



HEALTH ESTATES

creating healing environments



GUIDANCE

**HSC HOSPITAL CAR PARKING
PROVISION AND MANAGEMENT**

JUNE 2008

Introduction

Most of our hospitals were designed and built in an era when car ownership and usage were significantly less than they are today. With more services being placed on constricted hospital sites together with an increase in health and social care activity, there is evidence to suggest that current capacity and management of car parking has become a problem for most acute hospitals in Northern Ireland. This is having a significant impact on the ability of patients to gain access to hospital facilities and meeting their scheduled appointments.

Department of Health, Social Services and Public Safety (DHSSPS) policy covering car park management, including policy decisions concerning the introduction of charging and the levels of charges, has been that this is a local operational matter for Trusts. However, this may have resulted in a lack of consistency across health and social care for eligibility criteria for free car parking for patients or relatives who have to attend frequently or for extended periods, such as extended cancer and renal dialysis treatment.

This Guidance for HSC Hospital Car Parking Provision and Management has therefore been developed to assist Trusts demonstrate that the introduction of car parking charging reflects a reasonable balance between the perceived needs of legitimate car park users and the costs of providing and maintaining car parking facilities. In addition, Trust environmental and sustainability responsibilities must be considered in regard to car park provision and if charging is considered as one aspect of meeting these responsibilities, such decisions must be able to demonstrate the principle of transparency - charging can only be justified as part of a wider, environmentally planned approach to travel management that facilitates access to our hospitals by patients, carers, visitors and staff.

It is recognised that issues of access and implementation of car parking arrangements at sites where there are present difficulties will often involve difficult choices and decisions. The solutions adopted at each site must fit the particular needs and circumstances of the site. This guidance is intended to highlight the key factors involved, and to help to ensure a fair approach to this issue.

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1 KEY PRINCIPLES

- 1.1** Car parking solutions adopted at each hospital must fit the particular needs and circumstances of the facility
- 1.2** Environmental and sustainability responsibilities must be acknowledged by society and considered when it comes to making decisions concerning car park provision including aspects of effective management such as charging. Such decisions must be able to demonstrate the principle of transparency and charging, if introduced, must be justified as part of a wider, environmentally planned approach to travel management that facilitates access to our hospitals by patients, carers, visitors and staff.
- 1.3** The regional guidance for eligibility criteria for free car parking must be applied to ensure consistency of criteria and their application across health and social services.
- 1.4** HSC Trusts must ensure that there is a reasonable allocation of car parking spaces available to allow patients and carers to attend clinics and appointments, including access for emergencies, and there should be clear information available to patients on how to get to the site including parking arrangements and any free car parking criteria or concessions.
- 1.5** HSC Trusts should seek to ensure that a reasonable allocation of spaces is made available for staff, taking into consideration the overall availability of car parking on the site and the need to balance the needs of patients and visitors.
- 1.6** Arrangements for allocating and charging for staff parking, which must reflect the needs of good employment practice and essential car use required for the delivery of services, must be agreed through local staff partnership arrangements.

