guidance to local authorities and applicants with respect to both speculative and committed development. It highlights the need for a consistent but flexible approach to travel plans and recommends a staged process, with preliminary framework travel plans informing more detailed travel plans once planning permission has been given.

Department of Health (2006): 'Health Technical Memorandum 07 – 03, Transport Management'

In 2006, the Department for Health published guidance to identify best practice in developing Travel Plans and providing adequate transport and car parking for NHS trusts in England. The document notes the benefits of a Travel Plan are enjoyed by the following groups:

- The individual, through improved health, reduced stressed and cost savings;
- The patient, by freeing up accessibility to sites, relieving concern, allowing the ability to keep appointments etc;
- The workplace, through a healthier, more motivated workplace, reduced congestion and improved access to sites for employees, potential recruits, visitors and contractors;

- The community, by organisations demonstrating their commitment to environment priorities, reducing congestion, freeing the flow of movement through local routes, reducing incidence of road traffics whilst also addressing issues of nuisance and noise;
- The environment, through improved local air quality, with less noise, dirt and fumes which can contribute to other national global improvements; and,
- · Health promotion, by encouraging physical exercise, such as walking and cycling.



**Figure 2.1** The environmental hierarchy of a TP **Figure 2.2** Strategic Objectives of a TP (Source – Section 3.9, Department of Health (2006): 'Health Technical Memorandum 07 – 03)

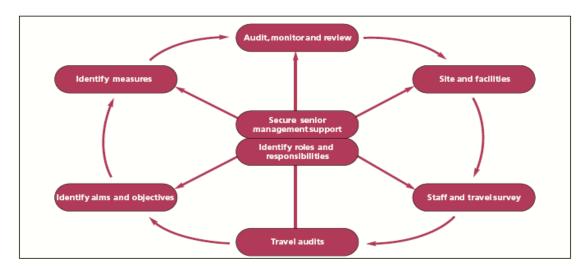


Figure 2.3 TP 'virtuous circle' (Source – Section 3.9, Department of Health (2006): 'Health Technical Memorandum 07 – 03)

CLG (2007): 'Revised Planning Policy Guidance PPG13' (Transport)

In March 2001, DETR published a revised PPG13 relating to Transport. A key objective of the guidance was the need to integrate planning and transport at the national, regional and local level to promote more sustainable transport choices and reduce the need to travel, especially by car.

Key themes included in the original guidance, relevant to Travel Plans include:

- The need to ensure accessibility and promote travel by public transport, walking and cycling;
- The need to control parking;
- The need for appropriate traffic management; and
- The adoption of travel plans.

PPG13 suggests that travel plans should support the delivery of sustainable transport objectives through:

- Reducing car usage (particularly single occupancy trips);
- Promoting walking, cycling and the use of public transport;
- Improving road safety and personal security, particularly for pedestrians and cyclists; and
- Promoting more environmentally friendly freight movements.

### DfT Good Practice Guidelines (April 2009)

Guidance on the preparation of Travel Plans and case studies available on the DfT and Travelwise websites has informed this Travel Plan in respect of the following requirements:

- · Defining specific aims and objectives;
- Proposing hard (infrastructure) and soft (management) initiatives;
- Establishing realistic targets relevant to the baseline conditions; and
- The need for on-going monitoring and review.

In April 2009 the DfT published the 'Good Practice Guidelines: Delivering Travel Plans through the Planning Process'. The guidelines are a valuable tool with detailed information, good practice and case studies presented in a user friendly document.

The guidelines improve understanding of how to make use of the planning process in ensuring the effective implementation of sustainable Travel Plans. The application of the case studies has been acknowledged within the presented STP to maximise the deliverability of sustainable transport initiatives and encouraging a modal split which reduces the dependency on single occupancy vehicular trips.

To establish the development sites' compliance with current and emerging local planning policy the following sections will review the relevant policies from 'Cumbria County Council Local Transport Plan 2' and the 'Cumbria and Lake District Joint Structure Plan 2001 – 2016'.

### 2.3 Regional Policy

To establish the development site's compliance with current sub-regional planning policy the following sections will review the relevant policies from the 'Cumbria and Lake District Joint Structure Plan 2001 – 2016'.

### 2.3.1 Cumbria and Lake District Joint Structure Plan 2001 - 2016

In April 2006, this document was formally adopted providing strategies and policies for development and use of land within Cumbria County Council and the Lake District National Park Authority. Both authorities are responsible for the strategic planning of their respective area, a joint Structure Plan has been prepared to ensure that planning is co-ordinated for the whole county.

The plan identifies policies for development for Barrow-in-Furness and other key service centres in the West Cumbria area. *Policy ST10: Furness and West Cumbria* identifies the following measures to be promoted for service centres:

- The highest priority will be given to measures that secure regeneration;
- Opportunities will be promoted to sustain and enhance employment, secure investment, develop social and community facilities and support the role of town centres; and,
- There is a need for development and regeneration in to diversify and improve the quality of life in towns such as Barrowin-Furness, Maryport and Whitehaven.

### Policy L56: Health, Education and Training Facilities

The Structure Plan promotes access to health facilities alongside training and education services to ensure retention of young people within Cumbria, attract inward investment and promote confidence across the region. The authorities will support developments or re-developments that follow the policies below:

- Located in appropriate sites related to their catchment areas;
- · Located usually in town centre areas;
- Are well served by public transport;
- Accompanied by Transport Assessments and Travel Plans; and,
- Traffic generation impact upon the local highway network is minimised where possible.

### Policy T24: The Strategic Transport Networks

Development should not adversely affect the strategic transport network. The emphasis of local policy is on reducing the need to travel and providing a choice of transport, which is a key element in securing a sustainable pattern of development for the Borough. Section 5.3 notes that it is important that transport provision is made to support access to services and this is key within town centres.

### Policy T31: Travel Plans

Travel Plans can increase the use of public transport, walking and cycling to seek to reduce car journeys. They can also seek to address key issues such as road safety, personal security and most notably to help reduce traffic growth. Travel Plans assist in meeting targets for reducing traffic growth, developers should scope early discussions with the relevant local planning authorities to identify at an early stage the scope required for a Travel Plan.

### Policy T32: Car Parking Standards

The availability of parking can influence the means of transport and destinations people choose for journeys. Maximum parking guidance has been identified for Hospitals within, 'Parking Guidelines for Cumbria', published in September 1997. Identifying maximum parking standards aim to promote sustainable transport choices and vitality of town centres. Guidance on maximum parking levels for hospitals are shown in Table 2.1.

Type of	Essential Essential Parking		Maximum Non-operational Parking		
Development	Operational Parking	for Disabled People	Cars	Motorcycles	Pedal Cycles
Hospitals	50sqm of useable service space per 250sqm gross floor area PLUS turning space PLUS access for ambulance	1 space or a number equivalent to 5% of car requirement whichever is the greater	2 spaces per 3 bedspaces PLUS 3 spaces per consulting room (including accident and emergency) PLUS 1 space per 2 staff	A number equivalent to 5% of car requirement when more than 20 car spaces necessary	1 space per 5 sta PLUS number equivalent to 10% of car requiremer with a minimum of 2 spaces

Table 2.1 Cumbria Parking Standards

### **Local Policy**

On 6th June 2006, Copeland BC adopted the 'Copeland Local Plan 2001 - 2016', presenting development principles and guidance for the Borough. The emerging Local Development Framework (LDF) for Copeland will eventually superseded the local plan, at present the Copeland Local Plan 2001 - 2016 is the statuary local planning document.

### 2.4.1 Copeland Local Plan 2001 - 2016

The Copeland Local Plan Chapter 2 "Local Plan Aims and Objectives", in Section 2.2 identifies the Councils concerns regarding the increasing amount of skilled young workforce migrating from the Borough to seek employment elsewhere. There is a pressing need for regeneration to address the long term economic challenges associated with the Borough. The aims of the local plan are summarised as follows:

- Secure a stable and balanced population whilst improving public health, safety and quality of life;
- Protect and enhance landscapes, habitats and the built and natural environments;
- Make the most efficient use of existing buildings and infrastructure, previously developed land and natural resources;
- Promote and facilitate economic regeneration to achieve stable, diverse and self sustaining employment.

Chapter 2 further promotes the importance of sustainability within the Borough. There are four key objectives presented in this Chapter, which are as follows:

- 1. Social progress which recognises the need of everybody;
- 2. Effective protection of the environment;
- 3. Prudent use of natural resources; and
- 4. Maintenance of high and stable levels of economic growth and employment.

Chapter 7 of the Local Plan 'Transport' presents the key transport policies of relevance to the proposed development, which are summarised below:

Policy TSP 6: General Development Requirements

The Local Plan identifies a need for Travel Plans to provide the following:

- Have clear targets for reducing car-use and parking and set out how these will be achieved alongside measures to increase the use of public transport, walking and cycling; and
- They should provide for improved road safety, personal security and more efficient/environmentally friendly delivery and freight movements.

### Policy TSP 7: Transport Assessments and Travel Plans

The plan notes the requirement for Transport Assessments and Travel Plans where, "development which is likely to have significant transport implications and all major development proposals above the thresholds set out in Appendix 4 of the Local Plan. Appendix 4 of the Local Plan identifies the criteria of a Travel Plan for health facilities in excess of 2,500 m<sup>2</sup>. In addition, the plan notes, "any developments which may directly or indirectly impact upon the trunk road network must be accompanied by a Transport Assessment and in the cases indicated, by a Travel Plan."

### 2.5 Policy Summary

The development supports the aims and objectives promoted within the National Planning Policy Guidance 13: Transport. The proposals will ensure a sustainable approach to ultimately reduce single occupant vehicular trips, whilst promoting more sustainable modes including walking, cycling and public transport.

Cumbria County Council and the Lake District National Park Authority presented sub-regional guidance through the publication of "Cumbria and Lake District Joint Structure Plan 2001 – 2016." The policy guidance document reemphasises the importance of sustainability, which can be delivered through the Travel Planning process.

The Copeland Borough Council "Local Plan 2001 - 2016" presents the key challenges experienced within the Borough including the issue of outward migration of skilled staff and the need for employment opportunities within the Borough to retain skilled young professionals.

### 2.6 Purpose of a Travel Plan

A Travel Plan is a way of managing how people travel to a particular area or organisation. This Travel Plan addresses:

- Staff, visitor and patient mode of travel to the hospital;
- Parking issues that may arise on site; and,
- Improve the accessibility of the site, reducing staff, patient and visitor stress.

The main benefits that can be expected from the Travel Plan are as follows:

Benefits to Patients and Visitors:

- Services that are easier to access by all forms of transport, reducing anxiety and frustration and leading to better health outcomes from treatment;
- Increased availability of parking spaces for patients and visitors which results in reduced stress levels; and

Health services are improved due to staff being healthier and happier.

### Benefits to Staff:

- Services that are easier to access by all forms of transport, reducing anxiety and frustration and leading to better health outcomes from treatment;
- Reduced travel costs;
- Staff generally healthier due to increased exercise;
- · Creates a level playing field for all travellers, thereby enabling more people to be able to apply for jobs; and
- Provide choice through increasing travel and working options.

### Benefits for the Trust:

- Improved recruitment and retention of staff by providing a wider choice of candidates; improving morale and reducing absenteeism;
- Lower mileage claims and more effective use of staff time;
- · Reduced demand for car parking;
- · Reduced costs for use of land for car parking including capital charges, maintenance and security;
- Released car parking space for alternative uses, i.e. delivery of services;
- Increased revenue through parking charges which can be used to fund Travel Plan initiatives;
- Timely patient attendance at appointments;
- Presenting a positive image of the organisation;
- Establish safer walking and cycling routes
- Fewer complaints; and
- Improved relations with the local community and the local authority.

### Benefits to the Community:

- Help to reduce congestion both locally and further field and thereby reduces the Trust's carbon footprint;
- Reduced parking conflict on site and on neighbouring residential streets; and
- Help to improve air quality and reduce road accidents.

This is not an exhaustive list and there are numerous further examples of the benefits Travel Planning can bring both organisations and individuals.

# 3 Existing Conditions

### 3 **Existing Conditions**

### 3.1 **Background**

The West Cumberland Hospital is located off Homewood Road and Homewood Hill, Whitehaven. The site is situated in a residential area, although an industrial/business estate is located to the immediate north of the main access. A plan illustrating the hospital boundary and surrounding bus stop locations is highlighted in Figure 3.1.

