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## Appendices

- **Appendix A** UHW Schematic Site Plan
- **Appendix B** Monitoring Results
- **Appendix C** Maps Illustrating Distance Travelled and Modal Split
- **Appendix D** Action Plan
- **Appendix E** Reform of Car Parking in NHS Hospitals
- **Appendix F** Car Park Tariff, Permit and Dispensation Summary
- **Appendix G** Adverse Weather Protocol
1. EXECUTIVE SUMMARY

1.1 Background

The UHW Travel Plan has been developed to generate benefits for the Health Board, its staff, patients and visitors and for the wider community. These benefits include:

- Improved access to the site and an improved patient experience;
- Increased travel options for staff, patients and visitors with a knock on effect to the wider community;
- Health benefits resulting from active travel;
- Reduced congestion on site and in the wider community;
- Reduced CO₂ emissions;
- Improved business efficiency - reduced business mileage costs;
- Improved compliance with Welsh Government (WG) requirements e.g. WHC (2008) 011 requested NHS Trusts to adopt measures to promote car drivers to use more environmentally friendly forms of transport.

1.2 Objectives

Key objectives of the Travel Plan include:

- The promotion of sustainable transport in Cardiff and Vale of Glamorgan as an alternative to single car occupancy;
- Improving opportunities for, and to encourage, travel by sustainable modes;
- Reducing unnecessary travel;
- Raising awareness among staff, patients and visitors of the Travel Plan; and
- Measuring the change in attitudes towards sustainable travel, over time.

To achieve these objectives the Travel Plan will suggest and develop new ideas including:

- New bus services and bus access routes to UHW
- Utilising the new park and ride service from East Cardiff
- Introduction of inter-hospital shuttle buses for staff
- New and improved cycle routes
- More priority for pedestrians, cyclists and buses
- More car parking for patients and visitors
- Car parking reviews and allocation of permits
- Tighter controls over parking on streets
- Development of a purposeful and focused communications package
1.3 Monitoring/Survey Results

In order to monitor the impact, and inform the development, of the Travel Plan location specific site audits were conducted. The first in 2005 has been updated for 2012 and generally shows increases in all vehicular activity on site.

Additionally a staff travel survey has been undertaken year on year since 2009 to monitor the impact of the measures and targets introduced in terms of encouraging modal shift.

The original site audit provided background information on the existing facilities at the site and that the facilities for cyclists, and in particular cycle parking, were not adequate. Many of these issues have been addressed and the survey evidences an increase in the numbers of staff cycling to work.

The staff travel survey also revealed that there remains a heavy reliance on the car to travel to work with almost 64% either travelling by car alone or with others. However, this has reduced from a combined figure of over 93% in 2009 demonstrating that Travel Plan initiatives/actions have had a positive impact. Furthermore, over 50% of staff, who returned completed questionnaires, live within 7 miles of work, suggesting active travel, car sharing and public transport initiatives can continue to have the greatest impact on modal shift. In addition as almost 77% of staff surveyed worked normal office hours, suggesting that public transport and car sharing initiatives are more likely to be successful.

For the first time, the Travel Plan also includes the results of a survey undertaken to ascertain patient and visitor travel patterns/habits. Although too early to indentify trends there is an indication that there is a linkage between distance travelled, disability and travel arrangements, particularly car usage.

Detailed monitoring and interpretation (Paragraph 5) of survey data is also provided.

1.4 Action Plan

Detailed Action Plan updates have been submitted to WG in 2010 and 2011, and a further updated Action Plan indicating some of the achievements between 2009 and 2012 is included. This demonstrates progress against original objectives and, while there have been many successes, some projects did not materialise following discussions with external stakeholders.

