

Board of Directors Meeting

Report

Subject: Visitor Car Parking tariff review

Date: 24th September 2015

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Lead Director: Peter Wozencroft, Director of Strategic Planning & Commercial Development

Executive Summary

Sherwood Forest Hospitals NHS Foundation Trust boasts some of the best healthcare parking facilities nationwide – giving excellent availability and access. The Trust has 1,988 parking spaces in total and 87 parking spaces designated as disabled. The disabled to able-bodied parking ratio is 4%. Significant capital schemes during 2014/15 at the Kings Mill Hospital site have resulted in improved patient/visitor parking facilities, an enhanced provision of staff parking (on the former Dukeries site and a new staff car park adjacent to the medical records building), along with better road markings, lining and improved signage. The Trust continues to work on plans to improve the parking shortage at Newark Hospital. All Trust car parking facilities are accredited to the Association of Chief Police Officers ‘Park Mark’ Safer Parking scheme.

Staff car parking charges increases were transacted on the 1st April 2015 and agreement was made with the Joint Staff Partnership Forum that staff parking charges will increase by RPI each April. Patient / visitor charges have not been increased since 2011.

Following review of comparable Trust benchmarks, this paper recommends a new pricing structure for Patient and Visitor parking and is recommended as a CIP opportunity. The paper takes into account feedback from Executive Team and Board of Directors Strategy Sessions during September 2015 and a further option 1a has been included which proposes a modest rise and annual RPI increase.

A four week mobilisation period is required to implement the tariff changes. During this time the SPV will be instructed, signage ordered and a robust communication plan implemented.

A stage 2 Quality Impact Assessment has been undertaken as part of the Project Initiation Document (PID) to understand any reputational impact of the proposal.

Recommendation/s

Option 1 - increases across all bandings, at lower rates in 4 - 24hr periods

Time, hrs	Proposed charge, £	% increase
<0.25	Free	Nil
0.25 – 1	2.00	33
1 – 4	4.00	33
4 – 6	6.00	20
6 – 24	7.00	7
7 day saver	12.50	25
4 week saver	30.00	20

FYE of option 1 - £441K

Or Option 1a - increases across all bandings, at lower rates in 4-24hr periods, to achieve a mid position benchmark performance and review car park tariffs annually in line with RPI

Time, hrs	Proposed charge, £	% increase
<0.25	Free	Nil
0.25 – 1	1.80	20
1 – 4	3.50	17
4 – 6	5.50	10
6 – 24	7.00	7
7 day saver	12.50	25
4 week saver	30.00	20

FYE of option 1a - £268K

Relevant Strategic Priorities (please mark in bold)

To consistently deliver a high quality patient experience safely and effectively	To develop extended clinical networks that benefit the patients we serve
To eliminate the variability of access to and outcomes from our acute services	To provide efficient and cost-effective services and deliver better value healthcare
To reduce demand on hospital services and deliver care closer to home	

How has organisational learning been disseminated	
Links to the BAF and Corporate Risk Register	
Details of additional risks associated with this paper (may include CQC Essential Standards, NHSLA, NHS Constitution)	Potential reputational and adverse press risks as identified in the stage 2 Quality Impact Assessment.
Links to NHS Constitution	In September 2014 the Board of Directors reviewed the Trust's compliance with the DH published ' <i>NHS patient, visitors and staff car parking principles</i> ' and were assured of the Trust's actions relating to concessions, including free or reduced charges or caps for the following groups, <ul style="list-style-type: none"> • Frequent outpatient attenders • Visitors to patients who are gravely ill • Visitors to relatives who have an extended stay in hospital
Financial Implications/Impact	Potential additional income of £441K (FYE), option 1 or £268K (FYE) option 1a.
Legal Implications/Impact	Changes are in line with the NHS patient, visitors and staff care parking principles

Partnership working & Public Engagement Implications/Impact	Supported by a robust communication plan
Committees/groups where this item has been presented before	<p>Verbal update of intention to review car parking charges was given at the Car Park User Group in July 2015.</p> <p>Executive team approved the proposal on 17th August 2015</p> <p>Board of Directors Strategy Development Session - September 2015</p>
Monitoring and Review	As per the KPIs identified in the PID.
Is a QIA required/been completed? If yes provide brief details	Yes – stage 2 completed as part of the PMO PID.