

JPUH Travel and Parking Policy**Document Control:**

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JAMES PAGET UNIVERSITY HOSPITALS NHS FOUNDATION TRUST
SUSTAINABLE TRAVEL AND PARKING POLICY

EXECUTIVE SUMMARY

This Sustainable Travel and Parking policy amalgamates and supersedes the following documents:

- The Staff Car Parking and Traffic Flow Policy - Dated Jan 2013.
- The Green Transport Plan – Dated Dec 2010.

Utilising guidance from the Department of Health, advice from the National Performance Advisory Group (NPAG), direction from the [Government's Integrated Transport Strategy](#) and seeking to indirectly support the Trust [Health and Wellbeing Group's Terms of Reference](#), it will seek to update staff on, and demonstrate the importance of, the sustainability agenda, carbon reduction, health and wellbeing and inform a safe, fair and effective approach to parking and traffic flow on site.

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1.0 INTRODUCTION

1.1 Background. A survey of staff travel arrangements conducted in July 2016 served to highlight a number of areas, which when measured against the Trust's desire to align itself with the Government's sustainability agenda and promote responsible travel, represent areas for improvement. This document will seek to highlight these areas and make SMART recommendations to minimise their impact, ultimately ensuring that the Trust is better aligned to the [Government's integrated Transport Strategy](#).

The same survey highlighted a weighty reliance on car travel for both staff and public, which in turn generates substantial dependence on the car parking facilities at the hospital. This document will also seek to inform all users on the scope, limitations and appropriate use of the current Trust real estate to enable maximum mutual benefit.

1.2 SCOPE

1.3 This policy will offer guidance and credible options for sustainable travel to all JPUH staff and via verbal communication, the general public. It will focus on travel to and from the main site at the JPUH. Whilst it does not offer specific advice or guidance, the Trust will work to support the following sites:

- The Newberry Clinic

1.4 RESPONSIBILITIES

1.5 The Head of Facilities Management is responsible for the production and the overall implementation of a safe and effective Travel and Parking plan.

1.6 The Facilities Manager is responsible for management of the following functions:

- Monitoring of on-site facilities to ensure, in liaison with the Estates Department, they remain fit for purpose.
- Production of a Travel and Parking policy that underpins the Trust's commitment to sustainable travel and safe and effective use of the on-site facilities; and via Car Parking Officers, the issuing of warnings and fines for inappropriate use of on-site parking.

1.7 Where possible all staff and visitors to the hospital carry a moral and civic responsibility to travel in a sustainable manner and utilise on site facilities in accordance with the contract detailed at Fig 1.

1.8 MONITORING AND REVIEW

1.9 The Head of Facilities Management is responsible for the implementation, monitoring and review of this policy. Success will be measured against observable promotion and resourcing of sustainable travel, controlled and safe traffic flow around the site and encouraging (and where appropriate enforcing) responsible use of the car parking facilities.

1.10 READER PANEL

1.11 The following formed the Reader Panel that reviewed this document:

- Head of Facilities Management.
- Head of Estates and Planning.
- Facilities Manager.
- Patient Travel and Finance Supervisor.
- PA to Head of Facilities Management (Car Parking Administrator).
- Staffside.

1.12 TRUST VALUES

1.13 This Policy conforms to the Trust's values of putting patients first, aiming to get it right, recognising that everybody counts and doing everything openly and honestly. The Policy incorporates these values throughout and an Equality Impact Assessment has been completed to ensure this has occurred.

1.14 DISTRIBUTION CONTROL

1.15 Printed copies of this document should be considered out of date. The most up to date version is available from the Trust Intranet.

2.0 STATEMENT OF POLICY

2.1 Reducing congestion and encouraging green or sustainable travel is a Government priority and it is developing Active Travel Plans to promote a balanced transport system in the UK. These plans are designed to reduce single-occupancy car journeys, promote other modes of more sustainable transport, and increase people's fitness.

The NHS, and by extension the Trust, has an important role to play in leading by example and developing active travel plans, since moving its 1.3 million staff, patients and visitors each day accounts for approximately 5% of total road traffic in England. A large proportion of this travel is made up of single person car journeys. The sheer volume of the traffic we generate not only slows people down, it affects air quality, access times for the critically ill, numbers of road traffic incidents, encourages more sedentary lifestyles and makes up about a fifth of the NHS carbon footprint.

The Trust recognises the Government's and the NHS' position on sustainable travel, and seeks to proactively support that stance whilst maintaining facilities that are capable of supporting our staff and visitors regardless of the travel choices they make.

POLICY OBJECTIVES

2.2 This policy will outline initiatives and recommended actions to deliver on the following objectives:

- Reduce the number of cars traveling to the site, whilst maintaining adequate parking facilities for those that choose to, or have no choice but to, travel by car.
- Reduce congestion allowing easier access for emergency vehicles and safer access and egress for all.

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- Improve relations with local residents by minimising hospital related parking in the local area.
- Achieve and maintain the right balance of staff, public and disabled parking across the site.
- Inform staff of the benefits aligned to healthier forms of travel.
- Improve the patient and visitor experience and increase awareness by promoting and enforcing this policy.
- Inform the site strategy.

3.0 APPLICATION OF POLICY WITHIN THE TRUST

3.1 Introduction. This chapter lists a series of proposed actions, and clarifies detail aligned to sustainable travel, parking regulations and traffic flow. It is based on, and seeks to rectify, areas for improvement identified during the travel survey conducted in July 16.

3.2 Walking. Walking is on the decrease nationally despite the associated benefits to health and wellbeing. The JPUH travel survey showed that of the 13% of staff that live within a 2 mile radius of the hospital, more than half (7%) regularly walk to work. These figures are positive and compare favourably to national statistics but do not validate complacency. With that in mind the Trust remains committed to the promotion of walking as a travel choice and in direct support of the Trust's [Health and Wellbeing Group's Terms of Reference](#), will deliver on the following initiatives:

- Advertise (via internal comms) viable routes from residential areas within a 2 mile radius of the hospital, to the site.
- Advertise (via internal comms) the health benefits associated with walking.
- Liaise directly with local authorities with a view to improving signage, lighting and pathways on routes to the hospital.
- Promote (via internal comms) the use of 'walking buddies' to alleviate concerns over security when walking (particularly in the winter months).
- As part of the site strategy, improve pedestrian access to all areas of the hospital.

3.3 Cycling. Cycling is also a widely recognised route to better health and wellbeing and in direct support of the Trust's [Health and Wellbeing Group](#) objectives, it should be actively encouraged. The survey indicated that just 5% of staff cycle to work despite 15% of staff living within a 4 mile radius of the hospital, this represents an area for improvement. Facilities for bike storage and security, whilst dispersed, are currently sufficient to satisfy demand and therefore cannot be cited as a limitation. With that considered the Trust will, within 6 months, deliver on the following initiatives with a view to promoting cycling as a viable travel option:

- Liaise directly with local authorities with a view to improving signage and lighting on cycle routes to the hospital.
- Advertise (via internal comms) viable cycle routes from residential areas within a 4 mile radius of the hospital, to the site.
- Advertise (via internal comms) the health benefits associated with cycling.
- Liaise with local bicycle shops with a view to securing a percentage discount for employees of the Trust.
- Continue to monitor facilities for bike storage and security to ensure it continues to meet need.

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- As part of the site strategy, develop a centralised, covered and secure 'cycle hub' that better serves the cyclists' needs.
- As part of the site strategy, consider the viability of shower and changing facilities accessible to cyclists.