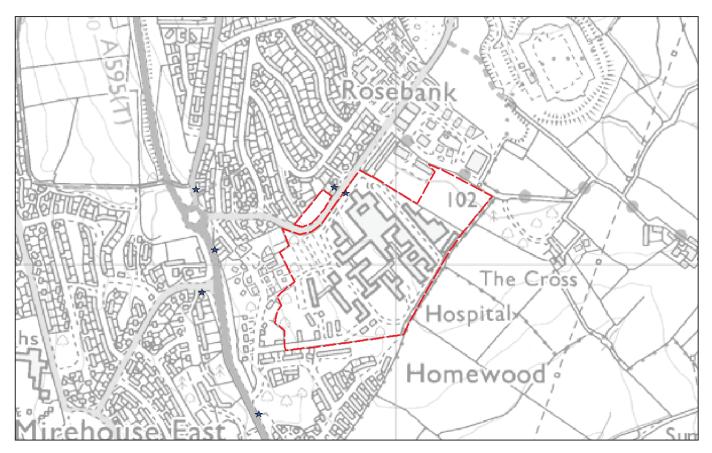


Figure 3.1 shows the hospital location and surrounding bus stops

### 3.2 **Existing Accesses**

There are two accesses which operate on a 24 hour daily basis on site. The main access and egress is located off Homewood Road, whilst a secondary emergency access is situated off Homewood Hill. Both Homewood Road and Homewood Hill connect the hospital to the A595 (Egremont Road), a key arterial route into Whitehaven Town Centre.

### 3.3 **Car Parking**

### 3.3.1 **Existing Parking Conditions**

In the 2010 Travel Plan, it was identified 620 car parking spaces were located at West Cumberland Hospital. This number is broken down between allocated staff, patient and visitor car parking. Staff parking is generally located away from the front of the Hospital and at the bottom of the hill to the west of the site. There are also parking spaces along the main service road which accommodates movements across the site.

The pay and display car charges on site are as follows:

Up to 1.5 hours: £1;

1.5 hours – 3 hour: £2;

• From 3 – 4.5 hours: £3: and

Over 4.5 hours: £5.

The Trust has allocated a total of 1,747 parking permits to NHS staff. A copy of the application form is located in **Appendix C** of this report. The cost of a parking permit at present is £68 for all staff. The availability, cost and criteria used to allocate parking permits will be appraised through the Travel Planning process and will be complimented by supporting measures to ensure that alternatives modes of transport are viable.

It is envisaged that the Travel Plan will facilitate a modal shift towards sustainable forms of travel. The Trust is already pursing car sharing and cycle to works schemes and video conferencing suites are available to discourage travel to meetings. A car sharing club is not currently in operation at West Cumberland Hospital but there is a scheme running at the sister Hospital. All opportunities will be explored to investigate the potential of a car sharing following the receipt and analysis of the questionnaire responses.

### 3.3.2 Proposed Hospital Redevelopment Parking

To provide a starting point for the appraisal of the need for parking, AECOM have consulted the 'Health Technical Memorandum 07 - 03' (Department of Health, 2006). The publication has developed criteria based on numerous case studies and provides a useful resource to establish parking numbers and also to define the Travel Planning targets. The total number of parking spaces is based on total staff numbers, number of beds and the number of consulting rooms. In the case of the proposed development this equates to:

- 1,565 staff;
- 252 beds; and
- 77 consulting/treatment rooms.

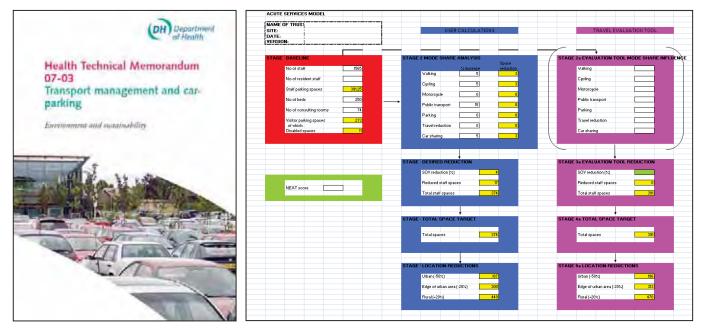


Figure 3.2 'Health Technical Memorandum 07 - 03' (Department of Health, 2006), Car Parking Assessment Tool

The calculations define the number of parking spaces through the following criteria:

- 1 space for every 4 staff (this equates to 391 spaces for staff);
- 1 space for every 2 beds (this equates to 126 spaces for visitors and patients); and,
- 3 4 spaces for every consulting room (this equates to 231 spaces for visitors and patients, based on 3 spaces per consulting room).

When applying the criteria to the proposed development there is a requirement for 391 spaces for staff and 357 spaces for visitors. These numbers will be subject to further scrutiny once the modal split targets have been identified through the Travel Planning process. Please note that the above criteria is provides less parking than the Cumbria Parking Standards as summarised below;

- 1 space for every 2 staff (this equates to 783 spaces for staff);
- 2 spaces for every 3 beds (this equates to 168 spaces for visitors and patients); and,
- 3 spaces for every consulting room (this equates to 231 spaces for visitors and patients).

The Cumbria standards would equate to 783 spaces for staff and 399 visitor spaces. Given current government policy there is a need to deliver a sustainable site and limit the availability of the car parking. Furthermore, the Travel Planning targets seek to directly reduce the availability of parking, subject to an appraisal of the operation of the site.

The Masterplan accommodates Disables Parking, Mother and Child Parking and covered cycle parking. There are also staff parking spaces which will be retained and unaffected by the Masterplan proposals.

There are three zones at the Hospital where parking will be provided:

- Zone 1 208 spaces within the internal circulatory route and 17 north of the circulatory road at the energy centre;
- Zone 2 350 bays designated in the car to the south of the internal circulatory road; and
- Zone 3 -Staff Car Parking off Homewood Road.

Table 3.1 shows the net difference between the Health Technical Memorandum parking standards and the number of proposed parking spaces following the redevelopment of the Hospital.

Parking Zones at West	Proposed Parking (max)		Health Technical Memorandum		
Cumberland Hospital	Staff Spaces (Indicative)	Visitor and Patient Spaces (Indicative)	Staff Spaces	Visitor and Patient Spaces	
Zone 1	17	357			
Zone 2	295	0	391	357	
Zone 3	66	0			
Parking Totals for Staff, Visitors & Patients	378	357	391	357	
Overall Total Spaces 735		748			

**Table 3.1**: Net difference in parking numbers

Table 3.1 illustrates the 735 parking spaces proposed for West Cumberland Hospital is below the recommended 748 spaces, as indicated in Depart for Health's, "Health Technical Memorandum." An indicative split of car parking that will be available on site for staff, visitors and patients is 378 staff spaces and 357 visitor / patient spaces. This split is however indicative and could be amended if required.

Whilst the proposed amount of staff parking is below the Department for Health's recommended staff parking levels, the Trust are satisfied the Travel Plan will measures to influence modal shift amongst staff, from private car travel to more sustainable modes, reducing the requirement for car parking. In addition, national, sub-regional and local planning policy encourages the promotion of sustainable travel and reducing the reliance on private vehicular travel. Furthermore, the Health Technical Memorandum guidance suggests a location reduction (see Figure 3.2) of 20% for edge of town locations. Applying the 20% reduction upon the recommended 748 spaces suggests the proposed 735 spaces at West Cumberland Hospital will be suffice and in unison with the Travel Planning targets.

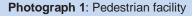
Car parks are currently and will continue to be patrolled. There are occasions where onsite parking restrictions are relaxed to allow overflow parking on double yellow lines and grassed areas. It is however anticipated the new parking arrangements will deter and reduce the need for vehicles to park outside of the designated bays. The Trust is keen to ensure the proposed car parking is enforced to alleviate overflow parking on site.

### 3.4 **Highway Condition**

The A595 (Egremont Road) is a key arterial route from Whitehaven to West Cumberland Hospital. It is worth noting the A595 is a key commuter route for people travelling to work at the Sellafield Nuclear Power Station. Traffic volumes are generally free flowing during the day, however queuing was observed during the peak hours, which is likely to be attributed to the usual traffic profile and a shift change at the power station.

Pedestrian footpaths are of a sufficient standard and width along Egremont Road and Homewood Road, with street lighting increasing the sense of security for pedestrians. A pedestrian crossing facility is located along Egremont Road, adjacent to the bus stop facility (**Photograph 1**). 'Slow' road markings are located along Homewood Road near the main Hospital entrance to encourage reduced vehicle speeds within the vicinity of the site, thus improving pedestrian safety. The Hospital is located along Homewood Road which is on a steep incline, characteristic of the surrounding geography. Movements by pedestrians are consequently restricted especially to those with mobility issues.







Photograph 2: Pedestrian facilities

The internal Hospital pedestrian footpaths are positioned for patients, staff and visitors to move around the site safely. Tactile paving and dropped kerbs are located at various crossing points however there are concerns whether crossing facilities on site meet DDA standards.

A pedestrian crossing is located to the south of the main building connecting the Accident and Emergency entrance with the car parks to the south of the site. Hand rail facilities are located strategically across the site to aid pedestrian flow.





Photograph 3: Zebra crossing

Photograph 4: Pedestrian facilities

### 3.5 Accident Data

Traffic accident data has been obtained from Capita, on behalf of Cumbria County Council for the highway network in the immediate vicinity of West Cumberland Hospital. The data looks at the number of slight, serious, and fatal accidents within a five year period in the latest available 60 months, between 1<sup>st</sup> September 2004 and 31<sup>st</sup> August 2009.

The data has been compiled for the following locations:

- Homewood Road;
- Homewood Hill;
- Homewood Drive;
- Egremont Road;
- Rutland Avenue; and,
- Sneakyeat Road.

In total, 13 accidents have been recorded within the study area, 12 have been slight, with one serious accident. There were no fatal accidents recorded during this period, as illustrated in **Table 3.2**.

Location	No.	Severity		
Location	Of Incidents	Slight	Serious	Fatal
Homewood Road / Egremont Road Junction	4	4	0	0
Egremont Road / Rutland Avenue Junction	4	3	1	0
Homewood Road / Dorset Close	2	2	0	0

Homewood Road / Main Entrance to the Hospital	2	2	0	0
Homewood Road / Sneakyeat Road	1	1	0	0
Total	13	12	1	0

**Table 3.2** summarises the severity and number of accidents at each of the locations.

Full accident data and plans of this study area are contained within Appendix D of this report. The following sub-section paragraphs provide a summary description of this full accident data at each of the junctions:

### Homewood Road / Egremont Road Junction

Four slight accidents occurred at this location, one involved a pedestrian under the influence of alcohol walking onto the carriageway and colliding with a car. Two further slight accidents occurred at this location involving vehicles that failed to negotiate the roundabout and collided with the central island and kerb. Finally, a slight accident occurred which involved a car colliding with a cyclist, due to the car driver failing to see the cyclist.

### Egremont Road / Rutland Avenue Junction

Three slight incidents occurred at this location; one incident involved an overtaking vehicle colliding with a car travelling in the opposite direction turning right. A slight incident occurred with a vehicle colliding into the rear of a queuing vehicle, whilst another incident involved a car colliding with a vehicle travelling right into Rutland Road. A serious accident occurred at the pedestrian crossing facility on the A595, where a 10 year old walked onto the carriageway and collided with a car.

### Homewood Road / Dorset Close

Two slight incidents occurred at this location, one incident involved a car colliding into the rear of a vehicle slowing down to turn left. A further incident occurred when a motorbike pulled over to allow another vehicle to pass, however the bike collided with the kerb and the driver fell off his bike.

### Homewood Road / Main Entrance to the Hospital

A vehicle turned right into the junction onto the path of another vehicle and caused a collision. A further slight incident occurred with a vehicle colliding into the rear of another vehicle that had stopped to give-way to an ambulance.

### Homewood Road / Sneakyeat Road

A slight incident occurred at this location when a vehicle pulled out of Sneakyeat Road onto the path of another vehicle and caused a collision.

### Summary

The majority of accidents in the vicinity of the proposed site over a five year period have been caused by driver, cyclist or pedestrian error. The proposed development is unlikely to have any detrimental effect on road safety in the area. The pattern of existing collisions does not give rise to any existing deficiencies or failings of the road network in its current form.

