



Travel Plan Review 2010

October 2010

Wirral University Teaching Hospital

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Arrowe Park Hospital, Arrowe Park Road, Upton, Wirral, CH49 5PE

Issue and revision record

Revision	Date	Originator	Checker	Approver	Description
A	October 2010	JK	BB	EM	FINAL ISSUE

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Executive Foreword

Forward for the Travel Plan 2010

Welcome to the 2010 Travel Plan Review for Wirral University Teaching Hospitals. We understand that travel is a fundamental aspect of the patient experience and also for people that work or visit our hospitals therefore we have developed this Travel Plan which is intended to offer the widest choice of transport options for anyone wishing to access the site.

We have introduced the salary sacrifice scheme last year so that staff are able to purchase bicycles at a discounted rate with a similar arrangement this year and planning a further opportunity in April 2011.

In addition to cycling, we will also look to introduce measures to encourage staff to walk and car share, and implement initiatives to increase the attractiveness of public transport.

The Government's report 'Making Smarter Choices Work' has encouraged organisations to promote sustainable transport initiatives through workplace travel planning, supporting public transport and increasing travel awareness. We firmly support this initiative and feel that we should be leading by example.

We know that we cannot implement the plan without the help of Merseyside TravelWise, Merseytravel, Wirral Borough Council and the local transport operators, which is why we are working closely with these organisations in order to achieve the objectives of the travel plan. Furthermore, to be successful, we need to win the hearts and minds of our staff.

Our plan will aim to manage our transport impacts in order to reduce the impact we have on the local community and also the environment. We will regularly monitor the plan to ensure that we are on target to deliver these objectives so that we can introduce new measures as we progress.

John Foster

Director of Estates & Facilities

Executive Summary

Since 2006, Wirral University Teaching Hospitals NHS Foundation Trust is obliged to submit an Annual Travel Plan Progress Update to Wirral Council in relation to its Arrowe Park Hospital site. This document is the fourth annual review and covers the period from August 2009 to October 2010.

Key achievements since the last review include:

- An overall increase in non car modes from 15% in 2008 to 21% in 2010.
- Achieving the Trust's 2010/12 target of 35% of staff using sustainable modes to travel to work.
- A 10% increase in the number of staff which car share from 4% to 14%.
- Doubling the numbers of staff that walk to work.
- A 4% increase in the number of staff that travel by bus to work.
- Increasing the response to the staff travel survey by 14%.
- An increase in the park and ride utilisation figures.
- Producing a 'How to Get to Guide for Arrowe Park' and sending it to over 12,000 patients.
- Producing a 'How to Get to Guide' poster which will be displayed within GP surgeries.
- Including transport information within the Trust's new patient guides which is issued to all new patients.
- 49 Staff purchased a bicycle via the salary sacrifice scheme in the 2009/10 financial year.
- Holding an awareness raising event to support TravelWise and In Town Without My Car Day.

Since the last review, the Trust has predominately concentrated on travel awareness raising as the majority of infrastructure and financial measures have already been implemented. The Trust now faces the challenge of making best use of existing transport infrastructure and encouraging sustainable travel behaviour through marketing and communications strategies.

Awareness raising measures have included the production and distribution of a 'How to Get to Guide', which provides information on bus travel, walking and cycling to Arrowe Park Hospital; and a new patient guide which contains information on transport and car parking. Furthermore, a staff travel awareness event was held to promote sustainable and active travel choices and information on the travel plan is to be included in the next staff induction handbook.

In addition to these measures, the Transport Strategy Group continues to meet quarterly to discuss travel and accessibility to and from the Trust sites, with the aim of reducing single occupancy car use and improving accessibility for staff, visitors, patients and contractors.

The Trust has also introduced a salary sacrifice scheme for staff to purchase bicycles called 'Cycle to Work'. The scheme enables staff to purchase a bike at a discount cost due to income tax and national insurance contributions through salary sacrifice. The Trust will continue to offer this scheme to staff and will undertake awareness raising to promote the next salary sacrifice scheme window.

The Trust continues to liaise with local bus operators to identify potential ticket discounts for staff and promote public transport services. The Trust also continues to work with TravelWise to identify future grant schemes and funding streams for travel initiatives.

1. Introduction

1.1 Background

Since 2003 Mott MacDonald MIS have been providing assistance to Wirral University Teaching Hospitals (WUTH) NHS Foundation Trust on car park management and Travel Plan development.

The Travel Plan Strategy for the Trust was formally approved via a Section 106 agreement with Wirral Council in March 2006. The Trust is therefore obliged to submit an Annual Travel Plan Progress Update to Wirral Council. The Trust's Travel Plan covers Arrowe Park Hospital and Clatterbridge Hospital sites, however it should be noted that the Section 106 agreement is specific to the Arrowe Park site.

This document is the fourth annual review and covers the period from August 2009 to October 2010. In addition to this, we propose actions which will be implemented during the period October 2010 to August 2011. It is proposed that a technical report will be submitted to Wirral Borough Council in 2011 to provide an overview of activities from the past year and the next formal review will be undertaken in 2012.

The Traffic Management and Car Parking Policy Version 2 accompanies this Travel Plan and contains revised information relating to car parking charges and measures to manage the 300 free patient spaces.

1.2 What is a Travel Plan?

A Travel Plan is a package of measures designed to reduce the number and length of car trips generated by an organisation. A Travel Plan can address a range of travel types such as staff commuting, business trips, journeys made by patients and visitors to the site, how an organisation's fleet is managed and travel made by suppliers. Travel Plans have a number of benefits and the bullet points below give a brief summary.

- Address transport problems, including:
 - Parking issues
 - Road safety
 - Public transport accessibility
 - Congestion
 - Recruitment & retention
- Corporate & social responsibility
- Secure planning permission
- Environmental credibility
- Reduce the need for expensive car parks

- Reduce the need to travel
- Address social exclusion
- Healthier work force
- Financial savings
- Community relations
- Employee Benefit Packages

It is important to note that the main objective of a TP is to change human behaviour and in order to do so a combination of key skills is required. These include:

- Marketing & Communications;
- Human Resources;
- Market Research;
- Facility Management;
- Project Management; and
- Transport Planning.

Research has found that the most successful way of managing an organisation's transport impacts is through improving the quality of non car modes and providing disincentives for the use of the car. This has been taken into account when developing the plan for the Trust.

1.3 Travel Plan Objectives

The Trust has identified five overarching objectives for the travel plan which will be addressed over the short, medium and long term. These objectives are the high-level aims of the plan, which will give direction and provide a focus.

Our objectives are set out below.

- Reduce the level of traffic accessing the site by encouraging greater use of sustainable modes.
- Offer an improved choice of travel options to all staff, visitors and patients.
- Improve the health, fitness and well-being of our staff, by encouraging greater use of active travel modes.
- Reduce our environmental impact through encouraging greater use of sustainable modes.
- Be a good neighbour to the local community by reducing our overall transport impacts.

1.4 Structure of the Report

This report is structured as follows:

1. An appreciation of the issues is described in Section 2;
2. Issues raised at the 2009 committee meeting are presented in Section 4;
3. A summary of the 2010 monitoring exercise, including the staff travel survey results.
4. An overview of the achievements since August 2009 are presented in Section 5;
5. The Trust's Marketing and Communications Strategy is discussed in Section 6;
6. The agreed future action plan is presented in Section 7;
7. The agreed future travel plan targets for both the medium and long term are included within Section 8; and
8. A short conclusion to the review report is included in Section 9.

2. Appreciation of the Issues

2.1 Introduction

As one of the largest employers in Wirral, the Trust makes a major contribution to Wirral's and Merseyside's commitment to reducing congestion through its Travel Plan. The Trust continues to actively engage with Merseytravel, TravelWise and Wirral Council, in addition to this the travel plan is supported by the borough's main bus operators - Avon Buses, First Group and Arriva.

The Travel Plan also indirectly supports other national and local policies such as reducing obesity and encouraging exercise. Some of these initiatives/policies are detailed below.

2.2 The Government White Paper

The Government White Paper 'The Future of Transport – A Network for 2030', published in July 2004, looks at the strategic development of travel and the transport network over the next thirty years. It builds on and expands the strategic goals outlined in the Ten Year Plan for transport, 'A New Deal for Transport: Better for Everyone', which was published in July 2000.

The White Paper notes that travel plans, which are produced by employers and aimed at reducing car use for travel to work and travel for business, can reduce commuter car driving by between 10% and 30% at a cost to the Local Authority of £2 to £4 per head per annum. As such it is recognised that local transport can be enhanced by:

"Promoting the use of school Travel Plans, workplace Travel Plans and personalised journey planning to encourage people to consider alternatives to using their cars"¹

2.3 NHS Carbon Reduction Strategy

The NHS has developed a carbon reduction strategy in response to the need to take action on climate change.

'The NHS has a carbon footprint of 18 million tonnes CO2 per year This is composed of energy (22%), travel (18%) and procurement (60%). Despite an increase in efficiency, the NHS has increased its carbon footprint by 40% since 1990. This means that meeting the

¹ 'The Future of Transport – A Network for 2030', page 15, Department for Transport, July 2004

Climate Change Act² targets of 26% reduction by 2020 and 80% reduction by 2050 will be a huge challenge. This strategy establishes that the NHS should have a target of reducing its 2007 carbon footprint by 10% by 2015. This will require the current level of growth of emissions to not only be curbed, but the trend to be reversed and absolute emissions reduced. Interim NHS targets will be needed to meet the government targets.'

The Trust's Travel Plan supports this carbon reduction strategy.

2.4 Department of Health

In February 2006, the Department of Health published "Health Technical Memorandum 07-03: Transport Management and car parking". This document describes a Travel Plan as "a package of practical measures designed to influence transport to an individual site or within an organisation." It states that Travel Plans are designed to lessen the environmental impact of transport arrangements, including the reduction of emissions from exhausts and reducing single occupancy car travel. They also aim to reduce transport journeys to NHS sites for employee business requirements and reduce congestion through improvements in transport management.

When developing a Travel Plan for an NHS Trust, consideration should be given to the selection of the following measures, as appropriate:

- Staff commuting to and from work
- Staff travel on work business
- Patient and visitor transport and access to trust sites
- Public transport facilities
- Utilisation and provision of fleet vehicles
- Deliveries and contractors
- Peripatetic / community visits
- Reimbursing travel and subsistence expenses and rewarding the use of small-engine vehicles or cycle mileage
- The needs of visually or mobility impaired people.

In December 2006, the Department of Health published "Income Generation: Car Parking Charges – Best Practice for Implementation" The document "provides advice on the issues to be considered when setting up a car parking scheme or when reviewing existing ones, including the key components of a scheme, what charges to impose and what concessions to consider."

It considers issues such as:

- Car parking facilities in the context of improving site congestion, security and conditions for local residents;
- Parking charges and the promotion and advertising of the scheme;
- Method of control, management, operation and enforcement of the parking facility; and
- Commercial viability and business case for the scheme.

It also refers to a report published by the Select Committee in July 2006, which recommends that “trusts be advised to:-

- Issue all regular patients, or their visitors, with a ‘season ticket’ that allows them reduced price, or free parking;
- Introduce a weekly cap on parking charges for patients;
- Provide free parking for patients who have to attend on a daily basis for treatment; and
- Inform patients before their treatment begins of the parking charges, exemptions and reduced rates that will apply.”

In 2009, the previous government proposed the abolishment of patient car parking charges, similar to the system in place in Scotland and Wales. In September 2010, the Health Minister Simon Burns MP, announced that hospitals should take responsibility for their own car parking arrangements, abandoning the previous’ government’s commitment and Appendix A provides a copy of the statement and accompanying material.

The Health Minister reported that:

“That consultation set out proposals to introduce mandatory free parking for many inpatients and outpatients. Those proposals would cost the NHS in excess of £100m. The impact assessment states that it would lead to a net disbenefit to patients valued at almost £200m. This negative impact arises from substantial health benefits foregone from not investing this income in healthcare, offset by lower financial benefits to favoured car park users. The impact also does not include environmental costs associated with the policy, which would also clearly be adverse. At a time when the NHS needs to make every penny of its budget count the government cannot support such a proposal.”

The Health Minister recommended that hospitals work with local groups to ensure that current car parking policies are genuinely fair. Priority should be given to patients whose health needs require frequent visits

to the hospital and this group should not be penalised for their illness. This is in line with the Trust's current car parking exemption policy, see Appendix B for details.

2.5 Merseyside Local Transport Plan

The second Local Transport Plan (LTP2) for Merseyside covers the period 2006-2011 and was produced by the five local authorities of Knowsley, Liverpool, Sefton, St. Helens and Wirral in partnership with Merseytravel and was published in July 2006.

LTP2 contains a range of targets that the Merseyside Authorities seek to achieve with respect to cutting the use of the car and increasing the use of public transport, walking and cycling.

