Haringey Streets for People

HAVE YOUR SAY

BOUNDS GREEN LTN QUESTIONNAIRE

Haringey Council is conducting this questionnaire to understand how you feel about the trial Low Traffic Neighbourhood (LTN).

Your response will help us better understand any impacts, benefits or challenges that the LTN brings to you.

We introduced the trial LTN because we wanted to reduce the overall volume of traffic in and around the area so that the community can walk, cycle and wheel in cleaner air and safer streets.

The trial LTN is designed to create Streets for People, part of our ambition to create a fairer, greener borough.

The questionnaire comprises of four sections:

A. About you
B. About your experience of the trial LTN
C. About your experience with exemptions
D. Equality monitoring (optional)

For further information please visit:
www.haringey.gov.uk/haringey-streets-people

All responses must reach the council by 20 September 2024.

Thank you for your participation

Data Protection and Privacy Statement:
www.haringey.gov.uk/contact/privacy-statement



boundsgreenltn.commonplace.is

Haringey LONDON

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A: About you and your connection to the LTN

This section asks about you and your connection to the trial LTN. Your responses to these questions will help us to understand your views more clearly.

A1. Where do you live in relation to the LTN?

You can check if you live in a LTN at: **www.haringey.gov.uk/check-live-in-ltn**

- ☐ I live within Bounds Green LTN
- ☐ I live on a boundary road surrounding Bounds Green LTN
- ☐ I live in another part of Haringey
- ☐ I live in a different London Borough
- ☐ I live outside London

A2. If you live in a different London Borough, which borough?

A3. If you don't live within the LTN or on a boundary road surrounding the LTN, what is your connection to the area?

- ☐ I work within the LTN
- ☐ I work on a boundary road surrounding the LTN
- ☐ I visit friends, family, shops, services, clients, schools within the LTN
- ☐ I visit friends, family, shops, services, clients, schools on boundary roads surrounding the LTN
- ☐ I travel through the LTN
- ☐ I travel along boundary roads surrounding the LTN
- ☐ Other

A4. What is your home postcode?

This information is only required to understand how views differ between people who live in the LTN and outside/on boundary roads and will not be used for personal identification purposes

A5. What is the name of the street where you live?

This information is only required to understand how views differ between people who live in the LTN and outside/on boundary roads and will not be used for personal identification purposes

A6. If you are a responding on behalf of a business, what is the postcode of your business?

A7. If you are a responding on behalf of a business, what is the name of the street where your business is located?

A8. Do you have a disability?

By disability we mean a person who is disabled, is living with a disability or has a long-term health condition

☐ No ☐ Yes (I have a Blue Badge) ☐ Yes (I don't have a Blue Badge)

A9. General nature of the disability

If you answered yes to the previous question, please tell us the general nature of your disability

- ☐ Blind or partially sighted
- ☐ Physical disability or health condition
- ☐ Deaf / British Sign Language User / hard of hearing
- ☐ Mental health condition

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- ☐ Learning disability
- ☐ Neurodivergent
- ☐ Long term health condition / hidden health condition
- ☐ Chronic illness
- ☐ Terminal illness
- ☐ Alcohol or drug dependency
- ☐ Prefer not to say
- ☐ Other

A10. If you have a disability, does it affect your mobility?

☐ No ☐ Yes ☐ Prefer not to say

A11. What is your employment status?

- ☐ Full-time employment
- ☐ Part-time employment
- ☐ Full-time education
- ☐ Part-time education
- ☐ Not in paid employment and not in education
- ☐ Prefer not to say

A12. If you are employed or in education, where do you work or study?

- ☐ I mostly work or study from home
- ☐ I mostly work or study away from home (eg office, shop, factory, school)
- ☐ Where I work or study changes from day to day (eg trades person)
- ☐ Prefer not to say

A13. If you are employed, what is your usual working pattern?

- ☐ Standard working day (eg between 8am and 6pm)
- ☐ Outside the standard working day (eg early mornings, nighttime)
- ☐ Prefer not to say

A14. Does your household have access to a motor vehicle (eg car, van, motorcycle or moped)?

☐ No ☐ Yes, one motor vehicle ☐ Yes, two or more motor vehicles ☐ Prefer not to say

A15. If you have access to a motor vehicle, do you use it for work?

