

# **In-Vehicle Information Systems (IVIS) Consultation**

Autumn 2006

Questionnaire

## **Instructions**

This questionnaire has been designed for completion within Microsoft Word, for return by email. Please note that the document has been "locked" in order to preserve the formatting, and answers should be entered directly into the light-grey areas located in the bold answer boxes. We would be grateful if you could indicate an answer for every question, and provide comments in the relevant boxes where necessary.

When complete please return the questionnaire as an attachment to:

**TTS.enquiries@dft.gsi.gov.uk**

Thank you very much for your help. We look forward to receiving your completed questionnaire.

**A Your Personal Details**

01 **Name**

02 **Organisation**

03a **Type of Organisation** (please tick appropriate box)

Member of public	<input type="checkbox"/>
Local Authority	<input type="checkbox"/>
Manufacturer (Please specify type in 03b)	<input type="checkbox"/>
Campaign group	<input type="checkbox"/>
Other (Please specify in 03b)	<input checked="" type="checkbox"/>

03b

04a **Address**

04b **Postcode**

05 **Telephone Number**

06 **Fax Number**

07 **Email Address**

**B Questions Relating to Chapter 3 of the Consultation Paper**

08 **Have you used a route guidance device?** (please tick appropriate box)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

09 **To what extent are you concerned about the driver distraction potential of route guidance devices?** (please tick appropriate box)

Very concerned	<input checked="" type="checkbox"/>
Concerned	<input type="checkbox"/>
Slightly concerned	<input type="checkbox"/>
Not concerned	<input type="checkbox"/>
Don't know	<input type="checkbox"/>

10 **To what extent are you concerned about the mapping and routeing issues associated with route guidance devices?** (please tick appropriate box)

Very concerned	<input type="checkbox"/>
Concerned	<input type="checkbox"/>
Slightly concerned	<input checked="" type="checkbox"/>
Not concerned	<input type="checkbox"/>
Don't know	<input type="checkbox"/>

11a **What in your opinion is the best way to tackle driver distraction and/or routeing concerns?** (please tick all appropriate boxes)

Regulation	<input checked="" type="checkbox"/>
Central Government Guidance	<input checked="" type="checkbox"/>
Industry code of practice	<input type="checkbox"/>
Manufacturer self-testing	<input type="checkbox"/>
Other (Please specify in 04b, and continue onto a separate sheet if necessary)	<input checked="" type="checkbox"/>

12b

Please see attached sheet.

13a **Are you happy with the level of communication between Local Authorities/Traffic Managers and mapping companies?** (please tick appropriate box)

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input checked="" type="checkbox"/>

13b **Please explain your answer, and continue onto a separate sheet if necessary.**

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14 **What could be done to improve communications?**

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15 **Should the onus be on Local Authorities to inform mapping companies of changes to local traffic networks, or on mapping companies actively to seek out this information?**  
(please tick the appropriate box)

Local Authorities	<input type="checkbox"/>
Mapping companies	<input type="checkbox"/>
Both	<input checked="" type="checkbox"/>
Don't know	<input type="checkbox"/>

16 **Should the onus be on Local Authorities to liaise with mapping companies on local traffic network management issues, or on mapping companies actively to seek out this information?**  
(please tick the appropriate box)

Local Authorities	<input type="checkbox"/>
Mapping companies	<input type="checkbox"/>
Both	<input checked="" type="checkbox"/>
Don't know	<input type="checkbox"/>

17 **Should Local Authorities charge for their provision of roads information?** (please tick appropriate box)

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input checked="" type="checkbox"/>

18 **Do you consider the use, by heavy vehicles, of route guidance devices to be...?** (please tick appropriate box)

Significant benefit	<input type="checkbox"/>
Slight benefit	<input type="checkbox"/>
Niether a benefit nor a problem	<input type="checkbox"/>
Slight problem	<input type="checkbox"/>
Significant problem	<input type="checkbox"/>
Don't know	<input checked="" type="checkbox"/>

19a **What are the major barriers to the development of heavy-vehicle-customised route guidance?** (please tick the appropriate boxes)

Cost	<input type="checkbox"/>
Availability of heavy vehicle route information.	<input type="checkbox"/>
Formatting of heavy vehicle information	<input type="checkbox"/>
Other (please specify in 19b)	<input type="checkbox"/>
Don't know	<input checked="" type="checkbox"/>

