

Department of Health - NHS patient, visitor and staff car parking principles

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In summary, the hospital site was almost compliant before the principles were even published, we have a bit of work to do and this includes getting the community car parks compliant and controlled.

List of Principles

- 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.

The current Policy and operating process has been developed over a number of years it has been at many committees, Trust board, partnership meetings, developed with PALS to reflect patients comments and also in line with transport

- Charges should be reasonable for the area.

£3 per hour is a rate that was signed of by the Trust Board, when compared to the London Borough of Islington rates it is in the middle of there charging amounts. The £3 per hour is also reasonable in terms of private parking in the area.

- Concessions, including free or reduced charges or caps, should be available for the following groups:
 - people with disabilities
 - frequent outpatient attenders
 - visitors with relatives who are gravely ill
 - visitors to relatives who have an extended stay in hospital
 - staff working shifts that mean public transport cannot be used

Other concessions, eg for volunteers or staff who car-share, should be considered locally.

We have a number of concessions and authorise free parking in certain circumstances. People with a valid blue badge, park for free during 0700-1800 Mon to Fri. The PALS service act as a checking process to authorise patients or relatives that require parking for exceptional circumstances. The Head of Security, Security Advisor and Deputy Director of Estates and Facilities (DDofE&F) are a point of contact to make decisions on specific requests and situations. If there is significant weather issues, bank holidays or strike action car parking is opened up for greater use by both staff and patients.



- Priority for staff parking should be based on need, eg staff whose daily duties require them to travel by car.

The Staff parking permit systems is well establish and follows an agree

- Trusts should consider installing 'pay on exit' or similar schemes so that drivers pay only for the time that they have used. Additional charges should only be imposed where reasonable and should be waived when overstaying is beyond the driver's control (eg when treatment takes longer than planned, or when staff are required to work beyond their scheduled shift).

We have a Automatic number plate recognition system that is pay on exit / pay when ready to leave. There are no additional charges, it is simple pay for the time you stay. Any exceptional circumstances will be dealt with using a the concession process above.

- Details of charges, concessions and additional charges should be well publicised including at car park entrances, wherever payment is made and inside the hospital. They should also be included on the hospital website and on patient letters and forms, where appropriate.

All details are displayed at the main entrance and around the carpark. They are also on the Trust website. The Trust follows the BPA British Parking Association guidance with regards to this area.

Following the principles being published there is current work in progress with regards to information being displayed inside the Hospital. What information is sent to patients is also being reviewed.

- NHS trusts should publish:
 - their parking policy
 - their implementation of the NHS car parking principles
 - financial information relating to their car parking
 - summarised complaint information on car parking and actions taken in response.

Again, following the principles being published there is current work in progress with separating the parking section from the Transport Policy, Getting the financial information to publish. There is also a discussion on how / what format we publish complaint information.

Contracted-out car parking

- NHS organisations are responsible for the actions of private contractors who run car parks on their behalf.



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The car parking function is the responsibility of the Security & Carparking service and manager that are all directly employed by the Trust and are an in house service.

- NHS organisations should act against rogue contractors in line with the relevant codes of practice where applicable.

This principle is not applicable to our service

- Contracts should not be let on any basis that incentivises additional charges, eg 'income from parking charge notices only'.

There is no contract for car park management, the only contract is a service that processes our Parking Charge Notices. The issuing is completed by the in house team and any appeal or cancelling of PCN is done by the Trusts in house Security Manager.

Additional Information attached to principles

1. Each site is different and very few will be able to provide spaces for everyone who needs one. Since 2010, national planning policy no longer imposes maximum parking standards on development, and no longer recommends the use of car parking charges as a demand management measure to discourage car use.
2. Consideration should be given to the needs of people with temporary disabilities as well as Blue Badge holders.
3. Such staff might include nurses or therapists who visit patients at home. Routine travel between hospital sites might more sensibly be managed by providing internal transport.
4. 'Reasonable' implementation of additional charges practice might include additional charges for people who do not have legitimate reasons for parking (eg commuters), or who persistently flout parking regulations (eg blocking entrances). A period of grace should normally be applied before a parking charge notice is issued.
5. There are two trade associations – the British Parking Association and the Independent Parking Committee. If the car park operator is a member of either, their relevant code applies and an appeals service is available to motorists. NHS organisations should consider imposing a requirement for contractors to be members of such an association.

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