



**Meeting:** Council

**Date:** 6 February 2014

**Wards Affected:** Shiphay with the Willows

**Report Title:** Torbay Hospital Parking Project

**Is this a key decision:** Yes

**Executive Lead Contact Details:** Cllr Robert Excell – Executive Lead for Safer Communities, Transport and Sport

**Supporting Officer Contact Details:** Patrick Carney, Group Service Manager – Streetscene & Place; Steve Hurley, Group Manager - Commissioning Partnerships & Business Development

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## 1. Purpose

- 1.1 To consider whether the Council should enter into a Joint Partnership Agreement with the South Devon Healthcare NHS Foundation Trust to fund improvements to provide additional visitor and staff parking on the Torbay Hospital site. The Council will also manage the enforcement of parking on site for the next ten years. The project will increase the number of parking spaces which will lead to visitors being less likely to be late for appointments which can be stressful at an already difficult time.

## 2. Proposed Decision

- 2.1 That the Council make available up to £1.7 million funding through prudential borrowing to provide increased surface level parking on the Torbay Hospital site:
- (i) subject to a business case being submitted by the Residents and Visitor Service (RVS) that is satisfactory to the Executive Director of Operations in consultation with the Mayor and Executive Head for Finance. Such business case is approved by the Board of the South Devon Healthcare NHS Foundation Trust (SDHFT), to enable delivery of the car parking project at the Torbay Hospital site with the borrowing costs to be funded from increased income at the Torbay Hospital site.
- 2.2 That the Director of Place be given authority, in consultation with the Executive Head of Finance and the Executive Lead for Safer Communities, Parking and Sport to enter into a 10 year Joint Partnership Agreement (or other suitable legal structure) with the South Devon Healthcare NHS Foundation Trust (SDHFT) to fund an increase in parking spaces on the Torbay Hospital site and to provide enforcement to all car parks over the next ten years.

- (i) subject to the operational business case including the payment of the Council's interest and repayment costs of borrowing and is approved by the Board of the South Devon Healthcare NHS Foundation Trust (SDHFT).

### **3. Action Needed**

- 3.1 That officers from the Council and the SDHFT provide a detailed business case and operating agreement which forms the basis of a Joint Partnership. On signing of the agreement by both parties, the improvements will be designed in detail and submitted for planning approval. A trading account will be created which will fund the borrowing costs, current costs and enforcement costs. Any excess will be split between the two parties. The hosting arrangements for the trading account will be part of the final business case.

### **4. Summary**

- 4.1 Torbay Hospital is run by the SDHFT. The Hospital has occupied its current site since the 1920's and has expanded significantly since the 1960's leading to a poorly designed site with parking provided at numerous locations and inadequate connectivity throughout the site.
- 4.2 Torbay Council entered into an informal partnership with the SDHFT to review the current parking provision and traffic management issues in order to establish a "self funding" solution that will provide adequate visitor and staff parking that also promotes sustainable travel.
- 4.3 In considering the options, Torbay Council carried out on-site parking surveys, traffic counts, staff surveys and junction modelling. The results showed that all car parks reach capacity throughout the day, although not necessarily at the same time. During the week the total number of cars on site reached a peak at two points throughout the day, once in the morning and once in the afternoon. The morning peak is mainly associated with staff parking and the afternoon peak is more closely associated with visitor parking. The staff survey indicated a number of improvements to bus surveys that could lead to increased use of sustainable transport.
- 4.4 Torbay Council considered four options:-
- Demand Management
  - Surface Level Parking
  - Temporary Multi-story Parking
  - Park & Ride
- 4.5 From the analysis, the surface level parking option has been identified as the preferred option. This will provide the following:-
- *Net increase of 433 spaces*
  - *Less parking at entrances to buildings*
  - *More convenient visitor parking*
  - *Improved sustainable transport measures*
  - *Increased staff parking*
  - *Improved signage*

- *“Pay on Exit” in main visitor car parks*
  - *Increased disabled parking*
- 4.6 The capital cost for this Surface Level option is £1.65 million and would be funded by Torbay Council on behalf of the partnership through Prudential Borrowing. The parking on site will be enforced by Torbay Council staff and the cost to implement will be funded through the income received from parking on behalf of the joint partnership.
- 4.7 Whilst risks exist the business case demonstrates that Torbay Council would be able to provide the required income in parking at no cost to the SDHFT or the Council. In order to take this forward an operating agreement needs to be approved by the South Devon Healthcare NHS Foundation Board and Torbay Council. If approved, construction could commence in June 2014 with full implementation by May 2015.

