

# Southampton Health Tour

## Recommendations

### ABOUT THE TOUR

On 27 September 2019, [Healthwatch Southampton](#) teamed up with [My Journey](#) and the [Southampton Collective](#) to host a health tour of the city. The purpose was to explore active travel issues, how people travel to health services and discuss associated air quality concerns.

Conversations were held on route during health stops to gather people's views. This was supplemented by an online survey. In total 45 people were active participants in the tour and survey. More detailed responses are included in Appendix One and Two of this document.



*Poster and front of flyer advertising the tour*



*Back of flyer showing details of cycle, walk and stops*

### REPORT

A report of the tour in slideshow format is available separately.



## DETAILED RECOMMENDATIONS

We recognise that there is some good practice happening in the city already, some positive activity being organised by My Journey Southampton and by some proactive health professionals.

After analysing the findings of the tour and associated community engagement, Healthwatch Southampton offers the following recommendations.

### For NHS and public health – communication

#### 1. Improve communications about active and bus travel, publicly celebrate good practice from within health sector as well as wider city initiatives, and continue to encourage people to share/discuss the barriers and opportunities for active and bus travel to health services:

- a. **Improve letters** to patients who need to attend health appointments, with active travel options, bus information and walking maps.
- b. Undertake specific **communications campaigns** (social media, print media and talks) around [Love to Ride](#) and other support to help people (patients, visitors, staff) use active modes of transport, such as cycle confidence.
- c. **Encourage groups and networks** such as a Patient Participation Groups and Primary Care Networks to engage and promote engagement in active travel initiatives.
- d. Signpost patients and the public to telephone and web-based support to **help people plan their journey**.
- e. **Celebrate good practice** with active travel initiatives in the NHS and encourage more to happen; e.g. GP parkrun teams and teams setting up health walks. Signpost people to other initiatives.
- f. Raise awareness of **concessionary public transport passes for disabled people**; e.g. [SmartCites](#) card.
- g. **Share evidence-based health information** about the health impacts of inactivity and air pollution, as a means of encouraging behaviour change. In doing so, help people to connect with initiatives that can improve walking, cycling and other active travel.
- h. Ensure there is continued ways for people to **raise travel barriers and opportunities** with Clinical Commissioning Group, other NHS and Public Health organisations e.g. an annual survey, conversation at patient and carer involvement forums, using coproduction approaches.

### For NHS sites

#### 2. Work with others to improve active travel infrastructure and bus access to, from and within health sites. Develop accessibility initiatives and ensure disabled car parking is meeting health needs:

- a. Work with Council and others to **improve cycle and walking infrastructure** (including dedicated and safe routes, signage and bike parking) to and around NHS venues.
- b. Liaise with staff and visitors to ensure that changes reflect **identified local needs**.
- c. **Accommodate a range of active travel needs** e.g. ensuring widths of paths are wide enough for wider mobility scooters, adapted bikes/trailers and wider pushchairs.

- d. **Note the barriers to accessibility** which were found during the health tour 27 Sept 2019 (see the associated Powerpoint report).
- e. Work with bus companies and the Council to **improve bus provision, patient and community transport**.
- f. Monitor the demand and need for **disabled parking spaces**, following the recent recognition of hidden disabilities in Blue Badge schemes.
- g. Provide **free water** to visitors, especially needed after a walk or cycle.

### For Southampton City Council and My Journey

#### 3. Continue to explore and discuss the ways people with disabilities and health needs get around the city, including barriers and opportunities. Signposting to services and encourage the development/expansion of accessibility schemes. Develop projects and priorities in response:

- a. **Councillors are encouraged to lead walks** around their wards to understand barriers, with a focus on disability and access for people with health conditions. This could include mapping problems, identifying locations and suitability of bus stops and understand local bus timetable issues (with a view to progressing identified issues).
- b. **Encourage wider use and awareness of initiatives** such as [Sunflower Lanyard Scheme](#), [Access Cards](#) (e.g. CredAbility), [SmartCities bus travel pass for people with disabilities](#). Continue to raise awareness of changes to [Blue Badge scheme](#) which now allows for hidden disabilities to be recognised.
- c. **Share information about both active travel and bus travel options**. This could include information sharing through Southampton City Council [travel for disabled people](#) webpage and through the contacts that the Blue Badge team has with people with accessibility challenges.
- d. The increase in demand for blue badges, may well require **additional provision of disabled spaces**, so this should be monitored carefully.
- e. **Note the barriers to accessibility** which were found during the health tour 27 Sept 2019 (see the associated Powerpoint report).
- f. Feed the findings from this work into the **review of community transport**.
- g. **Take action on pavement/cycle lane parking**. This unduly impacts the safety of more vulnerable pedestrians and cyclists, such as people in wheelchairs and children/pushchairs.