2 THE ENVIRONMENTAL AND SUSTAINABILITY CONTEXT

The National Transport Strategy for Northern Ireland 2002-2012

- 2.1** Momentum is gathering to demonstrate that action is being taken towards the adoption of sustainable development principles in the health and social care estate in line with the National Transport Strategy for Northern Ireland 2002-2012.
- 2.2** Accessing health and social care services can be a challenge for those who live in rural areas of Northern Ireland; live in isolated or deprived urban communities on the outskirts of our towns and cities; have limited mobility through age or disability; or are on low income and have no access to a car.
- 2.3** Just over one quarter (26%) of households in Northern Ireland do not have access to a car (NISRA 2003-2005) with 53% of households in Belfast, 79% and 77% in East and West Northern Ireland having access to a car. Adequate Public Transport links to health and social care services are therefore important for non car users, particularly in the Belfast area, and are seen increasingly as a more acceptable environmental alternative to growing car usage. The high car access rates in the East and West of the province indicates the rural context when considering adequate public transport services.
- 2.4** Over the same period in Northern Ireland as a whole, over 74% of our households had access to a car which is a significantly higher percentage in comparison with Scotland which has a figure of 27%. It could indicate that the continued growth in car ownership in Northern Ireland results in the prime mode of transport to our hospitals being cars with a consequential increase in capacity and congestion problems.
- 2.5** Added to this trend is the forecast rise from 88% to 91% of all road traffic movements by 2015 (Belfast Metropolitan Transport Plan). Data from the Roads Service Vehicle Kilometre of Travel Survey in Northern Ireland indicates that there has been a road-based traffic growth of around 2.8% per annum in the region since 1991. The Belfast Metropolitan Transport Plan also notes that the increase in car dependence and deteriorating public transport serves to reduce accessibility for those without access to a car and thereby reduces social inclusion and widens the divisions in society.
- 2.6** The National Transport Strategy for Northern Ireland expects that all government and public sector organisations, including HSC Trusts, to lead by example and demonstrate commitment to the National Strategy by producing Healthy Transport Plans. The DHSSPS Fleet and Transport Management Controls Assurance Standard require HSC organisations to provide evidence of compliance with such policies.

Environmental Management

2.7 HSC Trusts are required to identify targets for reducing environmental pollution from transport in partnership with relevant stakeholders. Trust Transport Action Plans should address issues such as car sharing, cycling, public transport and car park management for patients, staff and the general public (DHSSPS Fleet and Transport Management Controls Assurance Standard).

Travel Planning

2.8 HSC organisations' Transport Action Plans should offer a package of practical measures in order to reduce the impact of travel both to and from the hospital. The DHSSPS has adopted the Healthy Transport Toolkit (Transport 2000) to assist HSC organisations in reviewing their current arrangements to support the introduction of Healthy Transport Plans. Plans should aim to:

- Encourage patients and visitors to use more sustainable travel options to get to hospitals.
- Encourage staff to adopt healthy transport choices such as walking and cycling where this is a realistic option.
- Explore car parking needs with Public Transport providers which may include consideration of park and ride schemes.
- Pursue opportunities for sharing vehicles or transport not only for staff but to explore innovative solutions to minimise journeys
- Consider journey management and distance covered.
- Ensure that the Trusts actions in respect to transport do not have an adverse impact upon the environment and consequently, the health of the population which we serve - there is a requirement to balance the needs of patients, visitors and staff against ensuring protection of the environment for which we all have a responsibility.

2.9 HSC Transport Plans should address transport problems from a new direction by managing demand for road and parking spaces more effectively. The management of car parking at HSC hospitals is therefore an integral part of wider travel planning requirements, including Trust environmental responsibilities.

3 CAR PARKING PROVISION

- 3.1** The provision and improvement of car parking and the development of alternative ways of accessing hospital sites incurs costs which need to be met through charges or from funding which might otherwise go to patient services. We therefore need to ensure that such considerations are justified and are part of a wider, environmentally planned approach to travel management that facilitates access to our hospitals by patients, carers, visitors and staff.
- 3.2** HTM 07-03: Transport Management and Car Parking provides comprehensive guidance on the issues to be considered when planning and assessing car parking issues together with the Healthy Transport Toolkit which will assist HSC organisations in reviewing their current arrangements to support the introduction of Healthy Transport Plans. Some issues which need to be considered include:

Site congestion

- what the overall number of spaces will be and how these will be positioned to support traffic flow
- how misuse of the car park (particularly if near a city or town centre, railway station etc) by those using the site for free or cheap parking will be avoided
- facilitating access for emergency care
- facilitating access routes for the emergency services
- ensuring compliance with fire and health and safety regulations

As space for car parking will vary from site to site, more stringent criteria may be needed to balance the interests of patients, the public and staff at restricted sites.

Patient and Public need

- the distance that patients and visitors will have to walk to healthcare services
- the provision of convenient spaces for certain users
- how to maintain a turnover of the available spaces to meet service and patient needs
- the provision of drop off and pick up points for patients, visitors and staff

Staff need

- the reasonable allocation of spaces for use by staff, taking into consideration the overall availability of car parking on the site and the need to balance the needs of patients and carers.

Security:

- the security arrangements needed to protect both people and property

Local Residents

- the potential impact on off-site parking resulting from the introduction of car parking charging
- addressing disturbance factors, such as noise and light pollution.