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## **Supporting Information**

### **5. Position**

- 5.1 Torbay Hospital serves the South Devon Area and is run by the South Devon Healthcare NHS Foundation Trust. The South Devon Healthcare NHS Foundation Trust catchment area covers 300 square miles - from South Dartmoor to the length of coastline which stretches from the mouth of the River Exe (Dawlish), past the Teign and Dart estuaries (beyond Dartmouth). Torbay Hospital therefore serves a resident population of approaching 300,000 people, plus about 100,000 visitors at any one time during the summer holiday season. The biggest part of the Trust's work is emergency treatment. Over 70,000 patients a year come through Torbay Hospital's Accident and Emergency Department. On an average working day at Torbay Hospital over 200 patients attend accident and emergency, 75 operations are performed, over 1,250 patients are seen in outpatient clinics and 7 babies are born.
- 5.2 Construction of the Hospital commenced on 26th June 1926. The hospital opened for patients in September 1928. The Hospital has expanded significantly over the years most notably over the past 50 years when the first significant expansion took place in the late 1960s.
- 5.3 The site covers an area of 21 Ha with 10 main buildings and numerous smaller buildings situated around the site mainly providing accommodation to office and support staff. The site provides parking for 1646 vehicles. A plan of the site is included in Appendix 1.
- 5.4 As the site has expanded, particularly over the past 50 years, many of these projects have been delivered independently with no long term development strategy. This has led to a number of entrances and a site that is served by two vehicle junctions. Due to the poor layout of the site it is difficult for visitors to orientate themselves and the site has poor connectivity for staff and visitors who are accessing the site on foot or public transport.

- 5.5 The main problem, however, is that the parking in the area reaches capacity in almost every car park during week days. The lack of parking, particularly, around the afternoon peak which is dictated by the visiting hours, leads to most public car parks reaching capacity. This can often mean that patients miss appointments and can become stressed at what could already be a worrying time. Staff parking on site is limited and controlled through a staff travel plan. Currently demand for staff parking permits exceed supply.
- 5.6 The limited parking on site meant many staff and patients parking in surrounding residential areas which led to Torbay Council, introducing a Controlled Parking Scheme in the surrounding area. The scheme only operates for 1 hour a day but has been successful in preventing commuter parking in these areas, although has increased demand for staff parking.
- 5.7 Enforcement within the site is not effective, surveys on site identified a high level of inappropriate and non permitted parking.

## **6. Possibilities and Options**

### **6.1 Options Considered**

In developing the options Torbay Council have, in outline, considered a number of options that could be introduced to alleviate the problems outlined in this report. A high level appraisal of the following options was carried out:

- *Demand Management*

The hospital already has a travel plan in place and a number of initiatives which promote the use of other modes of travel. Visiting times have recently been changed and “open” visiting stopped due to disruption to patients at all times of day. There is no plan to review this in the near future. These measures could be developed further in order to reduce car use and the demand for parking spaces. Such measures could include the issuing of less permits, increase in public transport provision, varying of visitor times across wards and financial support to sustainable transport uses.

- *Surface Level Parking*

A survey of the site indicates that the existing parking could be increased through the more efficient design of some car parks and construction of new car parks on existing grassed areas. This is the most cost effective method of increasing parking but may not provide all the spaces required.

- *Permanent Multi-storey Parking*

A number of existing car parks could be redeveloped to provide multi-storey parking through the construction of permanent multi-storey car parks. The capital cost to construct these car parks could be significant and potentially not cost effective. However, this option is likely to provide the maximum number of spaces.

- *Temporary Multi-storey Parking*

There are a number of suppliers who provide pre-designed and manufactured multi-storey car parks that are a more cost effective method of increasing parking. These structures can last for at least 20 years and are available to rent or

purchase. This option is likely to be cheaper than the provision of a permanent multi-storey car park and offers the opportunity to reconsider the issues in the future.

- *Park and Ride*

On a number of occasions the provision of a park and ride to provide off-site parking has been proposed. The locations previously discussed were The Willows, Gallows Gate and Occombe Farm. Park and Ride would potentially offer a lower initial capital cost to fund the provision of buses.

## 7. Preferred Solution/Option

7.1 Through the development of an outline business case and site surveys the preferred Solution is - Surface Level Car Parking Provision

The proposals include the following:-

- Extra surface level parking providing an additional 433 spaces
- Three pay on exit ticketless systems
- 'Parkmark' award standard car parks with lighting
- Sustainable transport provision
- Capital Cost £1,650,240 (£208,540 pay back per year for 10 years)
- Enforcement Cost £65,000
- Equipment service/repair contracts of VMS and pay on exist system £60,000
- Additional annual car park maintenance of surfaces £25,000

**Total cost per year      £358,540**

7.2 The Council has identified a large number of surface level parking spaces which can be provided within the Hospital grounds. These are relatively straight forward to construct using standard construction techniques.