3.4 Public Travel. The hospital is well served by public transport with buses connecting all prominent (local) centers of mass to the hospital. Despite this, data gathered in the survey suggests that less than 1% of staff use public transport to get to work. Prominent amongst reasons cited for a reluctance to use public transport were incompatibility with shift work (17%), the cost of fares (12%) and a lack of service from home postcode (26%). In order to address these concerns the Trust will, within 6 months, deliver on the following initiatives to promote the use of public transport:

- Advertise (via internal comms) the availability and frequency of local bus services.
- Advertise (via internal comms) that 'fold up bikes' can be transported on buses and trains facilitating hybrid travel.
- Liaise with local bus companies to explore the possibility of a percentage discount on fares for employees of the Trust.
- As part of the site strategy, develop a modern, covered bus terminus that better serves those that choose to utilise public transport and encourages those that do not to contemplate public transport as a viable option.
- As part of the site strategy, improve access and egress routes for buses making the site more accessible.

3.5 Public Travel (Cont). With routes and timings shifting constantly as ownership of companies' changes and timings are adjusted to suit need, fine detail is not included in this policy. Information considered stable and likely to endure is detailed below:

- Service 1, 1a: Lowestoft – **JPUH** – Great Yarmouth – Martham
- Service 7: Lowestoft – **JPUH** – Great Yarmouth
- Service 60J: **JPUH** – Lowestoft (Dedicated service)
- Service 61, 61b: Southwold – Lowestoft – **JPUH** – Great Yarmouth
- Service X1 FNS: Lowestoft – **JPUH** – Great Yarmouth – Norwich
- Up to date travel information is available at the following [Link](#) or at www.suffolkonboard.com

3.6 Motorcycles. The survey indicated that motorcycle use accounted for less than 1% of staff and public travel to the hospital. Whilst the carbon footprint aligned to motorcycles is less than that associated with cars (depending on the fuel type, number of passengers and engine size) motorcycles do account for 20% of RTC fatalities nationally. With the advantages and disadvantages considered, the Trust adopts a neutral stance on the use of motorcycles but will seek to enable their use by providing sufficient parking, encouraging safe riding, and promoting the use of low powered machines.

3.7 Car Share Scheme. Car Share schemes have clear benefits and a successful scheme would likely assist the Trust in achieving the targets detailed in Para 2.2 of this policy. However, more than 80% of those surveyed indicated that they would not be interested in a Car Share Scheme here at JPUH; this is reflective of other organisations where shift work is prominent. With this lack of appetite considered the Trust has no plans to launch a Car Share Scheme in the near future; but will reassess interest, with a view to implementation, at the next policy review.

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3.8 Electric Vehicles. Currently Trust Car Parks do not offer provision for the charging of electric vehicles. The Trust recognises that as reliability, range and practicality improves, sales of electric vehicles are on the increase and that this increase will likely be reflected in ownership amongst our staff. With that in mind, as part of the site strategy and in order to promote low emission travel, the Trust will explore the possibility of installing charge-points capable of supporting all major electric vehicles in staff and public Car Parks.

CAR PARKING AND TRAFFIC MANAGEMENT

3.9 Public Parking Process. On arrival at the entrance barrier to the public car parks (A and B with F as overspill) users will collect a chip coin from the machine at the entrance barrier; this chip coin should be retained for the duration of their stay. Prior to leaving the hospital the user will validate their chip coin at the machines provided in the entrance foyer; paying the appropriate fee. On arrival at the exit barrier the user will put their validated chip coin into the machine at which point the barrier will raise and they will be granted egress.

3.10 Car Park Charges. The Trust (via the facilities manager) continually monitors car parking fees to ensure they are competitive when compared to other hospital and remain at a level that keeps the hospital accessible for all. Current car parking charges are detailed below:

Duration of Stay	Fee charged
0 – 30 minutes	£0.00
30 minutes – 2 hours	£3.00
2 hours – 3 hours	£3.50
3 hours – 4 hours	£4.50
4+ hours (up to a maximum of 24hours)	£6.50

3.11 Free Parking. Where members of the public have to visit the hospital frequently over a short period of time, the Trust can issue a 7 day parking permit (renewable after 7 days if still required). Passes are issued by the travel office in reception on receipt of a £5 deposit, provided the following qualification criteria are met:

- Relative visiting a patient who is critically ill or at 'end of life'.
- Carer assisting patient (e.g. meal times).
- Immediate family visiting an inpatient that has been resident at the hospital for longer than 12 weeks.
- Parents visiting sick children (chip coin validated on the ward)
- Patients attending the Sandra Chapman Centre or any other cancer related appointment (chip coin validated on the ward)

3.12 Concessionary Parking. In order to protect accessibility for all, regardless of personal circumstance, the Trust offers concessionary parking on completion of an application form (Appendix A) for visitors that meet the following criteria:

- Immediate relatives visiting patients for 5 days or more.
- Patient attending regular treatment more than once a week.
- Claimant who is unemployed or on means tested benefits visiting immediate family.
- Delay in Outpatients appointment (basic rate fee being the maximum concession)

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3.13 Help with Health Costs Scheme: The Trust will offer concessions, and in some cases contributions to, travel costs associated with a visit to the hospital. Detailed information regarding levels of remuneration and discounts can be found at the following [Link](#) or at www.nhs.uk

3.14 JPUH Staff Parking. Staff at the hospital can pay for their parking using one of two methods:

- Monthly Deductions from Salary
- Pay as You Go (PAYG).

3.15 Monthly Deductions from Salary. Staff are encouraged to use this method as this saves money on administration costs. Application forms are available on the intranet, at the following [Link](#), at Appendix D, or from the Facilities Management office. Once an application form is completed and processed by the Car Park Administrator, a proximity card will be issued. Car Park charges are deducted directly from salary and are detailed below:

- Basic Salary up to £17,800 - £12.00 per month
- Basic Salary above £17,800 - £24.00 per month

3.16 Salary Sacrifice Scheme. Staff can opt to pay for their parking via the Salary Sacrifice Scheme, the application form and details of the scheme can be found at Appendix B.

3.17 PAYG. This method of payment has been designed, and is recommended for, staff that work on the bank, or hold an As & When contract. Applications from permanent contracted staff will be considered by the Head of Facilities Management on a case by case basis. An application form is available at Appendix E, on the intranet at the following [Link](#), or from the Facilities Management office. Completed forms should be sent to the Car Park Administrator for processing and authorisation; once accepted a proximity card will be issued. Key considerations are detailed below:

- Credit can be added to the card at the Pay Stations in the main entrance.
- The entry/exit barriers automatically deduct credit from the card dependent on the amount of time spent in the car park.
- Where a member of staff regularly leaves, and returns to, the site through their working day, the monthly deductions payment is a better option.
- Where staff are uncertain as to which scheme better suits their needs, they should refer to the 'Commonly Asked Questions' précis at Appendix C for guidance.

3.18 Car Park Allocation. Regardless of which scheme members of staff choose to utilise they will be allocated a predetermined range of car parks and proximity cards will not grant access to car parks that do not feature in their allocation. The car parks available to a staff member will be made clear by the Car Parking Administrator when proximity cards are issued. Allocations were approved by the Car Park Allocation Group and are detailed below:

Car Park	Permitted users
Car Park A	<ul style="list-style-type: none">• Visitors/Public only
Car Park B	<ul style="list-style-type: none">• Visitors overflow• Staff between 1800hrs – 0800hrs

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Car Park C	<ul style="list-style-type: none"> • Staff between 0600hrs – 1300hrs • Nursing and Medical staff 'on call' • 30 spaces reserved for late shift access
Car Park D	<ul style="list-style-type: none"> • Renal Unit patients only
Car Park E	<ul style="list-style-type: none"> • Admin, Support, and other staff with no shift/on call commitment. • Staff working in departments located at the rear of the hospital. • Overflow for all other staff groups.
Car Park F	<ul style="list-style-type: none"> • Staff with external duties that need to come and go frequently. • Nursing and Medical staff on shift • Staff working in departments located at the front of the hospital. • Public overspill.
Car Park G	<ul style="list-style-type: none"> • Overflow for other staff groups.

