NHS Lothian

John Jack Director of Facilities

5th June 2008

REPORT ON CHARGING FOR CAR PARKING AND THE IMPLEMENTATION OF CEL1 (2008) WITHIN NHS LOTHIAN

1 Purpose of the Report

1.1 The purpose of this report is to brief the Scottish Government Health Department on the implementation of CEL1(2008).

2 Executive Summary

- 2.1 Based on the revised advice contained within CEL1(2008), NHS Lothian has:
 - (i) Reviewed all traffic management arrangements in operation on our sites:
 - (ii) Conducted a financial review of the operation of our car parks and sustainable travel initiatives;
 - (iii) Where charges apply, with the exception of the Royal Infirmary of Edinburgh (RIE), we have implemented a maximum charge of £3.00 per day;
 - (iv) Negotiated in conjunction with our PFI partners a reduction in the maximum tariff applied RIE from £10 to £7 per day;
 - (v) We have maintained free parking on the vast majority of our other sites albeit this is subject to on-going partnership review particularly where sites are becoming increasingly congested;
 - (vi) Engaged with staff, other stakeholder partners (including Local Authorities and the Regional Transport Partnership) and the public in reviewing our traffic management arrangements:
 - (vii) Considered the specific needs of staff and patients/visitors in the design of our car parks and the allocation of spaces including our Assisted Parking service for cancer patients, and dedicated disabled spaces close to hospital entrances:
 - (viii) Developed a range of sustainable travel initiatives including:
 - a. Healthlink bus service operating daily between RIE and St John's Hospital in Livingston;
 - b. Staff Shuttle and MPV services operating between the main City of Edinburgh hospital sites:
 - c. Promotion of our tele/videoconferencing capability to reduce the need to travel to meetings;
 - d. Engagement with Local Authority Public Transport managers to maximise
 - e. commercial bus route opportunities;
 - f. Planning for the implementation of the Government Cycle to Work scheme;

- g. Development of a dedicated car sharing scheme to be launched on 9th June 2008:
- h. Implementation of an assisted annual travel pass purchase scheme.
- (ix) Initiated the development of trading accounts for car park operation; and
- (x) Developed and implemented a schedule of concessions which will be further refined subject to budget setting review
- 2.2 The additional costs associated with the full implementation of the advice contained within the CEL1 (2008) in respect of the NHS managed sites is currently £250,000 per year and £500,000 per year for implementing the £3.00 cap on tariffs within the PFI contract at the RIE. There would also be a loss of revenue from profit share of £200,000. The sum of £338,000 has also been incurred in Green Travel initiatives.
- 2.3 Analysis of the document has been undertaken by our PFI partners with regard to the other provisions associated with the revised concessions and the additional operational arrangements that would be required to manage the changes. The initial advice following this is that we would face significant congestion and reduction in patient and visitor access as a result.

3 Introduction

- 3.1 The updated Scottish Government guidance on the levying of charges in hospital car parks CEL1 (2008) has been endorsed by NHS Lothian and embedded within our traffic management arrangements.
- 3.2 The revised guidance is a key document as we re-profile our existing car park charging arrangements and concessions throughout the Board area, design traffic management systems on those sites which are currently congested and uncontrolled, and plan for expansion of car parking capability on Western General Hospital, Royal Infirmary of Edinburgh and St. John's Hospital.
- 3.3 The key principles within our approach to access, traffic management and sustainable travel which are aligned to CEL1(2008) are as follows:
 - 3.3.1 We acknowledge our responsibility to work with stakeholders to help to ensure good and sustainable access for patients, carers, visitors and staff to NHS sites. This is achieved by our Transport and Access Steering Group which works with includes West and East Lothian Councils, Scottish Ambulance Service, Lothian Partnership Forum, and public representation within its membership. We are also actively engaged in positively influencing commercial transport operators for the benefit our staff, patients and visitors.
 - 3.3.2 Car parking charges on our sites will only be applied where sites suffer from significant congestion and require provision of appropriate physical traffic management arrangements. Otherwise parking will be provided free.
 - 3.3.3 Charges for car parking will only be implemented as part of a planned approach to facilitating sustainable access to sites and to cover the costs of car park provision. This has always been the position within NHS Lothian evidenced by us being the first organisation to have tiered charges related to salary bandings for staff and our recent agreement with our private sector

- partners at the Royal Infirmary of Edinburgh to reduce the maximum tariff on that site.
- 3.3.4 We will 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 concessions.
- 3.3.5 We will also ensure that a reasonable allocation of spaces is also made available for staff, reflecting the overall availability of car parking on the site. This and paragraph 3.2.4 above, are both supported by staff partnership discussion. On those of our own sites which have traffic management systems the ratio of staff to patient/visitor spaces is approximately 70:30. At the RIE (circa 1700 spaces) the staff to patient/visitor split is approximately 80:20 with two car parks (600 spaces) dedicated staff and the remainder integrated throughout the other car parks.
- 3.3.6 We do ensure that arrangements for allocating staff parking does reflect the needs of good employment practice and essential car use required for the delivery of services, will be agreed through local staff partnership arrangements.

