

Sustrans Cymru's response to

**Designed to Deliver:
Shaping our Acute Hospitals
in Mid and West Wales**

Consultation Document

June 2006

1 Introduction

1.1 What is Sustrans

Sustrans is the charity behind the National Cycle Network, Safe Routes to Schools, Bike It and many other projects aimed at getting people out on their feet and bikes.

Sustrans believes that changes to the environment, making it easier, safer and more attractive to walk and cycle, can bring about major change in the travel choices people make. Incorporating active travel – walking and cycling – into the daily routine can make a major contribution to better public health. Thus, it can help improve people's health by reducing coronary heart disease, stroke, diabetes, cancer and obesity, and improving mental health and well being. Our own practical work and that of others are producing evidence to this effect.

Sustrans welcomes the opportunity to take part in this consultation on 'Designed to Deliver: Shaping our Acute Hospitals in Mid and West Wales.' If you have any questions regarding the issues raised in this document, please don't hesitate to get in touch.

1.2 The policy background

The Welsh Assembly Government's strategy for healthcare for the next ten years is set out in 'Design for Life.' It sets out an approach to designing health care services – which has been used by the authors to mould the proposals of 'Designed to Deliver: Shaping our Acute Hospitals in Mid and West Wales – A Consultation Document.'

In addition to the points raised in this consultation document, the philosophy behind Design for Life is to focus on health and wellbeing, not illness. The efforts of the Assembly Government, the NHS, local authorities, their partners, the community and individuals will be to

- use every opportunity to promote healthy communities
- empower individuals to take responsibility for their own health.

Design for Life states that Community Strategies and Health Social Care and Well Being Strategies will help ensure that service changes mesh with developments in areas such as housing and transport. This is an important point which we will return to later (see section 2.3).

Design for Life also states that in response to the Assembly's commitment to Sustainable Development, the NHS will have a positive impact on issues such as employment, purchasing, waste, travel and energy efficient buildings.

In terms of levels of care, Design for Life wants to strengthen the services provided to people at home or in their community. There will be a linking together of practices into primary care networks that will ensure that the fullest range of specialist, diagnostic and therapeutic services will be available in communities. Again this is something that Sustrans would support.

In terms of the wider policies that need to be considered in developing a Design to Deliver the following are relevant:

- The Walking and Cycling Strategy for Wales (December 2003)
- The Environmental Strategy for the National Health Service (April 2002)
- Healthcare Standards for Wales: Making the Connections Designed for Life (May 2005)
- Health at Work; The Corporate Health Standard (2005)
- and further Designed for Life targets

1.2.1 The Walking and Cycling Strategy sets targets up to 2010 which include:

- Increasing the levels of walking and cycling through promotion and provision of facilities
- Reflect the higher priority for walking and cycling in cross cutting policies, guidance and funding

1.2.2 The Environmental Strategy for the National Health Service has set NHS targets which include:

- Produce transport policies and strategies
- Undertake a transport survey
- Involve all parties, unions etc
- Liase with public transport co-ordinators
- Liase with Local Authorities
- Consider partnership arrangements
- Set targets benchmarks

1.2.3 Healthcare Standards for Wales: Making the Connections Designed for Life has two domains of particular relevance.

The first sets a standard where “Healthcare will be provided in environments that promote patient and staff wellbeing.” It specifically wants:

- Standard 2 - The planning and delivery of healthcare should “ensure equity of access to services.”
- Standard 3 - Healthcare premises are well designed and appropriate in order to promote patient and staff well being.

The fourth domain wants “Healthcare organisations [to] collaborate with relevant organisations and local communities to ensure the design and delivery of programmes and services to promote, protect and improve health.” It specifically wants:

- Standard 32 - Healthcare organisations achieve the Corporate Health Standard, the national quality mark for workplace health, moving to a higher level on reassessment.

1.2.4 An additional target within Designed for Life set the following targets by March 2008:

- All LHB's and NHS Trusts will achieve the gold or platinum standard level of the Corporate Health Standard, the national quality mark for the development of workplace health.
- All NHS Trusts will have in place an approved health promotion strategy covering services and staff.

2 Background Issues

2.1 The NHS and its impact on Transport, Health and the Environment

Badly managed transport arrangements can lead to local congestion and poor on site parking. This can result in missed appointments, road traffic accidents, difficult ambulance access and parking problems for local residents. By effectively managing transport issues in and around NHS sites, the problems for ambulances, patients, visitors, staff, suppliers and contractors can be minimised. At present, staff, patients and visitors to the NHS travel over 25 billion km a year. Over 80% of these trips are made by private car¹.

The NHS in Wales has the opportunity to influence the health of staff, visitors and patients, by encouraging a more sustainable approach to transport. The health impacts of unsustainable travel are as follows:

- direct pollutants released from traffic. Pollution-related admissions are estimated to cost the NHS between £17-£60m each year².
- people being injured or killed as a result of traffic accidents. Annually, 3500 people are killed, 34,000 seriously injured and 250,000 injured on the roads in Britain³.
- low levels of physical activity as drivers and passengers spend more and more time inactive in their vehicles. The direct and indirect costs on the Welsh healthcare system due to low levels of physical inactivity are estimated at £500 million per annum⁴.
- Carbon dioxide emissions from transport are the fastest growing contributor to climate change – at present transport in Wales produced a quarter of all our climate change emissions⁵.