3.19 Other Users. Payment methods for other users associated with the JPUH were agreed in consultation by the Car Park Allocation Group and are detailed at Appendix G.

3.20 Use of Proximity Cards. The procedure for use of, and the limitations associated with, the proximity cards are detailed below:

- Proximity cards are issued free of charge when an application is received. Failure to return the card on leaving the Trust will result in a £10 deduction from final salary.
- Replacement of lost or damaged cards will invite a £10 fee, payable to the Car Park Administrator.
- Cards must only be used by the member of staff it is issued to. A breach of this condition could result in withdrawal of the card and/or disciplinary action.
- Card holders should use their cards for **work purposes only**. Card holders **must not** use the card to access staff car parks for hospital appointments. For hospital appointments staff should use the public car parks and pay the public rate.
- If you do forget your card the help button should be pressed and having ascertained your details, the Car Park Officer will grant access. If you are on PAYG the money will be deducted manually from your balance by the Car Park Administrator. Staff should not park in the public car park in the event that they forget their card. These spaces are in demand and are for public use only.
- Proximity cards will not grant egress from a Car Park unless the same card had been used to grant access. Therefore, if the barrier is raised/out of action when entering, users must swipe their card regardless. Failure to do so will result in users being unable to exit.

3.21 Help and Advice. There is a help button directly connected to a manned intercom on each barrier and on the Pay Stations. Enquiries are dealt with by the Car Parking Officer in the Monitor Room. Car Parking Officers can also be reached on Ext 3158 or on 07788128072.

3.22 Illegal Parking. Entry to, and parking on, JPUH premises is strictly restricted to staff, patients, members of the public accompanying or visiting patients, and legitimate persons conducting business on the premises. By entering these premises visitors agree to be contractually bound by, and consent to, the terms and conditions clearly displayed at all entry points to the hospital. These terms and conditions are detailed below:

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- By entering these premises using a motorised vehicle, you hereby agree to wait and/or park only in **AUTHORISED AREAS AND WHOLLY WITHIN A MARKED BAY OF SUCH AREAS** (not on any perimeter road, other area, footpath or verge).
- Authorised parking areas are clearly marked/designated either solely for use by staff or for use by staff, patients and/or visitors.
- By parking a motorised vehicle in an authorised patient and/or visitor parking area, you agree to pay the appropriate charge which will be dependent on your length of stay. The patients and visitor car parks have Tariff Boards displaying the various charges and notice boards at barriers, ticket machines and elsewhere.
- Upon entry and/or parking in an authorised parking area, a valid ticket or permit **MUST** be obtained and retained for payment before you leave the car park or displayed in a prominent position in the motor vehicle where it can be easily seen by a parking attendant.
- Registered disabled persons holding a valid “blue badge” are provided with designated bays which are clearly marked with lines and signs. Users of these bays must be entitled to the “blue badge” and the badge must be displayed in an easily visible position. Where applicable, parking charges must be paid.

Fig 1.

By not complying with any of the above conditions, you will be liable for and agree to pay a £50 entry/parking charge together with any/all additional costs of its recovery incurred by James Paget University Hospitals NHS Foundation Trust and its duly authorised agent.

Payment of any such fine will be reduced to £15 if paid within fourteen days.

Do not leave valuables in your vehicle and ensure it is locked. The James Paget University Hospitals NHS Foundation Trust accepts no responsibility or liability for any loss or damage to any vehicle or its contents parked on the Trust premises howsoever caused.

Please refer all car parking enquiries to The Facilities Manager Tel: 01493 452179 Monday to Friday day time or the Monitor Room Tel: 01493 453158 at other times.

3.23 Leaving the Trust - Payroll Calculations. On preparing to leave the Trust individuals should complete the Amendment/Cancellation Form available at the following [Link](#) or at Appendix F and hand the completed form to the Car Park Administrator in the Facilities Management office in order that the user can be removed from the system and the form can be validated. The Car Park Administrator will in turn forward the form to Payroll.

- Deductions made for part months will be calculated on the same basis as a salary calculation i.e. January 31 days, February 28 days.

Cards should be returned to the Car Park Administrator, Facilities Management office, on the last day. Entry and exit to the car parks can be done by pressing the help button; otherwise a £10 deduction will be made from Payroll.

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3.24 Cancelling Monthly Deductions. Cancelling monthly deductions should be done by completing the Car Park Amendment/Cancellation Form at Appendix F, or at the following [Link](#). Once completed the form should be sent to the Car Park Administrator in the Facilities Management office who will forward the cancellation advice to Payroll.

3.25 Staff with Long Term Sickness. In the case of long term sickness, the onus is on the member of staff to request that deductions are ceased. This should be done by completing the Car Park Amendment/Cancellation Form at Appendix F or at the following [Link](#). Once completed the form should be sent to the Car Park Administrator in the Facilities Management office who will forward the cancellation advice to Payroll.

3.26 Maternity Leave. Prior to going on maternity leave, employees paying for parking on a monthly basis can change to PAYG. To do this, they will need to complete the Car Park Cancellation/Amendment form at Appendix F, or at the following [Link](#), and along with their proximity card (it will need revalidating), bring it to the Car Park Administrator in the Facilities Management Office. If the employee wants to revert back to monthly payments at the culmination of their maternity leave, they must contact the Car Park Administrator in the Facilities Management office at least six weeks prior to their return. On their first day back at work they should report to the office to get their card revalidated.

3.27 Maternity Leave on the Salary Sacrifice Scheme. If you joined the Salary Sacrifice Scheme the following details will apply when going on Maternity Leave. Additional detail is available at Appendix B.

- This is classed as a life-style change, and as it can affect payments made throughout the Maternity Leave period, employees who are pregnant can choose to leave the Salary Sacrifice Scheme.
- On return from maternity leave staff can re-join the Salary Sacrifice Scheme in the first month that you return to work. If you do not join during this period you will not be able to join the scheme until the following October (the date each year that the Trust re-offers the scheme). The anniversary of your 12 months will be 12 months from the first deduction after the return to work from Maternity Leave (which is the earliest date that you may leave the scheme).

Appendix B

CAR PARKING SALARY SACRIFICE SCHEME

Please provide **ALL** information to enable the process of your order

Title: _____ Name: _____

Address: _____

_____ Post Code _____

Home Phone Number: _____ Mobile Phone Number: _____

Job Title: _____

Department: _____ Work Tel No: _____

Month the salary sacrifice is to start _____

Amount of salary sacrifice each month **£12.00 / £24.00 (circle appropriate rate)**

I hereby confirm that in accordance with the agreement to vary the terms and conditions of my employment (the Agreement) of which this confirmation forms part, I will cease to be entitled to my original salary each pay period during the salary sacrifice periods which starts on the date set out above. Instead I will receive an adjusted salary and Car Parking with a face value equal to the amount indicated above for each pay period during the salary sacrifice period.

Under the terms of the Agreement, I acknowledge that the employer will satisfy its obligations under 3.1.2 of the Agreement by paying me the adjusted salary and delivering to me Car Parking as indicated above for each Pay period during the salary sacrifice period.

By signing this form I confirm that I have read and accept the terms and conditions overleaf, the information about Salary Sacrifice Schemes and the Salary Sacrifice Schemes Questions and Answers on the Trusts Intranet.

Signed _____ (the employee)

Print Name _____ Date _____

PLEASE SUBMIT THIS FORM TO THE PAYROLL DEPARTMENT

Title: JPUH Sustainable Travel and Parking Policy.
Author: Leigh Beuttell, Facilities Manager.
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What is a salary sacrifice?

A salary sacrifice happens when an employee gives up the right to receive part of the cash pay due under his or her contract of employment. Usually the sacrifice is made in return for the employer's agreement to provide the employee with some form of non-cash benefit. The 'sacrifice' is achieved by varying the employee's terms and conditions of employment relating to pay.