☐ No ☐ Yes, sometimes ☐ Yes, most of the time ☐ Prefer not to say

B - Your views on the LTN

In this section, we ask your views on the trial LTN. We want to know how you feel about it and how it has impacted you.

B1. For streets <u>within</u> the LTN, how do you feel about the following?

	Very positive	Positive	Neutral	Negative	Very negative	Don't know
Pollution/air quality	☐	☐	☐	☐	☐	☐
Traffic congestion	☐	☐	☐	☐	☐	☐
Road safety	☐	☐	☐	☐	☐	☐
Personal safety	☐	☐	☐	☐	☐	☐
Walking	☐	☐	☐	☐	☐	☐
Cycling	☐	☐	☐	☐	☐	☐
Crime and anti-social behaviour	☐	☐	☐	☐	☐	☐
Noise	☐	☐	☐	☐	☐	☐

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B2. For the boundary roads surrounding the LTN, how do you feel about the following?

	Very positive	Positive	Neutral	Negative	Very negative	Don't know
Pollution/air quality	☐	☐	☐	☐	☐	☐
Traffic congestion	☐	☐	☐	☐	☐	☐
Road safety	☐	☐	☐	☐	☐	☐
Personal safety	☐	☐	☐	☐	☐	☐
Walking	☐	☐	☐	☐	☐	☐
Cycling	☐	☐	☐	☐	☐	☐
Crime and anti-social behaviour	☐	☐	☐	☐	☐	☐
Noise	☐	☐	☐	☐	☐	☐

B3. Since the trial LTN was introduced, has the way you travel changed?

	Much more than before	More than before	No change	Less than before	Much less than before	Don't know
Walking or wheeling	☐	☐	☐	☐	☐	☐
Cycling	☐	☐	☐	☐	☐	☐
Mobility scooter	☐	☐	☐	☐	☐	☐
Assisted transport, e.g., Dial-a-Ride	☐	☐	☐	☐	☐	☐
Bus	☐	☐	☐	☐	☐	☐
Train or underground	☐	☐	☐	☐	☐	☐
Black taxi	☐	☐	☐	☐	☐	☐
Private hire vehicle	☐	☐	☐	☐	☐	☐
Motor vehicle (car, van, moped or motorcycle)	☐	☐	☐	☐	☐	☐

B4. Thinking specifically about time of the day or days of the week (for example peak and off-peak, weekdays and weekends), please explain why your travel has changed.

B5. How has the LTN affected your experience of community in the area?

- ☐ I interact more with my neighbours
- ☐ I spend more time in local public spaces
- ☐ I feel a stronger sense of belonging to the neighbourhood
- ☐ I participate more in local events or activities
- ☐ I've noticed no change in community interaction
- ☐ I feel less connected to my local community
- ☐ Other:

B6. Please describe any changes you've noticed in community interaction or neighbourhood atmosphere since the introduction of the LTN.

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B7. In general, how do you feel about the trial LTN?

- ☐ Very positive
- ☐ Positive
- ☐ Neutral
- ☐ Negative
- ☐ Very negative
- ☐ Not sure

B8. Whether you think the trial LTN has been positive or not, are there any changes or alternatives you would like to see? (For example, more crossings, cycle lanes, more street lighting, less traffic filters)

B9. Do you have any other comments about the trial LTN?

C - Your views on LTN exemptions

This section asks your views on the various LTN exemptions that we offer.

An exemption allows people to drive through some of our camera enforced traffic filters. You will recognise the filters as most have planters and signage.

We offer a range of exemptions, including for any Haringey Blue Badge holders and applications can also be made under our Individual Circumstances criteria.

For further details about the LTN exemptions please visit: **www.haringey.gov.uk/ltn-exemptions**

C1. Do you have an LTN exemption?

- ☐ No
- ☐ Yes
- ☐ Prefer not to say

C2. If you have an LTN exemption, under which criteria was it granted?

- ☐ Blue Badge holder (Haringey)
- ☐ Blue Badge holder (Enfield)
- ☐ Individual circumstance
- ☐ Urgent safety matter
- ☐ SEND transport
- ☐ Disability transport
- ☐ Emergency services
- ☐ Council refuse and cleansing
- ☐ Prefer not to say

C3. How do you feel about the exemptions for motor vehicles that are offered by the council?