# 4 Accessibility

### 4 Accessibility

### 4.1 Introduction

This section discusses accessibility of the site via sustainable modes and also the modelling exercise undertaken to identify the levels of accessibility to the site via public transport and on foot. A review has also been undertaken of the 2001 Census Journey to Work data to determine the number of persons that travel to work by the various modes of travel. This section will assist in developing appropriate measures and multi modal travel targets in the subsequent section, **Aims, Objectives and Measures.** 

### 4.2 Access by Public Transport

### 4.2.1 Bus Services

Bus services are within easy access of the Hospital with stops located adjacent to the main entrance on Homewood Road, as illustrated in **Figure 4.1**. Bus stops on Homewood Road are sheltered with timetable information provided. **Table 4.1** details the bus service provision in the vicinity.

Bus No.	Route	Frequency of Service (Mon – Fri)
6	Whitehaven – WC Hospital - Egremont – Ravenglass - Millom	Two hours (08:00 – 18:00)
22	Moresby Parks – Whitehaven – Hospital - Egremont	Hourly
30	Maryport – Workington – WC Whitehaven – Hospital - Thornhill	30 minutes
30A	Whitehaven – Hensignham – Hospital – West Lakes Science Park - Egremont	Hourly

**Table 4.1** Local Bus services in the vicinity of the hospital

Road markings on street denote the bus stop locations; a raised kerb is also located at the bus stop on the eastern side of Homewood road to ensure access for buggies and disabled persons. **Photograph 1** illustrates the shelter on Homewood Road, however it is worth noting that the cage is not consistent with the bus stop shelter location.

Further bus stop facilities are situated along Egremont Road, as illustrated in **Photograph 2**. Bus stop facilities at this location are also sheltered with accompanying road markings. People can access the hospital from these stops via the secondary hospital access on Homewood Hill.





Photograph 5: Homewood Road Bus Stop

Photograph 6: Egremont Road Bus Stop



Figure 4.1 Bus Services in West Cumbria

### 4.2.2 Rail Services

The nearest rail station is in Corkickle, located approximately 2km from the Hospital off Station Road, whilst Whitehaven Rail Station is located approximately 4 miles from the Hospital. Both stations are managed by Northern Rail and form part of the Carlisle to Barrow-in-Furness line, Figure 4.2 illustrates stops along this line. Approximately hourly services are available between Carlisle and Barrow-in-Furness; however service frequencies become irregular during the off-peak hours and at the weekends.

Rail users can access direct buses to the hospital from Whitehaven Rail Station. This station is staffed part time during the day from Monday - Saturday; parking facilities are also provided for vehicles and cycles. Northern Rail trains have a disabled access ramp and members of staff help disabled passengers on and off trains.

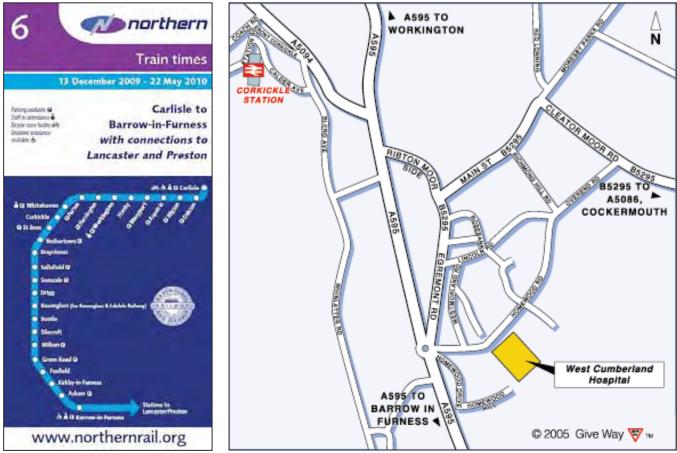


Figure 4.2 Carlisle to Barrow-in-Furness via Whitehaven and Corkickle (Source: Northern Rail/West Cumberland Hospital)

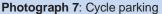
### 4.2.3 Pedestrian and Cycle Access

The local footways accessing the site are in good condition with dropped kerbs to improve mobility with street lighting present throughout. National Cycle Route 72 is located within 2km of the Hospital and is a predominantly traffic free route that passes through Whitehaven and runs adjacent to the railway track, as illustrated in Figure 3.4. This cycling route provides an attractive and safe mode of transport for people travelling from Whitehaven town centre towards the Hospital. Cyclists can then access the Hospital from the cycling route via a number of residential roads.

A 'Cycle to Work' scheme has been initiated by the Trust, providing bicycles to staff at a tax reduced rate to encourage and promote staff to travel to work by more sustainable modes. The Trust has identified that the scheme has seen reasonable success so far, with 100+ staff signed up to the cycle to work scheme. **Figure 4.3** illustrates the flyer distributed internally to NHS staff in West Cumbria to promote the scheme. Safety Inspections are provided for free and reduced rates are offered on maintenance. The Trust has also committed to the Cycle Guarantee Scheme, a national initiative to encourage and promote cycling to work.

At present six 'Sheffield' style racks cater for cycle parking. The Trust has recently ordered a new sheltered cycle parking facility to accommodate up to 50 additional cycles. Shower facilities are currently available for staff on D Block level 2, these have been refurbished and include locker/drying facilities.







Photograph 8: Pedestrian facilities

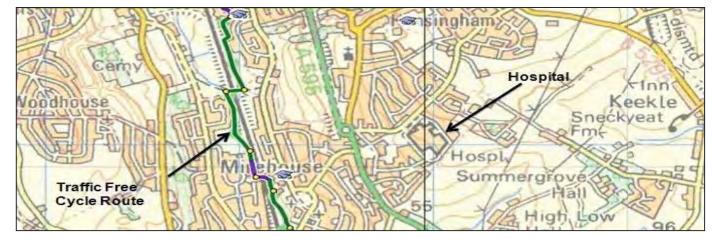


Figure 4.3 Cycle route in the vicinity of the site (Source: Sustrans website)



Figure 4.4 Cycle to Work flyer

### 4.3 **Accessibility Review**

Accessibility modelling has been undertaken using Accession, the latest industry software modelling package which produces mapping outputs illustrating the accessibility of a site by public transport and walking. This accessibility plots will provide an indication of areas that can access the Hospital within a reasonable travel time by foot and public transport. An acceptable travel time for both modes of travel is 30 minutes via foot and 1 hour via public transport.

### 4.3.1 Walk Isochrones

Table 4.2 shows the Institute of Highways and Transportation (IHT) acceptable walking distances. With regards to the proposed West Cumberland Hospital, the guidance suggests the preferred maximum commute is 2,000m or 2km. The standard average walking speed is 4.8km / hr; therefore a fair assumption is that 30 minutes travel time may be required to access the site via foot.

Criteria	Town Centre	Commuting / Sight Seeing	Elsewhere
Desirable	200m	500m	400m
Acceptable	400m	1,000m	800m
Preferred Maximum	800m	2,000m	1,200m

Table 4.2 IHT Suggested Acceptable Walking Distances

An accessibility plot based on a 30 minute travel time via foot has been prepared in Figure 4.5.

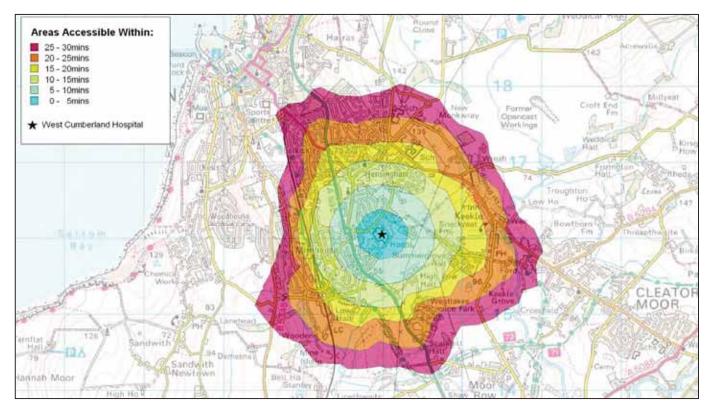


Figure 4.5 Walk Accessibility

### 4.4 Public Transport Isochrones

**Figure 4.6** illustrates areas accessible to West Cumberland Hospital via public transport within one hour travel time period. The accessibility plots cover a wider geographical area than the walk accessibility plots to reflect the enhanced accessibility though public transport. ACCESSION takes account of walk times, timetable data and frequencies of all main modes to produce the accessibility plots.

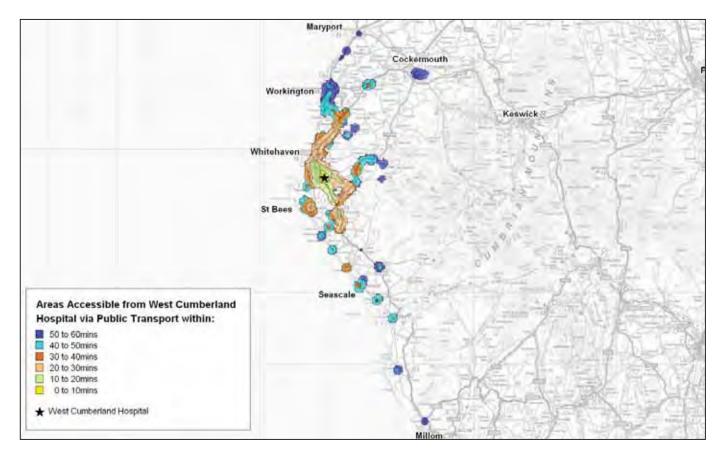


Figure 4.6 Public Transport Accessibility

**Figure 4.6** shows that public transport users can access the hospital from Whitehaven Town Centre within a 20 minutes travel time. St Bees and Seascale can access the hospital within a 30 minute travel time, however towns located further afield including Workington, Cockermouth and Millom require up to an hour travel time.

### 4.5 Journey to Work Analysis

An analysis of the 2001 Census Journey to Work (J2W) data has been undertaken to determine the number of people travelling to work in the Output Areas (OAs) that the Hospital lies in. The analysis reviews the number of persons travelling to work by all modes of transport.

**Figure 4.7** illustrates the OA boundaries that the Hospital lies in. There are some residential elements within the OA boundaries; however it is fair to assume that persons travelling to work within the OAs will be predominately working at the Hospital.

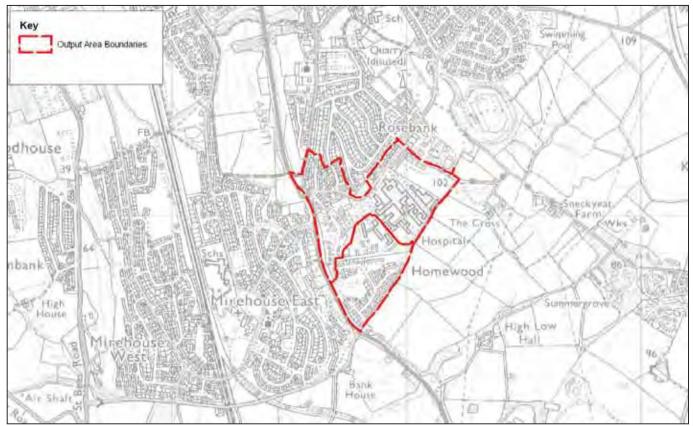


Figure 4.7 OA boundaries

Made of Transport	Persons travelling to work	within West Cumberland OAs
Mode of Transport	Total	Percentage
Car – driver	1,253	74.76
Car – passenger	157	9.37
On foot	117	6.98
Bus	84	5.01
Bicycle	24	1.43
Other	20	1.19
Train	12	0.72
Taxi	6	0.36
Motorcycle	3	0.18

Table 4.3 Preferred Mode of Travel

The results show 1,253 (75%) persons working within the OAs drive to work, whilst a further 157 (9%) people travel as a car passenger. Travelling to work via foot and bus are the key modes of sustainable travel to the identified OAs, whilst the percentage of persons travelling via train or bicycle is low.

From this review, multi modal targets will consequently be identified in Section 7.3, realistic targets will be indentified which promote bus and pedestrian facilities where possible, whilst measures will also be identified to encourage greater rail and cycle usage.