Disabled People

- a proportion of parking spaces must be set aside in line with Health Estates Guidance together with other appropriate guidance such as Disability Action guidance on the provision of car parking.
- each Trust must consult with local Disability Action groups about the provision of these spaces to ensure that they meet the needs of disabled persons.
- such provision should be kept under review and car parking user groups including disabled persons is a recommended approach.
- readily available assistance for unaccompanied registered disabled drivers is recommended.
- if possible, the needs of disabled patients should be ascertained prior to their appointment

3.3 The arrangements for car parking management in each Trust's Healthy Transport Plan have to reflect these different pressures and circumstances, and carefully balance the potentially conflicting interests of patients, the public and staff.

4 CAR PARKING CHARGING

Principles

- 4.1** The provision and improvement of car parking and the development of alternative ways of accessing hospital sites incurs costs which need to be met through charges or from funding which might otherwise go to patient services. We therefore need to ensure that such considerations are justified and are part of a wider, environmentally planned approach to travel management.
- 4.2** Car parking solutions adopted at each hospital must fit the particular needs and circumstances of the facility and if introduced as part of a local solution, Trusts must be able to demonstrate the effectiveness of such decisions.

Benefits of Charging

- 4.3** The introduction of car park charging may:
- be justified as part of a wider, environmentally planned approach to travel management and facilitating better access to our hospitals by patients, carers, visitors and staff
 - be one aspect of protecting limited capacity and managing congestion
 - providing, improving and maintaining car parking services to the level that users expect, for example, keeping road surfaces, road markings, lighting, ticket barriers and machines etc in good working order;
 - investing in other modes of transport for staff and patients, e.g. pool cars, park and ride shuttle buses, subsidised bus fares, in order to meet Trust Healthy Transport Plans
 - cover the cost of making existing facilities more secure, for example to avoid theft, both of and from cars. Patrols, security lighting, barriers; and closed circuit television can improve security, and assist in deterring crime and making staff and visitors feel safer
 - provide funding for car parking provision/management which might otherwise have to be found from the provision of patient services.

Should there be any restrictions on Charging?

- 4.4** Charges should take into account:
- charges in the surrounding area
 - the availability of alternative forms of transport depending on the location.
 - patients who attend frequently for treatment and/or have treatment which is time consuming should be entitled to free car parking (see Eligibility for Free Car Parking)
 - free or concessionary parking should be available for certain categories of patients and visitors (see paragraphs 4.11 to 4.20)

Should there be a standard charge range across HSC?

4.5 It is not practical to set a standard charge range as:

- supply and demand vary across Northern Ireland depending on location of the HSC facility
- the level of charges for car parking in the local area may vary
- the differing levels of investment required at each HSC facility.
- the planning restriction at the BCH which is located in a designated restricted parking area which requires the hospital to set charging levels to discourage extended or all day parking.

Engagement

4.6 HSC Trusts are required to systematically engage with patient and public groups, their staff and relevant local organisations, for example the local authorities and transport providers in their area, about changes to services. These requirements apply to proposals to introduce or revise car parking charges.

4.7 The engagement process should clearly recognise:

- the transport and environmental responsibilities placed on the Trust
- it is unlikely that the car parking facilities at hospital sites will be sufficient to meet the demand of all patients, visitors and members of staff who wish to use their cars to travel to a hospital
- criteria for car parking may have to vary from site to site, and be more stringently applied at restricted sites
- the process is intended to help the Trust balance the interests of patients, the public and staff and apply the agreed criteria as fairly and equitably as possible.

Unauthorised or Inappropriate Parking

4.8 Where unauthorised or inappropriate parking is a particular problem, for example at hospitals in city or town centres or near major transport interchanges, HSC Trusts should, drawing on advice from guidance issued by Health Estates, use a combination of measures, including charges and time limits to encourage turnover. For persistent or serious unauthorised parking, physical car parking deterrents such as clamping are permitted.

4.9 However, measures taken to discourage unauthorised parking must not be detrimental to the arrangements for patients, visitors and staff.