- ☐ Less people should be exempt
- ☐ More people should be exempt
- ☐ The right level of exemptions have been offered

C4. If you think changes are required to the exemptions, please provide more details

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D - Equality Monitoring – Optional

The following questions are optional; you are not required to provide answers. However, your response will help us understand how the LTNs may affect some of the protected characteristics outlined in the Equality Act 2010.

Collecting, analysing, and using equalities information helps us to understand how our policies and activities are affecting various sections of our communities and helps us to identify any inequalities that may need to be addressed. We will be grateful if you could complete this form. The information you provide on this form will be held in the strictest confidence and only be used for the purpose stated above.

D1. Age

Which age group applies to you?

- ☐ Under 17
- ☐ 17-21
- ☐ 22-29
- ☐ 30-39
- ☐ 40-49
- ☐ 50-59
- ☐ 60-74
- ☐ 75+
- ☐ Prefer not to say

D2. Sex

What best describes your sex?

- ☐ Male
- ☐ Female
- ☐ Prefer not to say
- ☐ Other

D3. Trans

Trans is an umbrella term to describe people whose gender identity is not the same as, or does not sit comfortably with, the sex they were assigned at birth. Do you consider yourself to be trans?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

D4. National Identity

How would you describe your national identity?

You may tick more than one box

- ☐ Afghan
- ☐ Australian
- ☐ Bangladeshi
- ☐ British
- ☐ Bulgarian
- ☐ Chilean
- ☐ Chinese
- ☐ Colombian
- ☐ Cypriot
- ☐ Ecuadorian
- ☐ English
- ☐ Eritrean
- ☐ French
- ☐ German
- ☐ Ghanaian
- ☐ Hungarian
- ☐ Irish
- ☐ Italian
- ☐ Indian
- ☐ Jamaican
- ☐ Kosovan
- ☐ Lithuanian
- ☐ Northern Irish
- ☐ Polish
- ☐ Romanian
- ☐ Scottish
- ☐ Spanish
- ☐ Somali
- ☐ Turkish
- ☐ United States
- ☐ Other

D5. Ethnicity

What best describes your ethnic group?

Asian or Asian British:

- ☐ Bangladeshi
- ☐ Chinese
- ☐ Indian
- ☐ Pakistani
- ☐ Any other Asian background: (please specify): _____

Mixed or multiple ethnic groups:

- ☐ White and Asian
- ☐ White and Black African
- ☐ White and Black Caribbean
- ☐ Any other Mixed or Multiple background (please specify): _____

Black, Black British, Caribbean, or African:

- ☐ African
- ☐ Caribbean
- ☐ Any other Black, Black British, Caribbean, or African background (please specify): _____

White:

- ☐ English/Welsh/Scottish/N. Irish/British
- ☐ Irish
- ☐ Gypsy or Irish Traveller
- ☐ Roma
- ☐ Any other White background (please specify): _____

Other ethnic group:

- ☐ Arab
- ☐ Kurdish
- ☐ Turkish
- ☐ Any other ethnic group (please specify): _____

If you prefer to self-describe your ethnicity, please tell us here

_____

- ☐ Prefer not to say

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D6. Sexual orientation

What best describes your sexual orientation?

- ☐ Heterosexual / Straight
- ☐ Bi
- ☐ Gay / Lesbian
- ☐ Prefer not to say
- ☐ Other

D7. Religion or belief

How would you describe your religion or belief?

You may tick more than one box

- ☐ Atheist
- ☐ Hindu
- ☐ Rastafarian
- ☐ Buddhist
- ☐ Jewish
- ☐ Sikh
- ☐ Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
- ☐ Muslim
- ☐ No Religion
- ☐ Prefer not to say
- ☐ Other

D8. Pregnancy and maternity

Are you pregnant?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

Have you had a baby in the last 12 months?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

D9. Marriage and Civil Partnership

What best describes you?

