1. Purpose of this Report:

The paper presents progress to review issues relating to service user/visitor parking provision at the Trust’s 2 inpatient sites (LMH/ACMHU). This follows analysis of demand, national guidance exceptions, and the options to improve parking access.

2. Summary of Key Points

The Trust is currently not meeting all standards within relevant national guidance:
- Provision at LMH achieves the overall recommended ‘benchmark’ number of parking spaces. However, provision allocated specifically to service users/visitors is significantly less than the suggested benchmark;
- Provision at ACMH is routinely not available for service users/visitors;
- A service user/visitor car parking survey carried out at LMH identified particular ‘peak’ periods (within core office hours) when available parking is problematic.

The paper outlines progress to date to understand the issues faced by service users/visitors, best practice benchmarks and guidance and progress to date to develop an evidence-based options appraisal for suitable solutions. Work has been progressed via an inclusive Car Parking Group. The final options will be proposed for approval by the EMT during Quarter 4.

3. Board Consideration

The Paper asks the Board to consider the inclusive approach taken, note reference to relevant guidance, local evidence and intelligence and that a policy is also being developed to support improved access.

4. Financial Implications

It is likely that the final preferred option will have capital implications. These will be presented to CPIG and EMT for approval in Quarter 4.

5. Legal Implications

None.

6. Assurance
This paper provides assurance in relation to the following CQC Theme:

**Responsive:** Services are organised to meet the needs of people who use our services

7. **Equality Impact Assessment**

An assessment will be undertaken once the preferred option is finalised.

8. **Previous Meetings/Committees Where the Report Has Been Considered:**

Executive Management Team.

9. **Risk Issues Identified for Discussion**

- Failure to meet NHS patient, visitor and staff car parking principles in full should no action be taken. Currently, the Trust partially complies with guidance;
- The implementation of a Car Parking Policy is considered essential if effective management of car parking on Trust sites is to be implemented and upheld.

10. **Links to Strategic Drivers**

<table>
<thead>
<tr>
<th>Patient Experience</th>
<th>Quality</th>
<th>Value for Money</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>User/Visitor survey feedback requesting improved access to parking facilities</td>
<td>Accessible parking for service users/visitors improves the patient/visitor experience supporting higher quality care.</td>
<td>When the preferred option is selected, value-for-money assurances will be provided for associated capital implications</td>
<td>Accessible car parking for service users and visitors improves the relationship between service users, visitors and the Trust</td>
</tr>
</tbody>
</table>

11. **Publication Under Freedom of Information Act**

This paper should be made available under the Freedom of Information Act.

12. **Recommendations:**

Trust Board is asked to:

- **Confirm it is assured** that an inclusive approach using relevant guidance and evidence is being used to develop an appropriate response with physical measures to support policy implementation and improve access;
- **Note a** final option is expected to be recommended during Quarter 4 and that a Car Parking Policy is being developed to support effective management of parking on Trust sites.

Paula Ottley  
Facilities Manager
**Introduction**

The paper presents progress to review issues relating to service user/visitor parking provision at the Trust’s 2 inpatient sites (LMH/ACMHU). This follows analysis of demand, national guidance exceptions, and the options to improve parking access. The report includes an exception summary of national guidance with regards to NHS parking provision, benchmarking data, Service User/Visitor parking survey results, options currently being appraised (to include cost:benefit analysis) and wider assurance to Board about actions being progressed.

**National Guidance: Department of Health documentation**

The Department of Health published the “NHS patient, visitor and staff car parking principles” document (Aug 2014, updated October 2015) as “rules for managing car parking in the NHS”. Underpinning this document is Health Technical Memorandum (HTM) 07-03 (March 2015, updated December 2015) which provides guidance and best practice case studies for how NHS patient/visitor and staff car parking principles may be implemented within a Trust’s overall parking provision and what measures need to be considered when developing car parking strategies and policies.