### For Bus companies and Southampton City Council

#### 4. Discuss and address bus travel and associated health access barriers

- a. **Review bus travel** to hospitals and health venues. **Work towards improvements**, to be more accessible, integrated with other travel options, easier to navigate and affordable for customers and patients.

## For all NHS/Council and others involved in health and travel policy and initiatives

### 5. Progress community engagement and co-production approaches around active travel and associated health issues.

- a. Continue **community discussions and sharing of ideas** for improvement through co-production approaches.
- b. Ensure that services, infrastructure plans and behaviour change initiatives are considering the needs of people with a range of mobility issues, **keeping a focus on disability and health**. The way people use infrastructure, as well as the quality of the public realm (e.g. greenery), really matters to people. This will include talking to members of the public and those with additional accessibility needs if the Council is successful in securing funding from the Department for Transport's Transforming Cities fund. **Detailed designs will need to reflect people's experiences and needs**.
- c. Continue to work together across health and other public services to **promote awareness of air pollution and the impacts on people**, including the most vulnerable in society. Promote ways it can be reduced in the city and ways people can reduce their own personal exposure. People are keen to see public talks etc as well as the involvement of young people in the change. Build on the good practice of the [Toxic! Question Time](#) event in November 2019, where health academics and professionals undertook community engagement on this issue.
- d. When commissioning public services, factor in [Social Value Act](#), which requires public services to think about how they can also secure wider social, economic and environmental benefits.
- e. **Work with polluters** to help them respond to these public health challenges, and **engage with businesses** for the benefit of their staff and the wider community.
- f. Please also **read our report of detailed comments** received from the public from this engagement work (see Appendix One and Two). These include some interesting single comments and ideas.

Thank you for reading our report.

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**healthwatch**  
Southampton

# APPENDIX ONE

## WORKSHOP QUESTION RESPONSES

### TAKEN FROM GROUP CONVERSATIONS 27 SEPT 2019

The following points were made by participants in workshop discussions and during health stops:

#### GPs and NHS

Most people live in walking distance of GPs.

Campaign by GPs with posters encouraging walking.

People with dementia have perceptual difficulties so maps are better than words.

Appointment letters say where there is car parking. People could also know where there is bike parking or bike cage such as a Princess Anne Hospital.

Letters could prioritise travel by bus, cycling and walking.

A map could be included e.g. a map showing the route from their postcode.

How do you get to health services if you are not well?

#### Walking

SUSTRANS has health walks, mostly from parks. There are also walks for Weston Lane and Shirley medical centres.

These initiatives have come from health staff doing blood pressure checks – “they need to go for a walk”

Walks are identified as good for social as well as for physical health. They could be expanded. Walks can also help identify other problems.

Councillors could be involved in walks, doing a tour of their wards, connected with GP surgeries.

#### Buses

Bus fares are viewed as pricey at times.

Connecting buses, e.g. 2 bus fares charged.

Difficulty working things out [bus timetables, location of stops, interchanges etc]

New strategy for bus companies. 6 private bus companies, must merge or collaborate so multi tickets can be used on any service. Single fares are expensive.

600-800m is the standard of how far people should be from a bus stop.

Smart City bus pass – need to meet higher mobility thresholds.

No connecting bus services east to west of the city.

Relationship between hospitals and bus companies need to be improved.

### **Integrated transport**

We need more integrated transport services.

### **Pets**

The health benefits of pets were mentioned, and the fact that buses and trains could accommodate pets.

### **New housing**

Conditions for new housing complexes should discourage car ownership, have maps of walking, bus and cycling routes issued to every new resident.