- ☐ Single
- ☐ Married
- ☐ Co-habiting
- ☐ Civil Partnership
- ☐ Separated
- ☐ Divorced
- ☐ Widowed
- ☐ Prefer not to say

D10. Socioeconomic status - Income. Universal Credit and means- tested benefits

Which of the following benefits do you receive, if any?

You may tick more than one box

- ☐ Universal Credit
- ☐ Child Tax Credit
- ☐ Housing Benefit
- ☐ Income Support
- ☐ income-based Jobseeker's Allowance (JSA)
- ☐ Income-related Employment and Support Allowance (ESA)
- ☐ Working Tax Credit
- ☐ None of the above
- ☐ Prefer not to say

D11. Socioeconomic status - Education

Which of these qualifications do you have?

Tick every box that applies if you have any of the qualifications listed.

- ☐ If your UK qualification is not listed, tick the box that contains its nearest equivalent.
- ☐ If you have qualifications gained outside the UK, tick the 'Foreign qualifications' box and the nearest UK equivalents (if known).
- ☐ No formal qualifications
- ☐ Level 1 – e.g. 1-4 GCSEs, Scottish Standard Grade or equivalent qualifications
- ☐ Level 2 – e.g. 5 or more GCSEs, Scottish Higher, Scottish Advanced Higher or equivalent qualifications
- ☐ Apprenticeship
- ☐ Level 3 – e.g. 2 or more A-levels, HNC, HND, SVQ level 4 or equivalent qualifications
- ☐ Level 4 or above – e.g. first or higher degree, professional qualifications or other equivalent higher education qualifications.
- ☐ Other qualifications – e.g. other vocational / work related qualifications and non-UK / foreign qualifications
- ☐ Prefer not to say

D12. Language

What is your preferred language?

You may tick more than one box

- ☐ Albanian
- ☐ Akan
- ☐ Arabic
- ☐ Bengali
- ☐ Bulgarian
- ☐ BSL User
- ☐ Chinese
- ☐ English
- ☐ French
- ☐ German
- ☐ Greek
- ☐ Gujarati
- ☐ Hungarian
- ☐ Italian
- ☐ Japanese
- ☐ Kurdish
- ☐ Lithuanian
- ☐ Persian / Farsi
- ☐ Polish
- ☐ Portuguese
- ☐ Romanian
- ☐ Russian
- ☐ Somali
- ☐ Spanish
- ☐ Tagalog Filipino
- ☐ Turkish
- ☐ Urdu
- ☐ Yiddish
- ☐ Other

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If you would like this leaflet to be translated or in an alternative format please:

- email **LTN@Haringey.gov.uk** subject **'Bounds Green LTN'** or
- complete the form below and **return by Freepost** (no stamp required) to: Frontline Consultation, Freepost Plus RTKX-AJJC-ULRY, London Borough of Haringey, 10 Station Road, Level 4, Alexandra House, London, N22 7TY

BULGARIAN / Български ☐

Тази листовка е с цел да получи вашето мнение относно изпитването на нисък трафик в квартала (Low Traffic Neighbourhood). Ако искате тази листовка да бъде преведена или се нуждаете от помощ при попълването на въпросника, моля да се свържете с посочения по-горе имейл адрес. Другата възможност е да поставите отметка в това квадратче, да попълните формуляра по-долу и да изпратите тази страница на посочения по-горе адрес Freepost (не се изисква печат).

FRENCH / Français ☐

Ce dépliant sollicite votre point de vue sur l'essai du quartier à faible trafic. Si vous souhaitez que ce dépliant soit traduit ou si vous avez besoin d'aide pour remplir le questionnaire, veuillez contacter l'adresse e-mail indiquée ci-dessus. Vous pouvez également cocher cette case, remplir le formulaire ci-dessous et poster cette page à l'adresse Freepost ci-dessus (aucun timbre n'est requis).

ITALIAN / Italiano ☐

Questo opuscolo raccoglie le tue opinioni sull'esperimento Quartiere a basso traffico. Se desideri che questo foglio illustrativo sia tradotto o hai bisogno di aiuto per completare il questionario, contatta l'indirizzo e-mail sopra indicato.
In alternativa, spunta questa casella, compila il modulo sottostante e spedisci questa pagina all'indirizzo Freepost sopra indicato (non è richiesto alcun francobollo).