Merseyside TravelWise is a partnership between the five Merseyside Local Authorities and Merseytravel and is part of the national TravelWise Association. The aim of TravelWise is to raise awareness of the effects that increased car use has on the environment, health and society. TravelWise supports businesses in Merseyside by providing information and organising several meetings a year so that businesses can learn about best practice from other organisations, meet with partners who can help their plans succeed and network with a range of colleagues.

3. Third Annual Review

3.1 Introduction

The previous Travel Plan Update report (Aug 08 - Aug 09) was reviewed at the Sustainable Communities Overview and Scrutiny Committee on the 21st September 2009.

The members expressed a number of concerns which are listed below:

1. Hospital car parking charges.
2. DDA compliant blue badge parking.
3. The location of bus stops at Arrowe Park Hospital, which result in people walking across the car park to the hospital main entrance.
4. Promotion of patient and visitor car parking exemptions.
5. Improved signage for the drop off facility at both the front and rear of the hospital.
6. Promotion of the liftshare scheme.
7. Timescales for achieving the short/long term targets.
8. Costs associated with the implementation of the plan.

Points 1 – 6 are discussed in-turn below whilst points 7 and 8 are considered in sections 7 and 8 of the report.

3.2 Car Parking Charges

Car parking charges were first introduced at the Trust in 2005 as part of the Traffic Management and Parking Policy in order to fund:

1. Travel plan measures;
2. Car park management interventions; and
3. Car park maintenance.

In addition to this, the car parking charge was also intended to disincentivise driving to the hospital and encourage greater use of sustainable modes of transport. It should be noted that the most successful travel plans contain both incentives and disincentives, and this was taken into consideration whilst developing the policy.

Currently the cost of visitor parking at the hospital is £2.00 per day, this is significantly lower than at other similar sized trusts within Merseyside and Cheshire. The table below provides a comparison of visitor car parking charges in place at other Trusts.

The Department for Transport calculated² that the cost of maintaining a service level car parking space is £400 per year. Taking this into account, the Trust would spend approximately £1.2m on car park maintenance..

Table 3.1: Car Parking Charges in Place at Other NHS Trusts

Hospital	Charge
The Countess of Chester Hospital	£2.50 per visit
Warrington Hospital	£2.50 for 4 hours
Broadgreen Hospital	£2.20 0 -2 hours
	£2.70 for 2 – 4 hours
	£5.40 for 4 – 24 hours
Whiston Hospital	0 – 3 hours £1.50
	3 – 6 hours £3.00
	Over 6 hours £10
Halton General Hospital	£2.50 for 4 hours

Staff wishing to park at the hospital are able to apply for a car parking permit and an administration charge is deducted directly from staff salaries on a monthly basis.

As previously discussed, the introduction of car parking charges in 2005 was intended to partly act as a deterrent which could be used to encourage the use of sustainable modes of travel. However, it should be noted that whilst the cost of car parking has remained constant since 2005, public transport fares have increased significantly. The average peak fare for bus travel has increased 41% from £1.36 in 2005 to £1.92³ whilst a saveaway ticket for the Wirral area has increased by 57% from £2.10 in 2005 to £3.30 in 2010.

The Trust's gross total revenue from car park charges from 1st April 2009 to 31st March 2010 was £1,128,074. This revenue, plus additional finance from the Trust (£164,723), was used to fund car park management and travel plan measures, which are presented in the table below.

Table 3.2: Expenditure of Car Parking Income

Item	Spend
VAT for Car Parking Income	£168,011
Exemptions & Refunds	£3,045
Security Management	£82,888
Clerical Assistant/Cash Office	£27,202
Traffic management	£70,559
Security staff	£724,100

² Department for Transport, Making Travel Plans Work 2002

³ Merseyside Annual Passenger Services Monitor 2009/10

Item	Spend
Consultancy costs	£12,500
Parking permits/ all admin	£12,999
Lease of Land	£53,000
Park & ride (in house)	£41,393
Inter site transport	£39,917
Maintenance/repairs	£57,183
Total Spend	£1,292,797
Additional Trust Funding	+£164,723
Car Parking Revenue	+£1,128,074

The Trust proposes to increase the visitor day rate by 25% to £2.50. It is important to note that this will be the first increase since the launch of car parking charges in 2005. It is intended that the additional revenue will be used to address the VAT increase to 20% and fund additional measures to safeguard the 300 free patient spaces discussed in the accompanying car park management and traffic policy. Further information is provided within the Traffic Management Policy.

3.3 Blue Badge Parking

The majority of blue badge parking continues to be free of charge at Arrowe Park hospital. A parking charge applies in car park B which has 21 blue badge spaces, the remaining 67 blue badge spaces are free of charge.

An additional 18 spaces were created at the hospital in 2008 in response to the car parking survey and consultation.

In addition to the blue badge parking, all pay stations are DDA compliant.

3.4 Bus Stop Location

Merseytravel undertook an assessment to understand the impact of relocating the bus stop to a location closer to the hospital main entrance. They found that whilst there would be some benefits, the cost and disbenefits of relocating the bus stop would outweigh the positive gains. Appendix C provides a summary of their response.

As alternative to relocating the bus stop, Merseytravel proposed to undertake improvements to the existing bus stop including the provision of an additional lay-by and upgrading the existing stop to become DDA compliant. Funding for this would predominantly be provided by

Merseytravel however it was agreed that the Trust and Wirral Council would contribute. Unfortunately due to financial restrictions, Merseytravel were forced to withdraw funding, however the Trust and Wirral Council are investigating other options.

3.5 Car Parking Exemptions

Information relating to the Trust's car parking policy for patients and visitors is provided with ward managers, departmental managers and is also included within the patient information guide and on the intranet.

3.6 Drop Off Points

The Trust has undertaken the following actions in relation to drop off facilities at the hospital:

- The Trust has installed an additional drop off point and associated signage adjacent to the Ophthalmology department.
- Signage is displayed within the main public car park to promote the free 20 minute drop off period.
- Additional signage at the front and rear of the hospital.

3.7 Liftshare

The latest travel survey revealed that car sharing has increased by over 100% however the number of staff registered on the liftshare website is minimal. The trust has undertaken awareness raising of the scheme through the monthly briefs and has also promoted the scheme to all car park permit applicants.

Internet based car share systems are perhaps best implemented at organisations where the majority of staff are desk based and in addition to this, our experience has found that these schemes are also more popular with males and younger people. With this in mind, it is perhaps unsurprising that the scheme has proved to be unpopular at Arrowe Park and it is important that the Trust considers additional measures to raise awareness of the benefits of car sharing.

4. Monitoring

4.1 Introduction

It is important that the travel plan is not regarded as a static document, instead it should evolve following a process of monitoring and review to ensure that it remains relevant to the staff, visitors and patients that use the hospital site.

In order to assist with the review, a travel survey was carried out in September 2010 which captured staff, patients and visitor travel patterns and the results are discussed below.

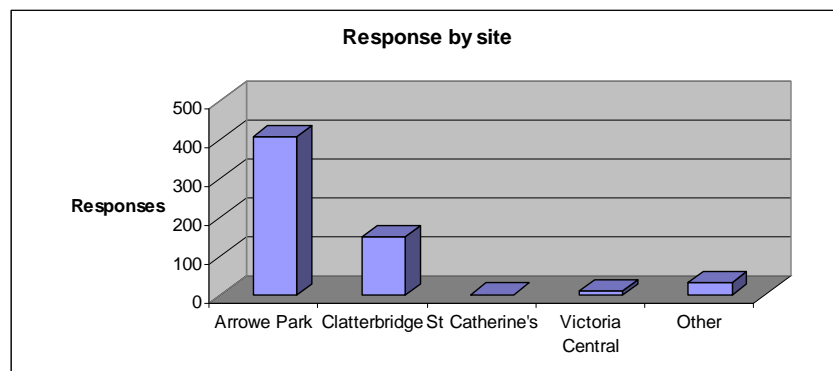
4.1.1 Staff travel survey - to be updated following paper surveys

The staff travel survey was conducted using a combination of TravelWise's online Wise Moves survey and paper forms. Appendix D contains a copy of the questionnaire. The survey was launched in September and all staff were emailed a link to the Wise Moves survey.

A total of 606 staff completed the survey of which 474 completed via the weblink representing a web response rate of 20% and an overall total response of 11%. It is important to note that the 2008 survey received a 6% response, which highlights an overall increase in survey participants.

In order to increase the response from staff that found it difficult to access a computer, 131 paper surveys were handed out at the Trust's TravelWise week event and via line managers. Figure 4.1 provides an illustration of the breakdown of responses by site.

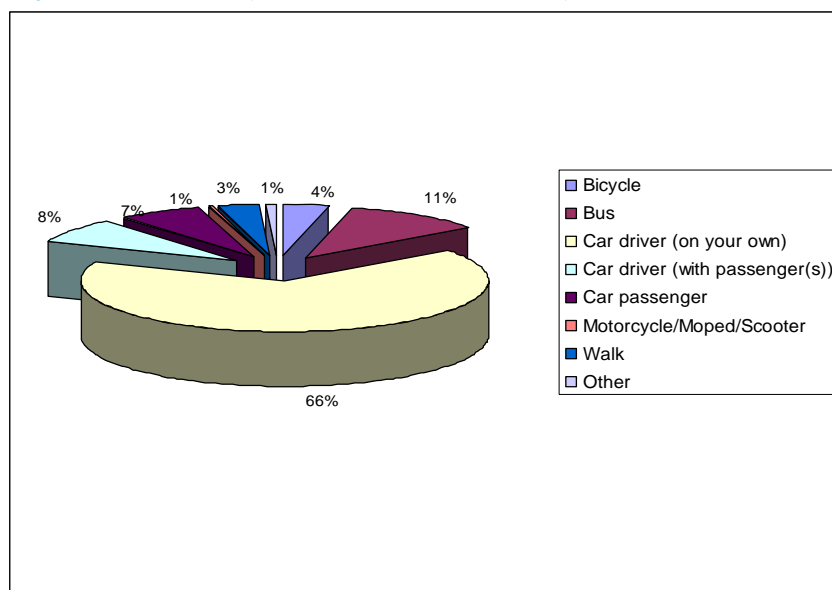
Figure 4.1: What site do you work at?



Number of responses = 606

Travelling by car alone was the most popular form of transport (66%) at all of the Trust's sites. Almost one in five staff (19%) travel to work using non car based modes, of which bus was the most popular mode (11%) followed by bicycle (4%). A similar figure (15%) reported that they car shared either as a driver (8%) or a passenger (7%). Figure 4.2 presents the results for journey to work for all Trust sites and Table 4.1 summarises the results by site.

Figure 4.2: How did you travel to the hospital today?



Number of responses = 606

Table 4.1: Main mode of travel by site

Mode of Transport	Arrowe	Clatterbridge	St Catherine's	Victoria Central	Other
Bicycle	16	4	0	0	1
Bus	43	16	0	2	3
Single Occupancy Car Driver	263	103	3	7	22
Car Driver with Passengers	27	13	0	1	5
Car Passenger	30	9	0	0	1
Motorcycle/Moped/Scooter	1	2	0	0	0
Taxi	0	0	0	0	0
Train	0	1	0	0	0
Walk	17	0	0	2	1
Other	4	0	0	0	1

Mode of Transport	Arrowe	Clatterbridge	St Catherine's	Victoria Central	Other
Total	407	151	3	12	33

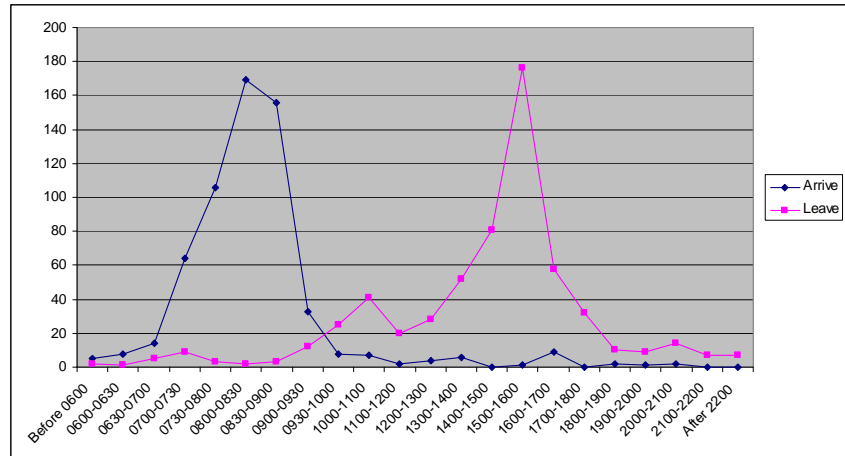
Table 4.2 below presents the mode share results for Arrowe Park against the targets set out in the previous travel plan review. The table highlights that the Trust has achieved the walking target and is close to achieving both the car share and sustainable modes targets; however more work is required to achieve the target for cycling.

