

# **CAR PARKING POLICY GILBERT BAIN HOSPITAL**

<b>Consultation</b>	<b>Date</b>
1. Discuss Policy and EQIA at SMT	3 December 2007
2. Circulate LPF members after SMT	4 December 2007
3. Provide copy to Disability Shetland for comment from Access Committee	5 December 2007
4. PFPI Committee	10 December 2007
5. LPF	20 December 2007
<b>Adoption</b>	<b>Date</b>
1. Board	15 January 2008
2. Board	<b>28 July 2009</b>

**Review Date:**

**January 2012**

**Responsible Officer:**

**Head of Estates**

# SHETLAND NHS BOARD

## CAR PARKING POLICY - GILBERT BAIN HOSPITAL

### 1.0 Introduction

Car parking at the Gilbert Bain Hospital site has become increasingly difficult over the years due both to the ever-increasing number of vehicles on our roads and, more recently, the impact on parking availability on the increasing level of activity at the hospital and the major redevelopment work currently taking place. It is essential that traffic for the day to day operations of the hospital can freely and immediately access the entrances: both ambulances and fire vehicles in an emergency, and, more routinely, vehicles delivering food, laundry and other essential supplies. It is the intention of this policy that a substantial proportion of parking at the Gilbert Bain Hospital should be available, adjacent to facilities, for patients and visitors, including access for disabled users.

In May 2007, the Board provided additional car parking spaces adjacent to the hospital's South Road frontage. It is extremely unlikely that further additional parking will be created at the Gilbert Bain site in the foreseeable future. **In 2008**, the Board **provided 37** additional car park spaces at Brevik House.

With this in mind, the revised policy strongly **advised** staff parking during normal weekday hours **not to use spaces designated for others.**

### 2.0 Restricted areas

A number of areas and car parking spaces are restricted:

- *Strictly No Parking* at any time, by any vehicle. This is to allow access for delivery and emergency vehicles to key areas of the premises (highlighted in red in Appendix I).
- *Parking Reserved* for particular categories of people or vehicles or restrictions at certain times of the day. For example, designated spaces for disabled parking and on call staff.

Vehicles found parked inappropriately in restricted areas will have a letter placed under the windscreen wiper detailing the problem and will have its registration number recorded. If there is a repetition of the inappropriate parking and it becomes apparent that the car belongs to a member of staff, then that individual's line manager will be advised. The Board's **Facilities Manager** will be responsible for managing the above aspects of this policy.

### **3.0 Patient and visitor parking**

Patients and visitors can park in any designated parking space and in disabled spaces if they have a blue badge. This includes the Brevik House car park. Patient information will be updated to take this into account (see also Section 7.0).

### **4.0 Disabled spaces**

The Scottish Government Health Directorate<sup>1</sup> require that a reasonable proportion of parking spaces must be set aside for disabled parking. In determining disabled parking spaces, the needs of disabled persons must be fully considered (eg. wide spaces, no kerbs or steps, preferably under cover, and located at all patient entrances).

Eight spaces are available adjacent to the main entrance to the hospital; one space in front of Brevik House; one space to the rear of Patient Travel, and two spaces in the Children's Outpatient car park (highlighted in blue in Appendix I).

### **5.0 Frail/Elderly and Parent/Child spaces**

Six parking spaces have been designated for the use of frail or elderly patients and for parents with pre-school children. These can be found opposite the main entrance to the hospital (highlighted in orange in Appendix 1).

### **6.0 Staff Parking**

It is the intention of this policy that a substantial proportion of parking at the Gilbert Bain Hospital should be available, adjacent

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<sup>1</sup> NHS HDL (2007) 14

to facilities, for patients and visitors, including access for disabled users. The Board **provided** 37 additional car park spaces at Brevik House in 2008 to help ease parking congestion.

With this in mind, staff are strongly **advised not to use the spaces designated for others.**

Two spaces have been allocated for the emergency use of on call staff. These are marked in purple on the plan (Appendix 1) and can be found opposite the main entrance of the hospital.

