

Patient and Client Council

Car Parking at Hospitals and other Health and Social Care Facilities

Views of Patients and Members of the Public

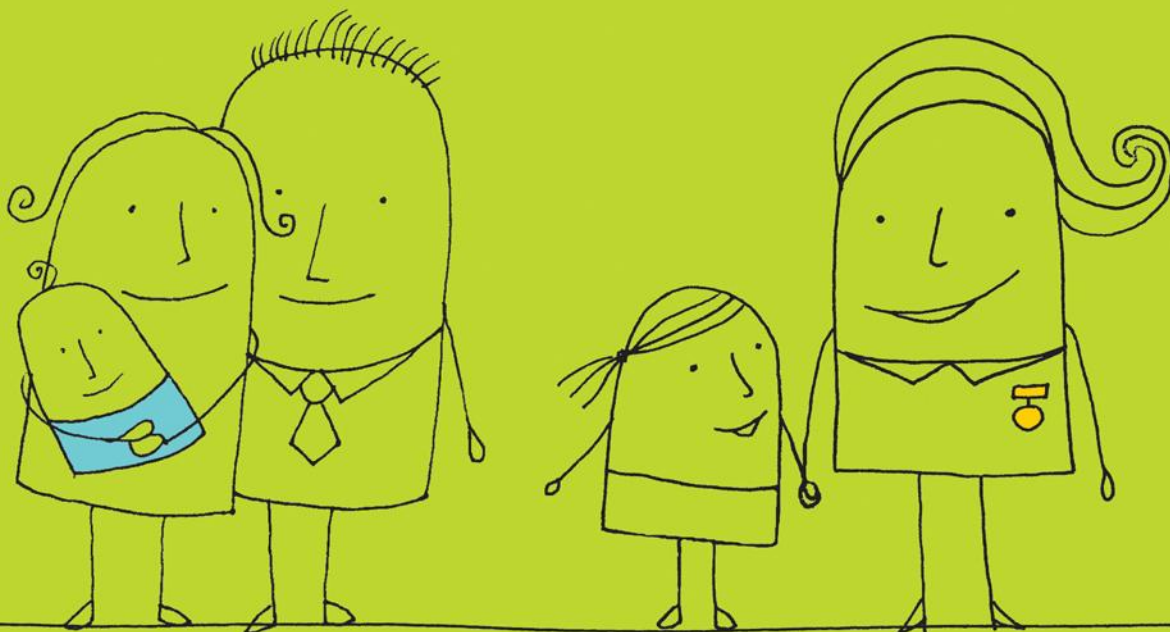


Table of Contents

1.0	Background and Purpose	1
	1.1 The Patient and Client Council	1
	1.2 Purpose and Context of this report	1
2.0	Our Approach	2
3.0	What People Said	2
4.0	Conclusions and Recommendations	11

Foreword

Dear Reader,

This report represents the views of 122 people across Northern Ireland in relation to car parking at health and social care facilities. While this study reports on a comparatively small number of respondents, given the geographical spread of contributions, we succeeded in gathering a reliable patient and public perspective.

The report makes it clear that car parking is a serious concern, with opinions divided as to the merits of car parking charges. The major issues raised relating to car parking are: the lack of availability of spaces; parking difficulties for disabled people; and the cost or inappropriate usage of free or low cost parking.

I wish to thank everyone who contributed to this report who took the time and trouble to give us their views.

The Patient and Client Council will ensure that the views and the resulting recommendations set out in this report help to influence future decisions about car parking and charges.

A handwritten signature in black ink that reads "Maeve Hully". The signature is written in a cursive, slightly slanted style.

Maeve Hully

Chief Executive of the Patient and Client Council

1.0 Background and Purpose

1.1 The Patient and Client Council

The Patient and Client Council has four main duties. They are to:

- listen to and act on people's views;
- encourage people to get involved;
- help people make a complaint; and,
- promote the spreading of advice and information.

1.2 Purpose and Context of this Report

The purpose of this report is to provide the Minister of Health, Social Services and Public Safety with the views of the public in relation to car parking and charges at health and social care facilities.

In September 2011 the Department of Health, Social Services and Public Safety issued a consultation document "Policy for Car Parking Provision and Management in the Health and Social Care Sector". This document focused on such things as: the need for consistency in car parking arrangements; balancing user needs against cost of provision and maintenance of car parking; transparency; justification; effectiveness; and prevention of inappropriate usage.