### **NHS parking**

Parking is very expensive.

### **Council and street parking**

Parking charges should be doubled in Council car parks.

There should be a charge for parking on residential streets near the University.

### **Encouraging people to cycle**

Love to Ride is a behaviour change initiative, helping people to get into cycling. It uses behaviour change theory, encouraging people to make pledges helps them to commit.

If you can get someone to ride a bike for 10mins, it releases endorphins and they are more likely to do it again.

They project works with employers too, including with a Workplace Liaison Officer.

### **Cycle skills**

Cycle confident sessions are considered valuable. People can also be helped to plan their routes.

Council could publicise availability of cycling tuition for skills and knowledge of best practice, giving confidence to ride in the city. Publicise beyond My Journey Southampton.

### **Cycling for people with disabilities**

Cycle lanes need to be made wider for people with adapted bikes, cargo bikes and other non-standard bikes.

Power assisted cycles and scooters can help.

Some people prefer the term “all ability cycling” rather than referring to adapted bikes.

### **Blue badges – parking for people with disabilities**

Changes have come into force which mean a wider range of people with hidden disabilities can apply for a blue badge e.g. mental health and autism

It is complicated to apply.

People still must pay for parking, even if they have a blue badge.

Blue badges do not apply on private parking.

The Blue Badge team can refer people to other services, even if rejected for a blue badge.

### **Community transport**

There is currently a review of community transport by commissioners.

### **Volunteer drivers**

Schemes were mentioned such as

- Hospital transport
- Dial-a-ride
- Communicare

### **Social prescribing**

Southampton Voluntary Services now has a contract to offer community navigation across the city with partners such as Solent Mind, Alzheimers and Spectrum. More information via: [SO:Linked](#). GPs say that 70-80% of people having appointments don't need medication but connecting them with local community activity and services can support their health.

Need a personalised approach, with activity built into everyday life.

Communication campaign is needed.

## APPENDIX TWO

### ONLINE SURVEY RESPONSES

To ensure that people who did not attend the Southampton Health Tour were able to contribute their thoughts, Healthwatch Southampton published a survey and encourage people to participate via their newsletter, social media and advertising in person.

14 people responded, the responses are below.

Q1: How can Southampton make it easier for people to travel to health appointments and make the experience as stress-free as possible?

- Improve pavements and cycle infrastructure and give priority to active travel.
- More U9 buses to the General Hospital!
- Direct bus links
- More surgeries? Not sure. Buses to the general hospital aren't great from many areas. Taxis are expensive. More community transport services would be good as these seem to be limited to very severe disabilities.
- Improve public transport (cheaper, joined up, more efficient, eco friendly) make City centre car free
- Encourage the use of public transport. Give information of bus services with appointment details
- Give information about travel routes outside of car use
- Impossible to get a GP appointment in reasonable time
- Better bus services all across the city, cheaper start a park and ride which would have better public buses benefitting all citizens
- The buses need to connect. It is quite difficult for instance to get to the Moorgreen hospital by bus.
- By having one bus company in the city
- Have services in the local community
- Better, more reliable and easier to book patient transport.
- Patient Transport Bus that runs numerous times a day that goes direct to the hospitals stopping at specific pick up points and dropping patients at the hospital entrance.
- Specific Disabled/Accessible Car Park near the entrance to SGH, like there used to be at the Park. Cycle paths to the hospitals for those able to cycle that could, also could be used by pedestrians.

Q2: How can we encourage active travel - by foot, bike, scooter or skateboard?

- Better signage for where to park your bike, send out details with health appointments that are walking/cycling friendly.
- Walking time maps
- Cycle lanes for bikes. Wider pavements. Pedestrianised walkways.
- Better footpaths, less traffic, cars not parking on pavements, better cycle lanes etc.
- Water coolers in all waiting rooms for when we get there hot and knackered!
- In the hospital waiting room I can get coffee (paid) but not water, this is daft, I usually walk 5km to get there (when my joints are good; can't walk far at all when they're not). I arrive hot and in need of a drink, but I can only have an expensive coffee.
- Car free within city centre (park and ride) good public transport 20 mph limit etc



