

1 INTRODUCTION

Accessibility Planning – The Context

- 1.1 The concept of accessibility planning arose from the Social Exclusion Unit report entitled *Making the Connections (2003)*, and is centred around the goal of improving access to life opportunities to allow people to achieve their potential.
- 1.2 A major objective in the use of accessibility planning is to facilitate access to key daily services such as
- Health care
 - Education and learning
 - Employment
 - Fresh food
 - Leisure and cultural destinations
- 1.3 Accessibility planning has arisen as a way of determining the ease (or difficulty) with which people can access the services they require. It is centred around but not exclusively related to social inclusion.
- Supporting economic regeneration
 - Facilitating the transition from welfare to work
 - Reducing health inequalities
 - Improving participation and attendance in education
- 1.4 The early identification of this wider use is key to both the identification of issues and the wider solutions to the problems facing local authorities. Whilst the primary responsibility lies with the transport authority, other local organisations and

bodies also have an important role to play. Such organisations include:

- Local Planning Authorities
- Primary care trusts
- Local education authorities
- Learning and skills councils
- Job Centre Plus

Accessibility in Local Transport Plans

- 1.5 Central Government dictates that Local Authorities produce a Local Transport Plan (LTP), which presents details of future transport improvements in the area. They are produced every 5 years and are investment plans that cover all forms of local transport; the focus is primarily placed upon infrastructure improvements and integrated transport delivery.
- 1.6 The first LTP for Bracknell Forest was written and submitted to Government in 2000 and covers the period to 2006. Bracknell Forest Borough Council is currently developing its second LTP, which will cover the period 2006 to 2011; a provisional version was submitted to Government in July 2005.
- 1.7 The guidance for the second LTP identifies a requirement for Local Transport Authorities to prepare and integrate an accessibility strategy into their LTPs. The strategy is required to identify how accessibility assessments will be developed and carried out. Further, the strategy needs to identify how accessibility assessments will be integrated into the wider transport visions and objectives of the LTP.

1.8 Bracknell Forest Borough Council is the local transport authority for the area. It is also the education authority and local planning authority. Through the local strategic partnership (The Bracknell Forest Partnership) we have strong links with the PCT and are engaged in issues and on accessibility of services and joint commissioning. We also have an active Life Long Learning subgroup which encourages the work of the LEA, local colleges and the Learning and Skills Council. Recognition has also been acknowledged that whilst unemployment levels are very low there are still issues to tackle related to unemployment deprivation and access to jobs.

A Five Stage Process

1.9 From the guidance on accessibility planning, a 5 stage process is derived and recommended. The stages are:

- Strategic accessibility assessment
- Local accessibility assessment
- Option appraisal and identification
- Accessibility action plan development
- Monitoring and evaluation

Bracknell Forest Context

1.10 Bracknell Forest Borough Council is a Unitary Authority located in the County of Berkshire covering approximately 110 square kilometres with a population around 111,000 people. It adjoins other local authorities in Berkshire, Surrey and Hampshire.

1.11 With a background as a small market town, Bracknell was earmarked for development as a 'new town' to alleviate the housing crisis caused by World War II. Bracknell New Town was designed in the 1950's on the neighbourhood principle with a primary school, shops, church, community centre and public house at the heart of each of the nine neighbourhoods resulting in relatively good local accessibility.

1.12 Car ownership in Bracknell Forest is high, with 85% of households owning one or more cars (double the national average). This is perhaps one of the reasons why a very high proportion of people travel to work by car (72% of households) and a small proportion travel by public transport (6%). Nonetheless, Bracknell Forest has an excellent network of pedestrian footways and cycle routes.

1.13 The Council has established 'All of Us' as a corporate brand to act as an umbrella for various national agendas, including social inclusion and community cohesion, and related statutory duties, including the Race Relations Amendment Act and Disability Discrimination Act. The 'All of Us' brand allows the Council to interpret these agendas in a way that is proportionate to the Borough's local circumstances, avoids confusing jargon, and accommodates future developments. A key element of the Council's approach to 'All of Us' is a three - year strategy, which aims to ensure that Bracknell Forest is a Borough where:

- There is a shared vision and a sense of belonging for all communities

- The diversity of people's backgrounds and circumstances is appreciated and positively valued.
- Those from different backgrounds have similar life opportunities
- Strong and positive relationships are being developed between people from different backgrounds in the workplace, in schools and within neighbourhoods

1.14 One of the Key Actions in the 'All of Us' Strategy is the development of an Accessibility Strategy to ensure that the Council's approach to planning and transport policy promotes community cohesion.

Policy Context

- 1.15 The policy context as set out in the guidance seeks to
- Implement specific accessibility-related transport schemes and initiatives through planning, delivering and managing the local public transport, highways, cycle, footway and rights of way networks
 - Integrate and mainstreaming accessibility considerations into their wider transport strategies, policies and programmes
 - Integrate and mainstreaming accessibility objectives across the planning and delivery of the authority's wider policy areas and within the corporate centre

- Influence partners' policy and scheme delivery so that accessibility considerations are taken into account.

1.16 The strategy articulated here ascertains the existing situation faced by residents of the Borough and identifies those areas that need to be targeted if the objectives of accessibility planning are to be realised.

2 ACCESSIBILITY ANALYSIS – THE PROCESS

2.1 The approach to developing the accessibility analysis for Bracknell Forest is outlined below.

Stage 1: Strategic Accessibility Assessment

Stage 1- Mapping

2.2 In order to begin to identify potential accessibility issues faced within Bracknell Forest, a number of Borough-wide accessibility analyses have been undertaken. These are consistent with the guidance and consider:

- Hospitals
- GPs
- Dentists
- Primary Schools
- Secondary Schools
- Further education
- Employment
- Local Centres
- Supermarkets

2.3 The analyses have been undertaken using both bus and rail public transport data. They have been produced for the time bands of 30 minutes and 60 minutes between the hours of 0700 and 2300.

Stage 2: Detailed Analysis

Stage 2 - Mapping

2.4 Stage 2 provides the opportunity to undertake more detailed mapping of specific issues. Following the Stage 1 analyses, we have identified the need to undertake additional analyses of access to key services centred on specific time periods and user groups.

2.5 In addition to this time period analysis, Bracknell Forest has undertaken some work based on the planned growth of the town. The expected implications for accessibility planning have been considered based upon this planned growth and some issues and opportunities identified.

Stage 3: Option Appraisal and Identification of Resources

2.6 Having completed the stage 2 mapping analysis, this stage of the process formally appraises the evolving options, and identifies the type and level of resources necessary to deliver options. This has been approached from an all - agency basis, and the specific role that each agency has to play in delivery.