Salary sacrifice is a matter of employment law, not tax law. Where an employee agrees to a salary sacrifice in return for a non-cash benefit, they give up their contractual right to future cash remuneration.

When is salary sacrifice effective?

Salary sacrifice arrangements are effective when the contractual right to cash pay has been reduced. For that to happen two conditions have to be met:

- the potential future remuneration must be given up before it is treated as received for tax or NICs purposes
- the true construction of the revised contractual arrangement between employer and employee must be that the employee is entitled to lower cash remuneration and a benefit

What do employees need to consider if they are thinking about entering into a salary sacrifice arrangement?

When entering a salary sacrifice arrangement it is essential to understand what the sacrifice will mean in practical terms. Employees should consider carefully the effect, or potential effect, that a reduction in their pay may have on:

- their future right to the original (higher) cash salary
- any pension scheme being contributed to
- entitlement to Working Tax Credit (WTC) or Child Tax Credit (CTC)
- entitlement to State Pension or other benefits such as Statutory Maternity Pay (SMP)

Salary sacrifice and the National Minimum Wage

A salary sacrifice cannot reduce your cash pay below the National Minimum Wage. The National Minimum Wage provides a legally binding minimum hourly rate of pay to workers aged 18 years or over - with few exceptions.

There are different levels of the National Minimum Wage:

Description	Amount
Adult Rate (21 and over)	£7.20 ¹ per hour
Development rate (including 18–20 year olds)	£5.30 ¹ per hour

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Under 18 but over compulsory school age	£3.87 per hour
Apprentices under 19 or in first year	£3.30 per hour

Rates in force from 1 Apr 2016

How could a salary sacrifice affect my future entitlement to the State Pension, benefits and Tax Credits?

A salary sacrifice may affect your entitlement to state benefits and tax credits, you should carefully consider the possible effects before you decide to go ahead with a change in your employment contract. The information that follows is based on the rules that apply at the time of writing.

When you sacrifice cash pay in return for a benefit that is exempt from NICs, for example, childcare vouchers - you will not pay NICs on the cost of providing the vouchers. Although this means that you save NICs and can therefore get more vouchers than cash for the same cost to your employer, it also:

- cuts the earnings on which you can pay NICs
- may take your earnings for which NICs are due below the Lower Earnings Limit (LEL)

As your entitlement to some benefits is based on the amount of NICs you pay, and others on the amount of your earnings, entering into a salary sacrifice may affect your current or future entitlement to a range of benefits.

For most employees paying less NICs may not adversely affect your benefit entitlement as:

- you may still be paying enough NICs to qualify for benefits
- your earnings may still be between the LEL and the Primary Threshold, so that you are deemed to be paying NICs and you can still build up benefit rights even though you are not actually paying NICs
- you may already be earning below the LEL before the salary sacrifice
- if you only sacrifice salary for a short period, your contribution history will only be affected for that period, so the effect on your benefit entitlement will be minimal

It is important to note, however, that not only will entitlement to the State Second Pension be affected if your reduced earnings fall below the LEL, but it may also be affected if your reduced earnings fall between the Lower Earnings Threshold and the Upper Earnings Limit.

Entering into a salary sacrifice arrangement may also affect your entitlement to Statutory Sick Pay (SSP), SMP, Statutory Paternity Pay and Statutory Adoption Pay, the State Pension and any means-tested benefits or tax credits. You should consider these effects before you decide whether to enter into a salary sacrifice.

Salary sacrifice and contribution-based benefits

Your entitlement to contribution-based benefits is related to the amount of NICs you have paid, or are deemed to have paid. Reducing your cash pay through a salary

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sacrifice may reduce the amount of earnings on which you pay NICs to below the LEL, so that you are no longer paying (or deemed to be paying) NICs. Even if your earnings remain above the LEL, because you are paying (or deemed to be paying) less NICs, this may reduce your entitlement to contribution-based benefits.

Contribution-based benefits include:

Incapacity Benefit

If your deductible earnings fall below the LEL, you may not be entitled to Incapacity Benefit. If this happens, you may be entitled to Income Support based on incapacity, which is a means-tested benefit.

Jobseeker's Allowance (JSA) (contribution-based)

If your deductible earnings fall below the LEL, you may not be entitled to any JSA (contribution-based), as this benefit is paid at a set amount which cannot be reduced. If you have not paid (or are not deemed to have paid) enough NICs, you will lose entitlement to this benefit. If this happens, you may still be able to claim JSA (income-based), which is a means-tested benefit.

State Pension

If you have not paid (or are not deemed to have paid) enough NICs on your income, you may have a reduced State Pension when you retire, or none at all. You should also consider if your State Second Pension could be affected (this is covered below under earnings-related benefits).

Salary sacrifice and earnings-related benefits

Your entitlement to earnings-related benefits is based on your level of earnings, not including any amount sacrificed in return for a NICs exempt benefit. If your cash earnings are reduced below the LEL your entitlement to earnings-related benefits will be reduced.

Earnings-related benefits include:

Maternity Allowance

If your cash earnings fall below £30 per week you will lose your entitlement to MA. If your cash earnings fall between £30 and £150.49 per week you will still be entitled to MA, but at a variable rate. If your earnings are £150.50 a week or more you will receive the full standard amount of MA.

The State Second Pension

The State Second Pension forms part of the State Pension. If your annual pay (less the amount of the salary sacrifice) is between the annual LEL and the Upper Accrual Point £40,040.00, your entitlement may be affected.

NHS Pension Scheme Arrangements

The fact that your contractual pay is being reduced means your level of pension contributions will be reduced i.e. they will be based on the revised new lower rate of gross pay. Usually it is income earned in the last year of service that determines on-going pension payments after retirement. Therefore, any salary sacrifice in the last year of service will have the effect of lowering pension income (and lump payments), and will have an adverse effect on the on-going pension received.

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In some circumstances on-going pension entitlement is determined by the income received in one of the last three years prior to retirement. In such circumstances a salary sacrifice that is in place during the year that is used to determine on-going pension entitlement, will again have an impact on the pension received.

Where an employee leaves the NHS Pension Scheme and freezes their pension entitlement, the value of the frozen pension may be affected if an employee participates in the salary sacrifice arrangement immediately prior to leaving the pension scheme.

A salary sacrifice may impact on the ongoing pension entitlement where a staff member is taken seriously ill and is required to take medical retirement or dies in service. In such circumstances the pension entitlement is determined by the income level in the preceding 12 months, and therefore may be impacted if a salary sacrifice is in place.

Salary sacrifice and work-related payments

Work-related payments are paid by your employer and are based on your average earnings over a fixed period before you begin to receive them. Sacrificed cash pay will not count as part of your average earnings for calculating these payments, so they may be reduced as a result of a salary sacrifice.

Work-related payments include:

Statutory Maternity Pay

If your average weekly earnings (for SMP entitlement purposes) fall below the LEL, you will lose your entitlement to SMP. If this happens you may still be entitled to MA, which is an earnings related benefit.

Even if you are still entitled to SMP, the higher rate, which you can receive during the first six weeks of maternity pay, will decrease, as it is based on the amount of your cash earnings. If your employer operates an occupational maternity pay scheme, you may still be entitled to maternity pay through that scheme.

Statutory Sick Pay

If your average weekly earnings (for SSP entitlement purposes) fall below the LEL, you will lose your right to SSP. If this happens you may still be entitled to Income Support based on incapacity or Incapacity Benefit, if you meet the qualifying conditions. These will be paid at a rate less than the normal rate of SSP. If your employer operates an occupational sick pay scheme, you may still be entitled to sick pay through that scheme.