7.3 Within the new spaces provide the Council is proposing to consolidate staff parking at the top of the site in the area of the old Football Field through the provision of resurfacing the site and providing extra parking spaces. Staff will be moved from the Farm House Car Park, Car Park B and the Boiler House Car Park. A separate area for staff pay and display will be provided in the new area 8 as identified in **Appendix 2.**

7.4 Through the consolidation of staff parking the public will be able to access new parking areas at the Lowes Bridge entrance including a new area 18, 11, 12. These parking spaces will be included on a Variable Messaging System (VMS) so patients will have the choice to take this entrance to access these parking areas. Additional patient parking will be provided at the Cadewell Lane entrance at Area D, E and staff moved from the Farm House Car Park allowing further patient parking.

7.5 These car parking areas at the Cadewell Lane end of the site will also be added to VMS so patients can chose which entrance to the car park best provides parking capacity for their needs.

7.6 Motorcycle parking will be provided in all new parking areas with areas reserved in the pay on exit car parks to ensure motorcycles can exit the site without making payment. This form of transport should be encouraged where ever possible due to environmental impact and ease of accommodating them on site.

- 7.7 Additional secure parking for bicycles will be included with two areas for 20 bicycles located close to Hospital entrances. This will encourage staff to use bicycles as a method of transport and pool bicycles will be made available to hire on a weekly rental scheme.
- 7.8 Areas around the three main entrances will be cleared to provide drop-off facilities, disabled parking and loading. Details of the layout are shown in **Appendix 2**.
- 7.9 Included in Table 1 below is an Outline Business Case (OBC) for the proposed improvements. Additional income will be provided from the additional spaces which have been based on a 40% occupancy rate. Further income will come from a re-structuring of the prices to match other local hospitals and additional staff permits. Allowance has been made for additional enforcement costs and maintenance of the new pay on exit systems and variable message signs. The business case is based on ensuring the Hospital still receives the same income that it currently uses to cover maintenance and running costs on the wider site and allows for repayment of borrowing costs. The OBC indicates a net surplus/contingency of 16%. Any surplus made will be split between the parties equally to re-invest in local services.

### **Budget Breakdown Option 1**

<b>Option 1</b>	<b>Income</b>	<b>Expenditure</b>
Existing income pay and display	£456,073	
Existing Income staff	£212,140	
Additional income (40% occupancy of new spaces plus tariff restructure)	£419,839	
Staff permits additional income	£172,736	
Staff permits based on additional 116 spaces	£23,664	
Enforcement Income	£21,000	
Borrowing Repayments (option 1)		£208,540
Enforcement Costs		£65,000
Equipment Service/Repair		£60,000
Additional car park maintenance		£25,000
Existing maintenance and operating costs		£456,073
Existing staff income		£212,140
Sustainable transport improvements		£100,000
<b>TOTALS</b>	<b>£1,305,452</b>	<b>£1,126,753.00</b>

The results show a net contingency of 16% of the expenditure.

## **8. Consultation**

- 8.1 As part of the project, a consultation exercise was carried out with Torbay Hospital staff. The results of the survey demonstrated that parking was a key issue, although there were opportunities to increase the use of public transport.
- 8.2 The Feasibility Report has been prepared in consultation with the Estates Department of the SDHFT and the proposals have been discussed with the Torbay Council Planning Service and other key stakeholders.

## **9. Risks**

- 9.1 The key risks associated with the proposals are as follows:-
- Lack of demand for parking – Site surveys show a clear demand for Parking but a 40% occupancy rate has been allowed for as a conservative estimate.
  - Unknown construction costs – A 10% contingency has been included in the build cost estimates.
  - Failure to achieve planning permission – Outline discussions have taken place with planning. Torbay Council will need to demonstrate that they are not creating demand by providing these facilities to accommodate existing demand.
  - Loss of support for enforcement by SDHFT – An enforcement policy will be agreed in advance between the two parties.
  - Loss of car parking spaces due to future site development – The SDHFT would have to carry this risk.
  - Lack of support from public – Prices will be comparable to other local hospitals.
  - Change in national legislation – The SDHFT would have to carry this risk if charging for parking was no longer permitted, however, announcements by the current Government indicate that this is unlikely.

**Sue Cheriton**  
**Executive Head – Residents & Visitor Services**

### **Appendices:**

Appendix 1 – Site Plan  
Appendix 2 – Option 1  
Appendix 3 – Equality Impact Assessment

### **Additional Information:**

None

### **Documents available in Members' Rooms:**

None

### **Background Papers:**

Torbay Hospital Parking Review, Phase 1 Feasibility Study