Stage 4: Accessibility Action Plan Development

2.7 Following the evaluation of the options in stage 3, this stage will identify an action plan for the delivery of the Borough's accessibility strategy. This will form a key component of the link with the LTP2, and will clearly identify the necessary actions from other agencies and timeframe for delivery.

Stage 5: Monitoring and Evaluation

- 2.8 Stage 5 of the accessibility strategy is associated with monitoring and evaluating the effectiveness of the strategy as a whole. In Bracknell Forest much of this work will be carried out through the annual reporting of the LTP2. Chapter 34 of this document sets out the methodology, indicators and targets that will be adopted for inclusion within the LTP.

3 VISION AND OBJECTIVES

Vision

- 3.1 The overall aim of the accessibility analysis is:
- “to ensure that people have access to key services at reasonable cost, in reasonable time, and with reasonable ease”*
- 3.2 This vision has fallen out of both the analyses and the Borough Council’s vision which is:
- “to make Bracknell Forest a place where all people can thrive: living, learning and working in a clean, safe and healthy environment”*
- 3.3 This vision puts an emphasis upon quality of life within the Borough, and has been endorsed by relevant stakeholders who have been consulted through the accessibility analysis process.
- 3.4 Bracknell Forest Borough Council has 15 Medium Term Objectives (MTOs); this strategy is key to a number of these MTOs but in particular to 15 “To maintain quality and extend access to all services”.

Consultation findings

- 3.5 The Borough Council held an accessibility Planning Workshop (as part of the “Within Reach” programme). This involved representation from a great number of key stakeholders; and

the importance of the accessibility analysis strategy is further underpinned by the public consultation exercise that the Borough has undertaken as part of the provisional LTP2. Details of this are presented in Chapter 17.

- 3.6 In addition to this, the Local Transport Plan Objectives, the Draft Local Transport Plan and the Provisional Local Transport Plan have all been consulted upon, and a summary of the responses is provided at Appendix A.
- 3.7 The workshop and the accessibility analysis have identified the accessibility issues affecting the lives of those who live and work in Bracknell Forest, and hence the importance placed upon tackling accessibility through the second Local Transport Plan period.

Objectives

- 3.8 In addressing the vision, we have developed a set of objectives that will enable us to focus our efforts and, where appropriate, target investment in priority areas. Again, these have been developed in consultation with stakeholders, and are defined as:
- Providing better access to essential services
 - To improve public transport
 - To provide an additional step change in the provision of public transport services prior to and through growth of Bracknell Town centre
 - To consider the provision of public transport in light of the future provision of hospital services
 - To promote the high levels of accessibility afforded by public transport in informing mode choice

3.9 These objectives are consistent with and related to the objectives of the LTP.

Priorities for Investment

3.10 Through the analyses undertaken to date we have discovered that accessibility to key services is very good for the residents of Bracknell Forest. However, measures can and will be taken to maintain these high levels and to target areas where access could potentially be improved.

3.11 From Table 3-1 (a summary of the key findings of the analysis) it is clear that a specific focus for improvement must be targeted towards access to hospitals (particularly future provision).

The Residents Survey

3.12 As a precursor to accessibility analysis, the council undertook a resident’s survey in 2002 with the aim of identifying residents’ perspectives on access to various services using their usual form of transport. The responses were categorised by ease of access and the key results were:

- Access to Local Shops – 90.9% easy
- Access to shop selling fresh fruit and vegetables –

• Access to Hospital - 36.1% difficult
 80.3% easy
 45.7% said access to a hospital was easy

3.13 Problems of accessibility cannot be solved overnight; the Borough has therefore identified areas where investment may

need to be focused in order to address access issues over time.

Table 3-1: Summary of Accessibility to Key Services in Bracknell Forest

Key Service and Time Period	Current % of Residents with Access by PT in 30 Minutes	Current % of Residents with Access by PT in 60 Minutes
GP Surgery 0700-2300	99%	100%
Dentists 0700-2300	99%	100%
Hospitals 0700-2300	62%	100%
Primary Schools 0730-0900	93%	99%
Primary Schools 1530-1700	95%	99%
Secondary Schools 0730-0900	96%	100%
Secondary Schools 1530-1700	97%	100%
FE Colleges 0730-0900	67%	100%
FE Colleges 1700-1830	74%	100%
Employers 0700-2300	99%	100%

Local Centres 0700-2300	97%	100%
Supermarkets 0700-2300	96%	100%

4 LINKS WITH WIDER POLICY AREAS

4.1 There are many areas of service delivery that have an impact on accessibility. The following categorises these under the broad service areas of:

- Land-use planning
- Health
- Education
- Employment

Land-use Planning

4.2 Land Use and Accessibility planning are intrinsically linked. The ability to assess a site in terms of its accessibility offers great potential to plan for sustainable accessible development. Better understanding of the relative accessibility of the Borough through the use of Accession will enable long range spatial strategies to identify the most sustainable areas for growth.

4.3 The Council has recently completed its issues and options stage in the formulation of its Local Development Framework, which will cover the period 2006-2026. The preferred options stage of this process has now just started. A consultation document as part of this process identifies a number of sites where future development could take place. As part of this accessibility analysis we have considered some of these identified sites with a view to exploring their relative accessibility to key services.

4.4 It is envisaged that in the future, we will extend this analysis to consider the impacts of potential development options and to highlight the mitigation measures required to enable any development to take place within particular areas.

4.5 The fact that the majority of forward planning, and transportation planning such as this accessibility analysis is undertaken within the same team within the Borough Council represents a real opportunity to consider land use and accessibility in a truly integrated manner. It is recognised that as a unitary authority, the Council has a strong advantage over other councils in the region in its ability to consider these aspects jointly and will therefore seek to ensure that every opportunity of marrying the two disciplines is explored to its full potential.

4.6 At a detailed level, accessibility assessments will be required by developers promoting specific sites clearly demonstrating how they will be mitigating any specific accessibility issues identified (as opposed to simply increasing road capacity to accommodate demand).

Health

4.7 There is currently one Primary Care Trust (PCT) that covers the Bracknell Forest area (The Bracknell Forest Primary Care Trust), which has a remit to provide the highest standards of health care in the community. The PCT's work includes doctor and dentist surgeries, opticians, mental health, health care in community hospitals, as well as support for the acute hospitals in the region. The PCT is therefore a major contributor to travel demand. The provision of services in

appropriate locations is therefore of critical importance in affecting accessibility.

4.8 The PCT is part of the Borough's Local Strategic Partnership (LSP) (Bracknell Forest Partnership) as discussed later in this chapter, and their decision-making process will need to be continually consulted upon to ensure that residents of the Borough retain good accessibility to key health services.