### 4.6 **Summary**

In summary, the edge of town location of the Hospital is reflected in the public transport facilities available to access the site. Bus facilities are available and provide connections between Whitehaven and the Hospital. Rail services are infrequent to Corkickle Rail Station, which is located approx two miles from the Hospital. The Trust has recently ordered a secure sheltered cycle parking facility for West Cumberland Hospital, which will further promote the use of sustainable modes.

# 5 Travel Surveys

# 5 Travel Surveys

## 5.1 Background

Questionnaires were distributed to staff to capture a range of travel data including the modes of transportation used by persons travelling to and from the Hospital. The results of the surveys will allow the Travel Plan Coordinator in identifying multi modal targets as part of the Travel Plan Monitoring Process.

It is acknowledged the greatest potential of influencing change in travel behaviour will be amongst staff at West Cumberland Hospital, as opposed to visitors and patients. In the 'Aims, Objectives and Measures' Section, appropriate measures will be developed to promote sustainable travel amongst visitors and patients. However the subsequent sections will focus on the staff travel surveys.

## 5.2 Staff Travel Survey Information

This section discusses the questions asked in the staff travel survey and the reasons behind these questions.

## Section A – You and Your Organisation

The first section included within the staff travel survey has a 'you and your organisation' section, which captures information to enable a respondent profile to be produced. This information is summarised below.

## Respondent Profile

Survey questions regarding respondent's personal profile have been gathered to recognise the occupation of each respondent and the number of days in which they work on site. This information will then act as the basis for identifying trends and patterns when analysing and cross-referencing the results.

# Journey Origin

Respondent's postcodes will be surveyed to enable each individual's journey origin to be mapped. This will aid in identifying individuals who live close enough to the hospital site to use more sustainable modes of travel other than the car, and will also enable clusters of staff members to be identified to encourage incentives such as car sharing.

## Journey to Work

Respondents will be asked a series of questions regarding their journey to work including which mode of transport they currently use. This information will identify the existing car usage at the site, and other modes of travel that are popular.

The journey time of hospital staff will be surveyed. Cross-referenced with the mode of transport information, it can be used to identify how long it takes individuals to travel to the site using different modes of travel. This data will be reviewed to identify the peak arrival times of staff at the site; this information could then be used to stagger shifts at the site to avoid excessive congestion.

Information regarding why respondents use their cars to travel to work will also be questioned to identify reasons behind car usage at the site. This information will help to recognise why other modes of travel are not used e.g. lack of alternative travel modes or reliability.

The number of persons currently car sharing will also be examined as part of this survey. Persons travelling via car will also be asked details regarding their engine size and type of fuel consumed by their vehicle. This will allow for approx CO<sub>2</sub> emissions generated by staff to be calculated.

# Section B - Parking

The second section of the survey is associated with staff parking at the hospital. This section is only applicable to staff members who travel to work via car, van or motorcycle.

Vehicle users will be surveyed in order to identify where each staff member parks on the hospital site and also if they hold a parking permit. This data will identify the parking hot spots at the hospital.

# Section C - Public Transport

The third section will survey all respondents who travel to work via public transport. The hospital benefits from bus stops located within the vicinity and Corkickle Rail Station. Staff members will be asked which bus services they regularly use to travel to work. This information will allow for a review of bus services, to identify congested and popular services and to examine whether additional or more frequent services are required.

Staff members will also be surveyed as to whether they usually use a travelcard or another type of pass when using public transport to travel to work. This information will aid in creating incentives within the Measures section of the Travel Plan to encourage public transport use.

## Section D – Alternative Mode of Transport

This section identifies each of the alternative modes of transport that are occasionally used instead of the staff member's main mode of travel. This survey question will be cross-referenced with Section E to identify what incentives will encourage hospital staff to use alternative modes of travel including car sharing, public transport, walking and cycling.

## Section E - Incentives to use Alternative Modes

Section E will survey hospital staff on the incentives that will encourage them to use alternative modes of travel. By identifying the most popular incentives, the use of alternative modes of travel stands a greater chance of being a success.

## Car Sharing

Hospital staff will be asked which incentives would encourage them to car share for their journey to work e.g. help to identify a suitable car share partner or a guaranteed lift home. By identifying the most popular incentives, the scheme stands a greater chance of being a success. As discussed earlier the feasibility of such an option can be determined by locating each staff member's home address which will identify potential car sharers spread out into various clusters.

## Public Transport

Another list of potential incentives to encourage staff members to use bus and rail services will be surveyed. These incentives will include for example cheaper fares, more reliable services and more direct routes.

Questions regarding incentives to encourage staff to cycle to work e.g. showers/changing facilities and improved secure cycle parking.

# Walking

Finally staff will be asked which incentives would encourage them to walk to work e.g. better quality footpaths or improved road safety.

# Section F - Any Comments

This section offers staff to raise any comments or views that the Trust should consider that may encourage staff to travel to work via sustainable modes of travel, and to reduce private vehicular usage.

## Section G - About You

Finally information about each individual that will help to produce trends and identify patterns will be surveyed. These questions will identify the sex of each individual, if a long term illness affects an individual's travel to the site and what shifts each staff member normally works. This information can then be cross-referenced during the analysis stage with all the previous information gathered as part of the survey to provide a variety of results.

#### 5.3 **Patient and Visitor Surveys**

A survey of patients and visitors will be undertaken as part of this Travel Plan. This will be quite a sensitive issue and the Travel Plan Coordinator will determine the most suitable way to engage patients and visitors in a survey. Previously, AECOM has undertaken patient and visitor surveys at Christies Hospital, Manchester, for a two day period by delicately surveying persons upon arrival at the hospital.

Another method for undertaking surveys is allocating survey forms to receptionists, who can distribute forms to patients and visitors upon arrival. Again, receptionists will need to be sensitive on determining the distribution of travel surveys.

The Travel Plan Coordinator will be responsible for identifying a suitable and representative sample of visitors and patients to target for the surveys. The results of the surveys will then be reviewed and incorporated in the Travel Plan targets.

#### 5.4 **Questionnaires Results and Analysis**

A copy of the staff travel survey can be found in **Appendix A**, whilst **Appendix B** presents the patient and visitor questionnaires. The data obtained from the surveys will form the baseline data and consequently inform the likely targets associated for staff travel patterns.

The purpose of questionnaires is to:

- Obtain data on travel patterns to/from the hospital;
- Identify the staff home locations for car sharing possibilities;
- Identify the most common routes to the hospital;
- Determine reasons for method of travel to the hospital;
- Examine attitudes to different means of travel;
- Identify improvements which could encourage staff to walk or cycle; and
- Provide a set of baseline data, which could be used as part of annual monitoring.
- Provide a set of baseline data, which could be used as part of annual monitoring.

**Travel Survey Responses** 

# 6 Travel Survey Responses

### 6.1 Introduction

An online questionnaire was prepared by the Trust and made available to all staff via the Hospital intranet. For Hospital staff working at a non-desktop based role, hard copies were made available at reception points across the Hospital. An extensive survey period was opened from September 2010 – December 2010, to ensure ample opportunities for staff to respond to the survey.

The Trust encouraged all staff within the North Cumbria University Hospitals NHS Trust to complete the survey, to ensure the travel behaviour was captured for staff at West Cumberland Hospital, Cumberland Infirmary and other satellite units across Cumbria. It is acknowledged a proportion of staff working predominantly at West Cumberland Hospital work at Cumberland Infirmary or other satellite units. The survey results will assist the Trust to review staff travel patterns across Cumbria, however for the purpose of this Travel Plan the subsequent sections review the responses from West Cumberland Hospital staff.

In total, 341 responses were received from staff at West Cumberland Hospital, in total approx 1,565 staff working at the Hospital; this represents a healthy response rate of 22%. When undertaking major surveys, the target response rate is generally 20% - 20% of all staff, ensuring the responses is reflective of onsite conditions.

The purpose of this questionnaire was to:

- Obtain travel data of staff travelling to and from the Hospital;
- Identify the staff home locations for car sharing possibilities;
- Determining the reasons for travel behaviour;
- Determine any barriers that prevent or deter staff from travelling sustainably;
- Identify improvements that could be made to encourage staff to travel more sustainably; and
- Identify potential sustainability champions.

# 6.2 Results

Background Information

# 6.2.1 Where do you usually start your journey to work?

West Cumberland Hospital staff provided their residential address; this information has been plotted in MapInfo to provide a visual of staffs residential locations. Question 9 of this survey asked staff to state the mode of transport they use to commute to work. This information has also been included within the MapInfo plot as illustrated in **Figure 6.1**. Colour coding has been applied to the staff postcodes, to indicate the various mode of transport used to travel to and from the Hospital.

**Figure 6.1**shows the majority of staff resides in towns within the vicinity of the Hospital including Whitehaven, Workington and Egremont. A proportion of residents live in smaller settlements of Seascale, Cleator Moor, Gosforth and the rural areas of Cumbria.

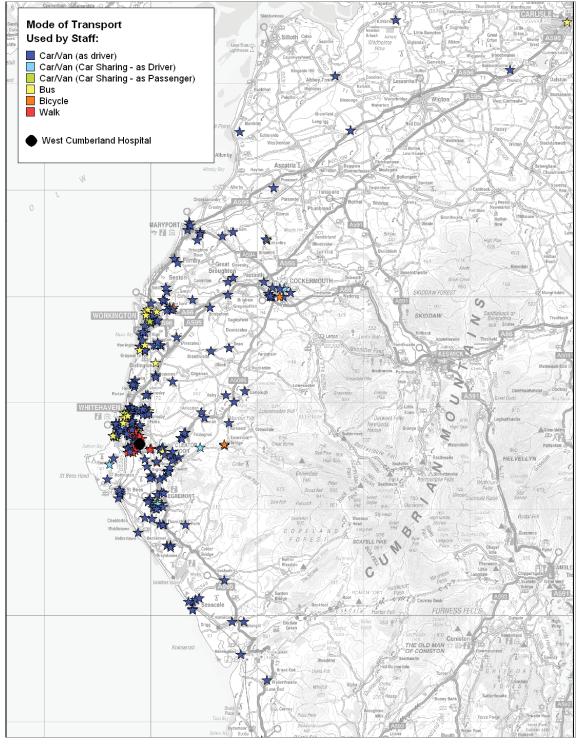


Figure 6.1 Location of West Cumberland Hospital Staff and Mode of Transport used to Commute

# At what time (approximately) do you usually leave (from A1) to travel to work?

Staffs were asked to identify their estimate time of departure when travelling to work. The results have been plotted in Figure 6.2, illustrating a peak period when staffs depart between 08:00 - 08:30 hrs, with a total of 87 staff leaving during this period. The morning peaks are as follows, 07:00 - 07:30 hrs, 07:30 - 08:00 hrs and 08:00 - 08:30 hrs when 52, 82 and 87 depart during these periods respectively.

A number of staff indicated they work shifts and the time of departure alternates depending on their allocated shift time. These people have been identified in Figure 6.2 within the 'Split Shifts' category, however it should be noted these staff could also be considered as departing during the morning peaks, when reviewing potential car sharing opportunities later in this Travel Plan.

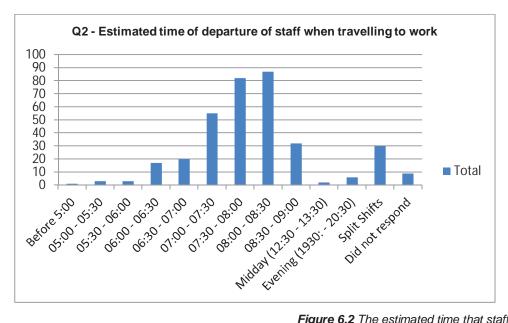


Figure 6.2 The estimated time that staff departs for work

## At what time (approximately) do you usually arrive at work?

The results presented in Figure 6.3, illustrate the peak periods when staff arrive at West Cumberland Hospital, which are 07:30 -08:00, 08:00 - 08:30 and 08:30 - 09:00, when 70, 82 and 65 staff arrival during these periods respectively.

In total, 31 staff noted they work split shifts, which can include the morning period, depending on their allocated shift time. The responses indicate a significant proportion of staff working at West Cumberland Hospital arrive regularly during the am peak period, whilst a significant proportion of staff work 'Split Shifts', therefore their arrival time will vary depending on allocated shift time.