GREEK / Ελληνικά ☐

Αυτό το φυλλάδιο ζητά τις απόψεις σας σχετικά με τη δοκιμαστική εφαρμογή του Low Traffic Neighbourhood [γειτονιά χαμηλής κυκλοφορίας]. Εάν χρειάζεστε αυτό το φυλλάδιο μεταφρασμένο σε άλλη γλώσσα ή αν χρειάζεστε βοήθεια για τη συμπλήρωση του ερωτηματολογίου, επικοινωνήστε στη διεύθυνση ηλεκτρονικού ταχυδρομείου που αναφέρεται παραπάνω. Εναλλακτικά, επιλέξτε αυτό το τετραγωνίδιο, συμπληρώστε το παρακάτω και ταχυδρομήστε αυτήν τη σελίδα στην παραπάνω διεύθυνση Freepost (δεν χρειάζεται γραμματόσημο).

PORTUGUESE / Português ☐

Este folheto busca suas opiniões sobre o teste do Low Traffic Neighbourhood "Baixo Tráfego no Bairro". Se você precisar que este folheto seja traduzido ou precisar de ajuda para preencher o questionário, entre em contato no endereço de e-mail listado acima. Como alternativa, assinale esta caixa, preencha o formulário abaixo e envie esta página para o endereço de Portes Grátis acima (não necessita de selo).

POLISH / POLSKI ☐

Niniejsza ulotka zawiera informacje na temat badania Low Traffic Neighbourhood (Dzielnica o małym natężeniu ruchu). Jeśli chcesz, aby ta ulotka była przetłumaczona lub potrzebujesz pomocy w wypełnieniu kwestionariusza, skontaktuj się z adresem e-mail podanym powyżej. Możesz też zaznaczyć to pole, wypełnić poniższy formularz i wysłać tę stronę na powyższy adres Freepost (znaczek nie jest wymagany).

ROMANIAN / Română ☐

Această broșură vă solicită opiniile cu privire la studiul privind vecinătatea cu trafic redus. Dacă doriți ca acest prospect să fie tradus sau aveți nevoie de ajutor pentru completarea chestionarului, vă rugăm să ne contactați la adresa de e-mail menționată mai sus. Alternativ, bifați această casetă, completați formularul de mai jos și postați această pagină la adresa Freepost de mai sus (nu este necesară ștampila).

SOMALI / Soomaali ☐

Qoraalkani waxa uu raadinayaa aragtidaada ku saabsan tijaabada xaafadda gaadiidka isku-socodka yar Haddii aad u baahan tahay buug-yarahan ina turjumay ama u baahan caawimaad dhamaystirka su'aalaha, fadlan la xiriir cinwaanka emailka kor ku xusan. Si ka duwan, sax sanduuqan, buuxi foomka hoose iyo boostada this page in cinwaanka ku xusan Freepost kor ku xusan (stamp looma baahna).

SPANISH / Español ☐

Este folleto busca recabar su opinión sobre el ensayo de Vecindario de Tráfico Reducido. Si necesita que este folleto sea traducido o necesita ayuda para completar el cuestionario, póngase en contacto con la dirección de correo electrónico indicada más arriba. Alternativamente, marque esta casilla, complete el formulario a continuación y envíe esta página a la dirección Freepost anterior (no se requiere sello).

TURKISH / Türkçe ☐

Bu yaprakçık Düşük Trafikli Mahalle denemesi konusundaki görüşlerinizi almak istemektedir. Eğer bu yaprakçığın tercüme edilmesini istiyorsanız ya da anket formunu tamamlamak konusunda yardıma ihtiyacınız varsa, lütfen yukarıda belirtilmiş olan e-posta adresi yoluyla temasa geçin.
Alternatif olarak, bu kutuyu işaretleyin, aşağıdaki formu doldurun ve bu sayfayı yukarıdaki Ücretsiz Posta adresine gönderin (pul yapıştırmak gerekmez).

Name _____

Address _____

_____

Phone number: _____

Large print ☐ On disk ☐ On audio tape ☐

Braille ☐ Another language ☐ Please specify _____

If you need any other assistance in responding, please call **020 8489 4787**
or email **LTN@Haringey.gov.uk**

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