4.9 The location and provision of services provided by the PCT can to some degree be influenced, and it is envisaged that accessibility planning will play an increasing important role in their future decision-making.

4.10 Examples of how the health sector can contribute to the accessibility strategy include:

- The delivery of more local service centres (e.g. community hospitals), offering patient services in locations more easily accessible by bus
- Funding innovative patient services, such as demand responsive networks and/or taxi-bus schemes
- Lengthening the opening times of doctors' surgeries, to offer more convenient evening services for patients
- Providing better information to patients on bus services at the time of appointment bookings (for example on the reverse of appointment cards).

4.11 The health sector will face challenges over the coming years and the issue that most affects Bracknell residents in relation

to health care is the location of frontline Hospital services. Presently the Borough's population relies upon hospitals in adjacent authority areas (Wexham Park, Slough – 11 miles; Heatherwood, Ascot – 3 miles; Frimley Park, Surrey – 6.5 miles; and The Royal Berkshire, Reading – 9.3 miles, figures based on distance from Bracknell Town Centre); as such, residents rely on the provision of cross boundary transport services.

4.12 The Heatherwood hospital, a subsidiary of Wexham Park, has become outdated and the East Berkshire Health Community is currently considering three options for a new facility. The Bracknell Forest accessibility analysis has considered the opportunities for the delivery of a new/replacement hospital facility that would serve the Borough, and the accessibility to such a facility is considered in depth in Chapter 29.

4.13 In addition, there are also much wider issues associated with the modernisation of the health service through the Choosing Health agenda, providing a greater focus on preventative care and localisation of facilities. The delivery of providing more accessible health care is an issue that is acknowledged by the Borough Council, and the role that it has to play in liaising with the NHS and PCT in delivery.

4.14 The issue over patients' freedom of choice needs also to be acknowledged. In many cases, accessibility is simply not just about providing a bus service to the local hospital, but considering carefully the specific needs of the patient and their relatives, the care and treatment they require, and offering an accessible service that meets these specific needs.

Education

- 4.15 The effect of the school run is a nationwide issue, and Bracknell Forest is no exception to this trend. There is a real need to address the issue, and place an emphasis on promoting alternatives to the private car. Tackling the school run is in itself important and is a key objective of the Borough's LTP, but there is also a wider issue associated with the health and wellbeing of school communities, and the subsequent impact that this may have on later life.
- 4.16 The increased reliance on the private car has over time resulted in fewer walk and cycle trips to and from school being undertaken. This has resulted in a component of a child's daily physical activity being removed, which potentially could have a detrimental effect upon their health, e.g. increasing levels of obesity. Through the provision of safe travel alternatives in delivering our accessibility strategy, we will aim to reduce this occurrence.
- 4.17 The advantages of children undertaking a healthy and active lifestyle have been proven through research to have a direct relationship with academic achievement. Examples from elsewhere indicate that children who walk and cycle to school generally arrive more alert and receptive to lessons taught in the classroom, which can only be of benefit. The ability to provide local, high standard schools that can be accessed by modes other than the car therefore takes on another dimension.
- 4.18 The Borough Council already is undertaking an aggressive programme of works with schools through its travel planning

work and aims to achieve 100% of all 5-18 year olds in local authority education being covered by a travel plan by 2011.

Employment

- 4.19 There is a key role for Bracknell Forest Borough Council to play in facilitating economic development and access to employment.
- 4.20 Over the past decade Bracknell Forest has experienced a great deal of growth, and one of the challenges will be to facilitate access to the growth in employment with sustainable transport. Further, the Regional Economic Strategy (RES), which will also form part of the South East Plan, recognises the importance that transport plays in economic wellbeing and identifies Bracknell Forest as having one of the highest levels of employment in the Thames Valley.
- 4.21 One of the key ways that the Council will approach this is through the coordination of land use and transport considerations through the preparation of the LTP, the Local Development Framework, and this Accessibility analysis. Further they are all being prepared concurrently by the same policy section within the Council. This allows joined-up thinking, continuity and coordination across intrinsically linked areas.
- 4.22 As part of this awareness, the Borough Council made a Kick-Start bid. This is a bid for funding to establish a regular bus service connecting major employment sites in the west of Bracknell with Bracknell town centre via the rail station, and

access to Heathrow where a large number of residents work. Unfortunately this bid was unsuccessful

4.23 Several large employers currently offer lunchtime shuttle buses for this purpose. A smaller number also offer peak time links with the railway station.

4.24 For example Waitrose runs a morning, lunchtime and evening bus service between the rail station and their site in the Southern Employment Area. In addition, Dell and 3M provide a similar service for their employees, but on a joint working arrangement, showing how employers can draw on resources cooperatively.

4.25 Further progress is being made with other employers with whom we are trying to secure similar services. We have encouraged them to contact the existing businesses running their own services as above.

4.26 Development of such services offers transportation benefits, as would the extension of the hours of operation of this type of service. Sharing of resources provided by different employers has significant benefits, as does development of “works” services in conjunction with conventional local bus services. The Council will continue to work with employers and identify ways in which this knowledge can be spread to stimulate access to employment in this manner.

4.27 As part of the process of working with employers, the Borough has identified several areas in which the employment sector can contribute to the accessibility strategy. These include:

- To consider local key worker housing close to major high technology employment, health and education opportunities, to encourage staff to locate close to work
- To actively promote and develop employer travel plans for major employers (including collections of employers in common geographic areas)
- To provide schemes that enable young people to gain access to transport

4.28 One of the key challenges that has emerged through the accessibility planning process is that despite the provision of appropriate transport and delivery of a strategy that offers local employment opportunities, there is little control over people’s individual choice of employment site, and the often transient nature of personal employment decisions.

4.29 The current Accession software used for the analysis does not allow for a ‘choice’ criterion, and this is an element that will need to be considered in more detail as accessibility planning gathers momentum. However, despite this, a realistic expectation of accessibility planning associated with access to employment is to ensure that opportunities are available for people to access employment opportunities in a sustainable manner and to begin to reduce exclusion of certain groups in doing so.

Engagement with Stakeholders

4.30 As part of the ongoing building of relationships with external organisations for the joint solving of accessibility problems, it

will be important to continually engage with both internal and external stakeholders. These will include:

Internal

- Planning
- Economic Development
- Countryside Services
- Passenger, Community, Rural and School Transport
- Local Education Authority
- Social Services

External

- Health Sector (PCT / NHS)
- Jobcentre Plus
- Post 16 Education
- The Local Strategic Partnerships
- Rural and Voluntary Youth Services
- Youth Council
- Bordering authorities

4.31 Such engagement will help ensure the coordination of policy documents produced by providers of services in other areas, such as education, social, health and employment, with the planning led policies produced in this accessibility strategy.