Salary sacrifice and Tax Credits

The WTC and CTC were introduced in April 2003 to help families on middle incomes. The amount of WTC award depends on a number of factors including the number of hours you work, how many children you may have and whether you pay any eligible childcare costs.

You should consider whether it is beneficial to claim tax credits before agreeing to a salary sacrifice arrangement.

Salary sacrifice and income-related benefits

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If you enter a salary sacrifice arrangement this may affect your entitlement to income-related benefits. If you are receiving Income Support or Jobseeker's Allowance you should contact your local social security or Jobseeker Plus office to find out more. If you are not receiving either of these benefits, but are receiving Housing Benefit and/or Council Tax Benefit you should contact your Local Authority.

How will a salary sacrifice affect married women paying reduced rate contributions?

If you sacrifice cash pay in return for a benefit that is exempt from National Insurance contributions, and this reduces the amount of your cash earnings to below the LEL, then you will not pay any contributions.

If you are a married woman and your earnings are below the LEL for two consecutive tax years, and you are not self-employed in those years, you will automatically lose the right to pay reduced rate contributions.

You can find further information about reduced rate contributions in [Form CF9](#).

Where can I find out more information about the possible effect of a salary sacrifice on benefit entitlement?

You should contact the Department for Work and Pensions. For general enquiries about pensions go into [The Pension Service website](#). The Department for Work and Pensions offers a free pension forecast. More information about this free service can be found on [The Pension Service website](#).

For enquiries about other benefits or allowances either contact your local Jobcentre Plus office, or go into the [Jobcentre Plus website](#).

If I choose to opt for Salary Sacrifice for Car Parking can I change my mind?

Once you have opted to commence the salary sacrifice you will not be able to withdraw from the scheme for a minimum period of 12 months. The only exception to this will be if you have a lifestyle change. Lifestyle change examples are if you are Pregnant, if you leave the Trust, or if you Retire (these are intended as examples, not an exhaustive list).

Can the Salary Sacrifice Scheme for Car Parking be stopped?

Once the Trust has commenced the Car Parking Salary Sacrifice Scheme it has to apply to HMRC to have the scheme recognised as an approved Salary Sacrifice Scheme. HMRC can decide not to approve the scheme, however there are other NHS Trusts who already operate such schemes, Car Parking Salary Sacrifice Schemes are recognised as approved schemes, and it is already set up within the National Payroll System (ESR).

The only other reason the Salary Sacrifice could be stopped is if the Trust decided to withdraw the scheme.

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This agreement to vary terms & conditions of employment is made between the EMPLOYEE and THE EMPLOYER DETAILED OVERLEAF AND ABOVE.

It is hereby agreed:

1. Definition

- 1.1 *'Original Salary' means the salary of the employee for each Pay Period during the salary sacrifice period on the assumption that the employee's terms and conditions of employment had not been varied by this agreement or any similar agreement.*
- 1.2 *'Pay Period' means the period of time for which the employee is normally paid i.e. monthly.*
- 1.3 *'Terms' means the terms and conditions of employment between the employee and the employer.*
- 1.4 *1.4 'Adjusted Salary' for a Pay Period means the Original Salary less an amount equal to the Sacrifice Value.*
- 1.5 *'Salary Sacrifice' period means the period of time, for which this agreement is to apply, as set out in clause 4.*

2. Recital

- 2.1 *By this agreement, the employee and the employer agree to vary the Terms.*
- 2.2 *Before entering into this agreement, on the assumption that no agreement similar to this agreement had been entered into, the employee would have been entitled to receive the Original Salary for each Pay Period.*
- 2.3 *As a consequence of entering into this agreement, the employee will be entitled to receive the Adjusted Salary and Car Parking for each Pay Period.*
- 2.4 *The employee and the employer acknowledge that this Agreement constitutes a notice of a variation to the Terms for the Variation Term in accordance with the provisions of section 4 of the Employment Rights Act of 1996.*

3. Variation

- 3.1 *The employee and the employer agree to vary the Terms for the salary sacrifice period as follows:*
 - 3.1.1 *The employee will cease to be entitled to the Original Salary for each Pay Period in the salary sacrifice period.*
 - 3.1.2 *The employee will be entitled to receive the Adjusted Salary and Car Parking with the face value equal to the Car Parking Value for each Pay Period in the salary sacrifice period.*

4. Salary Sacrifice Period

- 4.1 *The salary sacrifice period for this variation of Employment Terms shall commence on the first day as notified on the Order Form, and shall expire at the end of the Pay Period in which the employee request to cease the salary sacrifice by the submitting a Cancellation Form to the Payroll Department. The minimum period of the Salary Sacrifice will be 12 months. Following the 12 month period, the employee can request to leave the salary sacrifice scheme with notice as previously stated. If a lifestyle change occurs the employee must submit an Amendment form to change the monthly deductions from their salary. Four weeks' notice must be given prior to amendments and cancellations being made. It is the employee's responsibility to notify the Payroll Department of any changes to their contract details that may affect their suitability to the Car Parking Salary Sacrifice Scheme.*

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5. Responsibility

5.1 *The employee confirms that he or she:*

5.2 *Has read and understood the Salary Sacrifice Policy*

5.3 *Agrees that in the event the employee leaves their employment, the Salary Sacrifice value will be apportioned to their month of leaving.*

5.4 *You must notify the Payroll Department IMMEDIATELY if you have a lifestyle change.*

Appendix C

Commonly Asked Questions

- Q. What happens if I go off on long term sick or maternity leave?
- A. The onus is on the member of staff to request that deductions are ceased. This should be done by completing a "Car Park Amendment/Cancellation Form (available on the Intranet) and is available in the Maternity pack from your Department. Once completed the form should then be sent to the Car Park Administrator, who will then forward the cancellation advice to Payroll.
- Q. What should I do if I leave the employment of the Trust?
- A. The member of staff should contact Car Park Administration prior to departure, who will then notify Payroll to cease deductions. A Car Park Amendment Form/Cancellation Form should be completed (available on the Intranet under Forms & Templates- Car Parking).
- Deductions made for part month will be on the same basis as a salary calculation i.e. January 31 days, February 28 days.
- Cards should be returned to Car Park Administration; otherwise a £10 deduction will be made from Payroll.
- Q. What if I decide to stop paying by monthly deductions and choose to do "Pay as you Go?"
- A. The onus is on the member of staff to request that deductions are ceased; this should be done via Car Park Administration on a "Car Park Amendment/Cancellation Form" (available on the Intranet under Forms & Templates – Car Parking). You will also need to take your car park card to the Car Park Administrator on the day you wish to change over as this will need to be revalidated.
- Car Park Administration will then forward the form to Payroll.
- Employees will only be able to re-commence deductions via salary after 12 months have lapsed.
- Q. What if I lose my Card?
- A. If you lose your card please report this to the Car Park Administrator, Facilities Management on 01493 452280. A replacement card is charged at £10 and needs to be paid on receipt of the new card.
- Q. New starters to the Trust – when will I start paying if I choose deductions from my pay?
- A. Deductions are made for the part month on the same basis as a salary calculation i.e. January 31 days, February 28 days etc.

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Appendix D

James Paget University Hospitals 
NHS Foundation Trust

Application for Staff Parking at the James Paget University Hospital

Please complete all sections of this form and return to the Car Park Office, Facilities Management.

Section A – Please print details clearly below

Name:		
Job Title:		
Department:		Ext No:
Contract hours per week:		Band:
Payroll No:		Start Date:
Vehicle Registration No:	1 st Car:	2 nd Car:

Section B

Are you required to work shifts? YES/NO What is the latest time you start work:.....
What is the latest time you finish work:.....

Section C

Parking at the James Paget Hospital is covered under the "Contract to enter and/or park at these hospital premises" displayed at each entrance to the site. A copy will be issued to you with your car park card. The Trust's "Staff Car Parking & Traffic Flow Policy" is available on the intranet.