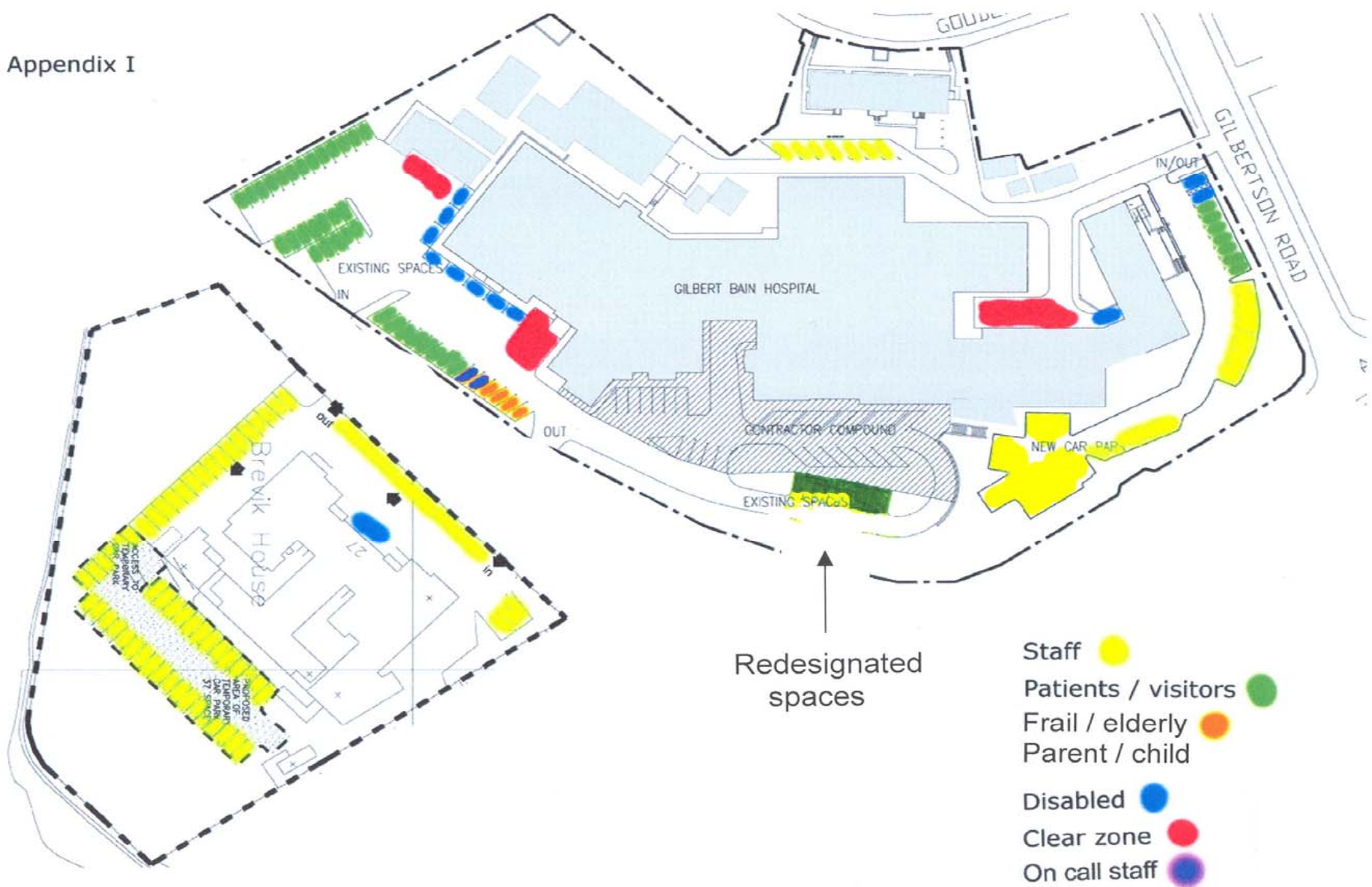
## 7.0 Alternatives

A key commitment which must underpin this policy is that the Board actively encourage staff and patients to find alternative ways to access the Gilbert Bain site. Not only will this help ease parking congestion but can also have a positive environmental and health impact. The Board **will continue to pursue this**, in conjunction with ZetTrans.