- It would help if the police/traffic wardens tackled the issue of pavement parking. This is often a huge problem from people with pushchairs or wheelchairs. Also, some of the city pavements are very uneven.
- Incentivise. Improve infrastructure to make it safer. Lead by example. Make it the norm for local journeys - change the default.
- Bikes on the pavement are a problem in Shirley
- More car free roads, wider pavements
- It needs to be a nice experience to travel this way. I see pictures of people cycling in places like the Netherlands and there are no cars. We need cycle paths that don't have cars rushing past.
- More greenery (trees).
- By having one bus company, providing a joined up service and deduced fees. Free for children under 16.
- Consistent and joined cycle lanes.
- If services are local and people are mobile, they can access them without a car.
- more cycle paths or possibly dual-purpose paths that can also be used by pedestrians, skaters etc and if possible, on routes away from direct traffic. Signposting of these paths for destinations; e.g. the same as roads have signposting.

**Q3: What could Southampton do to improve air quality and reduce people's exposure to air pollution?**

- Reduce access for polluting vehicles, make people know more where the quieter less polluted routes are, and actively encourage non-polluting forms of transport.
- Get cruise ships to switch off their engines when docked.
- Plant more trees. Improve public transport.
- Park and ride. Introduce car share schemes - the sort where you can rent a car for a day from nearby, like I've seen in London. I currently don't have a car and would use such a scheme rather than buy a new one - reducing car ownership would ensure people use other methods of transport where they can and save the cars for long journeys.
- ABP and Carnival/shipping properly monitored and held to account.
- City centre and beyond car free better, cleaner, cheaper public transport throughout Hampshire, more green spaces, education. Raise awareness.
- Stop school runs in massive diesels up to school gates, park and stride.
- Don't expand airport.
- Be honest!
- The new cycleways are a great initiative but could be extended. Anything that incentivises people to travel on foot, by bike or on public transport is great. A park and ride outside the city would also be good.
- Change reliance on fossil fuel powered travel.
- Cut down emissions from buses and ships.
- Better public bus services that are not so expensive.
- First the matter regarding the polluting cargo and cruise ships needs to deal with. One shipping company 'Carnival' needs to bring to account. They are now not co-operating over ship to shore energy. They need an ultimatum that they must sign up to this. There is too much traffic in Southampton. The public transport system is not good enough. I live near Hill Lane and there used to regular buses, now there are none. Electric buses.
- Have cheaper public transport.
- Some form of incentive to use buses more, like a loyalty card. Have a decent bus station.
- Charge cars to use the city centre, continue to improve cycle lanes and paths. Cheaper bus travel, more frequent trains - one an hour into city! Plug in facilities for cruise ships.
- Upgrade the docks so ships can plug into power and turn off their engines when docked

- Get better public bus services.

**Q4: How can we raise awareness of issues around access to health, active travel and air pollution?**

- Public health campaigns and talking to people in local communities.
- Talks in schools and large companies. Public talks in shopping precincts.
- Questionnaires and info given out after medical appointments. I'd say put a poster in the surgeries etc but there are generally dozens of these and it's rare to read them all! Leaflets sent out with appointment letters would also work about travel options including links to help plan a journey online.
- Tell the children to tell their parents. Get decision makers to go out and shadow the service users so they can see the problems.
- Campaigning, sign posting etc.
- Depends on the issues.
- Posters in health care settings, libraries, churches, supermarkets etc. Social media postings
- Air pollution is a public issue Most of the people who go on cruises probably don't know about the emissions from Cruise ships. They are not getting the information. The air quality on the top deck of those ships is also poor for the passengers.
- I don't think we need to. People are already aware of the issues; we just need to act on them.
- Better marketing and community engagement.
- Billboards, campaigns, sharing improvements to travel routes; e.g. cycle lanes. People change behaviour when money is involved; e.g. single use carrier bags.
- Talking to people and making it everyone's business

**Q5: How can we work effectively together to improve health in Southampton? Involving residents, NHS organisations, public services, communities, businesses, education, researchers - all together.**

