Northern Health and Social Care Trust

Trust Board Capital Business Case Briefing Paper	
Reference Number:	TB152/10/E
Date of Meeting:	24th August 2023
Presenting Director:	Suzanne Pullins Director of Nursing, Paediatrics, Women's & Corporate Support Services
Subject:	Hospital Parking Charges Act
Purpose/Action Required:	For information/Approval
Background:	The purpose of this brief is to provide Trust Board with an updated position in relation to the legislative changes to HSC Trust car parking charges and work that has been carried out within the Trust and regionally to plan for successful implementation of the Act. **<u>Hospital Parking Charges Bill NI (2022)</u>** The **Hospital Parking Charge Bill 2022** gained Royal Ascent in May 2022, and HSC Trusts were provided with a 2 year timeline from then to fully implement. By May 2024 the Trust must meet the conditions of the Bill which provides that: *"No person may impose or recover a monetary charge with respect to the parking of a vehicle in a car park at a hospital by someone who is attending the hospital in a relevant capacity as follows—* *(a) for the purpose of—* *(i) work or employment at the hospital, or* *(ii) providing services at the hospital,* *(b) as a patient of the hospital, or* *(c) as a visitor to the hospital* *Parking in the car park shall be in accordance with whatever reasonable conditions (including restrictions) which apply in relation to the parking of vehicles in the car park*." **<u>Regional Working</u>** A Regional Working Group was established by the DoH involving all Trusts. Membership of the regional group includes reps from the main Trade Unions. (Unite, Unison, NIPSA, RCN) and HSC Trust reps; Jeremy Foster, Donald McWhirter and Claire Simpson (Finance Representative) represent the NHSCT.

A business case has been completed for the required capital equipment which also details all revenue consequences of the options appraised and also the recurrent costs associated with maintaining current parking operations.
A project plan has also been developed that runs until September 2024 which covers all aspects of the planning, implementation and post implementation review. BSO Pals are now also represented on the Group and providing expert advice in relation to securing specialist advice and regulated providers to support the revised management arrangements for car park management beyond 2024.

Regional visits to Newcastle-upon-Tyne Royal Infirmary Hospital and Cardiff & Vale Hospital took place in 2022 attended by reps from DoH and HSC Trusts to assess technology employed at UK locations with zero tariff policy which was specifically cited as "good practice" by the Health Committee.
Research and learning from the UK site visits has informed the planning within the regional working group and it is clear that a blended approach to technology should be implemented, utilising barrier control technology and Automatic Number Plate Recognition (ANPR) to achieve the desired outcomes.

The use of ANPR technology has been recommended by both the Welsh and the UK Government in their guidance on car parking; and as a Regional Group this approach has been agreed as the way forward.

Impact for NHSCT:

Currently there are 2 sites within the Trust where paid for parking for patients/visitors is in place specifically:

- Antrim Area Hospital – Barrier controlled
- Causeway Area Hospital – Barrier controlled

Our proposal at this point is that the existing paid for parking spaces which are located at main entrance/exits to our buildings, will continue to be protected for patient/visitor parking beyond 2024. Change will be required therefore as a result of the impact of this new legislation to ensure all car parks operate at optimum capacity for legitimate users of our car parks; and to deter persons from using HSC spaces for non-healthcare related visits.

It is the intention of the regional group that all NI HSC Trusts will be operating the same arrangements aimed at having a consistent level of PCN charging in place across all Trusts. We will continue to require traffic management specialist contractor support to closely monitor parking on our sites and to issue PCNs for infringements.

The Trust will require significant upgrade and extension of car parking infrastructure to comply with Hospital Parking Charges Act.

The Trust's income from car parking in 2022/23 was £817k.

	This revenue generated from parking income is used to recover all of the costs associated with the provision, management, maintenance and monitoring of all car parking spaces on our hospital sites (barrier maintenance, pay machine maintenance, rates, resurfacing, relining, security, lighting, gritting etc.). The capital and revenue required for the implementation of the Act to continue to control on-site vehicle capacity is laid out in the attached Business Case however please see below a summary of the options and associated costs.
Benefits:	Full compliance with the new legislation which comes into effect in May 2024. Once for NI solution which ensures a consistent approach across all five trusts regionally.
Total Capital Costs:	**<u>Capital Costs over 5 years</u>** The Trust considered a range of options , the capital and revenue consequences are summarised below :-

	Option 1	Option 2	Option 3	Option 4	Option 5	Option 6
Description*	Do Nothing	Trust Purchase and Operate PCN In house	Indicative ANPR Contractor 0%Capital Expenditure by Trust	Indicative ANPR Contractor 25% Capital Expenditure by Trust	Indicative ANPR Contractor 50% Capital Expenditure by Trust	Indicative ANPR Contractor 100% Capital Expenditure by Trust
Capital Costs Over 5 Years		£1,018,419	£787,059	£867,969	£948,879	£1,110,699
Recurrent Revenue	£809,940	£998,867	£1,006,384	£993,688	£980,262	£953,475
Net Present Social Cost/Net Present Social Value	£3,553,731	£5,400,227	£5,206,520	£5,231,130	£5,252,501	£5,294,069
Benefits (monetary and non-monetary)		£815	£950	£950	£950	£950
Risks		L (1.75)	L (1.5)	L (1.75)	L (1.5)	L (1.25)
Conclusion**		£5	£4	£3	£2	£1

Affordability:	The preferred option requires capital funding of £1,033,726 in 2023/2024 with additional amounts being required in subsequent years. It is anticipated that Regional funding from the Department of Health will be made available as the capital costs are being only being incurred as a response to a legislative requirement. It is possible that the NHSCT might be expected to fund the capital requirements after 23/24 from the NHSCT CRL for the relevant year. The revenue funding required is £874,005 in 2024/2025 increasing to £953,475 in 2025/26 and thereafter.

	The reason for the increase in 2025/2026 is as in Year 1 (2024/25) there is still 1 month of car parking income receivable and the ANPR costs are being incurred for 11 of the 12 months. This revenue requirement is net of the projected income from the issuing of PCN's. Again, it is anticipated that the Department of Health will provide revenue funding as profiled, as again the costs are being incurred because of a legislative requirement. This was indicated at a meeting of the Hospital Parking Charges Working Group on 10/08/2023. Formal confirmation has not yet been received so this remains a significant financial risk to the Trust if the funding is not made available.
Risks:	DoH and DoF have confirmed that there is no additional revenue funding available to meet the requirements of this legislation however the DoH has confirmed additional Capital will be available to fund the infrastructure required. Potential delays in in procurement process.
Conclusion:	Option 6 is the preferred choice being adopted across the region with Business Cases approved. Option 6 has been selected as the preferred option despite it not having the lowest discounted cash flow of all the options for the following reasons. Based on assumptions as staff / public adopt to the new systems and understand the process • There is less than £90k of a difference over the appraisal period which is not deemed materially decisive. It has the lowest recurring revenue requirement of all of the options. • It has the least risk out of all options. • This option will ensure that the administration around PCN's are conducted via 3rd party, which reduces the risk to the Trust in terms of legislation compliance and governance and potential PR issues. • Lower level of reputational damage and complaint handling • This option will maintain the car parking team within house (service review to be completed) and avoid staff redeployment. It will be the least disruptive to the current car parking team. The Business case has been drafted with support from CSS, Capital Development ICT, Estates and Finance.