Table 4.2: Main mode of travel by site

Mode of Transport	2008 Survey	2010 Survey	2010/12 Target	Mode shift
Cycle	4%	4%	8%	0
Walk	2%	4%	4%	+2%
Car Share	4%	14%	15%	+10%
Sustainable Modes	20%	35%	35%	+15%

Respondents were asked to state the time they arrived at the hospital on the day of completing the survey, in addition to this participants were asked to estimate their departure time and the results are summarised in the chart below. The survey found that the peak arrival time was between 8am – 8.30am and departure time between 5pm – 5.30pm.

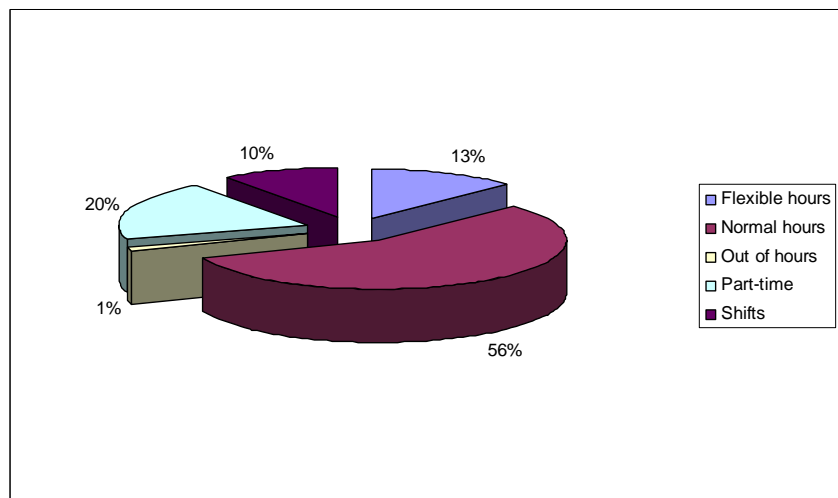
Figure 4.3: Arrival and Departure Times



Number of responses = 597

The majority of participants (56%) reported that they worked normal hospital hours. This represents an opportunity for the travel plan as it is less challenging to encourage sustainable modes when the bulk of the workforce work normal hours (e.g. 9am – 5pm) when public transport provision is high.

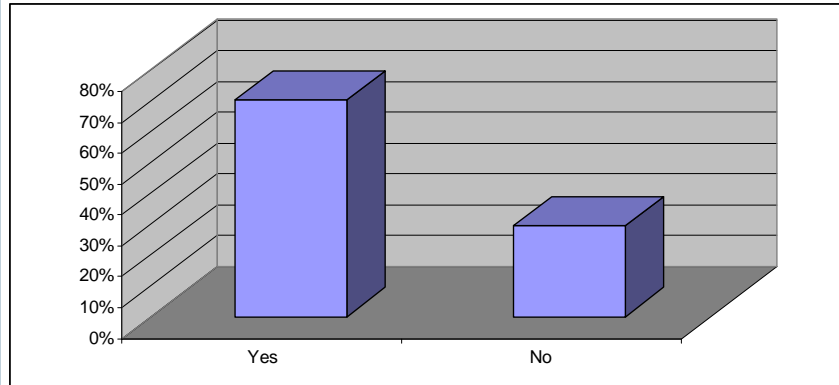
Figure 4.4: Hours worked



Number of responses = 597

Over two thirds of participants (70%) reported that they held a parking permit and this is illustrated in the chart below.

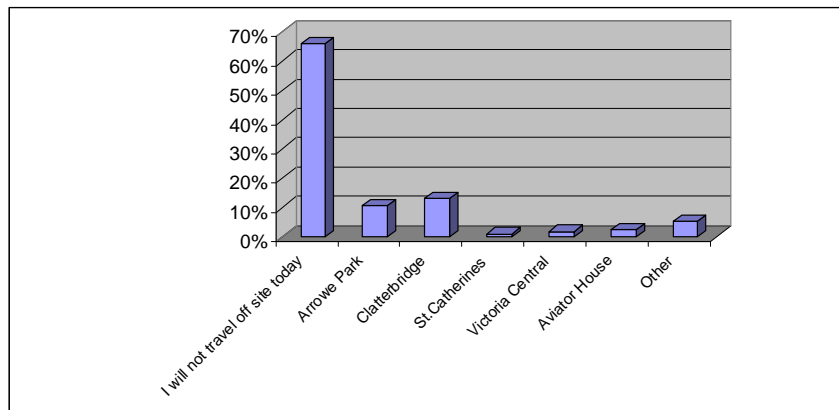
Figure 4.5: Are you a car park permit holder?



Number of responses = 597

Most participants reported that they were not required to travel off site on the day they completed the survey (66%). Those that did travel off site predominantly travelled to Clatterbridge (13%) or Arrowe Park (11%).

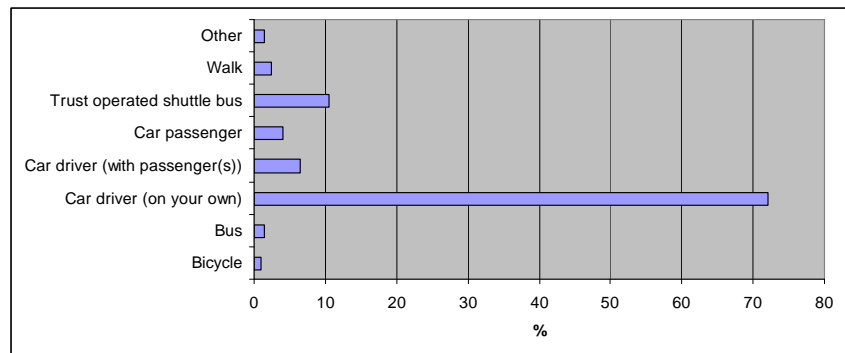
Figure 4.6: Inter-site travel



Number of responses = 628

Staff mainly drove on hospital business either alone (72%) or car shared (10%). One in ten respondents that reported to travelling on Trust business used the Trust operated shuttle bus (10%).

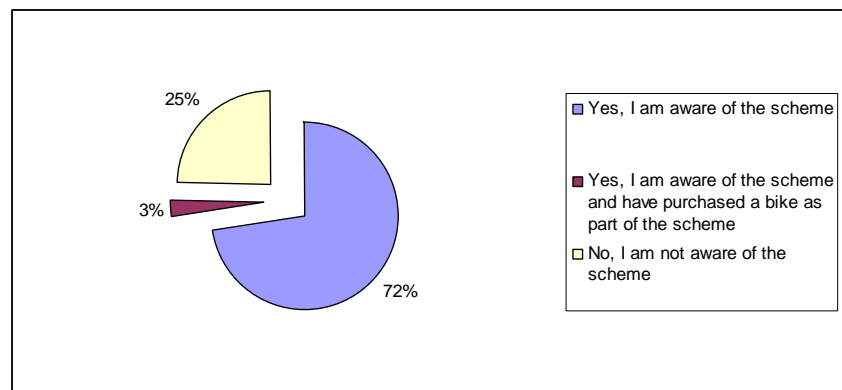
Figure 4.7: Mode of Travel for Business Travel



Number of responses: 201

Staff were asked if they were aware that the Trust operated a salary sacrifice scheme for purchasing bicycles. Almost three quarters (72%) reported that they were aware and a further 3% had purchased a bicycle through the scheme. A quarter of respondents reported that they were unaware highlighting the need for greater promotion.

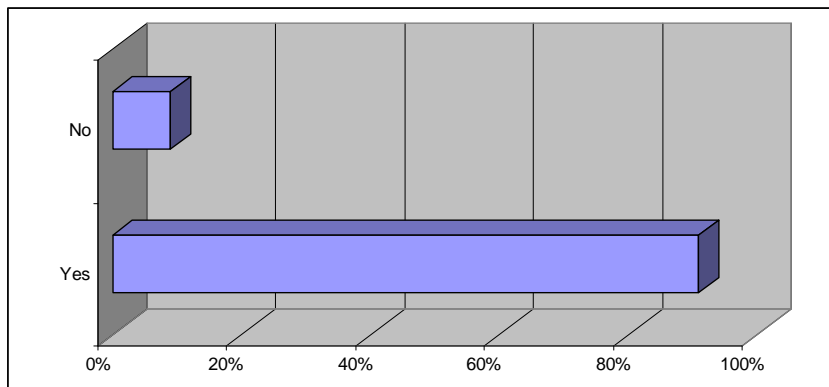
Figure 4.8: Awareness of Cycle to Work Scheme



Number of responses = 597

Participants were asked if they were interested in a public transport season ticket loan which could be offered by the Trust. Just over nine out of ten respondents reported (91%) that they were uninterested in such a scheme and this is presented in Chart 4.7 below.

Figure 4.9: Level of Interest for Public Transport Season Ticket Loans



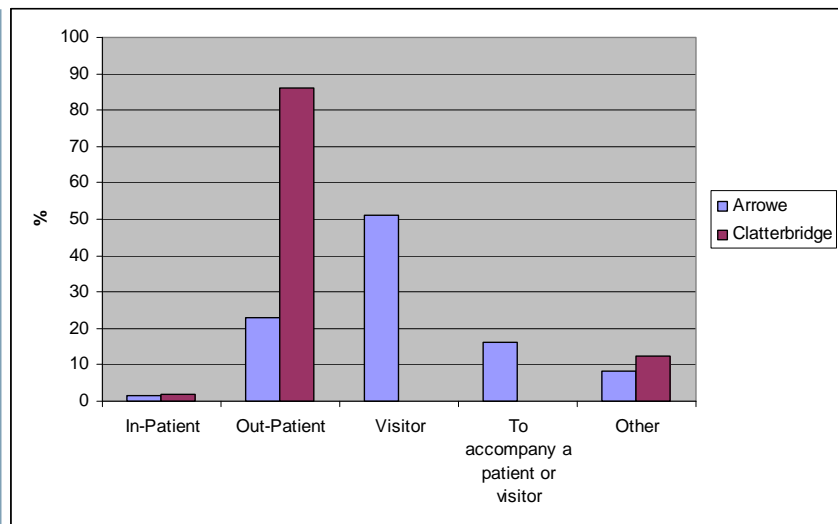
Number of responses = 597

4.1.2 Patient & Visitor Travel Survey

A snap shot survey was undertaken at both Clatterbridge and Arroe Park Hospitals to identify how patients and visitors travel to the hospitals. Hospital volunteers and Mott MacDonald interviewers collected information and Appendix E contains an example of the questionnaire. Face to face surveys were carried out at Arroe Park on Tuesday 14th September between 2.00pm and 19.00pm and on Tuesday 21st September 9am - 12pm at Clatterbridge.

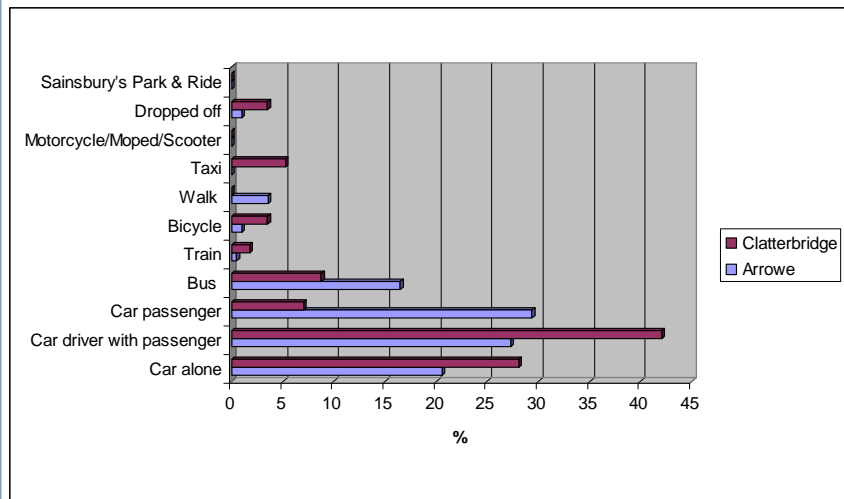
197 questionnaires were completed at Arroe Park and 57 were completed at Clatterbridge. The figures below provide a summary of the results.

The most popular reason for travelling to Arroe Park Hospital was as a visitor (51%), whilst respondents from Clatterbridge were more likely to be an out-patient (86%).