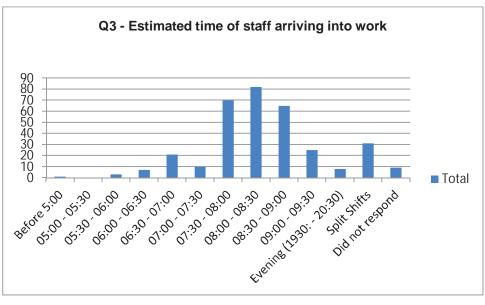


Figure 6.3 The estimated time staffs arrive for work

# What is your occupation?

Staffs were asked to identify their occupation within the Hospital, the results are presented in Figure 6.4.

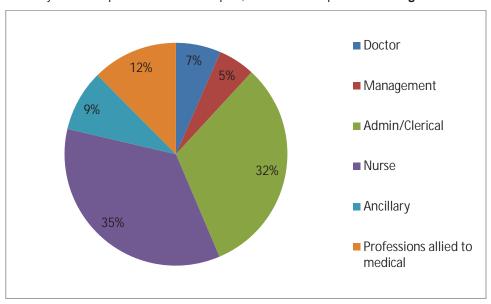


Figure 6.4 Staff Occupations

## **Travel Behaviour**

# 6.2.5 How many days do you work at your base site?

It is acknowledged a number of staff work in various NHS locations across Cumbria. The survey asked staff to identify the approx number of days they are based at West Cumberland Hospital. **Figure 6.5** illustrates the majority of staff answered '4 or more days a week', whilst over a quarter of staff (90) work '2 to 3 days per week' at the Hospital.

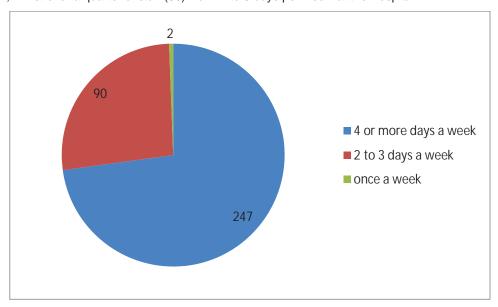


Figure 6.5 Staff Locations

# 6.2.6 Do you work in other NHS units in West Cumbria, if so where?

The following question aimed to identify the locations where West Cumberland Hospital staff work. This will identify movements of staff across NHS Units in Cumbria to assist the Trust in developing measures to promote sustainable travel.

In total, 129 staff responded and the results are 61 staff work at Cumberland Infirmary. In addition, nearly a quarter of staff (29) work in Workington, where a community health facility is based. The remainder of staff work in Whitehaven (17), a PCT premise in Millon (7), Maryport (7) and Cockermouth (8). **Figure 6.6** summarises the responses from West Cumberland Hospital staff.

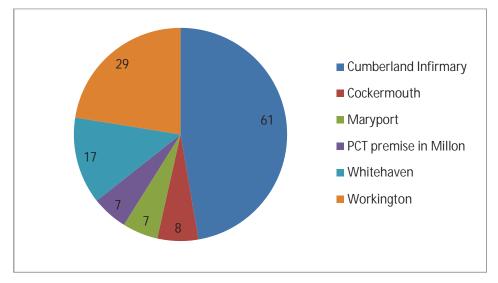


Figure 6.6 Locations where Hospital staff also work

# 6.2.7 How do you usually travel to/from work?

In total, 342 staff indicated the mode of transportation used to travel to and from West Cumberland Hospital. Approximately 80% (271) of respondents stated they travel by car / van as the driver. A small proportion of staff car share to work, with 8% (28) of respondent's car sharing as either the driver or passenger. In addition, 5% (16) of respondents identified they travel by bus to work. Whilst the number of persons travelling via bus is low, it is anticipated the number of staff travelling via public transport would be minimal, given the limited services to and from the hospital.

In addition, 5% of respondents stated walking as their main mode of transportation to and from the Hospital. In total, 0 respondents identified they travel to the Hospital using the Train. This is likely because of the distance from the station to the hospital, whilst the service frequency is low.

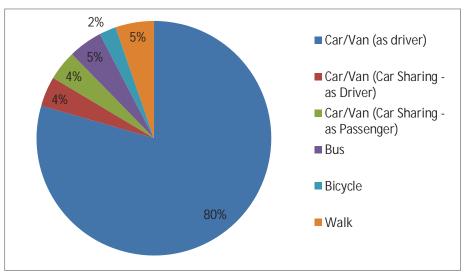


Figure 6.7 Mode of Transport used by Hospital Staff

Approx 80% of staff travel via private car, this figure can be attributed to existing levels of low public transport service provision, as well as the large catchment area of the Hospital, with a number of staff travelling from Seascale, Maryport and Cockermouth.

Measures have been incorporated in this Travel Plan to promote car sharing amongst staff. Measures will also be prepared to target staff living in close proximity to the Hospital. As identified in Planning Policy Guidance (PPG) 13: Transport, walking and cycling are the most important modes of transportation particularly at a local level to replace short car trips. Cycling has the greatest potential to replace car trips particularly under 5 kilometres, whilst walking can replace cars trips under 2 kilometres.

Figure 6.8 below has been prepared illustrating a five and two kilometre catchment from West Cumberland Hospital, which reflects the recommended cycling and walking catchments in PPG13: Transport. In addition, postcodes of staff have been plotted and colour coded to reflect the mode of transport used to travel to and from the Hospital. This will assist the Trust in targeting households living in vicinity to the Hospital that travel via car, to promote modal shift to more sustainable travel.

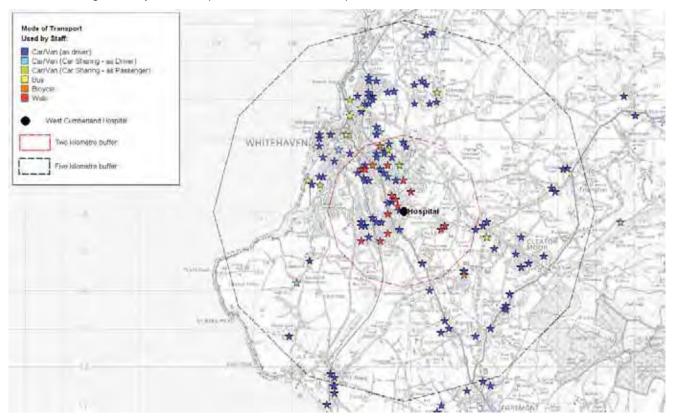


Figure 6.8 Walking and Cycling Catchments for West Cumberland Hospital Staff

The total number of persons residing within both a five and two kilometre catchment area has been calculated, as well as the mode of transport used by these staff to access the Hospital. Table 6.1 presents the modal share for staff within a two kilometre catchment, whilst Table 6.2 shows the modal share for staff within a five kilometre catchment.

Mode of Transport	Total	Percentage
Car / Van as Driver	40	65%
Car / Van (Car Sharing as Passenger)	3	5%
Bicycle	3	5%
Walk	16	26%
Total	62	100%

Table 6.1 Mode of Transport used by Staff living within a 2 kilometre catchment

In total, 62 staff live in a two kilometre catchment from West Cumberland Hospital, as illustrated in Table 6.1. The majority of staff travels via private car, with single occupant car drivers accounting for 65% (40), whilst 5% (3) car shares as a passenger. Given the proximity of the Hospital, walking is a key mode of transport used by staff with 25% (16) indicating they travel via foot to work. Another form of sustainable transport used by staff is via bike; with 5% (3) of staff noted they travel via this mode to work.

Mode of Transport	Total	Percentage
Car / Van as Driver	114	75%
Car / Van (Car Sharing as Driver)	5	3%
Car / Van (Car Sharing as Passenger)	6	4%
Bus	5	3%
Bicycle	5	3%
Walk	16	11%
Total	151	100%

Table 6.2 Mode of Transport used by Staff living within a 5 kilometre catchment

In total, 151 staff indicated they live within a five kilometre radius of West Cumberland Hospital. Table 6.2 presents the modal share for these staff, illustrating the majority travel via private car (75%) to work, whilst 7% (11) stated they car share. A further 11% (16) travel via foot, whilst 3% (5) travel via bike to work. In addition, due to the wider catchment area, 3% of staff travel via bus to the Hospital, as illustrated in Figure 6.8, where the majority of staff travelling via bus commute from Whitehaven Town Centre, where frequent services connect the town centre to the Hospital.

#### 6.2.8 Why do you usually travel to work by car?

Staffs were encouraged to indicate the main reasons why they chose to travel via car to and from work. This would assist the Trust in determine whether measures could be developed to address any staff concerns to promote more sustainable travel.

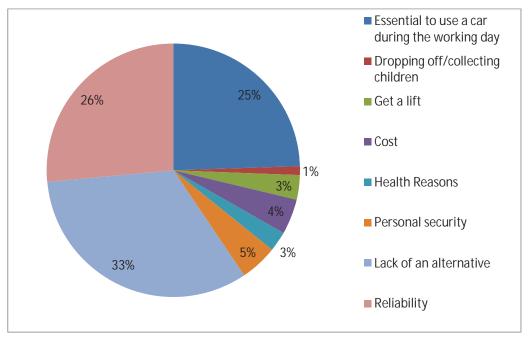


Figure 6.9 Reasons for travelling via car

The results illustrated in Figure 6.9 shows the three key reasons for staff to travel via car are as follows:

- Essential to use a car during the work day;
- Lack of an alternative; and
- Reliability.

The nature of working in a hospital will require staff to use a car as their main mode of travel, particularly for on-call staff. Given the limited bus service provision and the distance from the rail station, 33% of responses are due to the 'lack of an alternative'.

#### 6.2.9 What size engine and type of fuel does your vehicle have / consume?

Staff driving to the Hospital provided the engine size of their vehicle and the type of fuel consumed. The total distance travelled by staff to and from the Hospital was then calculated based upon their residential address, which was provided in the initial question of the survey. The distance travelled, staffs vehicle engine size and fuel type data was inputted to the Defra spreadsheet '2010 Guidelines to Defra / DECC's GHG Conversion Factors for Company Reporting' to generate approx Greenhouse Gas Emissions from staff travelling via car to and from the Hospital.

Industry standard conversion factors have been applied to generate the approximate amount of Carbon Dioxide, Methane and Nitrous Oxide emitted per day from staff commuting via car to the Hospital. The conversion factors as presented in Tables 6.3 and 6.4. The staff responses were broken down per fuel consumption type e.g. petrol or diesel, whilst cars were split into either a small, medium and large engine size category.

Passenger R Conversion Fac			Multiply	CO <sub>2</sub>	CH₄	N <sub>2</sub> O	Total Direct GHG	Total Indirect GHG	Grand Total GHG
Size of car	Total units travelled	Units	х	kg CO <sub>2</sub> per unit	kg CO₂e per unit	kg CO₂e per unit	kg CO₂e per unit	kg CO₂e per unit	kg CO₂e per unit
Small petrol car, up to 1.4 litre engine	794	miles	Х	0.27837	0.00029	0.00154	0.2802	0.0497	0.3299
Medium petrol car, from 1.4 - 2.0 litres	820	miles	х	0.34578	0.00029	0.00154	0.34762	0.06173	0.40935
Large petrol cars, above 2.0 litres	153	miles	х	0.48179	0.00029	0.00154	0.48362	0.08602	0.56964

Table 6.3 Conversion Factors for Petrol Cars

Passenger R Conversion Fac			Multiply	CO <sub>2</sub>	CH₄	N <sub>2</sub> O	Total Direct GHG	Total Indirect GHG	Grand Total GHG
Size of car	Total units travelled	Units	х	kg CO <sub>2</sub> per unit	kg CO₂e per unit	kg CO₂e per unit	kg CO₂e per unit	kg CO₂e per unit	kg CO₂e per unit
Small diesel car, up to 1.7 litre or under	183	miles	х	0.23364	0.00008	0.00267	0.23640	0.04482	0.28122
Medium diesel car, from 1.7 to 2.0 litre	92	miles	х	0.29124	0.00008	0.00267	0.29399	0.05588	0.34987
Large diesel car, over 2.0 litre	193	miles	х	0.39503	0.00008	0.00267	0.39778	0.07578	0.47356

Table 6.4 Conversion Factors for Diesel Cars

Using these conversion factors, the DEFRA tool has generated both the total amount of 'Direct Greenhouse Gases (GHGs)' and 'Indirect GHGs' emitted from cars commuting to and from West Cumberland Hospital. Indirect GHGs is associated with transportation, extraction and the production of fuels that is not owned or reported by the Hospital. The emissions generated have been summarised in **Tables 6.4** and **6.5**.

