

## Staff travel patterns across general practice and how to encourage more active commutes

### Introduction

Over 370 participants from general practice took part in an online travel survey. Questions included current mode of travel, distance and frequency. It also asked about their aspirations for their commute *on an ideal day* - and any barriers to achieving this.

### Results - A summary

- Most staff live within a 5-mile round trip of their practice (53%).
- Of those who lived less than a mile from work, 37% drove alone. Asked about 'travel on a perfect day', over 80% would prefer to walk.
- For those between 1 and 5 miles, 79% drove, but less than half would like to drive on a 'perfect day'.
- Nearly 40% who currently drive 5-10 miles to work would prefer an alternative mode of travel.

### Enablers

Identifying enablers to overcome barriers is vital. Both type of barrier and number for each member of staff can be considered.

Barriers to more active commutes for GP staff include:

- **external factors**, such as bad weather, distance/time to travel and safety on local roads and walking routes.
- **personal factors** such as not having suitable clothing (footwear, umbrella, helmet etc), not owning a bike, not being able to cycle, not feeling fit enough or not being interested; and
- **practice factors** such as lack of cycle racks/secure parking, too much to carry or changing facilities.

Solutions and 'enablers' can be targeted to *each and every* barrier.

- **external factors**, such as
  - bad weather → can't change the weather but can find protective clothing.
  - distance/time to travel → can't shorten, but can find routes which are shortest, least hilly.
  - safety on local roads → can find routes which are quietest.
- **personal factors** such as
  - not having a bike → cycle hire, salary sacrifice scheme.
  - not being able to cycle → cycle lessons.
  - not being fit enough → active practice or park run practice.
  - not being interested → have staff who do walk/cycle.
- **practice factors** such as
  - lack of cycle racks/secure parking → discuss with Practice Manager re installing.
  - too much to carry → discuss alternative carry options or reducing amount carried.
  - changing facilities → discuss with the Practice Manager re installing.

## Enablers

A focus on the staff who have fewest enablers to change behaviour can yield faster results. When several enablers may need to be implemented simultaneously, these can be done incrementally, but the behaviour change won't happen until all are implemented.

### Use those who already use active travel or public transport

Use the enthusiasm within the practice e.g. those who already walk and highlight the co-benefits they mention. These have included:

It Helps Me Switch Off  
 Enjoyable & Fun  
 Better sleep  
 It Makes Me Happier  
 Time With Friends/Family  
 More Time In Nature  
 Saves Money  
 I Enjoy The Fresh Air  
 Helps My Health Or Weight  
 Saves Time

### Focus on benefits

When trying to change the behaviour of staff to take more active travel options, it can be prudent to focus on the benefits of the alternative. For example, 'Would you like to save money on your travel to work?' or 'would you like a cheap and easy way to improve your fitness?'. This can lead to conversations about the more active alternatives as an answer.

### Incremental change - not 'all or nothing'

For most commuters, all of every journey is made by car. This can be reduced in two ways. One it to reduce the frequency of driving (3 days a week instead of 4 or 5) or making part of the journey by active travel or public transport (such as parking further away and walking or using a park and ride scheme).

**Support of management** is vital for the rest of the practice staff to become more active, but there may be a travel bias where those who travel by car do not recognise the needs of those who live closer and could travel by alternative (more active) means.

### Incentives

The practice can offer a variety of incentives (e.g. umbrella for staff who walk, waterproof trousers for those cycling), investment in the premises and staff (e.g. cycle storage, joining RCGP Active Practice charter)