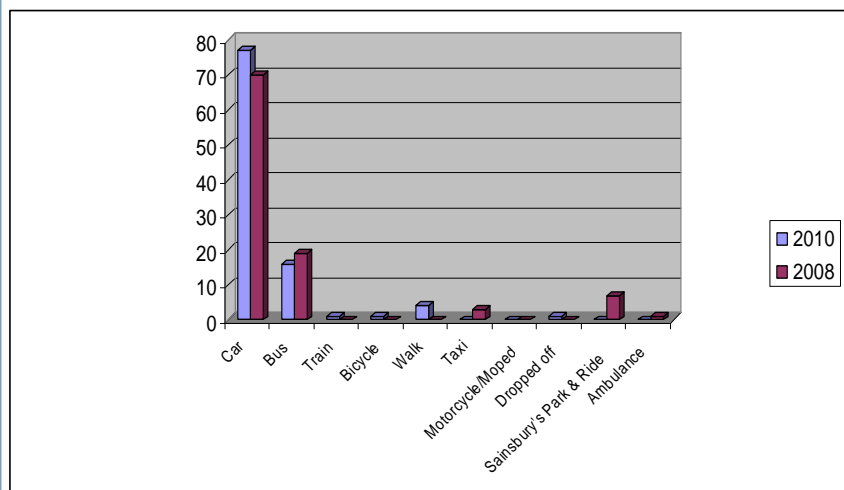
Number of Arrowe Park responses = 197 Number of Clatterbridge responses= 57

Respondents were asked to state how they travelled to the hospital on the day of the survey. The majority of participants at both hospitals reported that they arrived by car with over half (57%) of Arrowe Park and almost half (49%) of Clatterbridge (49%) respondents car sharing. Arrowe Park had a higher number of bus users (16%) than Clatterbridge (9%) however cycle use was higher at Clatterbridge (4%) than at Arrowe (1%). It should be noted that none of the respondents reported using the Trust park and ride service to travel to the hospital, however this is perhaps attributed to the low number of out patients (22%) that completed the survey for whom the service is largely aimed at.



Number of Arroe Park responses = 197 Number of Clatterbridge responses= 57

When compared to travel data collected in 2008, more patients and visitors are travelling to Arroe Park by car, however it is important to note that the 2008 survey was carried out over a greater time period and therefore achieved a higher response rate.



Number of 2008 Responses = 785 Number of 2010 Responses = 197

4.2 Park and Ride

A Park & Ride service is provided between Arroe Park Hospital and the Sainsbury's car park in Upton on weekdays. The service operates between 9.30am and 5pm Monday to Thursday and, following a request from Sainsbury's to reduce services on Friday afternoons, between

9.30 am and 12noon on Friday mornings. The service operates approximately every twenty minutes using a 17 seater minibus.

Regular records kept by the Trust indicates an average utilisation rate of the park and ride vehicle to be approximately 53% for the period April 2009 – August 2010. This is an increase on utilisation figures from 2007 (33%) and 2008 (50%) and highlights that progress is being made towards achieving the objectives of the travel plan.

The Trust will continue to monitor utilisation to ensure that the size of the vehicle and level of service is sufficient to meet demand. Any changes to the facility will be discussed by the Transport Strategy Group and ultimately be determined by the Trust Executive Group.

5. Travel Plan Review

5.1 Introduction

Since the last review, the Trust has predominantly concentrated on awareness raising as the majority of physical and financial measures were implemented in previous years. In addition to this, the Trust has continued to address the short term targets and table 5.2 provides a summary of activities in relation to this.

5.1.1 Awareness Raising

Supporting Merseyside
TravelWise Week at Arrowe Park



The Trust, in partnership with TravelWise, has produced a 'How to Get to Guide' which provides information on bus travel, walking and cycling to Arrowe Park hospital. 20,000 leaflets have been produced and to date, 12,000 have been sent to existing patients to promote alternatives to driving, the leaflet is also available as a downloadable document on the Trust's website. Using the information contained within the guide, a poster has also been produced this summarises the key bus routes and will be issued to GP's on the Wirral.

The Trust has developed a guide which is sent to all new patients. This guide has recently been updated to provide information on the Trust, advice on staying in hospital, how to travel to the hospital and details on the car park exemption policy.

A staff travel event was held on September 20th, to support Merseyside TravelWise's TravelWise Week. A travel kiosk was set up in the main entrance and information and goodies were made available for both staff and visitors.

Information is regularly provided within the Trust's monthly global emails on the salary sacrifice scheme, Bike Week, TravelWise week and the Trust's car share scheme.

All new staff receive a staff handbook as part of their induction process. Information containing the travel plan will be included within the next addition.

5.1.2 Transport Strategy Group

The Transport Strategy Group (TSG) continues to meet every quarter to discuss travel to and from the Trust sites. The TSG has the following aims and objectives:

The Transport Strategy Group will work to ensure that visitors, staff and contractors can gain access to and from the Trust's site, safely,

efficiently, and healthily. In particular the Group will seek to reduce over dependence on the car, especially driver travelling alone, as the means for getting to and from the hospital.

The Group will play a positive role in addressing issues for access to healthcare identified through the Merseyside Accessibility Strategy and will assist in developing solutions to overcome identified accessibility problems.

The Group will seek to coordinate effort across all the organisations affected by the hospital and its activities.

The Transport Strategy Group will act as the reference group for the Travel & Transport Coordinator and other member(s) of staff appointed to assist with the implementation of the Hospital's Travel Plan

In addition to the Trust the TSG is attended by representatives from the following parties:

- Wirral Council
- TravelWise
- Wirral Transport Users Association
- Unite
- The cycle opportunities group, bus users group and car park policy group report to the TSG.

5.1.3 Salary Sacrifice

The Trust introduced a salary sacrifice scheme to purchase bicycles in 2009. The scheme, named Cycle to Work, enables staff to purchase a bike at a reduced cost and in some cases, can cut the cost of purchasing a bike by half. The initiative operates through a salary sacrifice scheme, where finance purchase and collect repayments over a twelve month period. The cost of the bike is reduced because employees save money on income tax and national insurance (NI) contributions through the salary sacrifice scheme.

The scheme is available in May each year, however the Trust are reviewing interest to identify the need for additional application windows.

In 2009, 61 staff took part in the scheme and in 2010 49 staff purchased a bike through the scheme.

5.1.4 Cycle User Group

Since the introduction of the salary sacrifice scheme the Trust has found it difficult to attract attendance at the cycle user group. In order to address this, the Trust has promoted alternative methods of communication and has informed members that they are able to raise cycle specific issues directly to the facilities department.

5.1.5 Bus Operators

The Trust continues to liaise with the local bus operators to identify potential measures and marketing campaigns.

First Bus have offered the Trust the opportunity to join their 'Corporate Travel Club' which enables staff to purchase monthly season tickets at a discounted price. The Trust are currently considering how the scheme could be introduced.

5.1.6 Season Ticket Loans

The Trust has undertaken investigations to identify the feasibility of offering staff a season ticket loan to purchase an annual season ticket. Unfortunately the travel survey revealed minimal interest in such a scheme, however the Trust will continue to monitor this in the future.

5.1.7 TravelWise Grant

The Trust applied for a TravelWise grant for match funding for additional cycle parking facilities. Unfortunately, due to financial constraints, the scheme was terminated, however the Trust will continue to liaise with TravelWise to monitor future grant schemes.

5.2 Progress table

Table 5.2 show the previous short term targets from the Travel Plan review 2009. The table highlights progress by the use of green (on track), yellow (broadly on track) or red (behind) progress bars as illustrated in the table below.

Table 5.1: Progress Table

	Target on track/achieved
	Target broadly on track
	Target behind progress

Table 5.2: Short Term Progress Table

August 2008 - August 2009/10 Action Plan Schedule					2010 Review	
Target No	Initiative/Measure/Action:	Responsibility:	How Monitored / Measured:	Proposed Progress / Revised Target Date:	Actual Progress	Progress
S1	Update all surveys on a biannual basis	NHS Trust	Presentation of updated results at annual review	Spring 2010, repeat every two years	Undertaken in September 2010	
S2	Repeat 'Car Free Day'	Travel Plan Co-ordinator	Hold such an event and monitor attendance and events used	Annually	Event held in September 2010 as part of TravelWise week	
S3	Provide 'Green Travel Publicity Day' and general Travel Plan promotion	Travel Plan Co-ordinator	Hold such an event and monitor attendance and events held	Annually	Event held in September 2010 and regular email promotions included within the Trust monthly brief	
S4	Continue discussions with local bus operators via bus users group	Travel Plan Co-ordinator	Hold regular meetings with operators	Trust maintains regular contact with Avon, First and Arriva	Discount negotiated with First, currently undertaking review for implementation	
S5	Continue work of Cycle User Group	Travel Plan Co-ordinator		Ongoing	Low attendance at meetings since launch of salary sacrifice scheme however cyclists contacted regularly via email to maintain communication	
S6	Continue work of Car Park Policy Group	Travel Plan Co-ordinator	Maintain regular meetings	Ongoing	Group continues to meet	

S7	Continue Transport Strategy Group	Travel Plan Co-ordinator (in association with TravelWise)	Quarterly meeting - propose new targets for Travel Plan	Ongoing	Quarterly meetings held	
S8	Establish salary sacrifice scheme or interest free loans or packages for cycles/public transport tickets with possible outside partner	Travel Plan Co-ordinator	Appointment of outside partner or running scheme in-house	Complete, windows for staff to purchase a bike through salary sacrifice are ongoing	Salary sacrifice available for bikes on an annual basis. Loop hole closed for public transport tickets. Travel survey revealed little interest in season ticket loans.	
S9	Apply for Travelwise funding for cycle parking	Travel Plan Co-ordinator	Update outcome in annual review	Ongoing, new funding streams to be identified	Trust applied however funding was withdrawn	
S10	Include information on bus services, parking reimbursement and access to the hospitals in appointment letters to patients	Travel Plan Co-ordinator	Scheme up & running	Complete	Unable to provide within appointment letter due to space restrictions however information is included within the patients' information leaflet and how to get to guides	
S11	Survey and update the number of total vehicle trips into the hospitals	Arrowe Park Car Parks Manager	Presentation of updated results at annual review	Autumn 2010, repeat every two years	Travel survey snapshot carried out in September	
S12	Review reimbursement allowance for use of car for work purposes, allocation of parking permits and parking spaces etc..	NHS Trust	Use results from parking and travel study and car park policy groups recommendations	Complete Spring 2011, ongoing	Review in progress	
S13	Undertake patient and visitor surveys	NHS Trust	Presentation of updated results at annual review	Complete Autumn 2010, repeat every two years	Undertaken in September	

S14	Undertake new staff surveys, increase response rate from 6% to 12% of staff	NHS Trust, Transport strategy group	Presentation of updated results at annual review	Bi-annual	Undertaken in September, 20% response to web survey	
S15	Travel Plan Review	Travel Plan Co-ordinator	Annual Review Report	Complete Autumn 2010, undertake annually	Ongoing	
S16	Provide information on the Travel Plan in the staff induction pack	Travel Plan Co-ordinator	Information in induction pack	Complete Autumn 2010	Complete	
S17	Increase membership of Liftshare database	Travel Plan Co-ordinator	Grow membership to 100 staff	Ongoing	Trust looking to provide car share matching as part of the car park permit process as very low interest in website.	
S18	Develop car share policy - taxi ride homes, dedicated car park etc.	Travel Plan Co-ordinator	Develop proposals for Transport Strategy Group	Spring 2011	Ongoing	
S19	Evaluate Park and Ride service from Sainsbury's	Travel Plan Co-ordinator	Patronage figures provided in review	Annually	Service continues to operate with increase in utilisation from 2009 figures	
S20	Review marketing and communication of Travel Plan	Travel Plan Co-ordinator	Presentation of activities and strategy provided in review	Update annually	Developed strategy in collaboration with the marketing and comms department – see chapter 6	

6. Marketing and Communications Strategy

6.1 Introduction

Lack of information about travel alternatives such as public transport, car sharing and cycling is often one of the most significant barriers to their use. Therefore, marketing and communications is a crucial element of the travel plan and the Trust should spend a significant amount of time raising awareness of the travel plan.

The communications and marketing strategy will cover methods of engaging with staff, patients and visitors in order to raise the profile of different travel options, including the benefits of more sustainable or efficient travel.

6.2 Marketing and Communication Strategy

Marketing professionals claim when promoting an initiative it needs to be said seven times before individuals decide whether to buy in to the idea. When introducing a new initiative at the Trust it is important that resources are available to undertake regular communication as it will increase the likelihood success of any scheme.

Prior to any marketing exercise it is important that the Trust establish what the overall aims are which will help to focus activities and evaluate the success of each campaign. Some ideas include:

- Explaining measures such as car sharing or salary sacrifice;
- Letting staff know the benefits of using certain modes of transport such as the health benefits or cost savings;
- Encouraging greater use of sustainable modes of transport; and
- Reducing the number of single occupancy vehicles.

The table below provides marketing and communications guidance which should be taken into account when implementing the travel plan.