Bracknell Forest Partnership

4.32 The Bracknell Forest Partnership has developed a Community Plan for the Bracknell Forest area. Bracknell Forest Borough Council plays a key role in this process and has helped develop the following vision.

“In 2015, the community of Bracknell Forest will be self-confident, socially cohesive, economically buoyant and renowned for its “can do” attitude. Living and working in Bracknell Forest will mean having an excellent quality of life. Local people will be safe and healthy. They will have a home that meets their needs and be able to travel easily around the Borough, particularly by public transport. The distinctive, quality environment of Bracknell Forest will be enhanced and the community and learning will be valued throughout people’s lives.”

4.33 One aim of the Bracknell Forest Partnership (BFP) is to invigorate use of the transport network in Bracknell Forest, through strategic partnership working, for the benefit of all, especially disadvantaged groups.

4.34 A transport sub-group is in operation and is chaired by the Bracknell Forest Partnership board member for Transport. Its aim is to provide a voice for key stakeholders including business representatives, voluntary bodies and key public service providers including the PCT, Disabled Groups, Education and Social Services, and to allow issues and concerns to be addressed through regular meetings and consultations. Under this group is a specific team looking in particular at access to health. The issues raised by these groups are being fed back into the LTP to ensure that the document is fully representative of all views of those involved in this element of the Partnership.

4.35 The 2 key areas that the partnership is focusing on in the short term are:

- To improve access to transport, especially for young people and people with a disability;
- To encourage everybody in the Borough to use the enhanced transport network.

4.36 The Borough's high car ownership and usage means that we need to find a comfort level between improvements for public transport whilst recognising the role that the car has to play in the daily life of the residents. Consequently, a key element of the deliverability of the accessibility strategy will be ensuring that a real modal choice is available for all residents to make an informed decision about the mode of travel that they choose to access key services. This will be facilitated through the continued provision of the good accessibility to key services by public transport within the Borough as illustrated in the Stage 1 and 2 analyses later in this report.

5 CROSS BOUNDARY ISSUES

- 5.1 The major urban area of Bracknell is situated in the centre of Bracknell Forest, with the settlements of Sandhurst and Crowthorne to the south, Binfield to the north and North Ascot to the east. A number of these settlements cross boundaries with other authorities, in particular Crowthorne (with Wokingham District Council) and North Ascot (with The Royal Borough of Windsor and Maidenhead). Sandhurst (although wholly within the Borough) has strong connections to Camberley (Surrey County Council).
- 5.2 As a relatively small authority that is highly concentrated around Bracknell itself, many residents particularly in the smaller settlements of the Borough choose, rely, or depend upon services provided in nearby administrative areas such as Wokingham District, The Royal Borough of Windsor and Maidenhead, Slough Borough, Surrey Heath District, Reading Borough and even Guildford and Basingstoke and Deane Boroughs.
- 5.3 Key areas of joint working are with The Royal Borough of Windsor and Maidenhead and Slough Borough Council concentrating on the possible relocation of Wexham Park Hospital. We are also in a wider partnership which also includes Buckinghamshire County Council with Slough and Windsor.
- 5.4 The main area of which we have identified where the Borough relies upon its neighbours is that of hospital provision. There

is currently no major hospital in the Borough, and consequently residents rely upon the services provided at:

- Wexham Park, Slough
- Heatherwood, Ascot
- Frimley Park, Frimley (Surrey)
- Royal Berkshire, Reading

- 5.5 Our analysis of access to these 4 hospitals has been undertaken on the premise that residents of the Borough are able to access a facility, i.e. no account has been taken of actual choice. This issue is discussed in more detail in Chapter 10.

Areas Identified

- 5.6 As a consequence of this, as part of this accessibility analysis it has been deemed necessary to begin to explore access to facilities in adjacent authorities. The cross boundary services that have been considered to date are:
- Hospitals
 - Colleges/Further education
 - Denominational Schools; e.g. Roman Catholic
- 5.7 As accessibility planning develops, it is envisaged that more cross boundary analysis will be necessary, particularly if issues of personal choice are to be understood and travel to services facilitated in a sustainable manner. During the LTP period, Bracknell Forest will continue to work with our colleagues in the neighbouring authorities with the aim of establishing a framework for cross boundary working and analysis. Good progress on this has already been made and is outlined below.

Partnership Agreement on Joint Working

- 5.8 Over the last LTP period there has been a step change in the amount of joint working, understanding, and appreciation of the authorities' positions. This has culminated in discussions and work taking place on a wide range of issues at a high strategic level as well as at the local operational level.
- 5.9 The joint statement in Annex 5 of the LTP sets out an agreed position between Buckinghamshire, Slough, Windsor and Maidenhead and ourselves on a wide range of transport policy, infrastructure and operational issues. It represents a framework for the authorities to continue to work together to promote the national shared priorities and the Regional Transport Strategy. Importantly it also offers each authority opportunities to secure local transport and other objectives, particularly on cross boundary highway routes and transport services.
- 5.10 The joint work also is securing better co-ordination of local highway network management and improving cross boundary scheme delivery. Users of the transport network are not constrained by local authority boundaries and greater joint working is helping the local authorities to better meet travel demands.
- 5.11 The joint work is also allowing the authorities to explore the possibility of joint procurement of services across authorities, particularly in highway maintenance, traffic control, and concessionary fares and parking enforcement. The authorities are hoping to secure significant financial benefits through this

approach, whilst maintaining a high quality of service in meeting local objectives.

- 5.12 All parties view this joint statement as a commitment to ongoing programme of liaison and work. To reflect this, the statement includes an agreed set of joint indicators and targets which the authorities will be developing and monitoring.

- 5.13 The statement's aim is to:

“Promote improved management of our strategic transport infrastructure and services; co-ordinate local network management schemes and initiatives to promote greater use of public transport, walking and cycling; and explore opportunities to deliver better value for money in the delivery of transport, maintenance and other transport services.

We see our joint work as being fully supportive of the shared priorities agreed between national and local government, particularly in tackling congestion, promoting accessibility and improving air quality. The wider regional policy framework for our activities is the Regional Transport Strategy for the South East and this statement supports and promotes the implementation of a number of key components that strategy”.