Link to the survey - <https://tinyurl.com/yc46amv4>

Written by Dr Matt Sawyer; additional analysis and input from Kira Furness

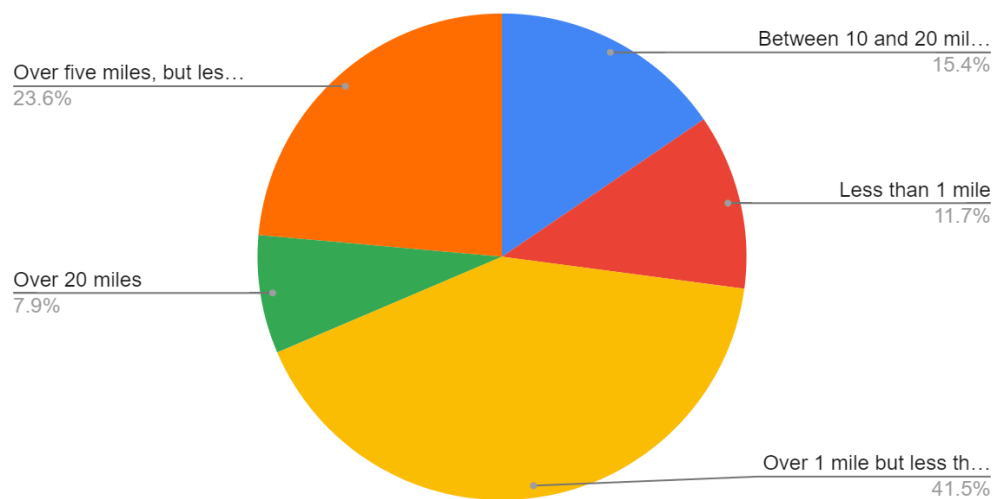
## Survey analysis

A google forms survey was created and distributed to a variety of primary care staff within the UK. In total there have been 370 participants (end of March 2023).

- 14% were doctors.
- 19% were nurses, HCAs, care coordinators, mental health workers etc.
- 21% management.
- 46% admin.

### Analysis by distance travelled

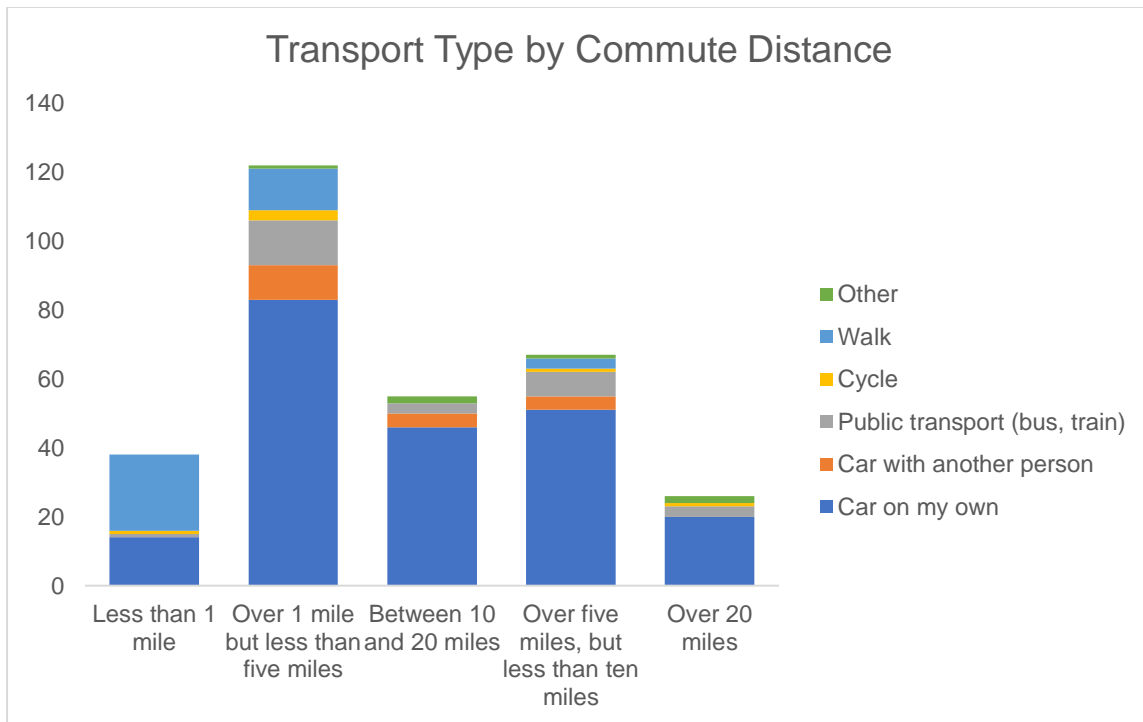
Count of How far is your total daily journey (round trip to and from home)?