Section D – Monthly Deductions

I agree to have car parking charges deducted monthly from salary. The car park charges will be reviewed at the Trust's discretion and changes notified via email on an inform "notice". The onus will be on staff to cancel their deduction if they no longer wish to park on site, by giving one month's notice and by completing a cancellation form available on the intranet under Forms & Templates and Car Parking and returning the car park card.

Signature:..... Date:.....

Basic salary up to £17,978	£12.00 per month
Basic salary above £17,979	£24.00 per month

Section E – Pay as you Go

I agree to have car parking charges from my Pay as you Go card. The car park charges will be reviewed at the Trust's discretion and changes notified via email on an inform "notice". The onus will be on staff to cancel their car parking if they no longer wish to park on site by completing a cancellation form available on the intranet under Forms & Templates and Car Parking and returning the car park card.

Signature:..... Date:.....

Up to 4 hour visit	70p per visit
Over 4 hour visit	£1.40 per visit

Failure to return this form will result in you not being able to access the car park.
NOTE: Your card must NOT be used by anyone other than yourself for car park access. A breach of this condition could result in withdrawal of the card/disciplinary action.

For Car Park Office Only

Received by Car Park Office and forwarded to Payroll

Signature.....

Title: JPUH Sustainable Travel and Parking Policy.
Author: Leigh Beuttell, Facilities Manager.
Issue: Sept 2016
Ref: POL/TPP/LB0916/01

Next Review: Sep 2019
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Appendix E

James Paget University Hospitals 
NHS Foundation Trust

Application for Parking for Staff Associated with the
James Paget University Hospital

“Pay as you Go”

This form must be signed and returned to the Car Park Administrator, Facilities Management Office. This form cannot therefore be accepted back by e-mail.

Failure to return this form will result in you not being able to access the car park.

Section A – Please print details clearly below

Name:
Job Title:
Company:
Address:

Vehicle registration

Section B

Are you required to work shifts? YES/NO

What is the latest time you start work:.....

What is the latest time you finish work:.....

Section C

Parking at the James Paget Hospital is covered under the “Contract to enter and/or park at these hospital premises” displayed at each entrance to the site. A copy will be issued to you with your car park card. The Trust’s “Car Parking & Traffic Flow Policy” is available on the intranet.

Section D

Payment Option – Pay as you Go

I agree to have car parking charges from my Pay as you Go card. The car park charges will be reviewed at the Trust’s discretion and changes notified via email on an inform “notice”. The onus will be on the member of staff to cancel their car park card if they no longer wish to park on site by informing the Car Park Administrator, Support Services Office.

Signature:..... Date:.....

Up to 4 hour visit	70p per visit
Over 4 hour visit	£1.40 per visit

NOTE: Your card must NOT be used by anyone other than yourself for car park access. A breach of this condition could result in withdrawal of the card/disciplinary action.

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Appendix F

Car Park Amendment/Cancellation Form
(to be forwarded to the Car Park Office, Facilities Management once completed)

Car Park Charges by Monthly Deductions from Payroll

Name:	
Department:	
Payroll No:	

Instruction to transfer from "Monthly Deductions" to "Pay as you Go"
Pay as you Go deducts each time you leave the car park

(Please Note: If you cancel paying car park charges by Monthly Deductions and then decide to go back to Monthly Deductions, Payroll will not be able to do this until a period of 12 months has lapsed).

Date to Commence:.....

Signature:..... Date:.....

Instruction to transfer from "Pay as you Go" to "Monthly Deductions".

I agree to have car parking charges deducted monthly from salary. The car park charges will be reviewed at the Trust's discretion and changes notified via email on an inform "notice". The onus will be on staff to cancel their deduction if they no longer wish to park on site, by giving one month's notice.

Basic salary up to £17,978	£12.00 per month
Basic salary above £17,979	£24.00 per month

Date to Commence:.....

Signature:..... Date:.....

Cancellation

Instruction to cancel car park charges.

I wish to cancel my deductions for car park charges with effect from

due to

Signature..... Date.....

For Car Park Office Only

Received by Car Park Office and forwarded to Payroll

Signed by.....

If cancellations are made part way through the month, the calculation will only be proportioned for starters/leavers based on the number of days in a calendar month.

Appendix G

Car Park Charges at the James Paget University Hospital NHS Foundation Trust

With the introduction of the car park charges a number of queries were raised from groups of staff volunteers and other NHS staff groups who regularly use our site or are based here. This guidance is provided for clarity.

Our aim is to have a system that is seen to be fair and transparent. The principles that we have established for consistency are:

- Any one employed by JPUH will have to pay. The only exception is disabled staff who are blue badge holders. **An Application form is required to be completed to enable a card to be issued to access the Car Park**
- Volunteers and Lay Governors, who are not in receipt of remuneration from the Trust, will receive a free card for staff car parks – **Free Car Parking Pass form required to be completed to enable a card to be issued (please contact the Car Park Administrator, Support Services for a form).**
- NHS staff who are not JPUH employees but are based at the Trust e.g. Busy Bees will only have to pay the staff not the public rate, and “Pay as you Go” option is available – **Pay as You Go form required to be completed to enable a card to be issued.**
- NHS staff that have a split contract e.g. visiting GPs with Specialist Registrar contract, visiting consultants etc will be treated the same as other staff i.e. if contracted hours are less than 20 this will be at the lower contribution rate. Monthly deductions or Pay as You Go Options available. **Application form is required to be completed to enable a card to be issued to access the Car Park**
- JPUH staff based at other sites but who visit the JPUH will be required to make a payment and “Pay as you Go” option is available – **Pay as You Go form required to be completed to enable a card to be issued.**
- Students who are on a bursary but are not otherwise paid by the JPUH will be entitled to free parking and will be issued with a free pass for regular visitors or have their car park ticket validated. **For regular students a form will need to be completed to obtain a free car parking card which will be set for the period whilst studying at the JPUH – Free Car Parking Pass form needed**
- “Pay as you Go” cards will be the option for Agency or temporary staff. **Pay as You Go form required to be completed to enable a card to be issued.**