Table 6.1: Marketing and Communications Strategy

Task	Action	Timescale
Re-launch the Travel Plan and Initial Promotion	Re-launch the Strategy to all employees via Trust Monthly Brief (team brief) cascade process and other Trust-wide publications e.g. Insite staff magazine (quarterly) and Public Membership News (bi-annually). Ensure that the launch is as high profile as possible. Recommend Chief Executive or Executive Team involvement, with photo opportunity and	April 2011

Task	Action	Timescale
	<p>story in Insite, on website and possibly some local media PR.</p> <p>Organise events to make the event enjoyable such as competitions and free gifts utilising the 'kiosk' at Arrowe Park Hospital and other venues such as staff restaurants at Arrowe Park and Clatterbridge Hospitals.</p> <p>Utilise the following channels of communication.</p> <ul style="list-style-type: none"> Poster campaign Global email Trust Monthly Brief Intranet and public website Features within the hospitals' newsletters The staff induction process <p>It is recommended that the following measures are launched at the same time so that participation is incentivised:</p> <ul style="list-style-type: none"> Consider launching a preferential car share spaces scheme Open the salary sacrifice for bikes window <p>Launch travel plan intranet site to provide further information</p>	
<p>Maintain the momentum</p>	<p>The Trust should look to launch a campaign at least every quarter with key events held over the Spring & Summer months. TravelWise are able to provide marketing advice and materials.</p> <p>We recommend promoting:</p> <ul style="list-style-type: none"> Active travel modes over the spring and summer months. Car sharing over autumn and winter months. Smarter working such as teleconferencing, videoconferencing and home working in the winter. Public transport in the spring. <p>Key events could coincide with the following:</p> <ul style="list-style-type: none"> Walk to Work Week – April Bike to Work Week – June Car Share Day – June In Town Without My Car Day – September TravelWise Week - September National Work from Home Day – May 	<p>Every quarter</p>

Task	Action	Timescale
	<p>Where possible base campaigns around the launch of new travel plan measures. For example, public transport discount/loans or cycle maintenance service.</p> <p>Furthermore, look to promote the travel plan through other campaigns including the transport phase of a Trust-wide awareness campaign around energy efficiency and environmental impacts as well as the Trust's proposals for encouraging health lifestyles which is aimed at encouraging 2,012 members of staff to take up or return to some form of sport or physical activity during the build-up to the London Olympics in 2012.</p>	
Monitoring	<p>As part of the planning requirement, the Trust monitors the travel plan bi-annually. Following each survey it will be important to promote the results amongst staff. This will promote the value of staff participation in the survey and can be done using the Trust Monthly Brief route, intranet and regular meetings.</p> <p>Where possible act upon the findings of the survey when launching a travel plan measure, highlighting the role of staff in identifying the measure.</p>	Bi-annually in November

The purpose of marketing is to match the right product to the right market, to provide an optimum return. Marketing will increase the likelihood that staff will change their travel behaviour through raising awareness of the alternatives to driving alone. If measures can be targeted at specific groups, such as distance catchment areas, then the overall impact of any campaign will be increased. Where appropriate the Trust will aim to focus:

- Walking campaigns focussed at staff which live within 1.5 miles of the site;
- Cycling campaigns at staff which live within 3 miles of the site; and
- Public transport aimed at staff which live within 400m of a direct bus service.

6.3 Patient & Visitors

In addition to the information issued to new patients and the how to get to guide, the Trust will continue to raise awareness of the alternatives to

driving utilising the local press. Press releases will be used to highlight the large numbers of bus services which serve the hospital, cycle facilities and the park & ride service to promote low cost options to driving to the hospital.

The Trust will further promote and raise the profile of travel discounts and exemptions in its Hospital Information for Patients and Carers in hard copy, on the website and at 'point of sale' areas such as pay stations, the cashpoint and bank. Discount information will also be made available to ward and department managers. Possibilities for promoting discounts on tickets and receipts will be investigated.

7. Action Plan 2010 - 2012

7.1 Introduction

It is important that the travel plan does not remain static and regular reviews will allow the trust to update the plan to meet the needs of staff, patients and visitors.

This section of the plan sets out how the Trust intends to address mode share in order to encourage greater use of sustainable travel modes.

7.2 Active Travel Modes

Going forward, the main focus of the plan will be encouraging greater use of active travel modes to promote healthy lifestyles benefiting both staff and the Trust. In addition to the benefits, active travel presents the Trust with the greatest opportunity for mode shift as:

- It is not reliant upon a public transport network for which the Trust has little control over;
- It is free so compares competitively with car travel; and
- It provides a mode of transport where the user has complete control presenting an attractive alternative to driving.

We are mindful that over two fifths of staff live within 3 miles of Arrowe Park Hospital however only 8% walk or cycle to work. Targeting this group of people is more cost effective than widespread measures and will also increase the overall likelihood of mode shift.

Making best use of expertise within the Trust and aligning measures with the Trust's proposals for encouraging healthy lifestyle will increase the overall impact of interventions.

7.3 Public Transport

The Trust will continue to work closely with the bus operators to identify opportunities to increase bus use. Staff who live on high frequency, direct bus routes will be targeted using personalised campaigns to raise awareness of the alternatives available to them. These campaigns will be underpinned by the traffic management and car park management policy, which will restrict permits to staff which live on direct, high frequency routes.

7.4 Car Share

Car sharing or lift-sharing can be an effective way to reduce congestion, especially at peak times, and involves two or more people sharing a car for a particular journey such as to work or to the shops. The main benefits associated with car sharing are financial due to the shared fuel

cost and reduced parking charges, table 7.1 details the potential cost savings.

Table 7.1 - Annual Fuel Costs per person for Car-Sharing

Distance from work (Miles)	Sole Occupant(£)*	Sharing with one other(£)	Sharing with two others(£)
10 miles**	715	357	239
20 miles**	1,430	715	477
40 miles**	2,859	1,430	953

* Based on a 1400cc engine running at 31.3 miles /gallon & petrol costs of £4.76/gallon and 47 working weeks of 5 days per week.

**In order to calculate a round trip figure, the distance from work has been doubled.

Currently 14% of staff car share, however there has been little interest in the liftshare website. The Trust is looking to increase membership of liftshare by undertaking promotional campaigns with existing car park permit holders.

It is recommended that the Trust does not solely rely upon the liftshare web based database as experience has shown that hospital staff are not receptive of internet based matching schemes. Alternatively, paper and electronic application forms will offer a more personal matching service, which hospital staff may feel more comfortable using. An example of Liverpool John Lennon Airport's car share application form is provided in appendix F and the Trust will look to produce a similar document. Completed forms should be returned to the travel co-ordinator, who will use this information to find a suitable sharer.

Raising awareness will be a key component of the scheme and it is recommended that the Trust utilises a variety of communication channels to raise the profile such as:

- High profile launch
- Poster campaign
- Global email
- Trust Monthly Brief
- Intranet
- Features within the Trust newsletter
- Application forms attached to payslips
- Staff induction

7.5 Car park management

Please see the Traffic Management and Car Park Policy for further details.

7.6 Action Plan 2010 - 2012

The table below provides an overview of travel plan activities for 2010 - 2012.

Table 7.2: Action Plan 2010-2012

October 2010 - October 2012 Action Plan Schedule					
Ongoing measures					
Target No	Initiative/Measure/Action:	Responsibility:	How Monitored / Measured:	Proposed Progress / Revised Target Date:	Medium/Long Term Targets Supported
S1	Update all surveys on a biannual basis	NHS Trust	Presentation of updated results at annual review	Spring 2012	All
S2	Repeat 'Car Free Day' / TravelWise Week	Travel Plan Co-ordinator	Hold such an event and monitor attendance and events used	Annually	All
S3	Provide 'Green Travel Publicity Day' and general Travel Plan promotion	Travel Plan Co-ordinator	Hold such an event and monitor attendance and events held	Annually	All
S4	Continue discussions with local bus operators via bus users group	Travel Plan Co-ordinator	Hold regular meetings with operators	Trust maintains regular contact with Avon, First and Arriva	M4, L4
S5	Continue work of Cycle User Group	Travel Plan Co-ordinator	Maintain regular meetings	Ongoing	M1, L1, L5
S6	Continue work of Car Park Policy Group	Travel Plan Co-ordinator	Maintain regular meetings	Ongoing	All
S7	Continue Transport Strategy Group	Travel Plan Co-ordinator (in association with TravelWise)	Quarterly meeting - propose new targets for Travel Plan	Ongoing	All

S12	Review reimbursement allowance for use of car for work purposes, allocation of parking permits and parking spaces etc..	NHS Trust	Use results from parking and travel study and car park policy groups recommendations	Complete Spring 2010	M3, L3
S13	Undertake patient and visitor surveys	NHS Trust	Presentation of updated results at annual review	Complete Autumn 2010, repeat every two years	All
S14	Undertake new staff surveys, increase response rate from 6% to 12% of staff	NHS Trust, Transport strategy group	Presentation of updated results at annual review	Bi-annual	All
S15	Travel Plan Review	Travel Plan Co-ordinator	Annual Review Report	Autumn 2011 & 2012	All
S16	Provide information on the Travel Plan in the staff induction pack	Travel Plan Co-ordinator	Information in induction pack	Complete Autumn 2010	All
S17	Increase membership of Liftshare database	Travel Plan Co-ordinator	Grow membership to 100 staff	Ongoing	M3, M4, L3, L4
S18	Develop car share policy - taxi ride homes, dedicated car park etc.	Travel Plan Co-ordinator	Develop proposals for Transport Strategy Group	Spring 2011	M3, M4, L3, L4
S19	Evaluate Park and Ride service from Sainsbury's	Travel Plan Co-ordinator	Patronage figures provided in review	Annually	M4, L4

Additional Measures 2010 - 2012

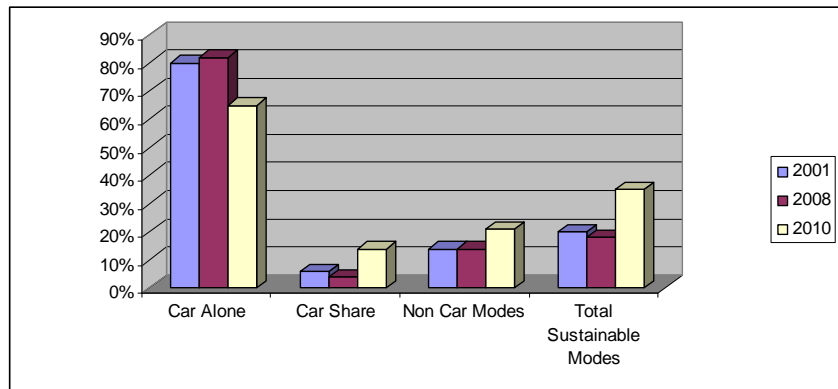
Target No	Initiative/Measure/Action:	Responsibility:	How Monitored / Measured:	Proposed Progress / Revised Target Date:	Medium/Long Term Targets Supported
S21	Work in partnership with Wirral Council and Wirral PCT to promote the health	Travel Plan Co-ordinator	Travel Survey results	Annually	M1, M2, L1, L2, M4

	and Wirral PCT to promote the health benefits of walking and cycling to work.	ordinator			
S22	Undertake a pedometer challenge to encourage staff to walk more	Marketing Team, HR & Travel Plan Co-ordinator	Record number of participants	Annually	M2, L2, M4
S23	Undertake monitoring of cycle parking on a monthly basis.	Travel Plan Co-ordinator	Record number of bikes	Monthly	M1, L1, M4
S24	Provide a Dr. Bike clinic maintenance service	Travel Plan Co-ordinator	Record number of participants	2 per year	M1, L1, M4
S25	Work with TravelWise and Wirral PCT to provide cycle training	Travel Plan Co-ordinator	Record number of participants	Complete Spring 2012	M1, L1, M4
S26	Investigate becoming an agent for Merseytravel, Arriva and First by selling season tickets	Travel Plan Co-ordinator, HR & Finance	Develop proposals for Transport Strategy Group	Complete Spring 2012	M4, L4
S27	Promote the liftshare database by directly targeting permit holders	Travel Plan Co-ordinator	Record number of application forms sent	Annually	M3, M4, L3
S28	Provide a paper alternative to the liftshare website	Travel Plan Co-ordinator	Record number of application forms	Ongoing	M3, M4, L3

8. Travel Plan Targets 2010 - 2012

It is important that the travel plan is continually reviewed and updated to ensure that the plan remains relevant to the Trust. The latest survey information has enabled the Trust to develop a new action plan and in order to give direction, a series of new medium and long term targets have been set.

The travel survey revealed that the Trust has considerably increased the number of staff travelling to Arrowe Park using sustainable modes (35%), meeting its 2010/2012 target two years early. The graph below presents the Trust's progress, comparing the latest survey results with 2001 and 2008 data.



In consultation with the Trust has set new targets for both the medium and long term and these are presented in table 8.1 on the next page.