Size of car	Total Distance Travelled (miles)	Carbon Dioxide (CO <sub>2</sub> ) Emissions	Methane (CH <sub>4</sub> ) Emissions	Nitrous Oxide (N₂0) Emissions	Total Direct Green House Gas Emissions	Total Indirect Green House Gas Emissions	Grand Total Greenhouse Gas Emissions
Size of car	Units	Total kg CO <sub>2</sub>	Total kg CO₂e	Total kg CO₂e	Total kg CO₂e	Total kg CO₂e	Total kg CO₂e
Small petrol car, up to 1.4 litre engine	960	267	0	1	269	48	317
Medium petrol car, from 1.4 - 2.0 litres	828	286	0	1	288	51	339
Large petrol cars, above 2.0 litres	154	74	0	0	74	13	88
Total	1,942	628	1	3	631	112	743

Table 6.4 Greenhouse Gas Emissions for Diesel Cars

The outputs from **Table 6.4** show in total 743 kg of GHGs are emitted from petrol cars travelling to and from the Hospital; 631 kg is associated with direct emissions from staff, whilst 112 kg can be attributed to indirect emissions.

Size of car	Total Distance Travelled (miles)	Carbon Dioxide (CO <sub>2</sub> ) Emissions	Methane (CH <sub>4</sub> ) Emissions	Nitrous Oxide (N <sub>2</sub> 0) Emissions	Total Direct Green House Gas Emissions	Total Indirect Green House Gas Emissions	Grand Total Greenhouse Gas Emissions
Size of car	Units	Total kg CO <sub>2</sub>	Total kg CO₂e	Total kg CO₂e	Total kg CO₂e	Total kg CO₂e	Total kg CO₂e
Small petrol car, up to 1.4 litre engine	371	87	0	1	88	17	104
Medium petrol car, from 1.4 - 2.0 litres	188	55	0	1	55	11	66
Large petrol cars, above 2.0 litres	390	154	0	1	155	30	184
Total	949	295	0	3	298	57	355

Table 6.5 Greenhouse Gas Emissions for Petrol Cars

Table 6.5 illustrates in total 355 kg of GHGs are emitted from diesel cars travelling to and from the Hospital; 298 kg is associated with direct emissions, whilst 57 kg can be attributed to indirect emissions. The outputs will be used as baseline data and following future staff surveys, the Trust will be measure future results against the baseline data. This will assist the Trust in measuring the success of the Travel Plan and its initiatives.

# Car Parking

## 6.2.10 Where do you or the driver usually park the vehicle?

Staffs travelling via car were asked to identify the locations they park their vehicle. In total, 157 stated they parked in the 'car park', whilst 64 noted they used 'staff parking'. A small proportion of staff also identified they used the parking opposite the Hospital on Homewood Road, Maternity car parking and the Mortuary car park.

# 6.2.11 Do you or the people you travel with have a parking permit?

In total, 275 people identified they have a parking permit for use at West Cumberland Hospital, whilst only 6 staff stated they were not in possession of a parking permit. The Trust is planning to review the application process for parking permits, in the near future staff may be required to meet more stringent criteria in order to qualify for a parking permit. This will assist in reducing single occupancy vehicular travel to and the Hospital, whilst promoting more sustainable modes of travel including car sharing, walk, cycle and public transport.

# **Public Transport**

## 6.2.12 If you usually use the bus to travel to/from work, what are the service numbers?

Staffs travelling via bus were asked to identify which service number they used and if they travel via two buses, then staff were asked to identify both service numbers. The results have been summarised in Table 6.6.

Bus Service Number	Bus 1	Bus 2 (if applicable)
22	2	1
30	13	0
31	2	0
67	1	0
68	1	1
300	1	0
301	1	0

Table 6.6 Bus service Numbers

The table illustrates service number 30 is the commonly used service with 13 users. This service provides direct connections to and from the Hospital via Whitehaven and Thornhill. As part of this question, staffs were asked to identify whether they used a travel card when using public transport. In total, 70 persons responded with 66 stating they don't use a travel card.

## Incentives to Promote Sustainable Travel

6.2.13 Which of the following would encourage you to car share for your journey to work?

The survey asked staff to identify whether any potential incentives would encourage staff to car share to and from the Hospital. The survey presented a number of potential incentives and the responses are illustrated in Figure 6.10.

The results illustrate that approx 100 respondents would like assistance in finding a suitable car sharing partner. This could be in the form of a car sharing database, which would be managed by the Trust. Other potential incentives include an emergency lift home, if let down by car sharing partner. In total, 62 staff would welcome transport to be made available by the Trust in this scenario.

Financial incentives would encourage approx 60 staff to car share to and from work. In total, 59 persons stated that reduced car parking charges would be welcomed. Other responses include improved car share website and also reserved car parking would promote car sharing amongst staff.

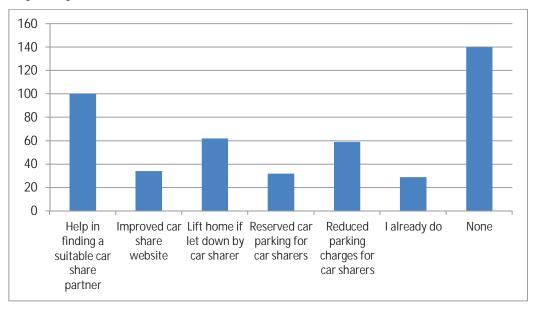


Figure 6.10 Incentives to encourage car sharing

6.2.14 Which of the following (if any) would encourage you to use bus or train for your journey to work? Staff were asked to identify whether any incentives would encourage public transport as part of their journey to and from work. The results have been collated and are presented in Figure 6.11.

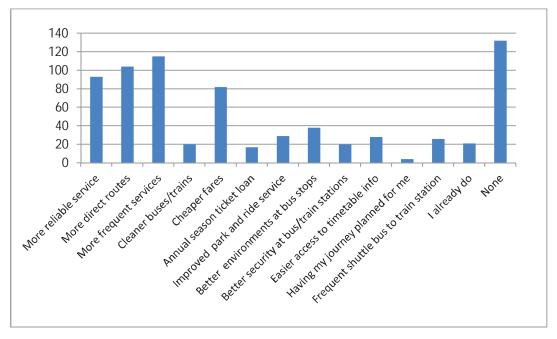


Figure 6.11 Incentives to promote public transport

The results illustrate approx 100 persons have identified the key incentives to promote public transport travel to and from the hospital are:

- More reliable routes;
- More direct routes; and
- More frequent service.

The limited public transport services in Cumbria, particularly to West Cumberland Hospital are reflected in the responses in **Figure 6.11**. The edge of town location, coupled with the distance to the rail station and irregular bus services are a concern for potential public transport users. Staff would also welcome financial incentives to use public transport via cheaper fares.

# 6.2.15 Which of the following would encourage you to cycle for your journey to work?

This question aimed to identify measures to promote staff to cycle to and from West Cumberland Hospital. The feedback indicated that staff would welcome the following initiatives:

- Improved changing facilities and lockers;
- Improved cycle paths / lanes; and
- Improved cycle parking.

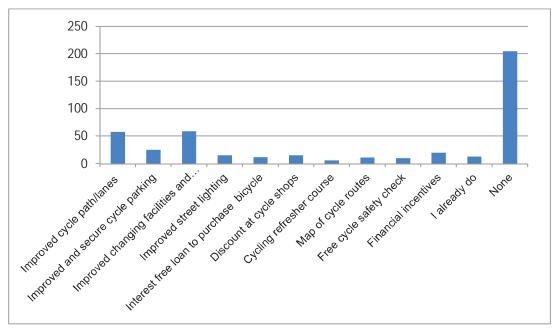


Figure 6.12 Incentives to promote cycling

# 6.2.16 Which of the following would encourage you to walk for your journey to work?

Staff were asked whether any measures would potentially encourage people to walk as part of their journey to and from the Hospital. A significant number stated that no measures could promote them to walk, a number of staff noted that often they require their vehicle for work or staff they live too far from the Hospital.

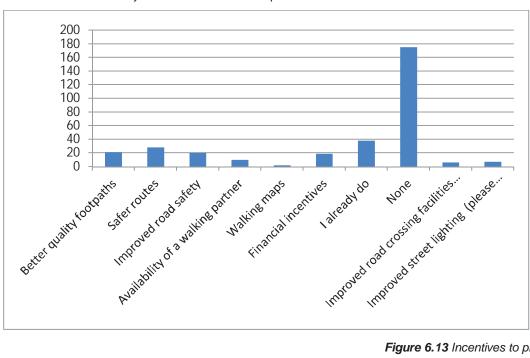


Figure 6.13 Incentives to promote walking

## 6.2.1 Do you have any comments that might encourage you to walk, cycle or use public transport for your journey to work?

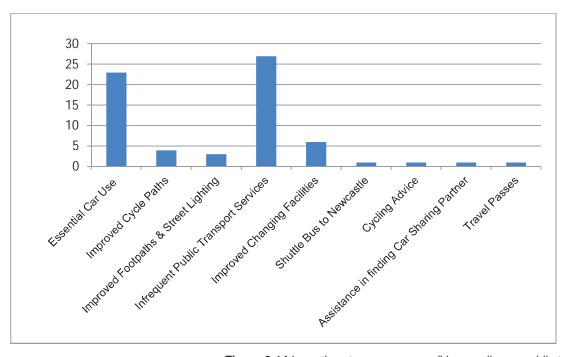


Figure 6.14 Incentives to encourage walking, cycling or public transport use

Staff provided feedback with regards to potential initiatives to could encourage more persons to either walk, cycle or use public transport as part of their journey to work. The responses have been collated and summarised in **Figure 6.14**. The results illustrate that 27 persons stated the existing public transport service provision is not sufficient. The most frequent concerns were regarding bus service provision was not regular, in particular during the morning peak periods and during shift changes.

Approx 23 respondents identified that it is essential they travel by car to and from work. The feedback from staff included the need to use the car to drop off and pick up children and the requirement of the car for work purposes. A small proportion of staff welcomed improvements to changing facilities including lockers, showers and a drying room, to encourage more persons to walk or cycle to work.

## 6.3 Conclusion

The responses provided by staff at West Cumberland Hospital will assist the Trust in developing a successful Travel Plan. The results of the survey will provide an understanding of the existing travel behaviour of staff, whether any issues or barriers exist that restrict sustainable travel and to identify and initiatives that could reduce vehicular travel. The key findings from the survey are as follows:

- 65% of staff arrive during the AM Peak Period (07:30 09:00);
- 129 (38%) respondents stated they work in other NHS premises in Cumbria, with 61 working in Cumberland Infirmary;
- 80% of staff travel via car to work, a further 8% of staff car share, 7% walk or cycle and 5% travel via bus;

- An exercise to calculate amount of GHG emitted from staff travelling to work via car identifies approx 1,098 kg of GHGs emitted per day;
- Approx 100 respondents identified that assistance in finding a car sharing partner would encourage them to car share, whilst financial incentives and a lift home if let down by car sharing partner would also be welcomed;
- Over 100 staff identified the need for more direct and increased public transport service provision; and
- Improved changing facilities, storage and cycle routes would encourage more staff to travel via bike.

# 7 Aims, Objectives and Measures

### 7 Aims, Objectives and Measures

#### 7.1 Introduction

Key targets and aims for the Travel Plan have been developed following discussions with the Travel Plan Coordinator, whilst the results of the travel surveys will identify targets for monitoring and review.

### 7.2 **Aims**

The aims are intended to be in line with Cumbria County Councils Transport Policy and support the achievement of the targets outlined in LTP2. The aims of the Travel Plan are:

- To improve the permeability of the hospital for all persons accessing and exiting the site;
- To increase the number of staff, visitors and patients travelling by public transport;
- To increase the number of staff, visitors and patients travelling by sustainable transport (bicycle and walking); and,
- To reduce the number of staff, visitors and patients travelling by car, particularly single occupancy travel.

#### 7.3 **Objectives**

The three objectives listed below generally contain the 'softer' measures for this Travel Plan which encourage the change from car use to sustainable travel behaviour and achieve the aims behind this Travel Plan. Examples of 'softer' measures include developing walking groups, cycle mileage and reduced fares on public transport.