- 5.14 In addition to this, the Borough Council is involved in a number of cross boundary initiatives and is on a number of groups looking to improve transport provision in the wider area. Several working groups have been established:

- Blackwater Valley Transport Sub Group
- Bracknell Forest and First Group Bus Quality Partnership
- East Berkshire Rural Transport Partnership (EBRTP)
- East Thames Valley Joint Working
- Berkshire Transport Planning Officers Group
- Bracknell Forest Partnership Local Strategic Partnership (LSP)

5.15 Full details of these can be found in Chapter 4 of the LTP.

Importance of Considering Cross Boundary Issues

5.16 The importance of undertaking cross boundary analysis is to understand fully the issues associated with accessibility across the region as a whole.

Issues to Address

5.17 This process has its challenges, however through the analysis of Bracknell Forest we have identified deficiencies with datasets. It is known from correspondence with neighbouring authorities that we are not alone in this.

5.18 Furthermore, the database behind the accession software may not be able to cope with the amount of data that will be necessary to consider larger geographical areas and data associated with the analysis of cross boundary issues.

5.19 Another issue may be bordering authorities' willingness to co-operate on the analysis of cross boundary analysis. To date we have had good working relationships with our neighbouring authorities and believe that the footings are in

place for a continued strong working relationship for the delivery of accessibility planning effecting cross boundary service provision.

5.20 We will seek to address any potential issues as we revisit our accessibility strategy in the coming years.

6 STAGE 1: STRATEGIC ACCESSIBILITY ASSESSMENT

Baseline Data

- 6.1 The build-up of data sets used to inform the accession model is presented below.

Destination Data

- 6.2 In order to plot accessibility to certain destinations (e.g. hospitals, dentists, GP surgeries, schools etc) Geographical Information System (GIS) files were sourced from within the Council and imported into the accession repository. The GIS files plot the destinations using Ordnance Survey coordinates.

Health Centres

- 6.3 For the purpose of mapping access to health facilities, we have used GIS files that plot the locations of GP surgeries and dentists within the Bracknell Forest Boundary.
- 6.4 For hospitals, we have used GIS files that plot the location of hospitals in the bordering Authorities. The reason for this is that Bracknell Forest does not have a major hospital within its boundary and therefore relies upon hospitals located in neighbouring authorities. Cross boundary analysis to hospital sites in these locations has therefore been required, and we have undertaken this analysis accordingly, map 3 on page 36.

Education

- 6.5 In order to map access to education, we have plotted accessibility to primary schools, secondary schools, further education colleges and Roman Catholic schools.
- 6.6 There are primary and secondary schools located within the Borough and these have been mapped and assessed accordingly. However, there is only one Further education college within the Borough, with others in adjoining authorities (which students from the Borough attend) and no Roman Catholic secondary schools. This has required the analysis to extend into neighbouring authorities, maps 8 and 9, pages 46 and 47.

Employment

- 6.7 The mapping of employment centres within Bracknell Forest was again plotted using a GIS file and the accessibility assessments calculated in Accession. Employment sites were selected on the basis of those sites with an employment designation in the Bracknell Forest Borough Local Plan, map 10 on page 49.

Local centres

- 6.8 Due to its designation as a new town and its subsequent growth designed on the neighbourhood principle, each neighbourhood has a local centre. Each of these local centres provides all the facilities that residents are likely to require on a daily basis. Access to these local centres has been assessed used Accession.

Fresh Food

- 6.9 The initial analysis presented here has been based upon service centres, which are the major food stores (Sainsbury's, Tesco etc.). As accessibility planning progresses, it is envisaged that this analysis will be extended to consider individual fresh food retailers in the Borough.

Public Transport

- 6.10 Several files were linked together (CIF file) for bus and rail. Stop coordinate data was then removed from this file and the UK (Naptan) stops produced in the Accession repository. These UK stops were then clipped to the study boundary. Following this, the bus CIF data was imported into the repository. Route lines were created for bus variants. The route lines were checked for obvious errors in the network, but no apparent errors were discovered. The rail CIF data was then imported into the existing repository containing the bus data. A data check exercise was undertaken for both the bus and rail data in the database and also by spot check on some routes on screen.

Road Network

- 6.11 The road network used for the Bracknell Forest accessibility analysis was the Oscar Road Network. A limitation of this system is that Oscar data is primarily roads and misses some footways and cycleways which can be an issue in a new town which incorporates this infrastructure. The process for doing this is outlined below.

- 6.12 The shape file was converted using MapInfo. Motorways, non object data, and Zero feature code links were removed. Some fields in the links file were also removed, as they were deemed not relevant. The next stage was to import the data into the repository and to clip it to the study boundary; the links file was then cleaned to remove any hanging links.

The Scenarios

- 6.13 The initial accessibility maps undertaken as Stage 1 of the accessibility analysis are as follows:
- GP Surgeries
 - Dentists
 - Acute care hospitals
 - Primary schools
 - Secondary schools
 - Further education colleges
 - Employment
 - Local centres
 - Supermarkets

Initial Findings

- 6.14 Chapters 8–16 present the findings of this analysis. The initial accessibility plots are complemented by demographic data, which shows the percentage of the Bracknell Forest population that are located within the certain time thresholds. Chapter 18 then presents a summary of the key results.

7 ACCESSION AND ITS LIMITATIONS

7.1 In April 2005 the Department for Transport issued local authorities with the accessibility planning software Accession. Accession was developed to undertake the mapping of accessibility profiles. Prior to this Bracknell Forest acted as one of the pilot authorities for the software ahead of its launch.

7.2 In transportation planning terms, the availability of the Accession software signifies a real step change in the ability to identify issues associated with access to key facilities through public transport, and is therefore most welcome.

7.3 Unfortunately the software has a number of built-in operating assumptions that need to be borne in mind when considering the results.

Assumptions

7.4 Through the accessibility analysis undertaken for Bracknell Forest, the assumptions that have been identified as relevant are as follows.

Choice

7.5 Accession makes an assumption that people will access their local facility (that is the easiest to get to based on the transport modes selected in the options for the run). No account is taken of preferential choice to access one facility over another, for example: places of education offering different courses, or hospital treatment only offered at certain

specialist sites. This results in the Accession outputs being somewhat skewed in reflecting the true picture of access to these services. In order to address this issue, it would be necessary to identify sub-sections of services and undertake a number of runs based on these specific service areas. We have not undertaken this analysis at this time, but envisage that it will form part of further work as our knowledge of accessibility planning expands.

Buses run on time

7.6 Accession assumes that buses run exactly to their timetable. This assumption means that connections between services can be easily made. Unfortunately, the reality is that in some cases buses do not run to time and that connections are frequently missed, thus resulting in longer journey time and the potential arises to be late/miss appointments etc. There is no apparent solution to this issue at present.