2.0 Our Approach

During December 2011 the Patient and Client Council initiated a survey to get the views of members of the public in relation to car parking charges at hospitals and other health and social care facilities. This took the form of an Internet online survey plus face to face interviews with a sample of hospital outpatients and those attending a cancer awareness event. The survey was designed to cover existing car parking provision and operation as well as look at many of the issues put forward in the Department's consultation document. A total of 122 responses was received (80 were completed on line and the remainder were completed in face to face interviews).

3.0 What People Said

The online survey had 10 questions and the following is a summary of the key issues raised from their responses and also from face to face interviews. The numbers quoted refer to the number of people who answered that specific question.

Question 1

Have you experienced any difficulties with the car parking arrangements at health and social care facilities?

Of 81 responses, 70 had experienced difficulties and 11 had not.

If yes, please give an example.

In the responses, main difficulties were identified, as below.

Insufficient Car parking spaces

Lack of car parking spaces was reported by 63 respondents, many of whom reported having to join queues for a space, with some missed appointments as a

result of a long wait for a space or having to seek alternative parking at a distance.

Comments include:

- “Car parks full, cars parked on outside roads/kerbs.”
- “Finding a parking space.”
- “I had to miss an appointment at the Hospital because, despite arriving 10 minutes before the appointment time, there were NO spaces either in the hospital's own car park or on street within 10 minutes walking distance.”
- “Lack of car parking space. Spaces too small to get out of car easily.”
- “It is quite difficult to find a space at the hospital, and practically impossible to find a space at my local surgery.”
- “Very long queues.”
- “Lack of adequate parking.”

Access to Parking by Disabled Persons

Particular difficulties were experienced by people who were entitled to park in spaces designated for those with a physical disability and who found insufficient spaces or considered that available spaces were already occupied by suspected able-bodied persons. 10 people referred to this issue in their response to question 1.

Comments include:

- “I am a blue badge user. Often the disabled parking spaces are all used. Many times the cars are not displaying blue badges. Ordinary spaces are not wide enough.”
- “Lack of car parking space. Spaces too small to get out of car easily. People parking in disabled spaces with no blue badge displayed.”
- “I have also noticed able bodied staff parking in public disabled bays.”

- “Takes too long to get in and all the disabled bays are full with people who don’t need them or by people who are waiting for someone and are still sitting in their cars.”
- “There is not enough accessible parking bays for people with disabilities. Enforcements for disregarding these notices are not being used.”

Cost of car parking

In addition to complaints about lack of parking spaces, 8 people also referred to having to pay parking charges as a difficulty.

Comments include:

- “Expensive and often still no spaces.”
- “Lack of adequate parking. Expensive on site parking at hospital”
- “The charges are far too high especially for people living on a limited income e.g. retirees, the unemployed and others living on state benefits.”
- “Having to pay at hospital car park when attending a hospital outpatient appointment.”
- “I find parking at Hospital an absolute nightmare and now expensive.”
- “Expensive on site parking at hospital.”

Question 2

Can you give an example of good car parking arrangements at a Health and Social Care facility?

Of the 40 people who responded most were satisfied with parking arrangements (not related to charging) at Health and Social Care facilities (hospitals, health centres and GP surgeries) across Northern Ireland. Belfast City, Causeway, Craigavon, Dundonald multi-storey, Downpatrick, the Mid-Ulster and Musgrave Park hospitals

were quoted as examples, with health centres at Ahoghill, Enniskillen, Knockbracken and Holywood Arches in Belfast and Portadown also favourably mentioned.

Comments include:

- “Belfast City Hospital - usually not too long to wait to get parking.”
- “Belfast city hospital has a great improvement on parking, however the prices charged are too high”
- “Downe Hospital has very good parking facilities. Those at the Ulster Hospital are good too, although the charges are VERY high.”
- “My own local Primary care centre at Kilkeel also has more than adequate free parking and disabled bays although some inconsiderate able bodied users tend to park in the disabled bays that are in front of the building's main door rather than walk about 50 yards or so from the main car park.”
- “Ahoghill Health Centre has good access to car spaces.
- ” Enniskillen health centre has good parking facilities all around the building so there are lots on entrances you can park beside.”
- “There are generous parking facilities at the Mid-Ulster Hospital now that it is no longer a busy, acute hospital and they are free.”
- “Portadown Health Centre has a good car park, plenty spaces unlike the old carpark.”
- “Musgrave Park Hosp. has a few different car parks which ensures that visitors/patients will get parked somewhere on the site.”

Question 3

Do you think it is reasonable for health and social care facilities to charge for car parking?

Of the 113 people respondents, 48 people thought it was reasonable to charge with 65 not in favour of charging.

Question 4

Do you think it is reasonable for health and social care facilities to charge for car parking where there are other paid car parks in the area?