4. Implementation of CEL1 (2008)

- 4.1 It is recognised that expanded car parking capability is required to support emerging clinical strategies however this will be kept to a minimum and aligned to our Green Travel Plan.
- 4.2 Given the above requirement it is therefore incumbent upon us to consider how we embed the principles taken from the Scottish Government document within our traffic management arrangements. It is worthy of note that we are already leading the way within NHS Scotland on the development of a sophisticated system of managing access to our services including parking.
- 4.3 Many of the principles embodied by our system pre-date their requirement within CEL1 (2008). These included:
 - Tiered charging according to salary for staff car parking (appendix 1);
 - A comprehensive application criteria for staff car park permits (appendix 2);
 - Dedicated assisted parking for cancer and colorectal day patients
 - A comprehensive schedule of concessions (appendix 3) to support regular and frequent patient and visitor attendance at hospital;
 - Free parking provided where possible
 - · Engagement with stakeholders; and
 - · Sustainable travel initiatives.
- 4.4 The publication of the revised guidance is therefore viewed by us as a natural development of that which was already in place within Lothian.
- 4.5 A review of our arrangements against the guidance has been carried out and further refinement includes:

- The reduction in the maximum tariff (only applicable at the Western General Hospital) implemented on 8th February 2008;
- Review of schedule of concessions subject to appropriate budget setting. The
 concessions presently in place and those being proposed are contained within
 appendices 3 and 4;
- The development of individual trading accounts for income and expenditure associated with car parking;
- The further development and implementation of sustainable travel initiatives including the NHS Lothian Car Sharing and Cycle to Work schemes.
- 4.6 While CEL1(2008) at this stage specifically, excludes the RIE as a PFI/PPP site, there are presently a range of existing concessions for patients, visitors and staff in place on all sites detailed in appendix 3. It can be seen from the table in appendix 4 that no adjustment is being made to either the tariff or concessionary arrangements in place at the RIE
- 4.7 To support further guidance being developed in respect of PFI sites, advice from our PFI partners has been provided and suggests that the operational issues associated with implementing the guidance as it stands would be considerable.
- 4.8 Implementation of the extended concessions and free parking beyond that which is already in place would reduce income in respect of St. John's Hospital and Western General Hospital by approximately £250,000 per annum. A full analysis of the additional costs is detailed in appendix 5.
- 4.9 It is very important to note that limiting the upper tariff to £3.00 would put additional pressure on the car parks at the RIE (and WGH) where the occupancy levels are already high (waiting lists are already in operation for staff parking permits) and only just manageable at peak times. Setting the maximum charge at this level brings it close to the cost of return bus journeys to the local park and ride or return bus journeys to anywhere in Edinburgh where a bus transfer is not required and thereby negating the economic motivation for staff to use public transport. Car parks would therefore be filled with cars belonging to hospital staff and staff and students of Edinburgh University.
- 4.10 The result of this would be no available spaces for patients or visitors and significant congestion within, and on the roads around, the hospital site causing delays to access for staff, patients and visitors. It would be necessary to adopt an increasing tariff for stays above 4 hours in order to deter inappropriate all day parking.
- 4.11 With regard to the administration of low-income concessions, it should also be noted that our Finance Directorate is assessing the implications of how these concessions will be managed within a review of the Hospital Cashiers' duties. This may result in a further staffing on-cost.
- 4.12 It should also be noted that business cases are presently being prepared in relation to the extension of structured traffic management within the Astley Ainslie Hospital and Royal Edinburgh Hospital sites where considerable parking congestion presently exists. We will however monitor the impact of the reduced upper tariff both on our existing sites where charges are extant and on these new sites to

ensure processes are in place within the terms of the guidance to deter city centre commuter parking within our public car park areas.