Objectiv	Objective 1: Reduce the need to travel by car and promote alternatives					
Target: To increase the numbers of staff, visitors and patients walking, cycling or travelling via public transport.						
Action	Method	Responsibility/Ownership	Timescale			
Stage 'Walk to Work' events	Discuss in TP Steering Group to widen involvement in national event	TP Co-ordinator TP Department Champion	Of immediate effect			
		TP Co-ordinator				
Develop walking/cycling groups	Discuss in TP Steering Group	TP Department Champion	Of immediate effect			
		TP Steering Group				
Develop and investigate the potential for providing public transport season tickets for staff	Discuss in TP Steering Group	TP Co-ordinator	Of immediate effect			
Find a 'buddy' and have a staff	Discuss in TP Steering Group	TP Co-ordinator	Within 3 months of			
car share week	Information to be presented on Hospital Intranet	TP Department Champion	Plan approval			
Encourage use of a Car Share website for staff, visitors and patients such as www.sharedwheels.co.uk or develop a dedicated website specifically for hospital staff.	TP Co-ordinator to encourage all persons to register to the website. Information to be presented on hospital intranet and posters. Review Sister hospital scheme	TP Co-ordinator TP Department Champion	Within 3 months of Plan approval and review of questionnaires			

Monitor use of parking spaces and allocate priority parking for disabled and car share users	Discuss at Board Meeting  Discuss in TP Steering Group	TP Co-ordinator Estates Services	Of immediate effect
Review of existing car parking charges to encourage sustainable travel and raise revenue for re-investment in sustainable travel initiatives	Discussion with Trust's Board Discuss in TP Steering Group  Liaise with CCC regarding the potential for movement on-street and appropriate regulation measures.	Trust's Board Estates Services TP Co-ordinator CCC Advisor Car Parking Working Group	Within 3 months of Plan approval
Review criteria for application process for new permit and renewals.	Discussion with Trust's Board Discuss in TP Steering Group	TP Co-ordinator	Within six months of approval of Plan.
Reviewing Number of staff parking spaces	Health Technical Memorandum 07 – 03	TP Co-ordinator	Within six months of approval of Plan
Promote Park and Ride Scheme  – building on previous undertakings	Continued discussions with LPA and Bus Operator	TP Co-ordinator	Within six months of approved Plan
Undertake surveys of visitors and patients (Template in Appendix B)	Discussion with Trust's Board Discuss in TP Steering Group	TP Co-ordinator	Within 6 months of Plan approval

Objective 2: Increase and enhance walking and cycling facilities							
Target:							
	To increase the number of po	ersons cycling to work;					
Action	Action Method Responsibility/Ownership Timescale						
		TP Co-ordinator					
Increase the number of cycle stands on site	Review available funding.	Estates Services	Completed				
		Trust's Board					
Cycling Awareness Campaigns	Distribute cycling promotional material.  Promote events on hospital intranet and on posters throughout the site for visitors and patients.	TP Co-ordinator TP Department Champion	Of immediate effect				
Conduct in-work cycle maintenance checks	Develop relationship with a local bike shop.	TP Co-ordinator	Of immediate effect				
Identify and agree with the Council 'Safer Cycle Routes' to the hospital	Meeting with Councils Advisor and TP Co-ordinator	TP Co-ordinator	Within 3 months of Plan approval				
Provide improved facilities for staff including cycling lockers, drying rooms and showers	Funded through Hospital Capital Programme.	TP Co-ordinator  Trust's Board	Within 3 months of Plan approval				
Review the Cycle to Work and	Discuss in TP Steering Group	TP Co-ordinator					

Guarantee Scheme, the existing uptake and potential to further promote the scheme,			Of immediate effect
via posters and on the hospital intranet.			
Train the TP Co-ordinator in	Liaise with Councils TP Advisor and make suitable	TP Co-ordinator	When TP Co-
Personalised Travel Planning	arrangements for training to be administered	CCCs TP Advisor	ordinator in post

Objective 3: Link the TP with other initiatives							
	Target:						
To enc	ourage a healthy lifestyle amongs	st staff, visitors and patients.					
Action	Method	Responsibility/Ownership	Timescale				
		TP Co-ordinator					
Assess contribution of TP to environmental objectives	Linked meeting between Environmental Steering Group and Travel Plan Steering Group	TP Steering Group	When TP Co- ordinator in post				
	3 - 11	TP Department Champion					
Promote health benefits of regular exercise including walking/cycling as part of daily routine	Discussions with TP Steering Group and member of Occupational Health  Promotion of this on the intranet for staff and posters across the	Occupational Health Member TP Co-ordinator	Of immediate effect				
Promote and distribute	hospital for patients and visitors  Discussions with TP Steering		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
pedometers to encourage staff to adopt a healthy lifestyle	Group and member of Occupational Health.	TP Co-ordinator	When TP Co- ordinator in post				
		TP Co-ordinator					
Presentation of TP ideas to staff.	Discussions at Board Meeting which is filtered through to TP Steering Group	TP Steering Group	When TP Co- ordinator in post				
		TP Department Champion					

**Monitoring and Review** 8

### 8 Monitoring and Review

#### 8.1 Introduction

The Travel Plan is intended to be a living document, to be reviewed and amended on a regular basis by the Travel Plan Coordinator. The Trust is committed to the Travel Plan process and will endeavour to ensure that the aims and objectives are delivered for the benefit of the whole community.

#### 8.2 **West Cumberland Hospital Targets**

- To improve the permeability of the hospital for all persons accessing and exiting the site;
- To increase the number of staff, visitors and patients travelling by public transport;
- To increase the number of staff, visitors and patients travelling by sustainable transport (bicycle and walking);
- To reduce the number of staff, visitors and patients travelling by car, especially single occupancy private travel; and,
- To increase the availability and use of teleconferencing and video conferencing for meetings reducing the need to travel.

#### 8.3 **Multi Modal Targets**

The Census 2001, Journey to Work identifies the modal split for persons travelling to the Outputs Area that the hospital lies in. These figures will provide an initial set of baseline targets for the plan. Staff surveys have also been undertaken and the modal share results have been included in Table 8.1. The results of the mode share will be used alongside the 2001 Census data to determine indicate modal share targets for staff working at the Hospital.

Mode	2001 Census	Staff Survey Results	Indicative Staff Targets
Car / van (as driver)	75%	80%	69%
Car / van (car sharer as driver)	-	4%	6%
Car / van (as passenger)	9%	4%	6%
Walking	7%	5%	7%
Bus	5%	5%	7%
Train	1%	0%	1%
Bicycle	1%	2%	4%
Other	2%	0%	0%
Total	100%	100%	100%

Table 8.1 Modal Share Targets

The results from the staff surveys indicate approx 80% of staff travel to work via private car, whilst 4% car share as the driver and a 4% car share as the passenger, in total 88% of staff travel via car. With 1,565 at West Cumberland Hospital, the results of the survey indicate approx 1,377 staff could be travelling by car to work, either privately or via car sharing, however the staff responses are indicate from a reflective sample.

Modal split targets have been presented in Table 8.1 to underline the Trusts aim of reducing the number of single occupancy car drivers, whilst increasing both the number of car sharers and staff travelling by sustainable modes of transport. The measures presented within this Travel Plan will aim to reduce the percentage of staff travelling via car to the Hospital from 88% to 81%. A 7% reduction of staff travelling via car will assist in alleviating parking issues on site.

A significant number of Hospital staff work split shifts, therefore the benefits of a reduction in vehicles at the site would be enjoyed throughout the day, not simply during the morning and evening peak periods.

The modal share targets are indicative and will be subject to on-going review and monitoring as the Travel Plan and accompanying measures are progressed. The Trust will look to set further stringent targets for the long term, with a view of reducing the number of staff, visitors and patients travelling by single occupancy vehicle.

#### 8.4 **Car Parking Management**

## Management and Enforcement

The allocation and availability of parking often directly contributes to the number of single occupancy car journeys. To ensure the site delivers the goals and target of the Travel Plan, modal share targets have been established by using available Census data and by also reviewing the Car Parking Assessment Tool (Figure 8.1). By using this tool, the Trust can also gain an appreciation of the wider needs of users, whilst looking to identify if spaces can be reallocated or removed.



Figure 8.1 'Health Technical Memorandum 07 – 03' (Department of Health, 2006), Car Parking Assessment Tool

The hospital car park is enforced by the Trust, to minimise car parking and traffic management issues occurring on site. The objective of the Trust is to ensure that the car parking enforcement does not penalise one-off offenders who may be patients or visitors. Car park enforcement officers target those who continually commit parking offenses on site. Wheel-clamping is in operation at the site, however this is generally a last resort of the Trust, appreciating the often distressed nature of patients or visitors purpose for visiting the hospital.

Where repeated parking offenses occur, a serving of notice and wheel clamping will be issued to the offending vehicle and driver. Offenders will be distributed a ticket if one of the following offenses is committed:

Failure to park in a designated bay,

- Failure to provide the required permit within a required zone,
- Failure to pay and display a valid ticket,
- Failure to display a valid disabled badge when parking in a disabled users only parking bay,
- Extended parking beyond the expiry of a ticket,
- Parking on red lines and in restricted zones that impends the access of emergency vehicles, and;
- Parking on yellow lines, hatched areas, pavements or grassed areas.

The vehicle clamp release is £80, when a vehicle is parked in an inappropriate location, an enforcement officer will however firstly record the details of the vehicle and undertake a check to determine whether previous offenses have been committed and recorded. In no offense has previously been recorded, then the vehicle will not be clamped, however a notice will be left with the vehicle. If the driver has been recorded as committing previous parking offenses, then the vehicle will be clamped by the Trust.

On occasions, vehicles will need to be removed if they are blocking or impeding the access for emergency vehicles. If this occasion arises, the vehicle may be removed from the area to a suitable location on or off site. Permission to remove the vehicle will be required by the car park manager and an appropriate member of the Trust beforehand.

#### 8.4.2 Security

Security measures are currently enforced and will be implemented within the redevelopment proposals for the Hospital. The onsite car park has been awarded ParkMark status, an initiative of the Associations of Chief Police Officers, which is awarded to parking facilities that have met the requirements of a risk assessment conducted by the police. The ultimate aim of this scheme is to reduce both the threat of crime and fear in parking facilities. Car parking patrols and CCTV are currently in operation within the site and will also be on site following the redevelopment of the Hospital.

#### 8.5 **Monitoring Process**

The purpose of an annual review is to:

- Monitor progress against set targets;
- Revise the Travel Plan to ensure it reflects best practice and the latest initiatives; and
- Conduct a detailed travel questionnaire annually to determine modal shift and identify which solutions are effective and what measures are required. This will also provide an opportunity for staff to make comments on the development and implementation of the Travel Plan.

#### 8.5.1 Frequency

Once it has been decided that the Travel Plan has been successfully implemented, it will be necessary to review the plan on an annual basis. This will allow for continuous appraisal and to investigate travel patterns associated with all the new staff of the hospital.

The Travel Plan Co-ordinator will determine the most suitable way to undertake annual reviews to achieve the greatest response rate. Online surveys are recommended as they can easily be filled in by the majority of staffs. Postal surveys and distribution of survey forms by receptionists will be required to engage staff. The Travel Plan Steering Group should be involved in the development of the annual review questions. Table 8.2 details the key review dates and actions to be undertaken following approval of the Travel Plan.

Review Date	Action	
Within three months	Liaise with Local Planning Authority (LPA)Travel Plan Co- ordinator (TPC), discuss annual travels survey	
Within six months	Survey template for staff to be finalised	
Within nine months	Distribution of d staff surveys	
Within one year	Review results of surveys, produce annual report and agree modal share targets with LPA TPC	

Table 8.2 Key Review Timescales, (All dates will be appraised on a regular basis by the Travel Plan Co-ordinator)

9 The Way Forward

### 9 The Way Forward

#### 9.1 Summary

The Trust is committed to reducing traffic congestion in and around West Cumberland Hospital through the implementation of an effective Travel Plan. The Plan proposes a series of measures and initiatives to alleviate issues that currently exist on site and promote healthier forms of travel for staff, visitor and patients of West Cumberland Hospital.

#### 9.2 **TP Steering Group**

The roles required in the Steering Group include:

- Travel Plan Co-ordinator;
- Department Champions (nominated);
- Cumbria County Councils Travel Plan Co-ordinator; and,
- Member of Trust's Board.