The government itself has estimated that as much as 5% of all UK transport is generated by the NHS⁶. Any efforts by the NHS in Wales to minimising the number and distance of journeys made by single-occupancy cars, by carefully selecting where services are situated in relation to the communities they serve, can have a significant impact.

Furthermore, Welsh NHS Trusts have a duty under the Walking and Cycling Strategy, Design For Life, the NHS Environmental Strategy, Healthcare

Standards for Wales and the Corporate Healthcare Standard to promote walking, cycling and public transport onto their sites.

By addressing both issues of promoting local services and improving sustainable transport access, pressure on health service as a whole will be reduced.

2.2 Personal Travel and Access

According to the 2001 Census⁷ Neath Port Talbot has the highest proportion of households in Mid and West Wales with no car or van, 30.2%, well above the average for Wales of 26%.

The number of households in the remaining local authority areas: Swansea 28.5%; Bridgend – 25.6%; Carmarthenshire - 23.1%; Pembrokeshire – 21.7%; Ceredigion – 19.5%; and Powys – 17.5%.

The Townsend Index uses proportion of households with no car as an indicator of deprivation, a wider determinant of good health and healthy lifestyle.

It is not inconceivable that those individuals living within deprived communities, and more likely to suffer ill health as a result, may be unable to access certain levels of healthcare as they don't have access to a private car. With this in mind, it seems reasonable to accept that every effort is made to make it easier for those people to access a reorganised healthcare system that primarily relies on sustainable transport and is therefore accessible to all.

Similarly, the ability of friends and family being able to visit these individuals as they become patients will be that much harder if transport plans to and from their healthcare are based purely on the assumption that any travel will be made by private transport.

2.3 Health Social Care and Well Being Strategies or Community Strategies

According to Design for Life, Community Strategies and Health Social Care and Well Being Strategies will help ensure that service changes mesh with developments and needs at a local level with housing and transport.

The Health Social Care and Well Being Strategies of the local authorities in Mid and West Wales identify transport, accessible services, healthier workplaces, increasing physical activity levels and environmental conservation as either key themes or priorities.

In terms of the Community Strategies in each authority area, the following priorities have been identified over long periods of consultation with partners. Namely:

- Transport – which is accessible, safe, convenient, sustainable and reduces inequalities and social exclusion.
- Choosing healthier lifestyles either as individuals or within the workplace
- Health to increase people's exercise levels

- Promote alternative forms of transport such as walking and cycling, coordinated by effective travel plans.
- Road Safety
- Conserving and enhancing the environment

The strategic aims of both local Community and local Health Social Care and Well Being Strategies need to be taken into account when developing “Designed to Deliver: Shaping our Acute Hospitals in Mid and West Wales.”

3 Response to Consultation

3.1 The Options and the Evaluation

3.1.1 Why Active Travel?

In the context of this consultation the reason staff, patients and visitors will want to travel is to access either their work place or particular healthcare service. What concerns Sustrans is the means of travel people use on those journeys.

According to the evidence collected by Sustrans and partners⁸ current trends in land use, planning and environmental design are forcing people to increasingly rely on unsustainable and physically inactive forms of travel, such as using the private car.

Surveys on travel behaviour, show the numbers of trips made by private car to be rising dramatically. The rate of road traffic growth in Wales has consistently outstripped growth rates in the rest of the UK in recent years. Between 1999 and 2003, road traffic in the UK grew by 4.7%, whereas it grew by 8.4%⁹ in Wales.

Ironically, the distances that people travelled are short enough to walk or cycle, yet most of these are currently done by car. According to the UK Government’s National Travel Survey, the majority of journeys we take are under 5 miles or less, yet nearly two thirds of these all trips of this distance are currently made by car (see table 1 for details).

	Under 1 mile	Under 2 Miles	Under 5 Miles
% of trips by all modes	22	42	68
% of all car trips	8	26	58

Table 1 – National Travel Survey, 1999-2001 Department for Transport

By changing the physical environment through the provision of traffic free, safe routes as part of the National Cycle Network, Sustrans has provided people with an alternative to private car use for those local journeys. Monitoring of the routes has shown that the Network is making an increasing impact on the local environment and public health.

The 2004 User Monitoring Report recorded over 201 million trips on the Network, with a 50:50 split between walkers and cyclists. According to the report, average trip length for commuting cyclists using on-road sections of the Network was 2.3 miles, the same average as that in the National Travel Survey (2003). On urban traffic-free sections of the National Cycle Network the average trip length was extended to 5 miles.

Two thirds of respondents said that the presence of the National Cycle Network had helped them to increase their levels of regular physical activity. Face-to-face surveys reveal that 46% of cyclists and 32% of pedestrians report that the Network has helped them to increase their level of regular physical activity by a large amount.

Most importantly, this evidence demonstrates the appeal of walking and cycling has over traditional sports as a means to get more people, more physically active, more often.