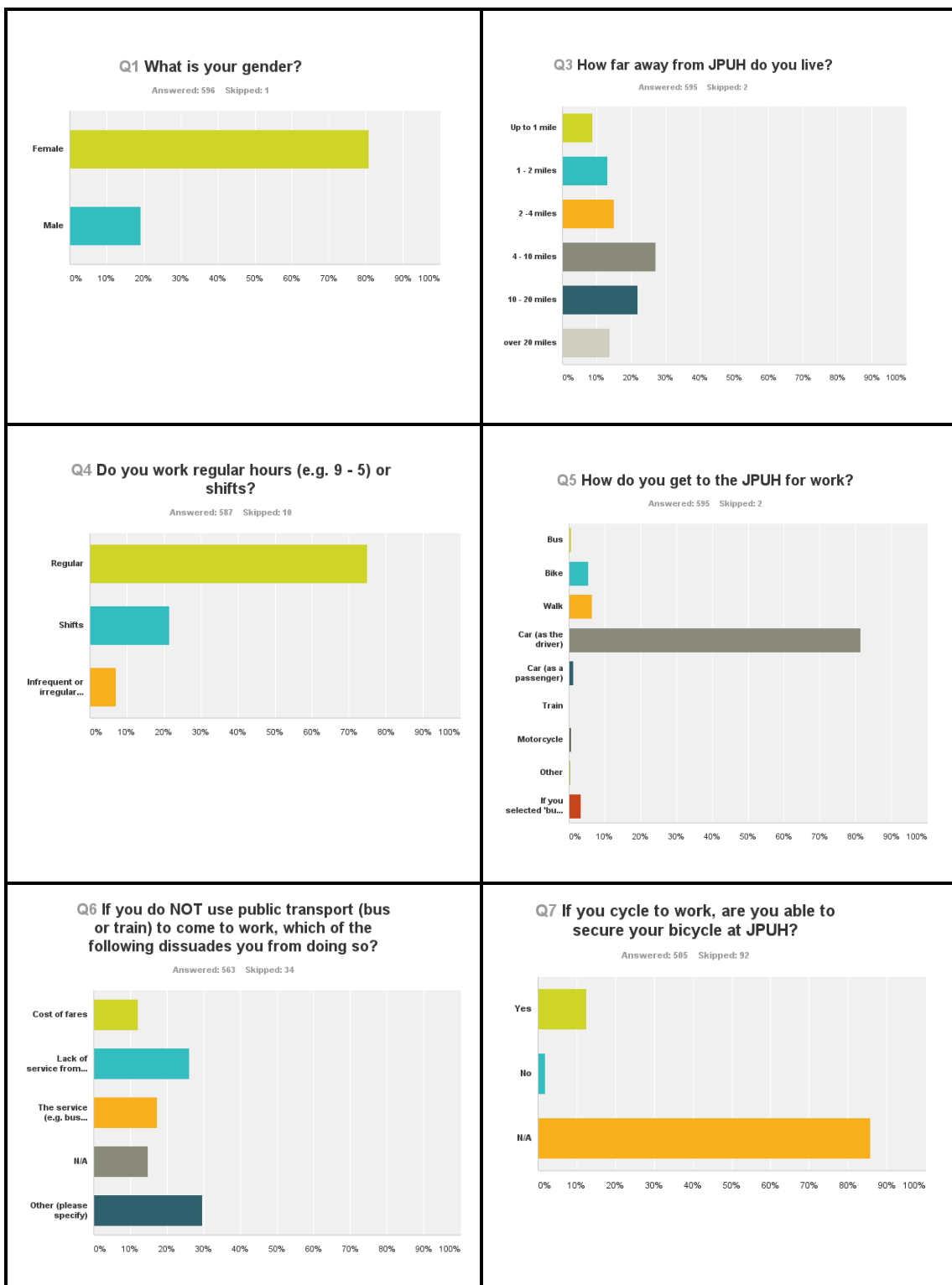
Note: There is an agreement that individuals who have a parking permit at NNUH will not be required to pay for a second permit at the JPUH but will receive free parking. **Free Car Parking Pass form required to be completed to enable a card to be issued from the Car Park Administrator, Facilities Management.**

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SUSTAINABLE TRAVEL AND PARKING POLICY

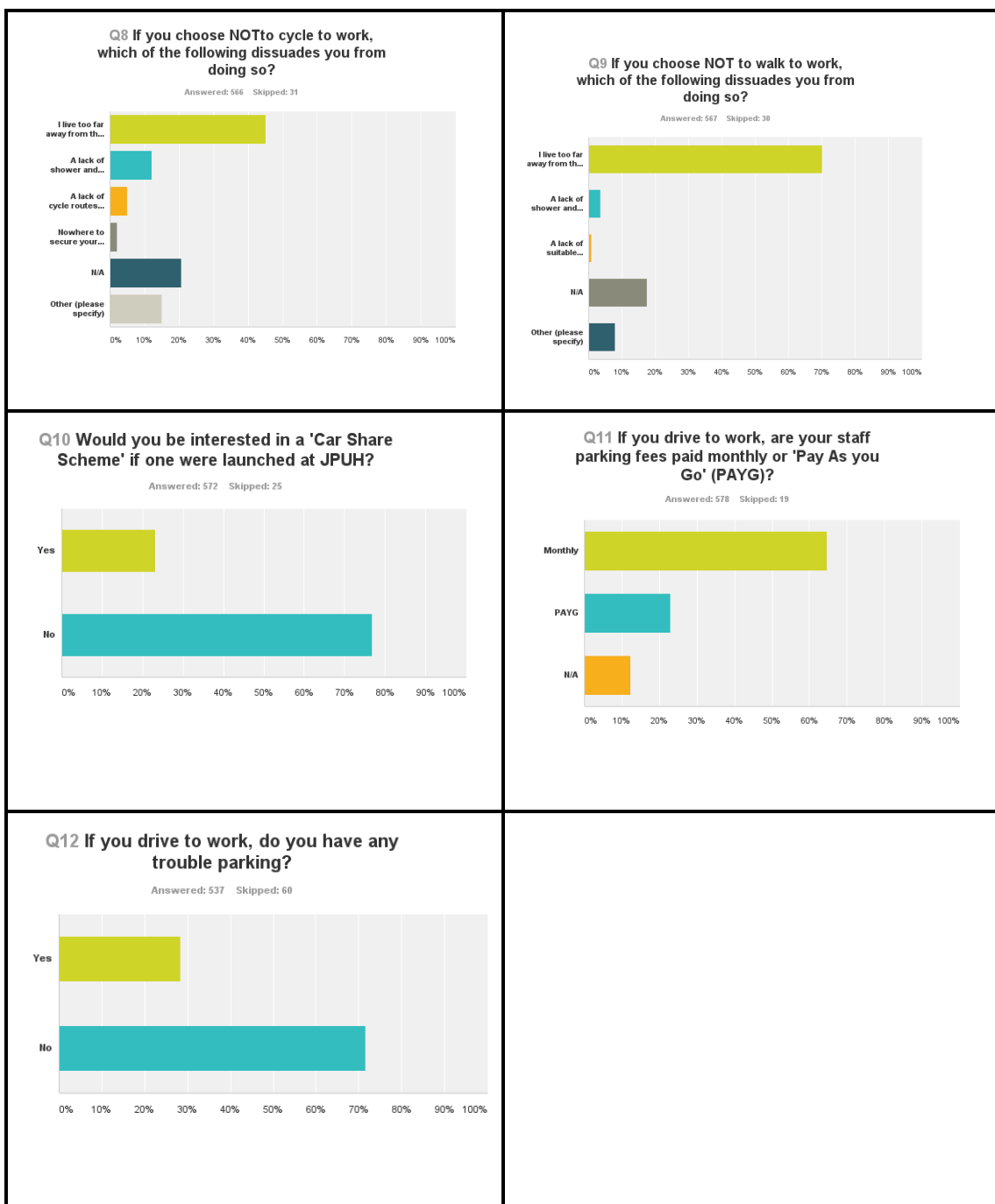
Appendix H

James Paget Staff Travel and Parking Survey – Data Schematics



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**JAMES PAGET UNIVERSITY HOSPITALS NHS FOUNDATION TRUST
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Appendix I





Appendix J

Staff Observations

1. The Staff Travel and Parking Survey conducted in July 2016 provided an opportunity for staff to express opinion on how current provisions work for them and where it does not meet their expectations, offer a view on how the service could be improved. The following comments are drawn (verbatim) from that survey and characterise recurring themes. Explanation or rationale is offered where applicable:

Observation: *"I do not agree with staff being charged to park!"*

Response: This is an issue that was raised repeatedly in the survey. By way of explanation, charging for staff parking was a non-negotiable prerequisite, stipulated by the local authority, when agreeing to planning permission (for the rear of the hospital - Car Park E) meaning the Trust has a legal obligation to charge.

Although there will always be some debate over the cost of parking and whether it is fair, it is worth considering that very few companies, be that private or public sector, have the capacity to provide on-site parking for their employees and where they do they invariably charge for the privilege. If on-site parking were not provided and staff here at JPUH were forced to use local public Car Parks it would cost, on average, £82.00 per month, an annual bill of £984.00.

Observation: *"The other reason I don't cycle is that lack of secure bicycle facilities, I think as a health care provider in an area with a very high obesity level, we should encourage healthier lifestyles at every opportunity. Cycling to work initiatives would be great PR for the James Paget Hospital."*

Response: Most respondents disagreed, with more than 90% of those that cycle to work stating that they have no problems securing their bicycles.