The Board will encourage cycling by providing a safe storage facility for bicycles and consider leasing and/or loan arrangements to cover alternatives to cars; publicise mileage allowances that encourage the use of car alternatives and car sharing for business journeys; encourage the development of car share schemes for travelling to and from work, and encourage staff to use public transport, wherever possible, publicising the availability of pool cars for business travel from their base as an alternative to not using public transport because a car is required during the day.

Patient literature should make clear how difficult it could be to park at the Gilbert Bain Hospital during the day and should encourage patients and relatives to use public transport where possible or to arrange for a friend or relative to drop them off rather than parking on the hospital site.

Appendix I



## 1. Rapid Impact Checklist Car Parking Policy – Gilbert Bain Hospital

## Appendix II

<p><b>Which groups</b> of the population do you think will be affected by this proposal?</p> <ul style="list-style-type: none"> <li>• minority ethnic people (incl. gypsy/travellers, refugees &amp; asylum seekers) ✓</li> <li>• women and men ✓</li> <li>• people in religious/faith groups ✓</li> <li>• disabled people ✓</li> <li>• older people, children and young people ✓</li> <li>• lesbian, gay, bisexual and transgender people ✓</li> </ul>	<p><b>Other groups:</b></p> <ul style="list-style-type: none"> <li>• people of low income ✓</li> <li>• people with mental health problems ✓</li> <li>• homeless people ✓</li> <li>• people involved in criminal justice system ✓</li> <li>• staff ✓</li> </ul>
<p>N.B. The word proposal is used below as shorthand for any policy, procedure, strategy or proposal that might be assessed.</p>	<p>What positive and negative impacts do you think there may be? Which groups will be affected by these impacts?</p>
<p>What impact will the proposal have on lifestyles? For example, will the changes affect:</p> <ul style="list-style-type: none"> <li>• Diet and nutrition?</li> <li>• Exercise and physical activity?</li> <li>• Substance use: tobacco, alcohol or drugs?</li> <li>• Risk taking behaviour?</li> <li>• Education and learning, or skills?</li> </ul>	<p>Positive impact Increased exercise for staff if parking further away from the workplace.</p>
<p>Will the proposal have any impact on the social environment? Things that might be affected include</p> <ul style="list-style-type: none"> <li>• Social status</li> <li>• Employment (paid or unpaid)</li> <li>• Social/family support</li> <li>• Stress</li> <li>• Income</li> </ul>	<p>None</p>
<p>Will the proposal have any impact on</p> <ul style="list-style-type: none"> <li>• Discrimination?</li> <li>• Equality of opportunity?</li> <li>• Relations between groups?</li> </ul>	<p>Positive Impact Improved access for disabled people</p>
<p>Will the proposal have an impact on the physical environment? For example, will there be impacts on:</p> <ul style="list-style-type: none"> <li>• Living conditions?</li> <li>• Working conditions?</li> <li>• Pollution or climate change?</li> <li>• Accidental injuries or public safety?</li> <li>• Transmission of infectious disease?</li> </ul>	<p>Positive Impact Environment, Climate Change, Pollution, Public Safety Promotion of car sharing and alternative transport Protect access to GBH for emergency vehicles</p>
<p>Will the proposal affect access to and experience of services? For example,</p> <ul style="list-style-type: none"> <li>• Health care</li> <li>• Transport</li> <li>• Social services</li> <li>• Housing services</li> <li>• Education</li> </ul>	<p>Positive impact Transport Improve parking experience for patients / visitors Protect access to GBH for emergency vehicles</p>

<b><u>Rapid Impact Checklist: Summary Sheet</u></b>	
<p style="text-align: center;"><b>Positive Impacts (Note the groups affected)</b></p> <p>Disabled people Older people Parents / Guardians of young children Staff</p>	<p style="text-align: center;"><b>Negative Impacts (Note the groups affected)</b></p> <p>Staff</p>
<b>Additional Information and Evidence Required</b>	
<p><b>Recommendations</b></p>	
<p><b>From the outcome of the RIC, have negative impacts been identified for race or other equality groups?</b> No</p> <p><b>Has a full EQIA process been recommended? If not, why not?</b> No negative impacts identified</p>	

**Manager's signature**

**Date**