Buses are not full

7.7 No account is taken in Accession of bus loadings and the ability for people to physically get on a bus. Accession assumes that if a bus services a particular route then it will always have the capacity to accommodate the people who want to board it.

Walk time

7.8 Accession assumes a walk time to bus stops that is stipulated in the options before undertaking the run. This is then applied to all users of public transport. The reality is that user

groups walk at different speeds when accessing public transport.

- 7.9 If the assumption is set at a short walk time, it will affect the ability of certain groups to meet connections to other routes where interchange is necessary to access services. In order to overcome this issue, several runs would need to be undertaken based on different assumptions. Again at this time we have not undertaken this analysis, but envisage that it will form part of further work as our knowledge of accessibility planning expands.

Technical Limitations

- 7.10 The ability of Accession to map accessibility is only as good as the data sets that are input into the software. During the analysis for Bracknell Forest, several problems have been identified, and a process of data cleaning has been necessary, which was completed prior to the accessibility analysis as described above.

Mapping is based on bus timetables from October 2004

- 7.11 Due to a lack of available data sets released, it has only been possible to undertake analysis using data from October 2004. However, the fact that the majority of access to key services in the Borough is so good, the effect of minor alterations to timetables is not expected to have had any major impact on the accessibility levels reported here.

Mapping excludes Demand Responsive and Community Transport services

- 7.12 As yet there is no accurate feature within Accession for accommodating Demand Responsive Services (DRT). These services provide considerable infill to the conventional bus network, enhancing the accessibility profiles reported later in this document. They are also supported by community transport schemes, although at this stage it is not possible to map these in detail given their extensive network coverage. Bracknell Forest however does not currently have any such services.

Contouring

- 7.13 Accession has 3 different types of contour interpolation known as “non aggressive”, “medium” and “aggressive”. Although much of the country is using the non aggressive option (the default), it is believed that this is not a very accurate interpolation method as it will spread contour boundaries to single points or small clusters of points causing either “spikes” or provide a contour coverage where there are no points at all. Using the aggressive approach will, however, miss out some individual points and, therefore, a separate result point map is layered beneath the contour layer and colour shaded (thematically mapped) to the same colour range bandings as used in the contour shading. The aggressive interpolation and second point map layer ensures that tight contours are produced and all point results are covered.

8 STAGE 1: ACCESS TO GP SURGERIES

Background

- 8.1 Map 1 on page 32 demonstrates access within 60 minutes to GP surgeries between 0700 and 2300. As part of the analysis, similar maps have been produced for Saturday between 0800 and 1300 and can be found in Appendix B (map B1). The separate result point maps are also included (maps B2 and B3).
- 8.2 The map demonstrates excellent Borough-wide accessibility with 99% of household having access to a GP by public transport within 30 minutes. The areas of Bracknell not covered by the contour reflect the main employment areas of the town.

Technical Limitations

Implications for Stage 2 Work

No account taken of choice
 Refine time period to ensure accessibility is maintained during access times of 1000-1600

Implications for LTP2

The excellent levels of accessibility afforded by the GP surgery locations has led to the identification of the possibility of making better use of these facilities in providing some minor treatment services traditionally associated with hospitals.

Although access to hospitals is relatively good, reducing the need to travel longer distance for routine treatment will be beneficial to achieving the Council's objective of...*"Providing better access to essential services by means other than the car"*.

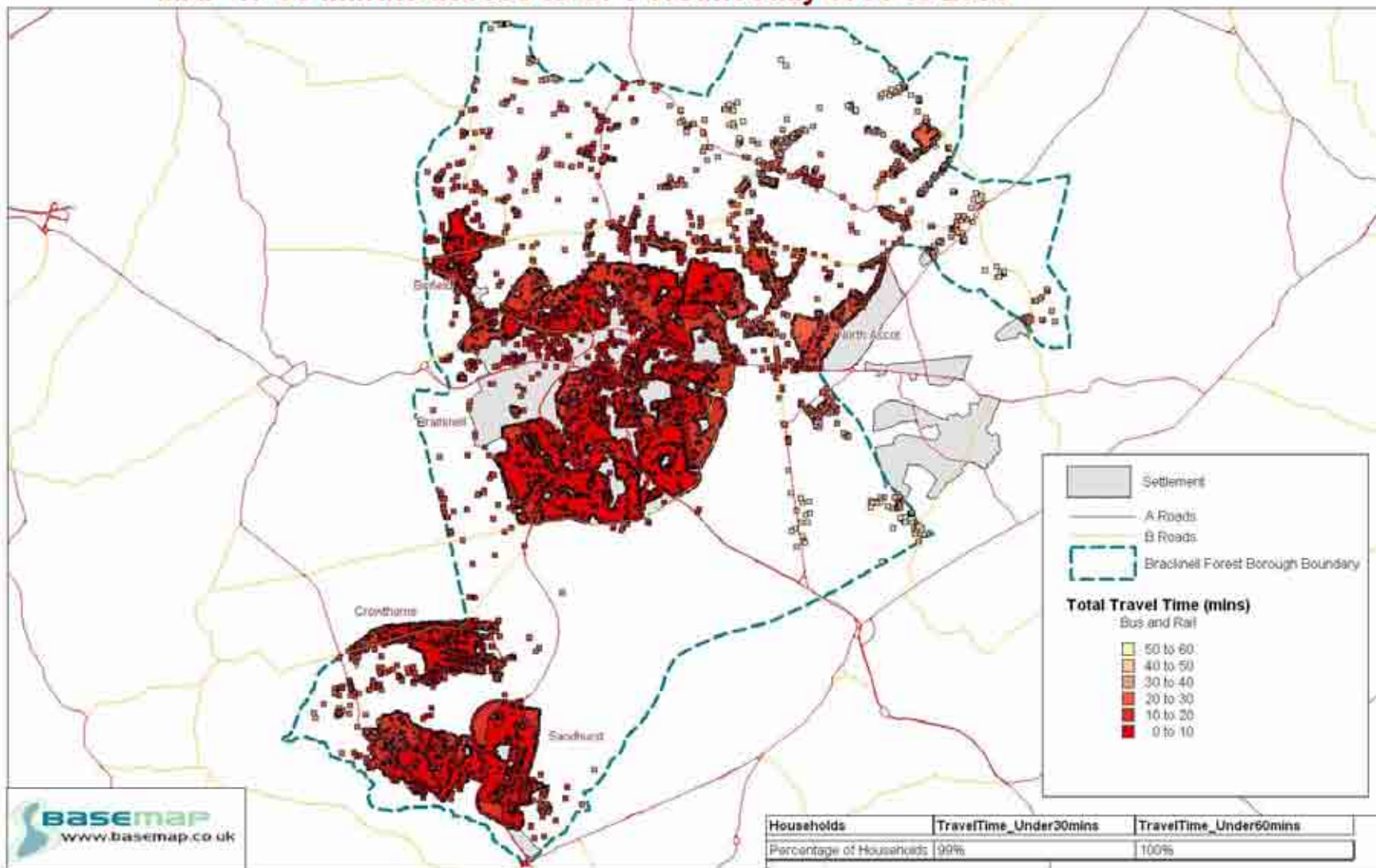
Implications for Stakeholders

There is a need identified to discuss with the Bracknell Forest PCT the potential opportunity for devolving some hospital services to the local community through the network of GP surgeries or a new healthplex.