**Figure 1.** Percentage of primary care staff by distance travelled from home to workplace.

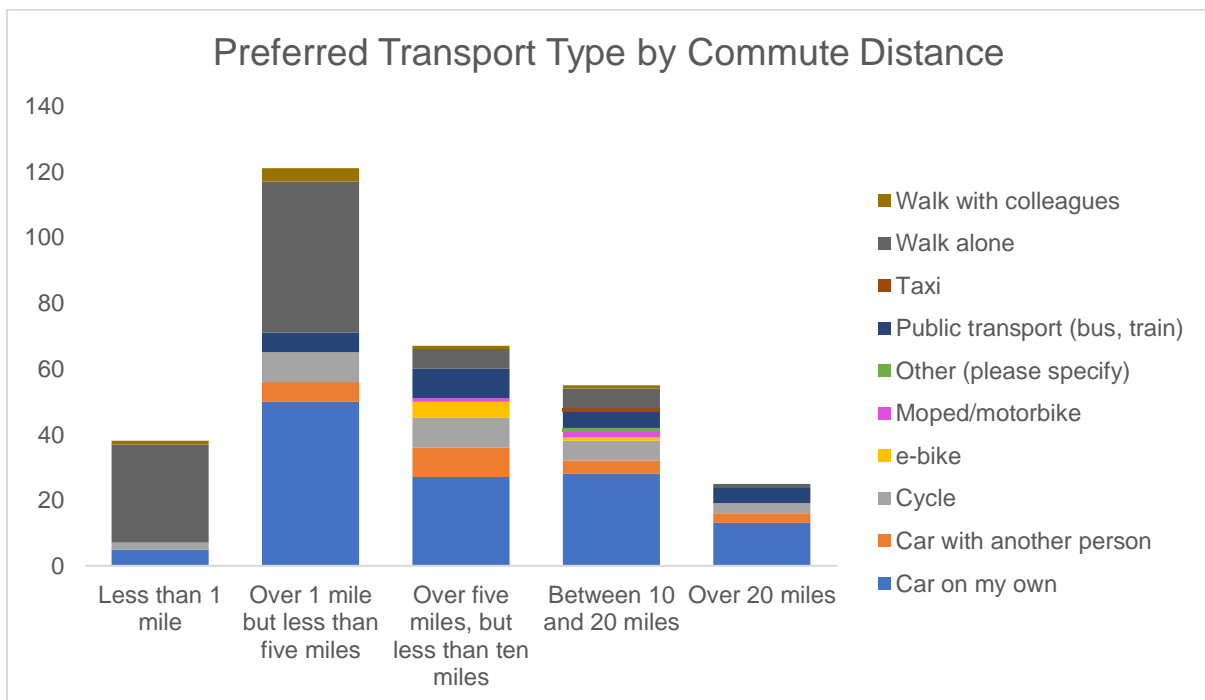
The majority of staff live within a 5-mile round trip from their practice (53%). A significant minority (12%) live within one mile. About 24% live between 5 and 10 miles, and a further 23% live over 10 miles.

Figure 2 show a breakdown for each distance travelled and proportion by different modes of travel.



**Figure 2.** Mode of travel by distance travelled.

An important question asked was ‘On a perfect day (sun is shining, no other commitments etc), how would you like to be able to travel to work?’ The results are shown in Figure 3.



**Figure 3.** Change in mode of travel when participants are asked about their ideal mode of travel.

Of note, is the, at time dramatic, fall in car travel across all distances.

## Analysis of travel results by role

Table 1 shows the proportion of different staff and distance from home.

**Table 1.** Analysis of travel results by role

	% of staff	Percentage of staff			
		Less than a mile	Within 5 miles	5-10 miles	Over 10 miles
Admin	46	13	50	18	19
Doctor	14	15	35	29	21
Management	21	14	25	26	35
Nurse and other clinical roles	19	5	43	33	19

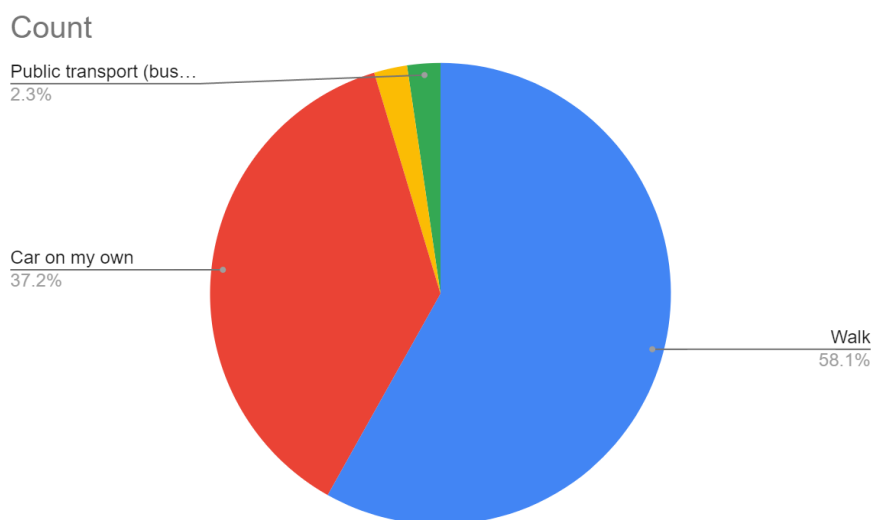
Staff tend to live within 5 miles of the workplace (admin 63%, nurses 48%, doctors 50%) with the exception for management where 39% live within 5 miles and more live over 10 miles from the practice.