John Jack Director of Facilities 3rd March 2008

List of Appendices

The following Appendices are attached:

Appendix 1: Staff car park charge structure. Appendix 2: Staff permit application criteria Appendix 3: Current car park concessions Appendix 4: Proposed car park concessions

Appendix 1 - Tiered staff car park charges

Salary Range	Cost
Below £10K per annum	Free
£10K to £20K per annum	£60
£20K to £30K per annum	£150
£30K to £50K per annum	£200
Over £50K per annum	£250

Appendix 2 – Staff Permit Application Criteria

The following are the application criteria for awarding parking permits. Each application will score points against these criteria and permits will be awarded on the basis of this scoring. The application process has been agreed and established on a partnership basis.

Criteria	Detail			
Business Need	Travel between sites or into the community on a daily basis not covered by or using dedicated NHS transport			
	Frequent travel required at short notice			
	Travel between sites, 3 days or more a week not covered by dedicated NHS transport, or use of a departmental pool car.			
	Regularly works across multi sites/other organisations more than twice per week.			
Car sharing	ID numbers of all staff sharing must be given and verified. Staff sharing cannot apply for separate permit under any other criteria			
Distance (applicant	No public transport option at all			
should reside out-with a 1.5	Travel time takes over 90 minutes, on a normal day			
mile radius.)	Travel takes 3 or more journey legs			
Personal Need	Registered disabled			
	III health / disability – supported by occupational health			
	Those staff whose carer obligations are regularly directly dependant on immediate vehicle access or where the applicants vehicle is directly required/provided for caring purposes (e.g. Motability) and those who have other regular exceptional caring commitments.			
Unsocial Hours	Regularly rostered to work 12 hours or longer per shift			
Other need	Organisational change/Redeployment			
Service need	Urgent service need backed by Director			

Appendix 3 - Car parking Concessions (Current)

Site	Patient Group	Concession	Method
St John's Hospital			
	Renal	Free	Intercom
	Oncology inc. McMillan Centre	Free	Intercom
	Physio	£5 per month	Application to Car Parking control
	SCBU	£5 per month	Application to Car Parking control
	Maternity	£5 per month	Application to Car Parking control
	Frequent Visitor	£5 per week	Application to Car Parking control
	Disabled	Free	Intercom
	Volunteers	Normal Charge	
	Frequent Attendees	Normal Charge	
	Low Income	Normal charge	
Western General Hospital			
	Renal	Free	Intercom
	Oncology	£1 per visit	Ticket on entry
	Disabled	Free	Intercom
	Patient	Normal charge*	Intercom
Royal Infirmary of Edinburgh			
	Renal	Free	Virtual pass
	Haemophiliacs	Free	Dedicated 2 spaces
	NNU	£3 per day	Blue Voucher
	Staff (nights and weekends)	£3 per day	Blue Voucher
	Patients/Visitors	£3 per day **	Blue Voucher
	Patients/Visitors	Free ***	Red Voucher
	Disabled	Free ****	Intercom

If over 4 hours cost will be reduced to £1 for SJH and £3 for WGH on confirmation from Clinical Staff to Security Where their vehicle is on site longer than 24 hrs or those who have exceeded £10 in the previous 7 days. Patients who attend frequently (once a week or more)
Where attendance relates to extreme trauma / bereavement

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In marked bays out with car parks

Appendix 4 - Car Parking Concessions (Proposed)

Site	Patient Group	Proposed Concession	Method
St John's Hospital		Concocción	
	Renal	Free	Intercom
	Oncology inc. McMillan Centre	Free	Intercom
	Physiotherapy	Free *	Application to Car Parking control
	SCBU	Free *	Application to Car Parking control
	Maternity	Free *	Application to Car Parking control
	Frequent Visitor	£5 per week *	Application to Car Parking control
	Disabled	Free	Intercom citing blue badge reference number
	Volunteers	Free	Application to Car Parking control
	Frequent Patient	Free*	Application to Car Parking control
	Low Income	Level under discussion	Application to Hospital Cashier
Western General Hospital			
	Renal	Free	Intercom
	Oncology	Free**	Ticket on entry
	Disabled	Free	Intercom
	Frequent Visitor	£5 per week *	Intercom
	Volunteers	Free	
	Frequent patient	Free	
	Low Income	Level under discussion	Application to Hospital Cashier
Royal Infirmary of Edinburgh			
	Renal	Free	Virtual pass
	Oncology	Free	Dedicated 2 spaces
	Disabled	£3 per day	Blue Voucher
	Frequent Visitor	£3 per day	Blue Voucher
	Volunteers	£3 per day	Blue Voucher
	Frequent patient	Free	Red Voucher
	Low Income	Free	Intercom

Dependent upon frequency of attendance Relates to Assisted Parking Scheme