Recommendation for Target

MEASURE	TARGET
% of population within 30 minutes of a GP Surgery	Maintain existing accessibility levels in existing and new development to 2011 at 99%

MAP 1: 60 minute access to GPs Wednesday 0700 to 2300



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9 STAGE 1: ACCESS TO DENTISTS

- 9.1 The map on page 34 demonstrates the access to Dentist surgeries within Bracknell Forest within 60 minutes between 0700 and 2300. As part of the analysis, similar maps have been produced for Saturday between 0800 and 1300 and can be found in Appendix B (map B4). The separate result point maps are also included (maps B5 and B6).
- 9.2 The map demonstrates excellent Borough-wide accessibility with 99% of households having access to a dentist by public transport within 30 minutes. The areas of Bracknell not covered by the contour again reflect the main employment areas of the town.

Technical Limitations

No account taken of choice

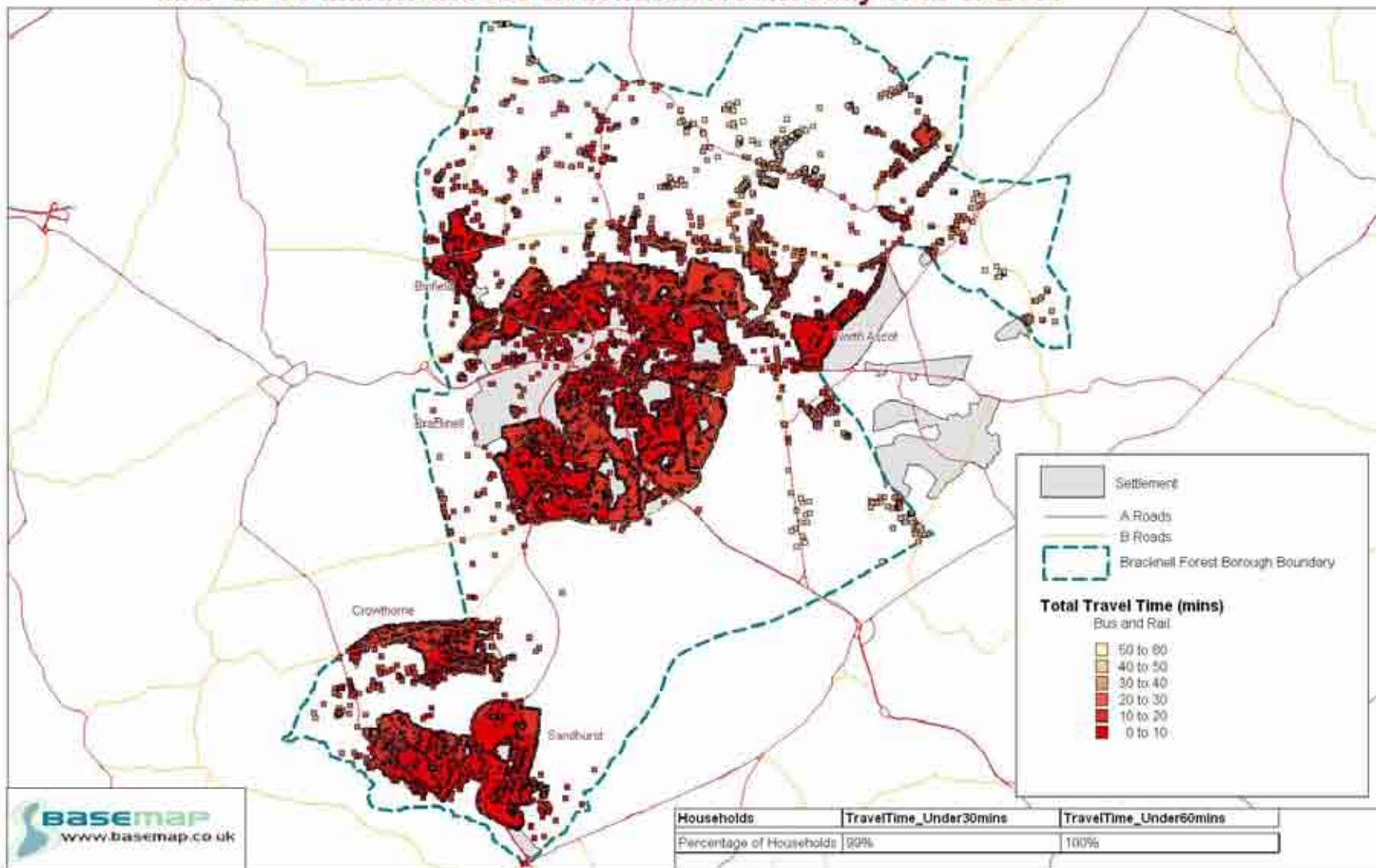
Implications for Stage 2 Work

Refine time period to ensure accessibility is maintained during access times of 1000 -1600

Recommendation for Target

MEASURE	TARGET
% of population within 30 minutes of a Dentist	Maintain existing accessibility levels in existing and new development to 2011 at 99%

MAP 2: 60 minute access to dentists Wednesday 0700 to 2300



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10 STAGE 1: ACCESS TO HOSPITALS

Background

- 10.1 There are no acute care hospitals located within Bracknell Forest Borough. Residents of the Borough therefore rely upon hospitals located in the neighbouring boroughs as set out below:
- Wexham Park, Slough
 - Heatherwood, Ascot
 - Frimley Park, Frimley (Surrey)
 - Royal Berkshire, Reading
- 10.2 The access to these 4 hospitals from within the Borough in the time period 0700 – 2300 is shown in map 3 on page 37. The map shows that within 60 minutes all households can access one of the 4 hospitals. However, the accompanying table shows that only 62% of Bracknell households are able to access one of these hospitals within 30 minutes by public transport.
- 10.3 As part of the analysis, similar maps have been produced for Saturday 0800–2200, Sunday 0900-2200 and can be found in Appendix B (map B7). The separate result point maps are also included (maps B8, B9, B10 and B11).
- 10.4 Relationships with colleagues in neighbouring authorities have aided in our analysis of hospitals outside of the Bracknell Forest boundary. These relationships will be critical in exploring wider cross boundary accessibility across all

service areas as the depth of accessibility analysis expands during the life of the strategy.