Table 8.1: Medium Term Targets

August 2010 to August 2012 - Medium Term Targets					2010 Review		
Target No	Previous Initiative/Measure/Action: Medium Term: 2 years	Responsibility:	Previous Target Date:	How Monitored / Measured:	Progress		
					2010 Survey Results	Revised target/	Revised target date
M1	Increase the proportion of staff cycling to work by 100% from 4% to 8% modal share	NHS Trust	Spring 2010	2-yearly formal survey and alternate 2-yearly 'snap-shot' modal split survey	4%	6%	Spring 2012
M2	Increase the proportion of staff walking to work by 100% from 2% to 4% modal share	NHS Trust	Spring 2010	2-yearly formal survey and alternate 2-yearly 'snap-shot' modal split survey	4%	6%	Spring 2012
M3	Increase the proportion of staff who car share from 4% to 15% modal share	NHS Trust	Spring 2010	2-yearly formal survey and alternate 2-yearly 'snap-shot' modal split survey	14%	16%	Spring 2012
M4	Reduce the number of single occupancy car trips to the hospital and achieve a 35% modal share of travel to the hospital by sustainable modes	NHS Trust	Spring 2010	2-yearly formal survey and alternate 2-yearly 'snap-shot' modal split survey	35%	41%	Spring 2012

Table 8.2: Long Term Targets

Long Term: 4 years				
L1	Increase the proportion of staff cycling to work from surveyed 2012 level by a further 50%	NHS Trust	Spring 2012	2-yearly formal survey and alternate 2-yearly 'snap-shot' modal split survey

L2	Increase the proportion of staff walking to work from surveyed 2012 level by a further 50%	NHS Trust	Spring 2012	2-yearly formal survey and alternate 2-yearly 'snap-shot' modal split survey
L3	Increase the proportion of staff who car share from surveyed 2012 level by a further 50%	NHS Trust	Spring 2012	2-yearly formal survey and alternate 2-yearly 'snap-shot' modal split survey
L4	Increase the proportion of staff using public transport to travel to work from surveyed 2012 level by a further 50%	NHS Trust	Spring 2012	2-yearly formal survey and alternate 2-yearly 'snap-shot' modal split survey
L5	Re-investigate the option of cycle mileage for business travel	NHS Trust	Spring 2012	Complete

9. Conclusions

The Trust has made significant progress in reducing the number of staff which drive alone to the Arrowe Park site, achieving the short term 2010/12 travel plan target of 35% of staff arriving by sustainable modes two years early. This could be attributed to the Trust implementing a series of incentives and disincentives, intended to raise awareness and increase the attractiveness of sustainable modes whilst penalising single occupancy car use. It is important to note that the most successful travel plans contain both types of measures and the Trust should continue to incentivise sustainable transport and use prohibitive measures to manage demand for car travel to achieve greater modal shift in the future.

The Trust has not increased car parking charges since the introduction of the system in 2005, however car parking in Birkenhead and the cost of public transport have both seen significant increases over the past five years. In addition to this, the Trust has not made a net profit since the system was introduced and uses all revenue generated from car parking to contribute towards the operation of the car park management & traffic policy and the travel plan. With the Trust looking for £28million in savings over the next two years, it is important that the cost of car parking truly reflects its operational cost in order to reduce the impact upon patient care budgets. Increasing car parking charges will address the VAT increase in January 2011, whilst continuing to provide funds for both the travel plan and the car park & traffic management policy, reducing the amount of additional funding provided by the Trust.

The Trust found great success utilising TravelWise's Wise Moves online survey, increasing the staff response rate from 6% in 2008 to 20% in 2010. In addition to this, paper forms distributed via line managers to members of staff with no access to a computer proved to be a successful method of distributing to the survey. The Trust should look to utilise these methods for future surveys to build upon the 2010 response rate.

The Trust has introduced a number of physical and financial measures, accompanied by car parking control, to manage the demand for car parking at Arrowe Park. Going forward, the emphasis should be upon greater awareness raising with the Trust looking to engage with stakeholders such as Wirral Council, TravelWise, Wirral PCT and the bus operators, to develop joint campaigns. In addition to this, current restrictions upon the car park could be further increased to address the number of staff which drive but could realistically use alternatives.

In terms of patients and visitors, the Trust will look to raise greater awareness of alternatives to driving to Arrowe Park, providing information to both new patients and GP's to encourage a more informed travel choice.

Appendices

Appendix A. Written Ministerial Statement and Car Parking Q&A

WRITTEN MINISTERIAL STATEMENT

DEPARTMENT OF HEALTH

NHS Parking: Response to Consultation

Thursday 16 September 2010

The Minister of State, Department of Health (Mr Simon Burns): I am today publishing the government's response to the recent public consultation on car parking at National Health Service hospitals issued by the previous administration before the election.

That consultation set out proposals to introduce mandatory free parking for many inpatients and outpatients. Those proposals would cost the NHS in excess of £100m. The impact assessment states that it would lead to a net disbenefit to patients valued at almost £200m. This negative impact arises from substantial health benefits foregone from not investing this income in healthcare, offset by lower financial benefits to favoured car park users. The impact also does not include environmental costs associated with the policy, which would also clearly be adverse. At a time when the NHS needs to make every penny of its budget count the government cannot support such a proposal.

Moreover, the government has embarked on a very clear strategy for the NHS that reduces central control and intervention in operational decisions, giving NHS managers the autonomy to make decisions that reflect the needs of their local community. Telling the NHS how to run their car parks would be inconsistent with this principle.

However, our strategy also puts patients at the centre of decision making, and supports patients to be able to make informed choices. It is clear from the consultation feedback that the parking policies and practices in some trusts fall short of these standards. Patients undergoing extended outpatient treatment, and long-stay inpatients, should not be further disadvantaged, and nor should their health needs be possibly compromised by high cumulative parking costs. A fair scale of concessionary rates should be offered, and all eligible patients should be fully informed and helped to take advantage of them. These standards are fundamental to patient centred care and informed choice.

Through our announcement today we are:

- ensuring that the NHS is made aware of patients' concerns;
- asking trusts to work with local groups to examine their current policies and practices and ensure that they are genuinely fair;
- emphasising the importance of promoting these fully to eligible patients, prior to and during their treatment; and

- asking the NHS Confederation, who already provide best practice guidance on parking policy, to engage further with parking providers and patient advocate groups to respond to the concerns identified through the consultation.

Local autonomy requires local accountability. It is for trust boards to ensure that their policy is fair and patient centred, and has the support of its local community. The challenge now is for the NHS collectively and locally, to take action to deliver the fair access that their patients expect.

The government's response and a summary of the responses to the consultation have been placed in the Library. Copies of the government's response are also available to hon Members in the Vote Office.

Car Parking Q&A

Are you just going to stand by and do nothing?

No. Through our announcement today we are:

- o ensuring that the NHS is made aware of patients' concerns;
- o asking trusts to work with local groups to examine their current policies and practices and ensure that they are genuinely fair;
- o emphasising the importance of promoting these fully to eligible patients, prior to and during their treatment;
- o asking the NHS Confederation, who already provide best practice guidance on parking policy, to engage further with parking providers and patient advocate groups to respond to the concerns identified through the consultation.

But local autonomy requires local accountability. It is for trust boards to ensure that their policy is fair and patient centred, and has the support of its local community. The challenge now is for the NHS collectively and locally, to take action to deliver the fair access that their patients expect.

Aren't you compromising your principle of local autonomy now by telling the NHS what to do?

No, we are highlighting that the provision of concessions as a standard is part of patient centred healthcare, and their active promotion is necessary for informed patient choice. The details of any scheme are for each trust to determine taking account of their local circumstances (engaging with their local community).

Why are you abandoning the previous administration's commitment to free parking?

This Government has never committed to a policy of mandated free parking. The proposals in consultation are estimated at £200 million in lost benefits to patients and would mean that hospitals have to divert money from patient care. At a time when the NHS must make every penny count, we simply cannot support such a proposal.

Labour said that each hospital would fund the reduction through (unspecified) local efficiencies in back office operations. Assuming that they could realise these, we want all available efficiency gains to be used to reinvest in patient care.

There simply isn't enough capacity at many hospitals to cope with the increase in demand for spaces that widespread free parking would generate. Priority patients would be unable to park, as has happened in a number of hospitals in Scotland and Wales.

We can't be in favour of decentralisation, and greater autonomy for NHS and then tell them how to run their car parking.

In response to the allegation that MS(H) has done a 'u-turn' on parking:

This is not a u-turn, this Government has never committed to a policy of mandated free parking. In an ideal world parking and all sorts of other ancillary services and facilities would be free. However, we are in unprecedented economic circumstances. The proposals in consultation are estimated at £200 million in lost benefits to patients and would mean that hospitals have to divert money from patient care. Labour said that each hospital would fund the reduction through (unspecified) local efficiencies in back office operations. Assuming that

hospitals can find these, we want all available efficiency gains to be used to reinvest in and protect patient care.

But the priority has to be patients whose health needs require frequent visits to the hospital. They are the ones who should not be penalised for their illness. That is why we have said clearly to the NHS that these patients must not be disadvantaged by cumulative parking charges.

Do you still think that parking charges are a 'tax on the sick'?

It is unreasonable for patients and visitors to pay a nominal charge on the few occasions they visit a hospital. However, for those who have to attend on a long term basis, if they incur high cumulative charges that could be seen as a cost of being sick.

That is why the NHS must ensure that a fair policy on concessions addresses the needs of this small but vitally important group of patients.

Explaining the policy cost calculations

Where does the cost (for Labour's policy) of £117m come from?

This was the estimated cost in the Impact Assessment of the original proposal by Andy Burnham for the visitors of all inpatients to receive a voucher for free parking.

They subsequently also consulted on options for outpatients that, if combined, would have increased this cost further

How do you get the 200m figure?

The previous government's plans set out proposals to introduce mandatory free parking for many inpatients and outpatients. Those proposals would cost the NHS in excess of £100m (£117). The impact assessment states that it would lead to a net disbenefit to patients valued at almost £200m. This negative impact arises from substantial health benefits foregone from not investing this income in healthcare, offset by lower financial benefits to favoured car park users. The impact also does not include environmental costs associated with the policy, which would also clearly be adverse.

How have you calculated that there is a 'net disbenefit' for this proposal?

In the absence of any evidence that free car parking for visitors to inpatients offer any health benefit, the main components of this calculation come from estimating the value of healthcare benefits that would have been foregone by spending this money on providing free car parking rather than on healthcare. This is only partially offset by the money saved by those car park users who would no longer have to pay to park.

What are the other 'environmental costs' that you have referred to?

These relate to the consequence of increased car journeys that would be encouraged by the provision of free parking, with resulting increase in CO2 emissions and related impacts

Provision of Concessions for Frequent Users

So which patients are eligible for concessions?

It would be wrong to specify a rigid central rule on what constitutes a 'regular patient' who justifies concessions, and what the rate should be, but each trust should be prioritising its

most frequent patients and providing a level of concession that their local circumstances can sustain. (These circumstances might include car park capacity, number of priority patients, location & available public transport)

But we would expect all cancer and renal dialysis outpatients, as well as others, to benefit from concessions.

Aren't you just centrally mandating concessions?"

No, we are simply saying that the principle of concessions for some patients is consistent with patient centred healthcare. That is not the same as mandating specific subsidies for particular groups.

Won't this just create the extra cost burden that you say that you can't afford?

No, we are talking about a small proportion of total patients and visitors for most hospitals. And they should already be providing and promoting fair concessions in line with existing guidance.

Are all hospitals providing concessions currently?

Those who responded to the consultation all tell us that they are providing some form of concession. What that doesn't tell us is whether they are fair, and whether patients are being informed and assisted to take advantage of them. Patients and patient groups tell us this is variable and that is unacceptable.

How will you ensure that all hospitals provide these without making them mandatory?

Trusts know that a policy of fair concessions is vital to patient-centred care. If they are failing to provide this, their local community should hold them to account. Through our announcement today we are:

- o ensuring that the NHS is made aware of patients' concerns;
- o asking trusts to work with local groups to examine their current policies and practices and ensure that they are genuinely fair;
- o emphasising the importance of promoting these fully to eligible patients, prior to and during their treatment;
- o asking the NHS Confederation, who already provide best practice guidance on parking policy, to engage further with parking providers and patient advocate groups to respond to the concerns identified through the consultation.

Who pays for the current Hospital Transport scheme, and how is eligibility is determined.

The Healthcare Travel Cost Scheme is funded by Primary Care Trusts (PCTs). Most commonly the provider unit will pay the patient at the cashiers office on the day of the appointment.

The eligibility criteria are:

- o Be in receipt of particular qualifying benefits such as Income Support, or Pension Credit
- o Be named on a NHS low income certificate

Why should anybody have to pay parking charges?

