**November 2022**

**LBN Travel Surveys: Core Questions & Scoping Form**

This document sets out the core questions that the London Borough of Newham (LBN) expect to be included in Travel Surveys that are conducted as part of Travel Plan monitoring for new developments.

Please review each question as part of your survey scoping exercise, including any question that is applicable to your site users (as identified overleaf and beneath each question).

Questions G1a to G7 must be included in surveys by default (though respondents should only be asked to respond to these questions on a voluntary basis). This is to assist the Council with equalities monitoring and to identify common barriers to active and sustainable travel being experienced by different sections of our community. **All collected data must be analysed in an anonymous format and treated confidentially in line with the UK Data Protection Act (2018) and General Data Protection Regulation (GDPR) protocols.**

As well as an overall summary of results, questions marked with \***DA\*** require analysis of results by responses given to questions G1a to G7. Any significant findings (i.e. frequently reported barriers for a specific demographic group) should be detailed in your monitoring report. For example, what barriers to cycling are frequently being reported by women aged 25-34? **Analysed data must only be submitted to LBN in an anonymised format. Raw data must not be submitted to LBN and will not be accepted.**

Surveys should of course be tailored to your site and site users. As a result, additional questions that you think would be beneficial to ask users should also be included.

Please return this form to TravelPlans@newham.gov.uk prior to undertaking your travel surveys, identifying the questions you propose to include.

**Site and Survey Details**

|  |  |
| --- | --- |
| Site address  |  |
| Site postcode |  |
| Consented Travel Plan ref. no. |  |
| Consented planning application ref. no.  |  |
| Survey year (baseline, Year 1 etc) |  |
| Survey date from (dd/mm/yyyy) |  |
| Survey date until (dd/mm/yyyy) |  |
| Proposed questionnaire format\* |  |

*\* e.g. online, in-person/intercept, paper/postal, hybrid*

**Proposed Questions**

Please use the checkboxes below to identify the questions that you are proposing to include. Leave checkboxes blank for any questions you do not propose to include.

|  |  |  |
| --- | --- | --- |
| Question Code | Applicability | Included? |
| M1 | Residents, Staff | [ ]  |
| M2 | Residents  | [ ]  |
| M3a | Visitors, Guests, Customers | [ ]  |
| M3b | Visitors, Guests, Customers | [ ]  |
| M4 | Staff, Visitors, Guests, Customers | [ ]  |
| WO1 | Residents, Staff | [ ]  |
| WO2 | Residents, Staff | [ ]  |
| WO3 | Residents, Staff | [ ]  |
| WO4 | Residents, Staff | [ ]  |
| B1 | Staff, Visitors, Guests, Customers | [ ]  |
| B2 | Residents | [ ]  |
| B3 | Staff, Visitors, Guests, Customers | [ ]  |
| B4 | Residents | [ ]  |
| B5 | Staff, Visitors, Guests, Customers | [ ]  |
| B6 | Residents | [ ]  |
| CC1 | Residents | [ ]  |
| CC2a | Residents | [ ]  |
| CC2b | Residents | [ ]  |
| CC2c | Residents | [ ]  |
| CS1 | Staff | [ ]  |
| E1 | Residents, Staff | [ ]  |
| E2 | Residents, Staff | [ ]  |
| E3 | Residents, Staff | [ ]  |
| E4 | All | [ ]  |
| G1a | All | [x]  |
| G1b | All | [x]  |
| G2 | All | [x]  |
| G3 | All | [x]  |
| G4a | All | [x]  |
| G4b | All | [x]  |
| G5 | All | [x]  |
| G6 | All | [x]  |
| G7 | All | [x]  |

**MAIN TRAVEL MODE**

**M1. What is your usual main mode of travel to/from work? (only select the mode used for the longest leg of your journey)** *\* delete as appropriate*

Walk [ ]

Cycle [ ]

Underground/DLR [ ]

Train/Overground [ ]

Bus [ ]

Tram\* [ ]

Riverboat\* [ ]

P&R Bus\* [ ]

Car Share (Driver) [ ]

Car Share (Passenger) [ ]

Car Driver (Alone) [ ]

Taxi [ ]

Scooter/Motorcycle [ ]

Work from Home [ ]

Unemployed [ ]

Other (please state) [ ]

*Applicable to: Residents, Staff*

**M2. What mode(s) of travel do you usually use for local non-work related journeys? (select all that apply)** *\* delete as appropriate*

Walk [ ]

Cycle [ ]

Underground/DLR [ ]

Train/Overground [ ]

Bus [ ]

Tram\* [ ]

Riverboat\* [ ]

P&R Bus\* [ ]

Car Share (Driver) [ ]

Car Share (Passenger) [ ]

Car Driver (Alone) [ ]

Taxi [ ]

Scooter/Motorcycle [ ]