## Analysis by distance travelled

### Less than one mile to work

In total, 11.7% lived less than a mile from work.

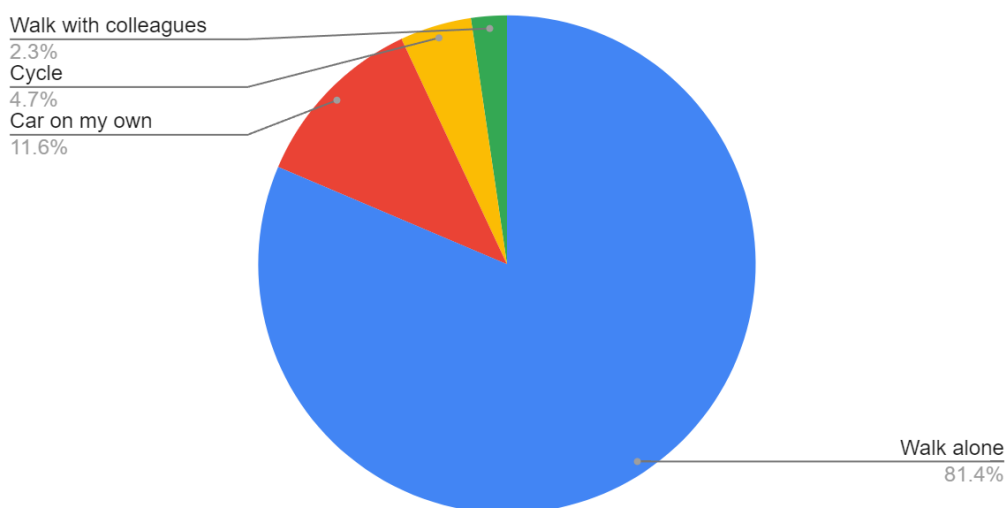
Currently, 37% drove alone, 58% walked, 2% cycled and 2% used public transport.



**Figure 4.** Mode of travel for those travelling less than 1 mile

Future 'ideal day' aspirations show the majority would like to walk.

Count of On a perfect day (sun is shining, no other commitments etc), how would you like to be able to travel to...



**Figure 5.** Preferred mode of travel on a 'perfect day'

Of these who initially drove, 40% felt they could use an alternative means of travel. Of those who felt they could not find an alternative to use the car, comments included 'not interested', 'time taken to travel by other means', 'too far to walk' and 'bad weather'. Some had tried more active travel, but had setbacks such as their bike being vandalised, or having to return home to collect a car for home visits or concerns for safety of the walking route.

Other barriers (e.g. from those who walk when considering cycling) include 'too many bags to carry', security fears, local road conditions, lack of shower facilities and living too short a distance to cycle.

#### **Possible 'enabler' actions**

To help enable alternatives, each of the barriers need to be addressed simultaneously.

This could involve:

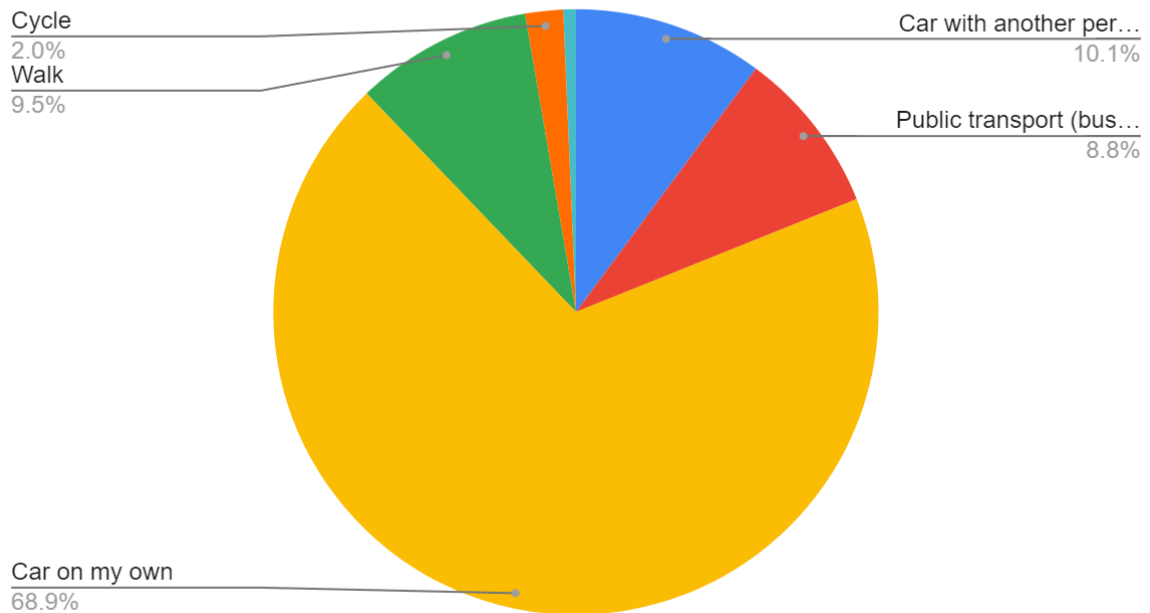
- Providing bad weather clothing.
- Providing practice umbrellas.
- Offer money off bike riding lessons/ 'learning on a lunchtime' etc.
- Provide facilities or opportunities to improve fitness.
- To offer cycle rental scheme 'try before you buy'.
- To offer salary sacrifice scheme for staff to buy a bike.
- Ask specifically if shower facilities is a barrier in the practice, and if so, explore options.
- Showcasing the co-benefits of walking and cycling from those who currently use those mode of travel.
- Working with local crime prevention to improve route safety for walking.
- Working with local council for safe cycle routes for staff and patients.

### Between 1 and 5 miles

In total, 42% of the staff live between one and five from their workplace.

Currently, the majority (79%) travel by car either solo (69%) or with another person (10%). 10% walk, 9% use public transport and 2% cycle.

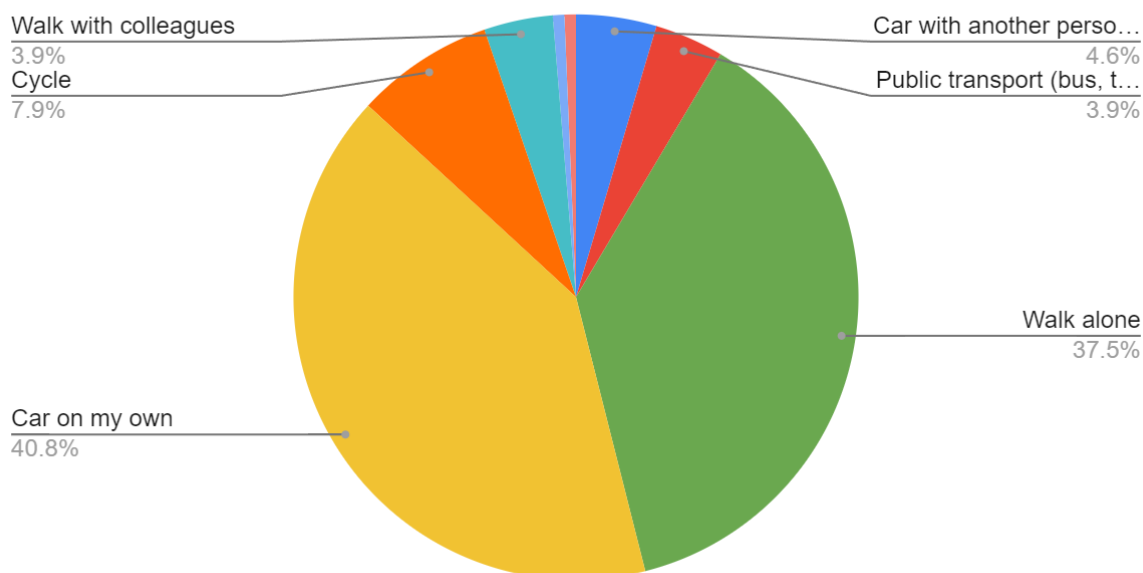
#### Count



**Figure 6.** Mode of travel for those travelling 1 to 5 miles

In 'ideal day' conditions, those wanting to drive alone falls from 79% to 45% (41% solo, 5% with another colleague).