Of the 72 respondents, when other car parks nearby were charging, 39 people considered that there should be charges at Health and Social Care facilities with 33 against such charges.

Comments include:

- “This is a charge on being ill.”
- “There should be concessions for regular or long-term patients and their visitors.”
- “All charges should go to the health service and not to the private sector.”
- “Older people will be most in need of care and least able to pay car parking charges.”
- “Hospitals should be treated differently to shopping.”
- “Charges cause additional stress and expense especially where people have already incurred substantial travel costs in getting to the hospital or other facility”.
- “I think that the method used in other countries would be a good one here - that parking tickets can be validated at the health and social care facility so that those visiting health and social care facilities do not have to pay.”
- “I would not object to charging for occasional or irregular short time users but there should be concessions for patients / carers visitors requiring regular or long visits. All charges should go to the health service and not to private contractors.”

Question 5

Do you think car parking charges should be set taking into account existing charges in other car parks in the local area?

Of the 81 respondents, the majority (50) thought that charges should not take into account nearby car park charges.

Comments include:

- “Those people with appointments should not have to pay.”
- “Car parking should be free – with measures put in place to prevent abuse.”
- “A minimal charge unrelated to local car parking charges might be acceptable.”
- “Charges should be based on ‘cost to run’.”
- “In favour of car parking charges to stop people abusing it.”
- “There should be free passes for necessary regular attenders for treatment.”
- “Re-introduce prescription charges and use the money to fund car parking.”
- “Stop all the bonuses to consultants and use this to cover car parking. Reduce salaries of the highest earners.”
- “Perhaps the fee for hourly parking can be higher than those nearby - this would dissuade those who need parking for other reasons.”

Question 6

The main reasons for car parking charges at health and social care facilities include: to cover the costs of providing a car park; to ensure space is available for patients, service users and visitors; or to deter members of the public from abusing car parking spaces. Do you think these reasons justify charges?

Of the 99 respondents, 69 people agreed that these reasons justified charges – 30 did not agree.

Question 7

Do you think the criteria for free car parking (shown below) are reasonable?

Table 1 (Criteria Set Out In Car Parking Consultation)

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

Of the 111 respondents, 76 people agreed these criteria were reasonable but 35 did not. Of the 35 who did not agree, 25 considered that all parking should be free for everyone.

Comments include:

- “This shows absurdity of trying to make distinctions. Is it based on serious nature of illness, or frequency of attendance, or financial circumstances of patient/relatives? Other illnesses may require weekly attendance.”
- “Elderly/disabled with mobility problems should be included.”
- “Free parking should include next of kin regardless of whether they are transporting the patient and extended to named relatives and even close friends. Sometimes patients have friends that are closer than relatives.”
- “Criteria are too restrictive.”
- “When services depend on the grade of illness, something is wrong.”
- “I would like this criteria to take into consideration people with disabilities who may spend a lot of time using health facilities, with special attention to wheelchair users and those with sensory disabilities.”
- “Why should cancer patients get priority when others with life-limiting conditions do not?”

Question 8

Do you think that where the public are charged, staff should also be charged to use car parks at health and social care facilities?

Of the 121 respondents, 75 people considered that staff should not be charged and 46 thought that they should be charged along with members of the public.

Comments included:

- A blanket very low charge (based say on the marginal cost of providing a space) should cover staff and staff spaces (except for a small number for emergency/short term use) should be sited away from the public entrances, which should be reserved for patients/carers;
- Apart from when the employee is a service user themselves, the workplace should be exempt from parking charges;
- Staff should be encouraged and incentivised not to use cars where they are able to use alternative public transport, walk, cycle or run to regularly get to work;
- Staff are vital to services and should not have to pay;
- Staff should receive free parking as part of their conditions;
- Staff, particularly in the community, who are actually using their cars as part of their job to carry out trust business should not be charged i.e. those receiving mileage allowance unless we add the car parking charges to that;
- If staff are to be charged they should be given a specific staff only car park. It's difficult to provide a public service when you arrive on duty to find that the public have used all the spaces;
- Staff are already facing pay freeze and pension contribution increase. Other public sector staff do not have to pay to park at their workplace;
- Staff need somewhere safe to park their vehicle. It is too much to expect them to pay for parking so they can work - it is like a wage cut in effect;
- Staff should not occupy spaces in car parks provided for the public; and
- There should be arrangements to reward staff car sharing and to encourage the use of public transport for staff.

Question 9

What is your nearest town?