Most members of the public only use a hospital car park for a very few days in a year. It is not unreasonable for them to pay a small amount towards the facility. However, such charges should not result in patients and visitors being unable to access NHS services where their care needs required extended access to hospital services.

Car parking facilities do carry costs such as maintenance, lighting and security. Without charging users, the NHS would need to divert funding from front line services. Many hospitals have invested in increased capacity and improved facilities in recent years. Without income future such investment is likely to dry up — in the consultation people told us that what they value most is sufficient convenient parking above free parking.

The NHS does not subsidise patients or visitors who travel by other means to attend the hospital, or those who park in nearby facilities provided by commercial operators.

Do all hospitals currently charge for car parking?

Of NHS respondents to the consultation 88% of Trusts charge. This is consistent with other historical data. Of course some London hospitals don't have any car parks for which they could charge.

And do they make profits?

We don't have any record of accounts that would confirm this. A few say they make a profit that they reinvest into local services.

What do you mean when you say there is a legislative issue that may require profits to be generated? (this line to subject legal clearance)

Car parking charges are part of generating income which legislation requires to at least break even. This applies to sensible local business activities that make use of their spare resources, such as renting out spare buildings or running a shop.

However, operating a car park is not the same — patients expect parking facilities if the site allows for them to be provided.

We are looking at options to relax the requirement to break even to give hospitals the flexibility to set charges suit their local circumstances.

Shouldn't 'regular' patients get free parking?

We can't go as far as specifying a rigid rule on what constitutes a 'regular patient' who justifies free parking. Trusts will need to consider locally issues, for example longer travel distances, patients attending several locations, as well as their available capacity and the needs of other priority patients.

Why is a local solution better?

Each NHS organisation has different locations, services and local populations. Therefore, the arrangement they make to provide access to their services will have different costs. It is both inappropriate and impossible for us to mandate centrally how they charge for their parking. For example, in some areas increased car usage will result in congestion and could hinder efforts to meet carbon reduction targets. In other areas, patients have little option than to use their car for transport.

We can't be in favour of decentralisation, and greater autonomy for NHS and then tell them how to run their car parking. But through our announcement today we are:

- o ensuring that the NHS is made aware of patients' concerns;
- o asking trusts to work with local groups to examine their current policies and practices and ensure that they are genuinely fair;
- o emphasising the importance of promoting these fully to eligible patients, prior to and during their treatment;
- o asking the NHS Confederation, who already provide best practice guidance on parking policy, to engage further with parking providers and patient advocate groups to respond to the concerns identified through the consultation.

Handling the Announcement

Q Why have you published this response today when parliament is about to rise for almost a month?

There is significant public interest and we were keen to ensure our response was published as soon as possible. Today was the first day this could be achieved.

If other countries can do it, why can't we?

Scotland and Wales have made their own choice to spend part of their finite NHS budget on subsidising the costs of car parks. That means less money on patient care.

A number of hospitals in Scotland and Wales have also had situation where priority patients haven't been able to park. There simply isn't enough capacity at many hospitals to cope with the increase in demand for spaces that widespread free parking would generate.

We can't be in favour of decentralisation, and greater autonomy for NHS and then tell them how to run their car parking.

If the responses say that people want free car parking — why aren't you listening to people?

The responses did not simply tell us that people want free parking. Respondents also told us that convenient access, and not the cost of parking, was their most important access concern. We believe that what most people want is not necessarily free parking for all or most patients and visitors, but good access to parking, with fair and reasonable charges and significant concessions (up to free parking) focused on those patients who have to attend regularly.

The NHS does not require central regulation to provide this.

What Best Practice Guidance and Codes of Practice exist?

The NHS Confederation represents over 95% of NHS organisations. One of its key roles is influencing policy, implementation and debate. In early 2010, it issued its best practice guidance to its members *Fair for all not free for all: principles for sustainable hospital car parking*^[1]. This describes many examples of good practice based on a set of principles that build on the Select Committee recommendations on concessions. The Confederation's Guide can be found at: <http://www.nhsconfed.org/OurWork/latestnews/Pages/fair-car-parking.aspx>

Also in 2010, the British Parking Association, in partnership with the Confederation, issued a Hospital Parking Charter. This charter, to which trusts have since signed up, acts as a kite mark, guaranteeing compliance to its standards^[2]. Other patient organisations have also described what they would see as good practice in running car parks. For instance *Which?* recently published their *Ten Demands for Hospital Car Parking*.^[3] The BPA's Charter can be found at: http://www.britishparking.co.uk/info_page.php?id=74&info_id=39

We believe that these resources together offer NHS organisations a broad range of information about standards, and will support the spread of best practice more effectively than guidance from government. However, we would encourage organisations representing NHS trusts and patients to consider whether existing publications could be refreshed to take account of the issues raised in response to this consultation, and clearly reflect both the needs of patients and the constraints of NHS.

Appendix B. Policy Reference: Car Parking Charging

Policy Reference:

CAR PARKING CHARGING

**For Patients & Visitors to Wirral University Teaching Hospital
NHS Trust Foundation Trust**

Version 1.2

Name and Designation of Policy Author(s)	Mr J W Realey, Facilities Manager
Name of Approving Committee	Car Park Policy Group
Ratified By	Hospital Management Board
Date Ratified	
Date Policy Published	(To be updated once published)
To Be reviewed By	(To be updated once published)
Target Audience	All staff, patients and visitors to Arrowe Park and Clatterbridge Hospitals
Associated Documents	

DOCUMENT HISTORY

Version History

Date	Version	Responsibility	Comments
Mar 2007	1.0	J W Realey	Draft version – currently in process of writing.
Aug 2007	1.1	J W Realey	Amended exemption information
September	1.2	J W Realey	Document for consultation as per policy guidance

Approvals

The following staff are identified as key individuals who represent a high level of expertise in fields relating to the content of the policy. All of these staff must review relevant sections of the policy and confirm that they approve the policy to go live.

The name of the person holding over-all responsibility for this policy is highlighted in **bold** text.

To save space, approvals of old versions will be summarised as one entry. Only the most recent approvals of the current version will be shown in full.

Approval Type Required	Approval Given By	Date Approved	Comments
Screened for Impact			
Impact Assessment			
Car Park Policy Group	P Holt	8 th August 2007	
Pharmacy (Only if medicines included in policy)			
Finance (Only if financial implications in policy)	R Fair	16 th August 2007	
HR/OD (Only if workforce/development implications in policy)			
Facilities and Operations Department	J W Realey	20th September 2007	

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1.0 INTRODUCTION

This Policy is primarily designed to provide guidance and advice to staff on who is entitled to exemption or partial exemption from car parking charges.

Wirral University Teaching Hospital, NHS Foundation Trust charges a parking fee to park in the designated parking areas for patients and visitors. This is based on a payment for each parking visit up to a maximum duration not exceeding 5 hours.

All staff should remember that a sympathetic and helpful approach should be adopted for patients and visitors regarding car-parking charges.

It is important to note that the exemption system agreed for car park charges needs to be applied and managed on a consistent basis at both hospital sites.

2.0 SCOPE

This policy covers both operational sites and is to assist staff who deal with patients and visitors in knowing who may or may not be entitled to exemptions or partial exemptions from car parking charges.

3.0 CAR PARKING FEES FOR PATIENTS AND VISITORS

The charge for patient and visitor parking at Arrowe Park and Clatterbridge Hospitals is £2.00 per visit, with a maximum visit of 5 hours - this limit is set in order to prevent staff from using patient / visitor car parks.

Anyone exceeding 5 hours must contact Security to enable them to exit the car park.

Car Parks that issue a ticket to gain access (summary list below) have a 20 minute drop off allowance for the driver to drop off a relative or friend and no charge will be incurred to exit the car park.

Arrowe Park Hospital

Car Park 'B' Car Park 'G'

Clatterbridge Hospital

Car Park 'B' Car Park 'F'
Car Park 'K' Car Park 'L'

The review of the charge per visit will be undertaken by the Car Park Policy Review Group on an annual basis in accordance with our agreement with the local authority. The review process will involve consultation with the Trust's Membership and with the Assembly of Governors.

4.0 FREE CAR PARKING SPACES

As part of the legal agreement with Wirral Metropolitan Borough Council, the Trust agreed to identify and maintain 300 free parking spaces at Arrowe Park Hospital.

The Trust is responsible for the enforcement of use of these spaces and as such the measures identified in Section 8 of this Policy will apply to any member of staff who use the available free spaces allocated for the use of members of the public only.

5.0 EXEMPTION OR PARTIAL EXEMPTION FROM PARKING CHARGES

5.1. EXEMPTIONS FOR VISITORS

The following exemptions for visitors will apply:

- **Immediate Families of Patients in ITU/HDU**
The one immediate family of critically ill patient in ITU/HDU will be entitled to free car parking whilst the patient is in ITU/HDU.
- **Parents of patients in Neonatal Unit**
The one immediate family member of the patient in Neonatal Unit will be entitled to free parking for the remainder of the stay.
- **Parents of patients in Paediatric Wards**
The one immediate family member of the patient in a Paediatric Ward who assists in their care will be entitled to free parking for the remainder of the stay.
- **Immediate Family of Terminally Ill Patients**
The one immediate family member of the patient will be entitled to free parking for all visits to the hospital to attend to their relative.
- **Families of Patients Who Have Been in Hospital for Over Two Weeks**
 - *Arrowe Park Hospital*
Will make use of one of the 300 free spaces or, alternatively, the Ward or Department Manager will contact the Cash Office who will then arrange for them to purchase a multi-day pass at a reduced cost (i.e. a seven-day pass at a cost of £5 or thirty day pass at a cost of £16 – Refer to Appendix 1).
 - *Clatterbridge Hospital*
The Ward or Department Manager will contact the Cash Office who will then arrange for them to purchase a multi-day pass at a reduced cost (i.e. a seven-day pass at a cost of £5 or thirty day pass at a cost of £16 – Refer to Appendix 1), which can be used in car parks 'B', 'K' and 'L'.

In each case the Ward or Departmental Manager will inform the Cash Office on the respective site by e-mail confirming the visitor's details on the Authorisation for Car Park Concession form (Appendix 1).

(Refer Appendix 3 – Public Information Notice)

A list of relatives, who have been authorised for exemption to car parking charges, will be maintained in the Cash Office and this will be used to verify the application for free parking.

Visitors who are able to claim travel reimbursement from their Job Centre Plus Office should also be able to reclaim their parking fee as part of that cost from their Job Centre Plus Office.

5.2. EXEMPTIONS FOR PATIENTS

The following exemptions / partial exemptions for patients will apply:

- **Frequent Attendees**
Patients who are required to attend hospital more than twice per week for an episode of care, i.e. dressings clinic, will be able to purchase a weekly multi-day car park pass at a reduced cost (£5.00). Similarly, patients who are required to attend more than eight times per month for an episode of care, i.e. dermatology, dialysis, will be able to purchase a monthly multi-day car park pass (£16.00).
(Refer to Appendix 1)
- **Patients on Benefits**
Patients attending for outpatient appointments or treatment who meet the criteria under the Hospital Travel Costs Scheme will be entitled to claim a refund of their car parking charges from the respective hospital cash office (Refer to Appendix 2).

Such patients will have to provide the relevant documentation in relation to eligible benefit (Refer to Appendix 2) and evidence of an appointment or treatment at the relevant hospital Cash Office.

(Refer Appendix 3 – Public Information Notice)

The following also applies:

- **Arrowe Park**
Patients must have proof of identity before their car park ticket will be validated at the Cash Office to enable them to exit the car park free of charge.
- **Clatterbridge**
Patients must have proof of identity and confirmation of their visit from the hospital with an appointment card or letter before the £2 parking fee will be reimbursed at the Cash Office.

Carers who provide assistance to patients will be afforded the same facilities as identified in Section 5.1 above.

5.3. EXEMPTIONS FOR VOLUNTEERS

Volunteers will be offered free car parking on the hospital sites. In exceptional circumstances where a free space cannot be provided, reimbursement will be available if a parking fee has been paid by a volunteer.

6.0 BLUE BADGE HOLDERS

There are a number of blue badge parking spaces, which are external to the main car parks and are available to blue badge holders without charge.

In addition there are a number of blue badge car parking spaces within all of the patient / visitor barriered car parks, however a charge of £2 per visit is applicable.

Traffic Advisors who are present on both operational sites will ensure that blue badge spaces are reserved specifically for the use of blue badge holders. However, it is recognised that a number of patients attending hospital have acute or chronic disability due to either their illness or the result of surgery. These patients will be directed sympathetically to blue badge spaces within barriered car parks.

7.0 COLLECTION OF FEES FROM EXIT BARRIERS AND PAY STATIONS

The collection of car park fees from exit barriers or pay stations is the responsibility of each of the Cash Offices under the direction of the Manager of Paymaster Services.