## Count of On a perfect day (sun is shining, no other commitments etc), how would you like to be able to travel to...



**Figure 7.** Mode of travel on a 'perfect day'

Of those who drive, 61% felt they could only get to work by driving. The barriers to alternative method of transport ranged from single reasons ('Not fit enough to cycle' or 'Don't have a bike') and multiple cumulative reasons ('Bad weather' AND 'Not fit enough to cycle' AND 'Don't have a bicycle' AND 'Not interested' AND 'Too many bags or too much kit to carry').

When current drivers consider walking as an alternative, the majority (over 70%) have a single barrier. These include 'Weather (cold, wind or rain)', 'Time taken for the journey', 'Health reasons' and 'Too far to walk'.

There are some with multiple reasons including security fears, not knowing the best route and other commitments (such as school run). A few add comments regarding lack of facilities e.g. changing room/shower at the practice.

One respondent listed multiple reasons ("Bad weather ie cold, wind, rain, Security fears of walking, Time taken for the journey, Lack of shower or changing room facilities, Not interested, Too far to walk") and would find change very difficult as lacks interest.

Regarding cycling, barriers include **external factors**, such as bad weather (20%), distance/time to travel and safety on local roads; **personal factors** such as not having a bike (37%), not being able to cycle(5%), not being fit enough and not being interested (20%); and **practice factors** such as lack of cycle racks/secure parking (10%), too much to carry or changing facilities.

### Ideas for possible enabling actions

Work with those who are most interested to change their travel routine (for example the 40% of those currently driving) or who have fewest 'enablers' required (83% listed only one or two reasons stopping cycling, 71% listed one or two reasons stopping walking).



- Demonstrating that cycling can be as fast (or faster) than driving or shorter walking routes.
- Bad weather clothing.
- Providing facilities are likely to be more important for staff as they travel further.
- Offer opportunities to improve fitness e.g. RCGP Active Practice or Park Run practice.
- To offer cycle rental scheme 'try before you buy'.
- To offer salary sacrifice scheme for staff to buy a bike.
- To discuss alternative ways to carry kit and equipment e.g. backpack or saddle bags.

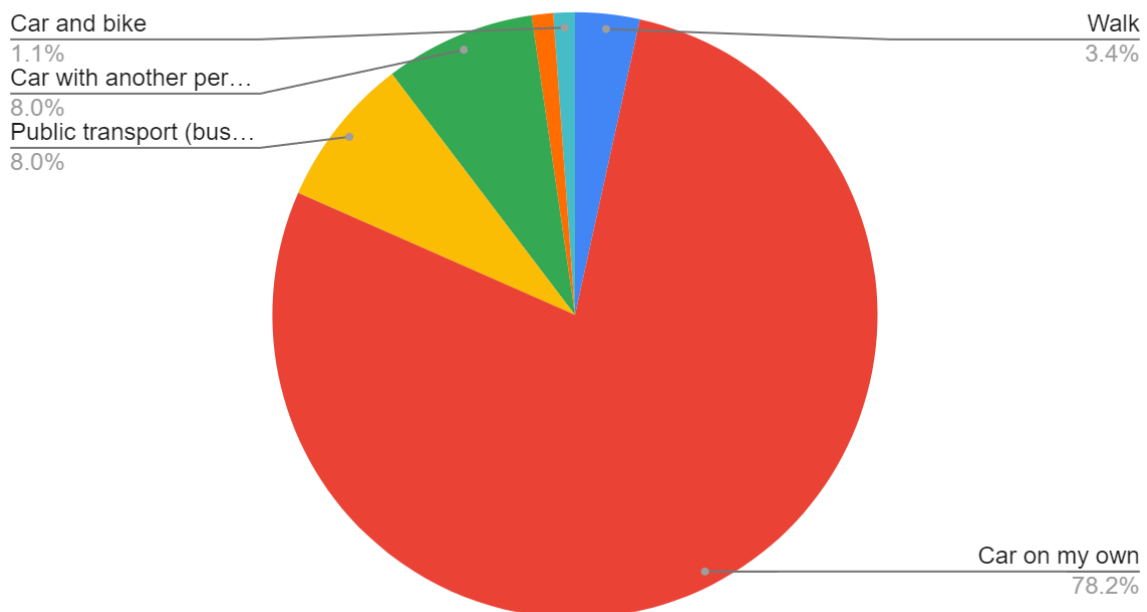
### Between 5 and 10 miles

In total, 24% of staff lived between 5-10 miles from the surgery.