**Table 1: Trust Exceptions against NHS patient, visitor & staff car parking principles:**

<table>
<thead>
<tr>
<th>Principle</th>
<th>Measures Used</th>
<th>Recommended Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS organisations should work with their patients and staff, local authorities and public transport providers to make sure that users can get to the site (and park if necessary) as safely, conveniently and economically as possible</td>
<td>290 LMH car parking spaces. 10 Bracken Ward spaces. 613 car parking spaces within AGH visitor/staff car park 3; Bus-stop from main interchange located directly outside site; Accessible footway from bus-stop to entrances; Secure storage for cyclists; Travel planning maps made available to staff.</td>
<td>1. Consideration toward further provision / improvements to be assessed 2. Share Travel Plans with service users and make available on BDCFT Internet page</td>
</tr>
<tr>
<td>NHS trusts should publish:</td>
<td>Exception</td>
<td>1. Car Parking Policy required</td>
</tr>
<tr>
<td>• Their parking policy &amp; implementation of the NHS car parking principles</td>
<td>Nil formal complaints</td>
<td></td>
</tr>
<tr>
<td>• Summarised complaint information on car parking and action taken</td>
<td>'Visitor parking' spaces close to point of use are identified on both sites</td>
<td>1. Consideration toward further provision to be assessed</td>
</tr>
<tr>
<td>Car-park design should place patient and visitor parking nearer to the point of use than staff parking.</td>
<td>3 Short-term parking bays are provided at the main entrance of LMH and covered by CCTV / patrol but only to best endeavors as there are no penalties for staff who misuse</td>
<td>1. Consideration toward further provision to be assessed 2. Car Park Policy development to be progressed</td>
</tr>
<tr>
<td>Provision &amp; management of short-term parking bays (to prevent misuse).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PLACE (Patient-Led Assessment of the Care Environment) guidance**

The Department of Health requires all NHS Trusts to undertake a self-assessment of a range of non-clinical services which contribute to the environment in which
healthcare is delivered in both the NHS and independent/private healthcare sector in England.

**Table 2: Trust Exceptions against PLACE Criteria 2016.**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Assessment Outcome</th>
<th>Recommended Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spaces for patients and visitors are located closer to the building / entrance than staff parking.</td>
<td>Criteria met (with caveat) as provided at LMH, Moorlands View, and ACMH. Exception: Daisy Hill House</td>
<td>The Trust is unable to provide assurance Service Users/ Visitors spaces are only occupied by Service Users/ Visitors and not Trust staff. Assurance to be provided.</td>
</tr>
</tbody>
</table>

**Existing provision**

**Appendix 1** provides an LMH existing provision site map and **Appendix 2** provides an AGH existing provision site map of car park 3 (new arrangement Q4 2016-17).

**Table 3: Summary of existing provision on LMH/AGH in-patient sites.**

<table>
<thead>
<tr>
<th>Site</th>
<th>Total Spaces</th>
<th>Visitor spaces</th>
<th>Accessible spaces</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lynfield Site</td>
<td>290*</td>
<td>13</td>
<td>12</td>
</tr>
<tr>
<td><strong>Location</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daisy Hill House: Step Forward Centre</td>
<td>68</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Lynfield Mount Hospital: Main Entrance</td>
<td>126</td>
<td>8 (3 short stay)</td>
<td>2</td>
</tr>
<tr>
<td>Moorland’s View Rear Car Park</td>
<td>37</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>Rear Entrance of LMH</td>
<td>59</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td><strong>Site</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AGH Car park 3**</td>
<td>613</td>
<td>249</td>
<td>unknown</td>
</tr>
<tr>
<td>Bracken Ward Car Park</td>
<td>10*</td>
<td>8</td>
<td>2</td>
</tr>
</tbody>
</table>

*includes 2 Electric Vehicle spaces.

**This** is the total parking provided on the adjacent ANHSFT site for staff and visitors.

**National Benchmarks**

As current guidance does not specify the number of designated visitor parking spots allocated on a site, benchmark data is a useful tool providing guidance toward recommended provision.

Two benchmark references are stated; the first taken from HTM 07-03 (2006) “Transport Management and Car-parking”, which offers guidance as to how many staff and patient/visitor spaces should be provided by a hospital. Although superseded by versions not containing such benchmarks, the data is a useful indication of provision requirements.

The second benchmarking reference is taken from The New Metric Handbook used as an authoritative reference tool by architects and gives the basic design requirements, principal dimensional data and general aspects of building provision. Both reference tools make a distinction between parking provision for staff and patients/visitors.
Utilising data from the LMH site, Table 4 shows overall parking provision on site to meet the recommended number of parking spaces provided. However the table also demonstrates provision allocated specifically to Service Users/Visitors is significantly less than the benchmark data indicated.

**Car Parking Survey**

During November to December 2016 a survey was circulated across 128 Service Users/Visitors accessing the Lynfield Mount Hospital Site in order to assess means of transport, the availability of on-site parking, and general perceptions toward provision for Service User/Visitors. **Appendix 6** presents the visiting profile, survey questions and responses but with key summarised findings outlined below. The Trust has just 10 spaces at ACMH, further work will link to an Airedale Trust review.