19b

19c **How can these barriers be overcome?**

20 **Do you consider that there are any groups of road users who pose a particular problem in terms of routeing? Please describe below and continue on a separate sheet if necessary.**

**C Questions Relating to Chapter 4 of the Consultation Paper**

21 **Does your organisation provide dynamic route guidance services?** (please tick appropriate box)

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

22 **Does your organisation provide information which feeds into, or is capable of being fed into, dynamic route guidance systems?** (please tick appropriate box)

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

23 **Does your organisation have a licence from the DfT?** (please tick appropriate box)

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

24a **Do you think DfT should have a role in examining the safety and routing of route guidance devices on the UK market?** (please tick appropriate box)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input type="checkbox"/>

24b **Please explain your choice below and continue on a separate sheet if necessary.**

Please see attached sheet.
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25 **Should static and dynamic systems be subject to the same level of scrutiny in terms of HMI safety and routing?** (please tick appropriate box)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input type="checkbox"/>

26a **Is the current licensing system fit for purpose?** (please tick appropriate box)

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>
Don't know	<input type="checkbox"/>

26b **Please give the principle reason for your answer below.**

Please see attached sheet.

27a **Would you prefer a self-compliance scheme to the current licensing regime?** (please tick appropriate box)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input type="checkbox"/>

27b **If yes, which of the following do you believe are appropriate to form the basis of such a scheme?** (please tick appropriate boxes)

European Statement of Principles	<input checked="" type="checkbox"/>
TRL Routeing Guidelines	<input checked="" type="checkbox"/>
Other (please specify in 27c)	<input checked="" type="checkbox"/>

27c Please see attached sheet.

28 **Are you aware of the European Statement of Principles on the design of Human Machine Interaction?** (please tick appropriate box)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

29a **If your organisation manufactures in-vehicle devices, does it subscribe to the contents of the European Statement of Principles on Human Machine Interaction safety?** (please tick appropriate box)

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input type="checkbox"/>
Not applicable	<input checked="" type="checkbox"/>

29b **Are there any areas with which you or your organisation disagree? If so, please describe below and continue on a separate sheet if necessary.**

Please see attached sheet.

30 **Are you aware of the Department for Transport's *Framework for Routeing: Assessment of Dynamic Route Guidance systems*? (please tick appropriate box)**

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

31a **If your organisation manufactures in-vehicle devices, does it subscribe to the contents of DfT's *Framework for Routeing: Assessment of Dynamic Route Guidance Systems*? (please tick appropriate box)**

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input type="checkbox"/>
Not applicable	<input checked="" type="checkbox"/>

31b **Are there any areas with which you or your organisation disagree? If so, please describe below and continue on a separate sheet if necessary..**

32a **Do you foresee any need to maintain legislation concerning use of roadside infrastructure? (please tick appropriate box)**

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input checked="" type="checkbox"/>

32b **Please explain your answer, and continue on a separate sheet if necessary.**



33a **Which of the options presented in Chapter 4.2 of the Consultation Paper would you favour?** (please tick appropriate box)

Option 1	<input type="checkbox"/>
Option 2	<input checked="" type="checkbox"/>
Option 3	<input type="checkbox"/>
Option 4	<input checked="" type="checkbox"/>
Other	<input checked="" type="checkbox"/>

33b **Please explain your answer, and continue on a separate sheet if necessary.**

<p>Please see attached sheet.</p>
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34 **Should DfT incentivise self-compliance to Good Practice criteria?** (please tick appropriate box)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>
Don't know	<input type="checkbox"/>

35a **Which of the suggested incentives would you favour?** (please tick appropriate box)

No incentive needed	<input type="checkbox"/>
Published list of self-complying organisations	<input type="checkbox"/>
Logo for self-complying organisations	<input type="checkbox"/>
Star-rating of all route guidance systems on the market	<input checked="" type="checkbox"/>
Other method (please describe in 11b).	<input type="checkbox"/>

35b **Please explain your choice below, and continue on a separate sheet if necessary..**

<p>Please see attached sheet</p>
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36

**Do you have any further comments? If so, please describe below, and continue on a separate sheet if necessary.**

Please see attached sheet.

Thank you for taking the time to complete this questionnaire. Please email your response to **TTS.enquiries@dft.gsi.gov.uk**

or send postal returns to:

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