Other [ ]

*Applicable to: Residents*

**M3a. Which main mode of travel did you use to get here today? (for longest leg of journey)** *\* delete as appropriate*

Walk ☐

Cycle ☐

Underground/DLR ☐

Train/Overground ☐

Bus ☐

Tram\* ☐

Riverboat\* ☐

P&R Bus\* ☐

Car Share (Driver) ☐

Car Share (Passenger) ☐

Car Driver (Alone) ☐

Taxi ☐

Scooter/Motorcycle ☐

Other ☐

**M3b. Is this usually your main mode of travel?**

Yes [ ]

No [ ]

Other (please state) [ ]

*Applicable to: Visitors, Guests, Customers*

**M4. What is your postcode? (for mapping purposes, first part of postcode is fine)**

*Applicable to: Staff, Visitors, Guests, Customers*

**WORK ARRANGEMENTS**

**WO1. What time do you typically depart your home and workplace for work related journeys? (select all that apply)**

Before 7am [ ]

7am-8am [ ]

8am-9am [ ]

9am-10am [ ]

10am-4pm [ ]

4pm-5pm [ ]

5pm-6pm [ ]

6pm-7pm [ ]

7pm-8pm [ ]

8pm-9pm [ ]

After 9pm [ ]

N/A [ ]

*Applicable to: Residents, Staff*

**WO2. How often do you work from home?**

Permanently [ ]

3+ days per week [ ]

1-2 days per week [ ]

Bi-weekly [ ]

Monthly or less [ ]

Never [ ]

N/A [ ]

Other (please state) [ ]

*Applicable to: Residents, Staff*

**WO3. What is your typical journey time from home to your place of work?**

Less than 15 mins [ ]

15-30 mins [ ]

30-45 mins [ ]

45-60 mins [ ]

60mins+ [ ]

*Applicable to: Residents, Staff*

**WO4. Approximately how far away is your place of work from your home?**

0-2km [ ]

2-5km [ ]

5-10km [ ]

10-20km [ ]

20-30km [ ]

30km+ [ ]

*Applicable to: Residents, Staff*

**BARRIERS TO ACTIVE, SUSTAINABLE TRAVEL**

**B1. Which of the following prevents you from regularly walking the whole way to or from [work/the site]? (select all that apply) \*DA\***

Air quality [ ]

Care responsibilities\* [ ]

Disability/health condition [ ]

Distance/effort [ ]

Don’t want to [ ]

Need car for work/trip [ ]

Not confident enough [ ]

Personal safety [ ]

Poor walking routes [ ]

Road safety/traffic [ ]

Weather/terrain [ ]

Work from home [ ]

N/A (already do) [ ]

Other (please state) [ ]

\* e.g. childcare, school run, caregiver etc.

*Applicable to: Staff, Visitors, Guests, Customers*

**B2. If you did not select ‘Walk’ for questions M1 or M2, which of the following prevents you from doing so? (select all that apply) \*DA\***

(Same options as B1)

*Applicable to: Residents*

**B3. Which of the following prevents you from regularly cycling to or from [work/the site]? (select all that apply) \*DA\***

Air quality [ ]

Care responsibilities\* [ ]

Costs\*\* [ ]

Disability/health condition [ ]

Distance/effort [ ]

Don’t own a bike/cycle [ ]

Don’t want to [ ]

Fear of theft/vandalism [ ]

Friends/family don’t cycle [ ]

Lack of cycle hire [ ]

Lack of cycle parking [ ]

Need car for work/trip [ ]

Not confident enough [ ]

Personal safety [ ]

Poor cycle routes [ ]

Road safety/traffic [ ]

Weather/terrain [ ]

Work from home [ ]

N/A (already do) [ ]

Other (please state) [ ]

\* e.g. childcare, school run, caregiver etc.

\*\* e.g. of a bike/cycle, equipment, repairs etc.

*Applicable to: All*

**B4. If you did not select ‘Cycle’ for questions M1 or M2, which of the following prevents you from doing so? (select all that apply) \*DA\***

(Same options as B3)

*Applicable to: Residents*

**B5. Which of the following prevents you from regularly taking public transport to or from [work/the site]? (select all that apply) \*DA\***

Care responsibilities\* [ ]

Costs [ ]

Covid-19 [ ]

Disability/health condition [ ]

Don’t want to [ ]

Infrequent/unreliable [ ]

Limited operating hours [ ]

Need car for work/trip [ ]

Personal safety [ ]

Road safety/traffic [ ]

Too far/indirect [ ]

Too busy [ ]

Travel time [ ]

Work from home [ ]

N/A (already do) [ ]

Other (please state) [ ]

\* e.g. childcare, school run, caregiver etc.