Technical Limitations

The analysis has not differentiated between various services provided at the facilities.

The main limitation to the assessment is personal choice. Reputation counts in health care provision and with no local acute care hospital provision, residents have some degree of choice, affecting the hospital that they choose to use. (There is no hard evidence that quantifies this choice but an estimate is provided in the table below.)

Table 10-1: Estimated hospital usage by Bracknell Residents

Hospital	Estimated % of Bracknell Residents using Facility
Wexham Park & Heatherwood	54%
Frimley Park	20%
Royal Berkshire	15%
Other	11%

Based on Admitted and Out-Patient figures, April-November 2005

Implications for Stage 2 Work

The Bracknell Forest PCT is currently undertaking a review of hospital provision in the area. Stage 2 analysis will identify the accessibility catchments of two of the potential alternatives being considered.

Implications for LTP2

The challenge for LTP2 relates to whether healthcare can be provided closer to Bracknell residents. The PCT has recently prepared a strategic outline case for the modernisation of hospital care in East Berkshire, and there is the real potential of the delivery of a new facility towards the end of the plan period. However the site has not been confirmed and this affects the accurate mapping of accessibility. There is also the possibility of a smaller healthplex facility for the town centre.

The Department of Health agreed a Strategic Outline case for proposals to modernise acute care hospital provision in East Berkshire in 2005. A number of options are being evaluated and will be subject to comment in 2006. Bracknell Forest is intrinsically involved in the process. All models under consideration involve increasing the proportion of outpatient care that is undertaken locally, which should in the longer term reduce demand for non-urgent journeys to current hospital sites. The recently approved Town Centre planning application includes provision for a new healthplex which will help realise the ambition to increase the localisation of health provision. The s106 package will help

both public transport and car transport access to the town centre area, thereby reducing journey times. The delivery of localised healthcare is outside of the Council's control and will not impact directly until the end of the LTP period, at best. In the intervening period we will look to improve the existing situation through joint working with the PCT and through the transport partnership.

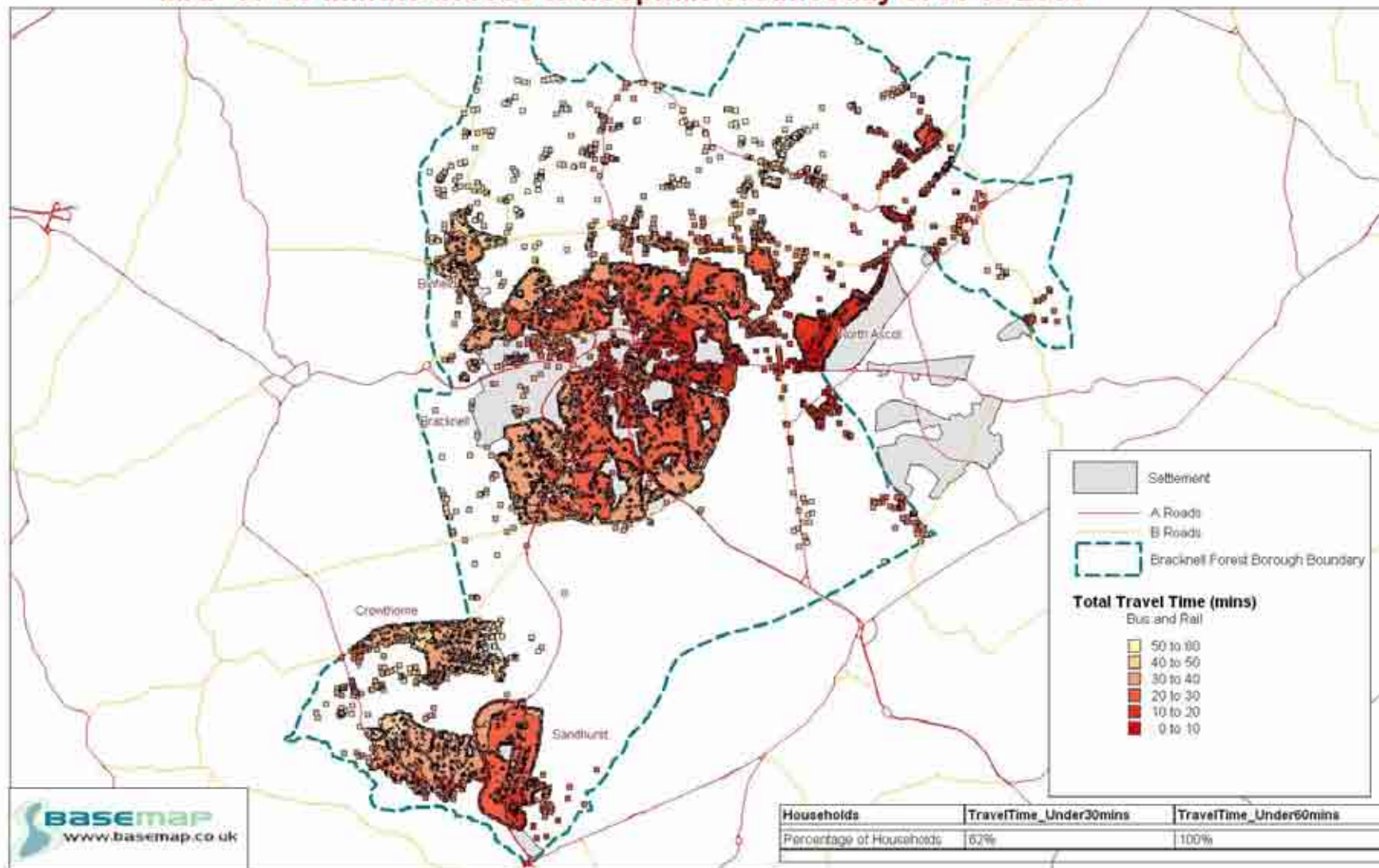
Implications for Stakeholders

For the NHS to consider the implications for the most accessible location of service provision for the Borough.

Suggested / Potential Target

MEASURE	TARGET
% of Bracknell Population within 30 minutes of a hospital	Increase accessibility through joint working with the PCT in identifying a new site for a hospital

MAP 3: 60 minute access to hospitals Wednesday 0700 to 2300



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