Patients & Visitors

4.10 HSC Trust Health Travel Plans should, as far as practical, ensure convenient access for patients to hospitals. Travel plans should recognise

that there is increasing car dependence across rural areas of Northern Ireland and where there is limited public transport availability; car travel may be the most convenient way for them to travel to hospital.

Eligibility for Free Car Parking

- 4.11** The eligibility criteria for free car parking across those HSC hospitals that are currently charging are inconsistent and could be seen as unfair to certain individuals depending on their personal circumstances.
- 4.12** The following eligibility matrix for free car parking has been devised by the Regional Car Parking Review Group with the intention of introducing transparency, fairness and consistency across the HSC based on the patient care path. This is a balanced approach between what is considered fair and reasonable for recovering the costs of car parking provision against what is considered fair and reasonable from a caring health and social care provider.
- 4.13** It is intended that this eligibility matrix for free car parking will remain under review to ensure that other circumstances that arise which indicate that it would be appropriate to include other regional exemption criteria within the regional eligibility matrix.
- 4.14** HSC Trusts will be expected to exercise discretion to apply the eligibility criteria in other situations where the duration and/or frequency of visits leads to significant charges e.g.
- a patient may have a number of outpatient appointments over an extended period
 - a patient may benefit from lengthy or frequent visits from relatives or friends to help with adjustment to a new environment
 - a patient outside the prescribed treatment categories who has to make lengthy and/or frequent visits for treatment.
- 4.15** HSC Trusts should ensure that patients with a number of outpatient appointments over an extended period which involves travelling to a number of HSC facilities (including inter Trust) are considered within the eligibility criteria for free car parking.
- 4.16** HSC Trusts should consider relevant local factors when exercising their discretion; the ability to use public transport is one factor. However, flexibility is important and individual patient-life circumstances should always be taken into account.
- 4.17** Attending in a voluntary capacity, for example, as a blood donor or as a member of a Volunteer Driver Service for patients should fall within the free car parking eligibility criteria.

HSC Eligibility Matrix for Free Car Parking

Care Path	Application of Free Car Parking			
	Patient	Next of Kin/Partner	Relative	Visitor
Radiotherapy Chemotherapy	Yes	Yes if transporting patient	Yes if transporting patient	N/A
Renal dialysis	Yes	As above	As above	N/A
Critical Care/ High Dependency	N/A	Yes	Discretionary	Discretionary

Concessions

4.18 HSC Trusts may choose to grant concessions as opposed to free car parking only in discretionary situations but they must not substitute concessions for free car parking for the outlined care paths.

Communication of Eligibility Criteria

4.19 HSC Trusts must ensure that information on their eligibility criteria for free and concession parking is clear, accessible and widely available to patients, carers, families and friends e.g. HSC Trust websites, appointment letters etc.

Management of Application of the Eligibility Criteria

4.20 HSC Trusts must ensure that there is consistent management of the application of the criteria. If this is left to the discretion of nursing staff, they must be provided with clear guidance on how to exercise that discretion.

Hospital Travel Costs Recovery Scheme

4.21 Patients who fulfil specified low income criteria may be able to reclaim car parking charges via this scheme. Information on this scheme should be widely available to patients, carers, families and friends e.g. HSC Trust websites etc.

Staff Charging

4.22 Achieving a balance between the needs of patients, visitors and staff in the use of limited parking spaces at a hospital will require the active involvement

of staff, managers, clinical staff, and trades union/professional organisations representatives in developing and implementing criteria which ensure transparency in staff charging levels if they are introduced.

4.23 HSC Trusts should involve staff and their representatives through staff partnership arrangements in decisions about how they can comply with the environmental and sustainability requirements placed on society to:

- reduce transport journeys for employee business requirements
- manage transport to ease congestion
- reduce emissions from exhausts.
- reduce reliance on single user car travel
- encourage active travel modes, such as walking and cycling
- relieve congestion and pollution through the effective management of car parking

4.24 HSC Trusts should also involve staff and their representatives through staff partnership arrangements in consideration of:

- the impact on staff of the introduction of, or revision of car parking charges
- good employment practice
- essential car use involved in the delivery of services
- regular review of the working of the agreed arrangements.

Car Parking Review Group

Health Estates would like to thank the members of the HSC Car Parking Review Group for their assistance and support in developing this guidance

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