It is important that this Steering Group is proactive and progresses travel initiatives. In the first instance, it is the responsibility for the Travel Plan Co-ordinator to collate information and take this forward into the workplace. 'Bike to Work' weeks must be advertised and encouraged; the provision of car sharing database should be readily available for staff to use. The use of the hospital intranet would be one successful start to this specific initiative. The most successful travel plans are those that take initial Travel Plan documents (like this one) as outlined and begins to develop their own elements of the plan over time.

The Steering Group should be responsible for:

- Incorporating the TP into the hospital's development plan;
- Progressing and encouraging sustainable travel initiatives;
- Involving the Trust's Board in the process and option identification; and,
- Supporting internal and external travel initiatives.

#### 9.3 **Annual Travel Plan Review**

A Monitoring Progress Report will be required once the West Cumberland Hospital Travel Plan is in place. This will be to assess the progress made towards achievement of the targets. This document should be reviewed annually. The Travel Plan Coordinator is the most important part of ensuring this Travel Plan is successful. The Travel Plan Steering Group is also an integral part of this process, together with a Department Champions being nominated to make sure that actions and plans are being carried forward. The staff travel survey should be undertaken annually to determine modal shift and success of the measures.

# Appendix A – Staff Travel Questionnaire

# Appendix A – Staff Travel Questionnaire

# Appendix B – Patient and Visitor Travel Questionnaire

# Appendix B – Patient and Visitor Travel Questionnaire

# Appendix C – Parking Permit Application Form

Appendix C – Parking Permit Application Form

## Appendix D – Traffic Accident Statistics

Appendix D – Traffic Accident Statistics

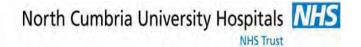




#### APPENDIX D STAFF SURVEY AND PATIENTS & VISITORS SURVEY









#### North Cumbria University Hospitals NHS Trust – Staff Travel Survey 2014

Hospital activity uses a lot of energy, whilst we don't want to cut back on what we do, we do want to cut our carbon footprint in the near future. To assist with the Hospitals Travel Plan, we are identifying where practical improvements can be achieved that will allow staff to help us reduce our carbon footprint in providing a more sustainable Hospital.

We need up-to-date information on people's travel routines and what affects their decisions. This questionnaire takes around five minutes to fill in. No individual responses will be identified in the analysis and your answers will not be passed onto any third parties, all responses will be treated with the strictest confidentially.

SECTION A VOILAND VOLID ODC ANICATION

	SECTION A	- TOU AND T	OUR ORGANISATION	
1.	Name			
2.	Where do you usually start your jo	ourney to work?		
	Postcode			
3.	At what time (approximately) do yo (Please use a 24 hour clock)	ou usually leave	(from Q1) to travel to work?	
4.	Which site are you based at? (Pleat West Cumberland Hospital			
	Cumberland Infirmary Carlisle			
5.	What is your occupation?			
	Doctor		Management	
	Administration / Clerical		Nurse/Midwife	_
	Ancillary		Professions allied to medical	
	Estates			
6.	How many days do you usually wo	ork at your base	site? (Please tick one only)	
	4 or more days a week		Once a month	
	2 to 3 days a week		Rarely	
	Once a week		Never	
	Once a fortnight			
7.	Do you travel anywhere else durin	a vour working (	dav?	
	Yes		No	
8.		in Cumbria, hov	w many days would you usually work at this l	ocation?
	4 or more days a week		Once a month	
	2 to 3 days a week		Rarely	
	Once a week		Never	
	Once a fortnight			

9.	How do you usually travel to/from work?(Please tick ONE mode only	<i>')</i>			
	Car/Van (as driver)				
	Car/Van (Car Sharing – as passenger)  Motorcycle				
	Train		$\overline{\Box}$		
	Bus		$\overline{\Box}$		
	Taxi				
	Bicvcle				
	Walk				
	Other (alegae angrifu)				
	Other (please specify)		_		
10.	Why do you usually travel to work by car? (Please tick all that apply)				
10.	Essential to use a car during the working day .	Health reasons			
	Dropping off/collecting children	Personal security	_		
	Get a lift	Lack of an alternative			
	- · · · · · · · · · · · · · · · · · · ·				
	Cost	Reliability			
	Other (please specify)				
4.4					
11.	What size of engine and type of fuel does your vehicle have / consu				
	Engine Size Fuel				
12.	Do you car share?				
12.			П		
			_		
	SECTION B - PARKING (Car/Van/Motorcy	olo Heore)			
	SECTION B - PARKING (Call Valil Mictorcy	cie Oseis)			
1.	Where do you or the driver usually park the vehicle?				
	Please Specify Location				
	Tiease openity Location				
2.	Do you or the people you travel with have a parking permit?				
۷.					
			_		
	SECTION C - PUBLIC TRANSPORT (Bus/T	rain Users)			
		,			
1.	If you usually use the bus to travel to/from work, what are the service numbers?				
	(Please give up to two bus services - if applicable)				
	Bus 1				
	Bus 2				
2.	Do you usually use a travelcard or other type of pass when travelling	ng to work by public transport?			
	Yes No				
	_	_			

	SECTION D - ALTERNATIVE MOD	ES OF TRANSPORT	
1.	Which of the following modes of transport (if any) do yo	u occasionally use instead of your main mo	de?
	Car/Van (as driver)	Walk	
	Car/Van (Car Sharing – as driver)	Bus	
	Car/Van (Car Sharing – as passenger)	Taxi	. 🗖
	Motorcycle	Bicycle	
	Train	,	
	Other (please specify)		
			_
	SECTION E - INCENTIVES TO USE A	ALTERNATIVE MODES	
1.	Which of the following (if any) would encourage you to (		
	Help in finding a suitable car share partner		
	Implement car share website		
	Alternative lift home if let down by the car sharer		$\overline{\Box}$
	Reserved car parking for car sharers		
	I already do		
	None		
	Other (please specify)		
			_
2.	Which of the following (if any) would encourage you to ι	use BUS or TRAIN for your journey to work?	?
	More reliable service		_
	More direct routes		
	More frequent services		
	Cleaner/smarter buses/trains		
	Cheaper fares		
	Annual season ticket loan		
	Implement park and ride service		
	Better quality waiting environments at bus stops		
	Better security at bus, train stations		
	Easier access to timetable information		
	Having my journey planned for me		
	I already do		
	None		
	Other (please specify)		ш
3.	Which of the following (if any) would encourage you to 0	CVCLE for your journey to work?	
J.	Improved cycle path/lanes on the journey to work		
	Improved and secure cycle parking at your workplace		
	Improved changing facilities, showers and lockers at work		
	Improved street lighting		
	Information on how to join the Bike to Work Scheme		
	Discount at cycle shops		
	Cycling refresher course		
	Map of cycle routes		
	Free cycle safety check		
	Financial incentives		
	I already do		
	None		
	Other (please specify)		

4.	Which of the following (if any) would encourage you to WALK for your journey to work? (Please tick all that apply)	
	Better quality footpaths	П
	Safer routes	
	Improved changing facilities, showers and lockers at work	
	Improved road safety	
	Availability of a walking partner	=
	Walking maps	
	Financial incentives	<u> </u>
	l already do	
	None	
	Improved road crossing facilities (please specify location)	
	Improved street lighting (please specify location)	
	Other (please specify)	
	SECTION F - ANY COMMENTS	
	OLOTION 1 7 M 1 OO MINILATIO	
1.	If you have any other comments (for example changes to facilities or services) that might encour you to walk, cycle or use public transport for your journey to work, please write in the space below.	_
	SECTION G - ABOUT YOU	
1.	Do you have a long-term illness or disability which affects your travel arrangements?	
	Yes No	
2.	Do you normally work: (Please tick one only)	
	Normal working day (e.g. 08:00 - 16:00, 09:00 - 17:00, 10:00 - 18:00 etc)	
	Day shifts (e.g. mornings/afternoon)	
	Out of hours (e.g. night shifts)	
	On Call / Standby	
	District Physicists	
	Other	
3.	Are you interested in being involved in improving Green Issues in the N.C.U.Hs NHS Trust:	
	Yes	
4.	If yes, could you leave your contact details.  Name:	
	Telephone:	
	Email:	

Thank you for completing this questionnaire and the results will be treated with the strictest of confidentiality.







### West Cumberland Hospital and Cumberland Infirmary Patients and Visitors Travel Questionnaire

North Cumbria University Hospitals NHS Trust is working alongside Cumbria County Council to develop a successful Travel Plan. The key aims of the Travel Plan are to reduce congestion, increase safety and improve the local environment by encouraging staff, visitors and patients to consider healthier alternative modes of travel to the car.

The questionnaire will help us better understand travel patterns to/from the hospital, problems which exist on routes to the hospital, and enable the identification of measures/initiatives to enhance the journey to and from the hospital.

ווטווו נו	не поѕрна.	
	About Yourself	
1.	Name:	
2.	Address	
3.	How frequently would you attend West Cumberland Hospital:	
	More than once a week Once every two weeks Once a year	
	Once a week Once a month	
	About Your Journey	
1	Origin of Journay (include past code)	
4.	3	
5.	Time of Departure ————————————————————————————————————	
6.	Time of Arrival	
7.	How did you travel to the hospital? (please tick one main method)	
	Car (as driver) Car (as passenger) Rail	
	Bus Cycle Taxi	
	NCAS L	
	Other, (please specify)	
	Questions for the persons who travelled via car to hospital	
8	Reasons for travelling to the hospital via car?	
0.		
	Essential Use Security Dropping off/collecting children Car Sharing	
	Lack of Alternative Car Sharing	
	Other (please specify)	

On site – please specify:			_  _
external car park – please specify:  Other – please specify:			-  -
The product specify.			
Questions for the persons	who travell	ed to hospital that didn't travel by ca	ır
0. Which of the following (if any) wου the hospital?	ıld encoura	age you to use BUS or TRAIN for you	r journ
More reliable service		More direct routes	
Nore frequent services		Cleaner / smarter buses / trains	
Cheaper fares		A park and ride service	
Setter quality and waiting environment		None	
Other (please specify)			
1. Which of the following (if any) woບ hospital?	ıld encoura	age you to CYCLE for your journey to	o the
mproved cycle lanes to the hospital		Improved street lighting	
nproved & Secure parking		Map of cycle routes	
lone		Other	
2. Which of the following (if any) wοι hospital?	ıld encoura	nge you to WALK for your journey to	the
Setter quality footpaths		Safer routes	
mproved road safety		Other	
3. If you travelled by bus, which serv	ice numbe	r did you travel on?	
4. Which bus stop did you get dropp	ed off at?		
lomewood Road		Egremont Road	
nk you for completing this question	naire, pleas	se provide any additional comments	s in the
below.			





### APPENDIX E CARBON FOOTPRINT – CALCULATIONS AND METHODOLOGY







This appendix sets out the methodology and calculations used for to determine the amount of CO<sub>2</sub> generated by travel.

The preferred method of assessing any impact on CO<sub>2</sub> resulting from a change in the number of trips made by car is to use or create an emissions model. The model would allow the appropriate delays and journey times to be assigned to each tip and provide a more accurate measure of any change. Due to time and budget constraints an estimated measure has been derived by making assumptions about the distribution of trip lengths, average speeds and the constitution of the fleet of vehicles use to make the trips. A description of the methodology used is below:

- The number of drivers for 2014 was provided by the answers to the questionnaire.
- The trip distances were calculated by making an assumption that the distribution of lone drivers in each trip
  distance range available in the questionnaire (The distance I travel (home-to-work) is :) has a normal
  distribution. These trip distances were multiplied by two to represent both the work-bound and homebound
  journeys.
- The constitution of the fleet was determined by the responses provided to the questionnaires, which allowed the ratio of petrol and diesel drivers and the make-up of engine sizes for each fuel type to be determined.
- The levels of CO<sub>2</sub> emissions, averaged over all speeds, for both petrol and diesel cars per kilometre, were gathered from the Department from Environmental Food and Rural Affairs (Defra). These levels are revised figures issued in the 2009 update.
- The above factors were combined to provide an estimated daily figure in tonnes. This figure was then annualised. The figure calculated was only representative of the 12% of people who responded to the relevant questions within the questionnaires; therefore the annualised figure was then factored to be representative of a 100% response rate.