**Summarised Service User / Visitor Survey Findings**
- 70% of respondents arrived by car, 13% public transport, 12% taxi, 5% other;
- 40% of those arriving by car were unable to find a parking space on site;
- 27% of those arriving by car parked off-site when unable to find parking on site;
- Lack of availability was most challenging during office hours (and particularly within LMH visiting times of 2-4pm) but general availability outside of office hours.

**Options Appraisal**

The car parking group is currently scoping 5 options for appraisal. A first draft Cost Benefit Analysis will be reviewed by the Car Parking group in the next month, the outcome discussed and further input gathered to support a recommendation to EMT:

**Option 1 – Do Nothing:** Baseline Comparator only

**Option 2 – Minimum:** Cordon off identified spaces until visiting times (prevents staff parking a.m.) and publicise option to reserve space in advance.

**Option 3 – Moderate:** Increase the number of ‘visitor only’ spaces at both sites alongside improved car parking space markings.
Option 4 – Moderate Plus: Increase the number of ‘visitor only’ spaces at both sites with additional purchase of software to manage car parking more effectively including improved monitoring & recording, and issue of penalty notices (if appropriate).

Option 5 – Maximum: Provide designated Service User and Visitor bays at both sites with auto barriers, blue badge spaces, short stay provision, red bay provision for emergency vehicles and improve signage

Additional information:
- Staff permit systems operate at both LMH and ACMH.
- Effective management of on-site parking must be underpinned by a Car Parking policy to effectively communicate expectations to staff who use Trust car parks and the (proportionate and appropriate) consequences of infringement.
- Security staff have monitored possible ‘misuse’ of car parking by non BDCFT staff and found this to be negligible (e.g. child care pick-up and drop-off). This obviates the need for car parking barriers in staff parking zones presently.
- Service Manager views regarding Service User/Visitor parking were sought with varying responses. As no direct complaints or issues had been raised with them, this did not provide a valuable source of intelligence.
- Airedale Trust plan to change all parking arrangements in Quarter 4, including measures to segregate/barrier control staff, patient and visitor parking. This will need to inform the emerging BDCFT approach. Airedale’s car-park redesign will place patient and visitor parking nearer to the point of use than staff parking.
- A ROSPA (Royal Society for the Prevention of Accidents) pedestrian safety review of Inpatient site car parks will be undertaken in 2017-18.
- The Sustainable Travel Plan outlines travel patterns, sets targets to reduce single occupancy car travel/taxi use, improve use of public transport and active travel.
- Information about the review has been provided to user and carer groups for dissemination and feedback. User involvement is being arranged at the group meetings scheduled for early February.
- Information about the review has been provided to staff-side representatives for dissemination and feedback. The issue has been added to the Sub-Staff Partnership Forum (scheduled 20th February) as an agenda item for discussion.

Key Findings:
- The first draft options appraisal will be refined by the Car Parking Group to include sustainability and reliability measures.
- Service User/Visitor survey data indicates a need to increase Service user / visitor parking provision which is reflected within the options being developed.
- Benchmarking data indicates a need to increase Service user / visitor parking provision which is reflected within the options being developed.
- The option selected for LMH may be mirrored for the ACMH site. Given major changes to car parking arrangements on the AGH site during the last quarter of 2016-17 it may be appropriate to await the outcome/impact.

Recommendation
Trust Board is asked to:
• **Confirm it is assured** that an inclusive approach using relevant guidance and evidence is being used to develop an appropriate response with physical measures to support policy implementation and improve access;

• **Note a** final option is expected to be recommended during Quarter 4 and that a Car Parking Policy is being developed to support effective management of parking on Trust sites.

**Appendices**

**Appendix 1**: LMH existing provision.

LMH-CP-010 As Existing PLAN.pdf

**Appendix 2**: AGH main car park provision- new Jan-17

AGH 2017 Car Park 3.pdf

**Appendix 3**: Option 3 Increased signage and dedicated visitor bays are to be marked as 'Visitor Only', in the bay and in front of

LMH-CP-113 Option 3-DRAFT PLAN.pdf

**Appendix 4**: Option 5 Combination of barrier and increased signage

LMH-CP-113 Option 4-DRAFT PLAN.pdf

**Appendix 5**: Photographic perspective of existing.

Appendix 5 Visitors Parking Site Plans V4

**Appendix 6**: Car Parking Survey December 2016

Appendix 6 - Car Parking Survey December