*Applicable to: All*

**B6. If you did not select a Public Transport mode for questions M1 or M2, which of the following prevents you from doing so? (select all that apply) \*DA\***

(Same options as B5)

*Applicable to: Residents*

**CAR CLUBS**

**CC1. When was your most recent car club trip?**

In the last week ☐

In the last month ☐

In the last 3 months ☐

3-6 months ago ☐

Over 6 months ago ☐

Have not made a car club trip ☐

Not sure ☐

*Applicable to: Residents*

**CC2a. Are you aware of your entitlement to a free car club membership and driver credit?\***

Yes ☐

No ☐

Other (Please state) ☐

**CC2b. [If response to CC2a. is ‘Yes’] Have you claimed this?\***

Yes ☐

No ☐

Other (Please state) ☐

**CC2c. [If response to CC2a. is ‘No’] Would you like further information about this?\***

Yes ☐

No ☐

Other (Please state) ☐

\*questions are only applicable if this has been included as an obligation, condition or Travel Plan measure

*Applicable to: Residents*

**CAR SHARING**

**CS1. If you currently travel to work by car, which of the following would encourage you to car share with a colleague? (select all that apply)**

Help finding sharers ☐

Improved car share platform ☐

Free taxi home if let down by sharer ☐

Priority parking ☐

Discounts/financial incentives ☐

Nothing ☐

N/A (already car share) ☐

Other (please state) ☐

*Applicable to: Staff*

**ENGAGEMENT**

**E1. Have you received a Travel Information Pack?\***

Yes [ ]

No [send info] [ ]

Not sure [send info] [ ]

\*question only applicable if this has been included as an obligation, condition or Travel Plan measure

*Applicable to: Residents, staff*

**E2. How informed do you feel on the on-site transport facilities and travel initiatives available to you?**

Well informed [ ]

Poorly informed [ ]

Uniformed [ ]

Uninterested [ ]

Other (please state) [ ]

*Applicable to: Residents, staff*

**E3. Would any of the following be of interest to you?**

Cycle training [ ]

Dr Bike session [ ]

Cycle group [ ]

Cycle to work scheme [ ]

Council cycle loan scheme [ ]

Improved/more regular travel info [ ]

Newham Street Tag [ ]

[Resident/Staff] Travel Forum [ ]

Walking group [ ]

Personalised travel planning advice [ ]

Other (please state) [ ]

[Add any other initiatives you can offer]

*Applicable to: Residents, staff*

**E4. Do you have any further comments?**

*Applicable to: All*

**GENERAL**

*[Suggested introductory text] The Council have asked us to include the following questions to identify and tackle any common barriers to active, sustainable travel (e.g. walking, cycling and public transport) being experienced by different sections of the community. All questions in this section are voluntary, and the information you provide will be held in the strictest confidence and used only for monitoring purposes. If you’d prefer not to give a response to any of these questions, please leave answers blank or select the ‘Prefer not to say’ option.*

**G1a. What is your sex?**

Male [ ]

Female [ ]

Other [ ]

Prefer not to say [ ]

**G1b. Does your gender identity match your sex as registered at birth?**

Yes [ ]

No [ ]

Prefer not to say [ ]

**G2. What age bracket do you fall within?**

0-15 [ ]
16-24 [ ]
25-34 [ ]
35-44 [ ]
45-54 [ ]
65-74 [ ]

75+
Prefer not to say [ ]

**G3. What is your ethnic group?**

Asian Black Mixed

Bangladeshi [ ]  African [ ]  Asian and White [ ]
Chinese [ ]  Caribbean [ ]  Black African and White [ ]
Indian [ ]  Other [ ]  Black Caribbean and White [ ]
Pakistani [ ]  Other [ ]
Other [ ]

White Other

English/Welsh/Scottish/Northern Irish/British [ ]  Arab [ ]
Irish [ ]  Any other [ ]
Gypsy or Irish Traveller [ ]  Prefer not to say [ ]
Other [ ]

**G4a. Do you have any physical or mental health condition or illnesses lasting or expecting to last 12 months or more?**

Yes [ ]

No [ ]

Prefer not to say [ ]

**G4b. [If ‘Yes’ is given for G4a] Do any of your conditions or illnesses reduce your ability to travel?**

Yes [ ]

No [ ]

Prefer not to say [ ]

**G5. Which of the following best describes your sexual orientation?**

Heterosexual [ ]

Gay or Lesbian [ ]

Bisexual [ ]

Other [ ]

Prefer not to say [ ]

**G6. What is your religion or belief?**

No religion or belief [ ]

Buddhist [ ]

Christian [ ]

Hindu [ ]

Jewish [ ]

Muslim [ ]

Sikh [ ]

Other [ ]

Prefer not to say [ ]

**G7. Are you currently pregnant or have you been pregnant in the last year?**

Yes [ ]

No [ ]

Prefer not to say [ ]

*Questions G1 to G7 applicable to: All users*

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