3.1.2 How the National Cycle Network can help the National Health Service

Sustrans believes that the NHS can have a positive influence on public health as part of the Designed to Deliver reorganisation, that would be greater than the sum of its parts. We believe that an opportunity exists within the reorganisation of services based on how the NHS can manage staff and visitor travel to its sites. Sustrans Cymru believes that this is an opportunity that should not be missed.

Your analysis has identified that the NHS in Mid and West Wales will be treating an aging population that faces long term health problems such as heart disease, cancer, diabetes, asthma and arthritis. The geographic location of healthcare services and how they are accessed by their communities should take these issues into account as part of this reorganisation. The NHS can play a major role in helping people and communities maintain a healthy lifestyle and prevent long term illnesses by improving sustainable transport access to their services.

We are pleased to see that most healthcare needs will be met within the home and community setting. By providing access to services at a local level, the NHS is reducing the need for people to travel in the first place. The next step is that the NHS can manage the ways in which people decide to travel to these local sites, by placing sustainable transport policies at the heart of that decision making process.

We agree that the centralisation of specialised health services is a consequence of the financial constraints in which the NHS operates. We would envisage that these sites would only be visited by a small number of patients – some from longer distances by ambulance or private car. If the staff, support services and visitors were able to access these specialised sites by improved active travel or public transport means, then the total, unsustainable transport impact would be a lot less.

Sustrans believes adopting sustainable transport policies is in line with Designed to Deliver's philosophy of a health service that focuses on

prevention rather than a cure, where more time and effort is spent on keeping people well, so that they don't have to go to the hospital quite so often.

If these principles are not taken into account, it is possible that large sections of the community will be put at a major disadvantage – such as those who don't have access to private cars but need an accessible health service, namely the elderly, low income groups and young people.

In addition, private car use promotes sedentary behaviour, which doesn't improve the health of those in the community who do have access to a car.

3.2 Health Services of the Future - Sustrans Recommendations

As indicated by the National Assembly, the Department for Health, the Department for Transport and Best Foot Forward (see reference 1), the NHS has a considerable environmental, social and economic impact in terms of transport to and from its sites.

The National Assembly has issued a raft of policy measures to support sustainable development. These have been mirrored at a local level in the development of Community Strategies and Social Care and Well Being Strategies. These policies and strategies should be taken into account when developing proposals of this nature.

With that in mind, as part of the 'Designed to Deliver' reorganisation, Sustrans believes the NHS should:

- Invest in technology that reduces the need to travel – such as telemedical equipment in local healthcare provision.
- Incorporate sustainable travel principles in developing its new proposals. A solution to these problems is to produce a Travel Plan with practical transport related measures, tailored to each individual site. Travel plans should aim to reduce congestion by encouraging walking, cycling and public transport, according to that hierarchy. This would improve transport links to NHS sites and save the health service money.
- Similarly use the principles of sustainable transport during the planning, design and eventual public and staff use of the primary care network within Mid and West Wales.
- Work with partners to change the environment so that people can walk or cycle more to and from their sites, thus reducing the volume of car based traffic entering NHS facilities.
- Use their influence on staff to promote healthier lifestyles - by investing in walking and cycling end of trip facilities within their sites and support those who choose to walk and cycle to work. This would meet many of the aims in both *Designed for Life, Creating world class Health and Social Care for Wales in the 21st Century* May 2005, and the *Health at Work: The Corporate Standard*.
- Stop subsidising those who currently use inactive and unsustainable forms of transport as they commute into work at the NHS – i.e. free car parking for staff. Or at the very least, provide a greater incentive to support those who travel actively to work when compared to those who don't.
- Use 'accessibility by sustainable forms' of transport as the first and only measure in the ranking process that was used in the document to

evaluate and measure access and distance to the reorganised healthcare services.

- Use a Health Impact Assessment or Integrated Impact Assessment in the development of their plans that incorporates the principles of sustainable transport to inform this consultation process.
- Provide a written response as to how the proposals in 'Designed to Deliver' support the National Assembly, Community and Social Care and Well Being strategies and policies (see section 1.2 for details).

Finally, in response to the fourth domain of Healthcare Standards for Wales: Making the Connections Designed for Life, the NHS has a wider role to promote health with its partners and within the community. Sustrans believes the NHS should:

- Use the organisation's influence when working with partners and ensure that road traffic flows are slower and separated from where people live and work.
- Ensure that in working with local planning authorities, regional transport consortia and national partners, more cycle lanes, pedestrianised areas and home zones are provided to make the local access of services as sustainable and physically active as possible.

References

1. Material Health, Best Foot Forward Ltd, 2004.
2. Claiming the Health Dividend: Unlocking the Benefits of NHS Spending, Kings Fund, 2002.
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4. Climbing Higher: National Assembly's Physical Activity and Sport Strategy, Welsh Assembly Government, 2005.
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6. 'Transport Secretary urges hospitals to reduce reliance on the car,' Department of Transport Press Notice, September, 1996.
7. www.statistics.gov.uk
8. www.activetravel.org.uk – the Evidence!
9. Welsh Health Survey: October 2003 – March 2004 (provisional) Cardiff, Welsh Assembly Government, 2004.