Of the respondents 84% drove (78% solo; 8% with another person). Very few used active means of travel - 4% - and 8% used public transport. One used a combination of car and bike.

20% of people who travel between 5 and 10 miles feel they could use another mode of transport other than their car.

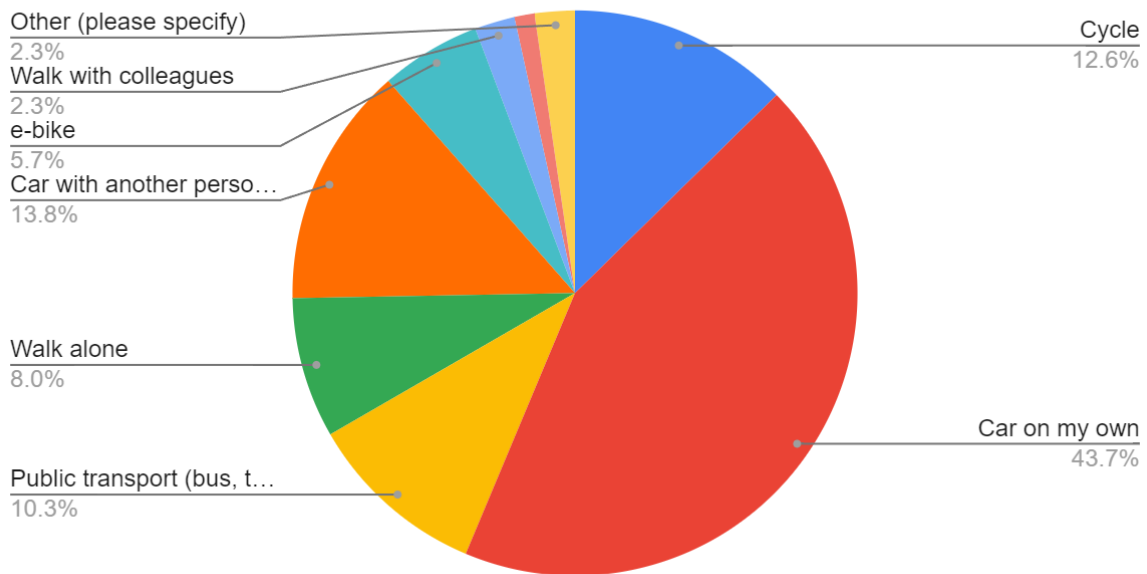
#### Count



**Figure 8.** Mode of travel for those travelling 5 to 10 miles

On a perfect day, the total travelling by car falls to 58% (44% solo, 14% with another) with 18% wishing they could cycle, 10% walking and 10% by public transport.