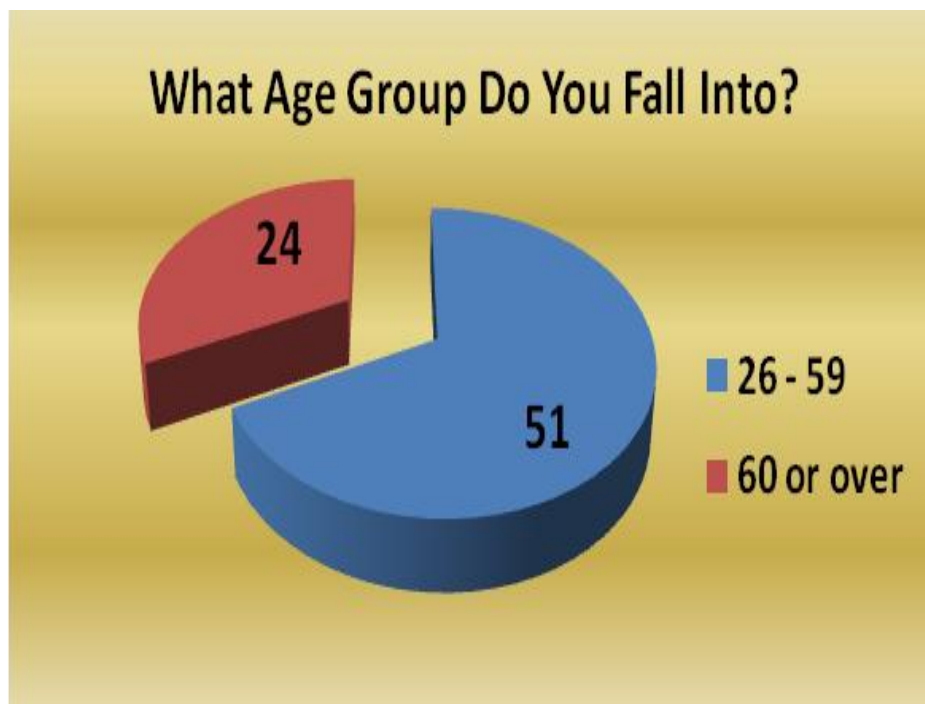
Of the 60 people who responded, the greatest number of respondents (17) were from the Belfast area but there was a good geographical spread of input from other places across Northern Ireland. This included Armagh, Ballymena, Bangor, Carrickfergus, Castlewellan, Coleraine, Cookstown, Downpatrick, Dungannon, Dungiven, Enniskillen, Garvagh, Glengormley, Irvinestown, Kilkeel, Lisburn, Londonderry, Magherafelt, Moneymore, Newry, Newtownards, Omagh, Portadown, Strabane, Tandragee and Whitehead.

Question 10

What age group do you fall into?

Of the 75 people who chose to answer this question, 51 were in the age group 26 – 59 years and 24 were age 60 or over.

Figure 1 – What Age Group Do You Fall Into?



4.0 Conclusions and Recommendations

Conclusions

Currently the major issue affecting patients, carers and members of the public is the lack of availability of sufficient car parking spaces. This leads to long delays and often results in people missing or being late for appointments.

Disabled people have particular difficulties in finding suitable parking.

There are concerns about staff occupying public car parking spaces and staff being charged to park.

Most people are in favour of free car parking, provided inappropriate usage can be addressed.

Where charges are made, they are often considered to be too high.

Current criteria for free parking are sometimes too subjective and restrictive.

Recommendations

We recommend that those who are making decisions in relation to car parking consider the issues raised in this report by respondents when finalising their proposals and in particular:

- Take heed of the particular needs of disabled persons, ensuring that sufficient convenient parking spaces are available and abuse of these is prevented;
- Consider the current arrangements for staff parking;
- Work with Departments, Agencies and others as appropriate to improve affordable access to car parking facilities through development and implementation of strategies to:

- Increase parking capacity in the short term;
- Introduce measures to prevent and deal with inappropriate usage of parking facilities;
- Enhance the provision of reliable, affordable and suitable public transport; and
- Ensure that patients, clients and their visitors and carers are made aware of relevant public transport services.

www.patientclientcouncil.hscni.net

Remember you can contact your local office on

Telephone 0800 917 0222

or email info.pcc@hscni.net

Belfast Area

1st Floor, Lesley House
25-27 Wellington Place
Belfast BT1 6GD

Northern Area

Houston's Mill Site
10a Buckna Road
Broughshane
Ballymena BT42 4NJ

Southern Area

Quaker Buildings
High Street
Lurgan
Craigavon BT66 8BB

Western Area

'Hilltop'
Tyrone and Fermanagh Hospital
Omagh BT79 0NS

South Eastern Area

1st Floor, Lesley House
25-27 Wellington Place
Belfast BT1 6GD