That said, the Trust is committed to promoting cycling as a viable travel choice. The proposed site strategy will incorporate a centralised, secure and covered area, offering a marked increase in the number (and quality) of available racks and potentially the addition of a showering and changing area. The Trust will also work with local retailers with a view to negotiating percentage discounts on bicycles for employees of the Trust and engage with local authorities to encourage development of cycle routes.

Observation: *"My biggest frustration is people who park inconsiderately, without thought or care for anyone else using the facilities. I don't have a problem with having to walk a little distance from the car park as long as I can get a space."*

Response: The Car Parking Officers have been working hard to address this problem in recent months and we have seen a marked improvement. This is perhaps best evidenced in the number of 'Red Warnings' that have been issued for inconsiderate parking in the period May - Sept 2016 (which numbers in excess of 600) or perhaps in staff feedback: *"It's good to see that you have stopped people parking in random places just for their convenience in car park F"* or *"On a positive note, it has been good to see less staff parking on the double yellow lines in Car Park E recently which seems to have been due to more red tickets being handed out"* We will continue to monitor this going forward and work to ensure that staff consider other users and park thoughtfully.

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Observation: *"It would be great if we had a better bus shelter. Considering that people who uses the buses are not only staff but also patients, we don't have a bus shelter big enough to support the busy times, specially when raining or snowing. Also, considering that often people using buses have mobility issues, are elderly or disabled, the "bench" provided at the bus shelter is not only big enough but also not appropriate to a big parcel of these populations considering comfort, safety and does not ensure them a good posture to keep pain levels at a minimum. I know that we have is a standard bus shelter but our bus shelter is not located in a standard place, is located in a hospital and considering that should provide good transportation for staff, patients and their families/visitors. Thank you!"*

Response: The Trust recognises the importance of promoting public transport as a travel choice and acknowledges that the current bus shelter could be improved. The proposed site strategy includes a bespoke bus terminus that will offer greatly improved facilities, capacity and access/egress routes.

Observation: *"If you do tend to arrive after 9.00am it is very difficult to find a space and have to go from car park to car park which can be quite annoying"*

Response: It is more difficult to park at the front of the hospital after 9:00am as the parking spaces closest to the front of the hospital are very popular. However, staff should not have to drive from 'Car Park to Car Park' looking for a space as the automated system informs users as to whether there are 'SPACES' or the car park is 'FULL'. When bemoaning a lack of spaces at the front of the hospital, it is worth considering that even if you park at the furthest corner of Car Park E at the rear of the hospital, it is only a 300 metre walk to the nearest entrance to the hospital.

The proposed site strategy will improve this situation greatly. All Car Parking for staff will be at the rear of the hospital and through intelligent use of the real estate, the number of available spaces will increase significantly.

Observation: *"Hard to see how the high car parking costs are justified, a sentiment echoed by many. Would be good to see a breakdown of how the money goes back into the actual car parking facilities, this might assuage some of the negative sentiments. If money is going back into any other hospital facilities or services then it is essentially a stealth tax."*

Response: Revenue raised through staff Car Parking is used to maintain and improve the Car Parks. An exhaustive list of where this resource has been utilised is available from the Estates department, but some recent examples (last 2 years) are detailed below:

- Pothole repairs and resurfacing in Car Park A and C.
- Resurfacing on access road.
- Line painting in Car Park E, F and Residences.
- Unblocking and cleaning of gullies in Car Park A.
- New footpath linking The Louise Hamilton Centre to the Brasenose entrance.
- Removal of overhanging trees in Car Park C (improving CCTV coverage).
- The creation of the overspill area in Car Park G.
- Repairs to flood lighting.
- Repairs to 'crash damaged' entry barrier.
- Addition of bike racks at DoM, Theatres and Renal.
- Procurement of additional CCTV monitors to enable greater coverage.
- Installation of a new 'Pay on Exit' Barrier system.

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Appendix K - Equality Impact Assessment

Policy or function being assessed: JPUH Travel and Parking Policy
Assessment completed by: Leigh Beuttell

Department/Service: Support Services
Date of assessment: September 2016

1.	Describe the aim, objective and purpose of this policy or function.	This policy covers all JPUH staff and other users of the staff car parks		
2i.	Who is intended to benefit from the policy or function?	Staff <input checked="" type="checkbox"/> Patients <input type="checkbox"/> Public <input type="checkbox"/> Organisation <input type="checkbox"/>		
2ii	How are they likely to benefit?	Informed on the viability of alternative travel and the provision of staff car park facilities.		
2iii	What outcomes are wanted from this policy or function?	To provide staff with the information necessary to consider their travel choices and make best use of staff car parking facilities.		
For Questions 3-11 below, please specify whether the policy/function does or could have an impact in relation to each of the nine equality strand headings:				
3.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their race/ethnicity ?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
4.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their gender ?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
5.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their disability ? Consider Physical, Mental and Social disabilities (e.g. Learning Disability or Autism).		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
6.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their sexual orientation ?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data

Title: JPUH Sustainable Travel and Parking Policy.
 Author: Leigh Beuttell, Facilities Manager.
 Issue: Sept 2016
 Ref: POL/TPP/LB0916/01

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7.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their pregnancy or maternity ?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
8.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their religion/belief ?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
9.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their transgender ?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
10.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their age ?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
11.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their marriage or civil partnership ?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
12.	Could the impact identified in Q.3-11 above, amount to there being the potential for a disadvantage and/or detrimental impact in this policy/function?		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
13.	Can this detrimental impact on one or more of the above groups be justified on the grounds of promoting equality of opportunity for another group? Or for any other reason? E.g. providing specific training to a particular group.		N	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
14.	Specific Issues Identified			
	Please list the specific issues that have been identified as being discriminatory/promoting detrimental treatment			Page/paragraph/section of policy/function that the issue relates to.
15.	Proposals			
	How could the identified detrimental impact be minimised or eradicated?	N/A		
	If such changes were made, would this have	N/A		

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	repercussions/negative effects on other groups as detailed in Q. 3-11?		
16.	Given this Equality Impact Assessment, does the policy/function need to be reconsidered/redrafted?	N	
17.	Policy/Function Implementation		
	<p>Upon consideration of the information gathered within the equality impact assessment, the Director/Head of Service agrees that the policy/function should be adopted by the Trust.</p> <p>Please print:</p> <p>Name of Director/Head of Service: Nichola Hicks Title: Head of Facilities Management Date: Sept 2016</p> <p>Name of Policy/function Author: Leigh Beuttell Title: Facilities Manager Date: Sept 2016</p> <p>(A paper copy of the EIA which has been signed is available on request).</p>		
18.	Proposed Date for Policy/Function Review		
	Sept 2019		
	Please detail the date for policy/function review (3 yearly): 3 yearly		
19.	Explain how you plan to publish the result of the assessment? <i>(Completed E.I.A's must be published on the Equality pages of the Trust's website).</i>		
	Standard Trust process		
20.	The Trust Values		
	<p>In addition to the Equality and Diversity considerations detailed above, I can confirm that the four core Trust Values are embedded in all policies and procedures.</p> <p>They are that all staff intend to do their best by:</p>		

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Putting patients first, and they will:
Provide the best possible care in a safe clean and friendly environment,
Treat everybody with courtesy and respect,
Act appropriately with everyone.

Aiming to get it right, and they will:
Commit to their own personal development,
Understand theirs and others roles and responsibilities,
Contribute to the development of services

Recognising that everyone counts, and they will:
Value the contribution and skills of others,
Treat everyone fairly,
Support the development of colleagues.

Doing everything openly and honestly, and they will:
Be clear about what they are trying to achieve,
Share information appropriately and effectively,
Admit to and learn from mistakes.

I confirm that this policy/function does not conflict with these values. ☒