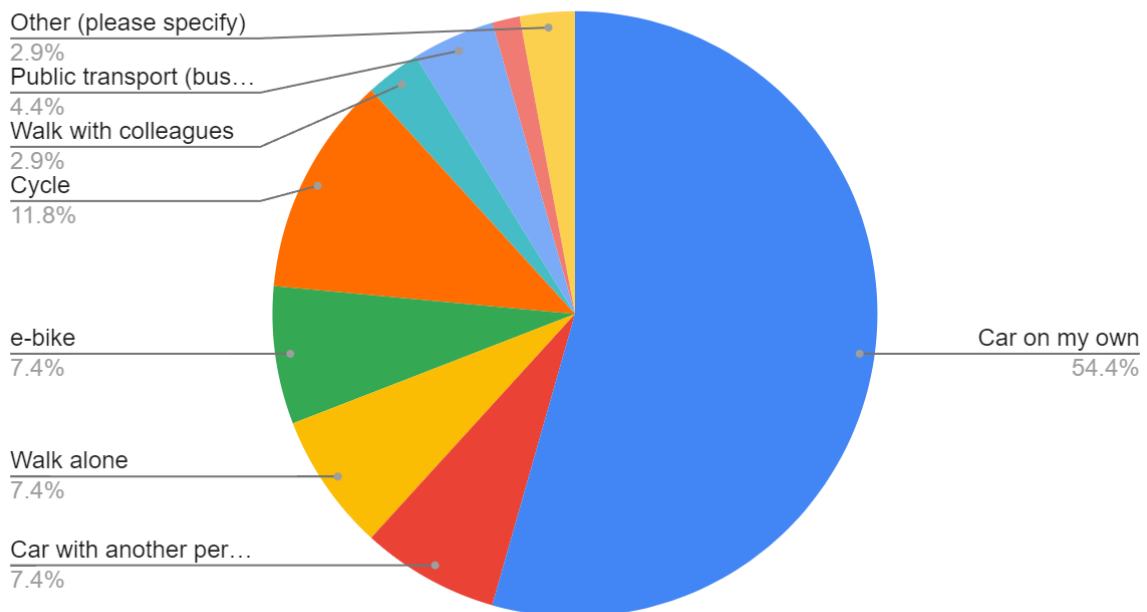
Count of On a perfect day (sun is shining, no other commitments etc), how would you like to be able to travel to...



**Figure 9.** Preferred mode of travel for those travelling on a perfect day

Of those driving, when considering their preferred travel ('on a perfect day'), those wishing to be in a car are 62% of respondents. **38% of staff driving would rather commute by an alternative form of transport.**

Count



**Figure 10.** Percentages of alternative modes of travel on a 'perfect day' for those who drive currently.

## Over 10 miles

The majority drive (87% either solo (82%) or with another (5%)). Some use public transport (8%) with few either cycling or combining modes of transport such as part public transport-part cycle.

19% felt they could choose an alternative mode of transport for their commute.

Barriers include the time taken to travel and distance. Comments included external factors such as 'Poor transport links. It would take 4-5 buses to get to work and I would need to leave before 8pm the night before!', 'Do not want to cycle on a dual carriageway!' and 'Takes over 1 hr on the bus and already start very early.'

## Possible options

- Hybrid modes of travel – part drive, part cycle, or part public transport, part cycle e.g. use park and ride schemes – practice could discuss with bus company for suitable location on bus route to practice.
- Consider electric bike trials/hire scheme to try and get some people to travel one day per week by an alternative means.
- Installing EV charge points to decarbonise the vehicles used.
- Shared lift/lift share either within the practice team or with involvement with members of the surrounding community/other businesses

## Discussion

Identifying enablers to overcome barriers is vital. Both type of barrier and number for each member of staff should be considered.

These can be:

- **external factors**, such as bad weather, distance/time to travel and safety on local roads.
- **personal factors** such as not having a bike, not being able to cycle, not being fit enough and not being interested.
- **practice factors** such as lack of cycle racks/secure parking, too much to carry or changing facilities.

Solutions/enablers can be targets to each and every barrier:

- **external factors**, such as
  - bad weather → can't change the weather but can find protective clothing.
  - distance/time to travel → can't shorten, but can find routes which are shortest, least hilly.
  - safety on local roads → can find routes which are quietest.
- **personal factors** such as
  - not having a bike → cycle hire, salary sacrifice scheme.
  - not being able to cycle → cycle lessons.
  - not being fit enough → active practice or park run practice.
  - not being interested → have staff who do walk/cycle.
- **practice factors** such as
  - lack of cycle racks/secure parking → discuss with Practice Manager re installing.
  - too much to carry → discuss alternative carry options or reducing amount carried.

- changing facilities → discuss with Practice Manager re installing.

**Focus on the staff who have fewest enablers required.** Often several enablers may need to be implemented simultaneously. Use the enthusiasm within the practice e.g. those who already walk and highlight the co-benefits they mention. These have included:

- Enjoyable and fun,
- Saves money,
- Saves time,
- Helps my health or weight,
- It makes me happier,
- I enjoy the fresh air,
- It helps me switch off,
- I spend more time in nature as a result.

**Support of management** is vital for the rest of practice staff to become more active, but there may be a travel bias where those who travel by car do not recognise the needs of those who live closer and could travel by alternative (more active) means. This is important as (e.g.) improving practice facilities (installing a cycle rack, shower room) or assisting staff (implementing cycle to work scheme) will likely fall under their responsibility.