- Through People's Assemblies and other ways of making sure that all people have their voices heard.
- In person forums with information shared on social media. Surveys that are shared via social media for a larger sample. Also have surveys at hospitals & waiting rooms.
- Have a get together event with rep/coordinators. People need to know their voices are heard and action taken or what's the point? So continued feedback Make a film or film event ask questions record responses
- It would be good if local businesses encouraged car sharing and the use of public transport, perhaps with some kind of reward for those who did this regularly.
- Cross sector partnership / cross sector action
- improve NHS first
- The CCG need to understand better the demographic of this city. Do not allow GP surgeries to amalgamate into too large a hub making it difficult for many to travel to them. Ensure they are run to benefit the many and not just the few. Poorer less well-educated families and those who lack friends or family support often give up attempting to access healthcare. Some who lack internet access or understand how to use it miss out. We need to learn as a city to be truly inclusive
- Accessible acupuncture.
- Vote labour, increasing NHS budgets, education budgets and having a joined-up approach to health care.
- Better community engagement that suits people's working hours. Develop an app that makes it easier for people to engage with you. The council already has people's addresses, so it is a useful way of communicating to everyone.
- Use surveys, campaigns and include schools' colleges and universities.
- Need to put more money into preventative measures and truly work together, rather than the bit map system we have. Ensure there is no overlapping and knowing who is doing what and providing what service

**Q6: Is there anything else you would like to say about these topics, or tell us how you are affected by the issues mentioned?**

- I have a neurological disorder which affects my ability to move at times. I have benefited from cycling to help me with my condition, and I want others to know the benefits of walking and cycling too.
- Not local but extra required driving tests or mandatory driver awareness courses e.g. after 20 years of passing first test. Would raise driver awareness and update their respect for cyclists & pedestrians, potentially not even midway through their driving career so opportunity for positive life changes to be had. Might make some think twice about their journey choices. Plus make extra revenue for DVLA as drivers would have to pay to test again.
- It is unnecessarily difficult to get around via public transport. Bus companies are more concerned about competing other companies out of business, so they have a monopoly in an area as opposed to providing a service for the community. The same goes for train companies - they don't talk to communities at all.
- It is a long way for me to get to my doctor's surgery and when my joints are bad. I have no choice but to drive. I don't want to change, because my surgery is one of the few where I can get through on the phone and don't usually have to wait too long for an appointment. I would be less likely to need to use the car if I moved to a closer surgery, but GP provision is poor, so I don't switch.
- My health is declining since I moved to Southampton City centre. I blame air pollution. My eyes sting and my voice is croaky. The Sot'on cough! As someone with a heart condition I worry I will die prematurely because of air pollution. I walk and cycle and use the bus in preference to our car nearly every day. Buses are not user friendly and expensive. Other cities have much better models! Car should not be king! Make City centre car free. Pavements around Polygon are so uneven they are full of puddles and trip hazards all the length. School traffic causes massive congestion near our house and outside the school. Lots of pollution and dangerous illegal parking on pavement and corners etc. Education and supporting residents would be good. The port is the biggest polluter, but people don't realise...
- Now the use and ownership of cars seems to be getting out of hand. My street in Bitterne is used as an unofficial park and ride and by people who live on Bitterne Road West as their own personal car Park. We have one car, which I rarely ever drive but this makes getting in and out of my house difficult and causes issues with larger vehicles like emergency services getting through the road. A proper park and ride might help with this issue.
- Inability to get GP appointments is a disgrace in this area
- Telephoning many surgeries recently has become a time-consuming activity. You can be calling 20th in queue then just get cut off. I have spoken recently with several people experiencing delays getting through! Some surgeries are run more with Locum GPs than permanent ones due to recent retirements with no replacements coming forward
- I feel Southampton would be a really nice place if only we had clean air. more greenery and more access to the Waterfront.
- Family members have asthma - poor air quality
- Care UK is skimming off the money from the NHS - GPs need to stop referring patients with multiple health conditions and complex health needs to Care UK for care UK to see them and get paid and then say they cannot treat them and so need to be referred to the NHS - this also means patients wait longer and health deteriorates and so another reason they cost NHS more in addition to the double referral and Care UK are not providing a good service and fail to answer their phones or phone people back and often their mail boxes are full and so one cannot leave a message and they lose patients files - this has happened me over and over and I believe Care UK is not fit for purpose.