The Security Manager will ensure that a Security Officer will accompany a member of the Cash Office staff when collecting cash from either the exit barriers or the pay stations.

The Manager of Paymaster Services will ensure that there is an auditable process for the collection of fees from exit barriers and pay stations and that the Director of Finance has approved the procedure (Refer to Car Park Fee Collection Procedure).

8.0 ROAD TRAFFIC CONTROL (SUMMARY)

In order to maximise the effectiveness of the access controls, it is vital that traffic flow is not adversely affected. In order to facilitate the smooth and efficient flow of traffic in terms of movement on site, access and egress, it is necessary to implement a comprehensive traffic management system, which involves both the clear direction of all vehicles and enforcement of parking restrictions (within the car parks and outside designated parking areas).

There will therefore be a fixed-penalty notice and wheel clamping operation implemented which will be applied appropriately dependant upon the circumstances. There will be two systems of control, both of which will be undertaken by Trust Staff:

- General control of the road systems will be by using the fixed-penalty ticket control system. Parking tickets for vehicles parked on double yellow lines will be issued and controlled by Trust traffic advisors, with an appointed specialist third party operator acting on behalf of the Trust to collect the appropriate parking fine and any necessary recovery procedures.
- Vehicles parked in a position that would cause a road hazard, safety issue or unauthorised in a blue badge parking bay will be wheel clamped by our Staff, as is the case now.

Note that Wirral University Teaching Hospital NHS Foundation Trust are not registered with the Security Industry Authority and cannot charge a release fee.

Both systems will be carefully monitored to ensure that they are operated correctly and are robust enough to ensure the free movement of vehicles around our operational sites at all times.

For further details, please refer to the Road Traffic and Illegal Parking Control Policy.

9.0 REVIEW OF CAR PARKING CHARGES POLICY

The Car Park Policy Group will review this policy on an annual basis following consultation with the Trust's membership. A report will be submitted for consideration and approval by the Trust's Board of Directors and ratified by the Assembly of Governors.

AUTHORISATION FOR CAR PARK CONCESSION

Ward / Department:

Date of Request:

Type of Concession Required	<input checked="" type="checkbox"/>	Notes
Patient Discounted Pass	<input type="checkbox"/>	A Discounted Pass can only be provided to patients having to attend more than twice per week (eight times per month).
Visitor Free Pass	<input type="checkbox"/>	A Free Pass can only be provided to visitors in respect of those patients in ITU/HDU, Neo-Natal Unit, Paediatric In-Patients and terminally ill patients. One pass only will be issued per patient. Please complete the visitor details section below.
Visitor Discounted Pass	<input type="checkbox"/>	A Discounted Pass can only be provided to visitors attending on a daily basis where the patient's length of stay has exceeded fourteen days. One pass only will be issued per patient. Please complete the visitor details section below.

Patient's Name: Patient No:

Address:

.....

Date of Admission / First Attendance:

Anticipated Length of Stay / Treatment:

Vehicle Registration No:

IF VISITOR PASS, PLEASE COMPLETE BELOW:

Visitor's Name:

Relationship to Patient:

Address:

.....

Vehicle Registration No:

TO BE COMPLETED BY THE AUTHORISING MANAGER

Manager's Name:

Manager's Signature: Date:

Patients on Benefits – Hospital Travel Costs Scheme

All patients who meet the criteria contained in the Hospital Travel Costs Scheme will be able to claim a refund of their car parking charges from the respective hospital Cash Office by providing the correct documentary evidence.

Such patients will need to provide the relevant documentation in relation to qualifying benefit and evidence of an appointment or treatment at the relevant hospital Cash Office.

Exemption Benefits:

- Guarantee Pension Credit
- Income Support
- Tax Credit NHS Exemption Certificate
 - Working Tax Credit
 - Child Tax Credit
- Income Based Job Seekers Allowance
- Holders of HC2 and HC3 Forms

PATIENTS/VISITORS CAR PARKING CONCESSION SCHEME

OUT-PATIENTS WEEKLY CONCESSION :

Patients who have to attend for treatment more than TWICE PER WEEK for an episode of care are entitled to apply for a DISCOUNTED WEEKLY MULTI-DAY PASS for the period of that treatment.

OUT-PATIENTS MONTHLY CONCESSION :

Patients attending for more than EIGHT TIMES PER MONTH for an episode of care are entitled to apply for a DISCOUNTED MONTHLY MULTI-DAY PASS for the period of that treatment.

VISITORS CONCESSIONS :

ONE nominated family member or carer is entitled to exemption of parking charges in respect of the following categories of patients:

NEO-NATAL PATIENTS

PAEDIATRIC PATIENTS

TERMINALLY ILL PATIENTS

PATIENTS WHILST IN ITU/HDU

In respect of ALL OTHER IN-PATIENTS : following TWO WEEKS hospital stay a nominated visitor/carers is entitled to apply for a VISITORS DISCOUNTED PARKING PASS.

ALL APPLICATIONS FOR CONCESSIONS SHOULD BE MADE TO THE WARD/DEPARTMENT MANAGER

Current concession charges: £5.00 per week £16.00 per month

300 FREE SPACES ARE PROVIDED FOR PATIENTS & VISITORS IN CAR PARK 'A' AT ARROWE PARK

Patients on Low Income who have evidence of an eligible benefit can be reimbursed for their parking charges under the HOSPITAL TRAVEL COSTS SCHEME.

Appendix C. Letter from Principal Projects Officer, Merseytravel

Our ref: CS/SC/JG/05/01/aph/2009/117

Your Ref:

Contact: Steve Cook

Tel: 0151 330 1304

Date: 29 October 2009

Ms Julie Barnes
Principal Officer Forward Planning
Technical Services
Wirral Metropolitan Borough Council
Cheshire Lines Building
Canning Street
Birkenhead CH41 1ND

Dear Julie

Examination of Proposals to Reconstruct Arrowe Park Hospital Bus Facilities Close to the Hospital's Main Front Entrance

Following our discussions at the Arrowe Park Hospital Public Transport Access meeting held on Wednesday 21 October 2009, I can confirm that Merseytravel's position, with regard to the potential for relocating bus stop facilities at Arrowe Park Hospital to a point closer to the hospital's main front entrance, are as follows.

In conjunction with the hospital authorities, Wirral MBC and the Merseyside bus operators, it is Merseytravel's view that whilst there would be obvious benefits to moving the bus stop facilities closer to the hospital's main entrance, the cost and dis-benefits of taking this action outweigh the positive gains that could be achieved by the relocation of the facilities at the present time. This decision was based upon (a) the clear statement by the hospital that, there would be no opportunity for buses to gain an easy route to and from the hospital main entrance, (b) that space around the hospital main entrance would be very limited for the provision of bus facilities and (c) that buses seeking to operate along any route closer to the hospital main entrance, would be likely to become a significant contributor to congestion that could impede the passage of emergency and other vehicles in this area.

On the basis of the above assessment, which was made in full collaboration with Wirral MBC and the hospital authorities, all parties have agreed to seek the improvement and enhancement of bus facilities in and around their present location, to accommodate the growing demand for public transport travel to and from this important hospital site. In conjunction with this action, the hospital authorities have also undertaken to assess and where appropriate, improve, the walking routes between the present and potentially enhanced bus facilities and the hospital's main entrance.

Cont'd...

I trust the above clarifies Merseytravel's views with regard to the this situation, however should you require any further information from ourselves upon this matter, please do not hesitate to contact me.

Yours sincerely

Steve Cook
Principal Projects Officer

Appendix D. Wirral University Teaching Hospitals – 2010 Staff Travel Survey

WIRRAL UNIVERSITY TEACHING HOSPITALS – 2010 Staff Travel Survey

As part of a planning condition with Wirral Council, the Trust is required to collect information relating to how our staff travel to work. We would appreciate it if you could complete this short questionnaire relating to your journey to work today.

1. What is your home postcode? Please note that this information will be treated in the strictest confidence

.....

2. What site are you based at? (1 box only)

- | | |
|--|---|
| <input type="checkbox"/> Arrowe Park | <input type="checkbox"/> Clatterbridge |
| <input type="checkbox"/> St Catherine's | <input type="checkbox"/> Victoria Central |
| <input type="checkbox"/> Other (please specify)..... | |

3. How did you travel to work today? Please select the mode that you use for the greatest distance.

- | | |
|---|---|
| <input type="checkbox"/> Car (on your own) | |
| <input type="checkbox"/> Car driver with passengers | |
| <input type="checkbox"/> Car passenger | <input type="checkbox"/> Train |
| <input type="checkbox"/> Bus | <input type="checkbox"/> Bicycle |
| <input type="checkbox"/> Foot | <input type="checkbox"/> Motorcycle / Moped |
| <input type="checkbox"/> Other | |

4. If you used more than one mode to travel to work today, please select all other modes you used in addition to your main mode. (please tick all those that apply)

- | | |
|---|---|
| <input type="checkbox"/> Car (on your own) | |
| <input type="checkbox"/> Car driver with passengers | |
| <input type="checkbox"/> Car passenger | <input type="checkbox"/> Train |
| <input type="checkbox"/> Bus | <input type="checkbox"/> Bicycle |
| <input type="checkbox"/> Foot | <input type="checkbox"/> Motorcycle / Moped |
| <input type="checkbox"/> Other | |

5. What time did you arrive at work today?

		:		
--	--	---	--	--

6. What time will you leave work today?

		:		
--	--	---	--	--

7. What are your normal working hours? (Please select 1 answer)

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Flexible hours | <input type="checkbox"/> Normal hours |
| <input type="checkbox"/> Out of hours | <input type="checkbox"/> Shifts |
| | <input type="checkbox"/> Part time |

8. Are you a car park permit holder? (Please tick one answer)

- Yes No

9. Will you need to travel to any of these sites today?

- I will not travel off site today
- Arrowe Park
- Clatterbridge
- Victoria Central
- Aviator House
- Other (Please state).....

10. How will you make these trips? (Please tick all those that apply)

- I will not travel off site today
- Car (on your own)
- Car driver with passengers
- Car passenger
- Bus
- Foot
- Train
- Hospital shuttle bus
- Bicycle
- Motorcycle / Moped
- Other

12. Are you aware that Trust employees are able to purchase a bicycle tax free as part of a salary sacrifice scheme?

- Yes I am aware of the scheme
- Yes I am aware and have purchased a bike through the scheme
- No, I am not aware of the scheme

13. Would you be interested in applying for an interest free loan to purchase an annual public transport season ticket?

- Yes No

Thank you for completing the survey.

Appendix E. Arrowe Park Visitor & Patient Travel Survey

Arrowe Park Visitor & Patient Travel Survey

1. What has been the main reason for you being at the hospital today?
(please place an 'X' in **one** box only)

Emergency (A&E) patient	<input type="checkbox"/>
In-Patient	<input type="checkbox"/>
Out-Patient	<input type="checkbox"/>
Visitor	<input type="checkbox"/>
To accompany a patient or visitor	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>

2. How did you travel to the hospital today? (please tick all those that apply)

Car alone	<input type="checkbox"/>
Car driver with passenger(s)	<input type="checkbox"/>
Car passenger	<input type="checkbox"/>
Bus	<input type="checkbox"/>
Train	<input type="checkbox"/>
Bicycle	<input type="checkbox"/>
Walk	<input type="checkbox"/>
Taxi	<input type="checkbox"/>
Motorcycle/Moped/Scooter	<input type="checkbox"/>
Dropped off	<input type="checkbox"/>
Sainsbury's park & ride	<input type="checkbox"/>

3. What is your postcode?

--	--	--	--	--	--	--	--

4. Interviewer record date

--	--	--	--	--	--

5. Interviewer record time

		:		
--	--	---	--	--

Appendix F. Car Share Registration Form

Car Sharing

Car Share registration form

Are you looking to save some money on your journey to and from the Airport? There could be someone else in your workplace travelling the same way as you. Fill in your details below and pass it onto Clare Nelson, CSR Advisor at JLA, who will look to match you with someone else going your way. It's that simple. The more who sign up to car share, the more chance we have of matching the journeys.

JOURNEY DETAILS

Departing from

Town/village (must be given)

Postcode (if known)

VIA (optional)

Town/village (must be given)

Postcode (if known)

Going to

Town/village (must be given)

Postcode (if known)

Time of departure (nearest 15 mins, e.g. 8:45)

Is this a return trip? Yes No

Time of return (nearest 15 mins, e.g. 17:45)

How frequently do you make this journey? (choose one option only)

One off (specify date)

Every (tick days) Mon Tue Wed Thu Fri Sat Sun

Other

Are you...? (tick one option only)

Looking for a lift Offering a lift Willing to share your journey

Do you hold a valid driving licence? Yes No

Any other info ie. No smoking, male or female car sharer only

Personal details

Title

First name

Surname

Gender

Company name

Email address

Home postcode

Contact telephone number