The Action Plan also includes objectives for 2012-2013 to ensure the key Travel Plan measures, as outlined within this document, are delivered in accordance with agreed timescales.
2. INTRODUCTION

The Cardiff and Vale University Health Board (the Health Board) was established in October 2009 and is one of largest in the UK, providing health services for approximately 500,000 people living in Cardiff and the Vale of Glamorgan. We also serve a wider population of 2.5 million people across South and Mid Wales for specialties such as paediatric intensive care, specialist children's services, renal services, cardiac services, neurology, bone marrow transplantation and medical genetics.

We have strong links with the Wales College of Medicine, Cardiff University and the partnership places us at the leading edge of education and training of health care professionals, as well as research and development into new approaches to healthcare.

Our patient services are provided across nine hospitals and 17 health centres, and we also provide services in health centres run by our NHS partner organisations both within Cardiff and the Vale and beyond (in Caerphilly and Merthyr for example). We work in close collaboration with GPs and other healthcare professionals.

The Health Board’s nine hospitals are; Barry Hospital, Cardiff Royal Infirmary/West Wing, Children’s Hospital for Wales, University Hospital Llandough, Rookwood Hospital, St David’s Hospital, University Dental Hospital, University Hospital of Wales, and Whitchurch Hospital.

The largest of the Health Board sites, the University Hospital of Wales (UHW), was officially opened in 1971 and rapidly established itself as one of the foremost teaching hospitals in the UK and the flagship hospital in Wales. With one or two exceptions the NHS service side is interlinked with professorial departments and both the NHS and University elements are heavily involved in research and development and have gained eminent reputations both nationally and internationally.

The hospital provides for the fullest integration of a 1,000 bed hospital and medical school in one complex. Three blocks running north south with 6 subsidiary 'link' blocks comprise the main complex. The main building is 10 storeys high with numerous peripheral developments. The bed occupancy averages between 85% and 90%.

Each week the hospital sees around 10,000 outpatients, 1,300 inpatients and 500 day cases (based on the quarter ended March 2012). The main operating theatre suite is one of the largest in Great Britain with 20 operating theatres (plus two more in the University Dental Hospital) undertaking approximately 74,000 procedures per year (based on 2011-12). The Accident and Emergency Unit on the UHW campus is an extremely busy department, with over 2,500 attendances per week (135,000 attendances per year), and is one of the busiest in the UK.

With all of this in mind, improving the whole patients experience is a key goal and the Health Board is working with all its partners to find ways to develop long term sustainable improvements. It should be noted, however, that sustainability is an issue facing society as a whole and therefore partnership working and necessary investment will be key to its success. This aim is also supported by the joint WG and Cardiff Council investment which made Cardiff Wales’ first Sustainable Travel City.
The original UHW Sustainable Travel Plan covered the period 2009 to 2011. We believe that the monitoring undertaken to date evidences the generally positive impact of the Travel Plan on travel patterns and consequently our environment. Improvements have been achieved in the provision of public transport, cycle storage, changing/shower facilities, signage and publicity of active travel routes and general site access. Working on a joint initiative with Sustrans Cymru, staff were offered cycle training and maintenance sessions, and active travel promotion days were held regularly. In their review of the initiative Sustrans state:

“Annual staff travel results from the University Hospital of Wales ….. suggest that between 2010 and 2011 there was an overall reduction of 5% of staff arriving to site as a single occupant in a car (an 8% reduction on base results) and an overall increase of 9% staff cycling to work, which equates to a 267% increase on the base levels in 2010.” (NHS Sustainable Travel: Project impacts, outcomes and future, Sustrans Cymru, October 2011)

As well as reducing site traffic congestion and pressure on car parking the achievements of the Travel Plan also assists the Health Board with it’s Corporate Health Standard achievement and produces direct savings. Although savings are difficult to quantify, current research by the London School of Economics shows that regular cyclists take one sick day less per year. On this basis, Sustrans have estimated that the 12% of staff currently cycling to work at UHW saves the Health Board 600 days per year in absenteeism.

This revised Travel Plan seeks to build upon the successes already achieved. It covers the period 2012 to 2015 and has been updated in terms of monitoring, achievements, and future targets and actions. The document has been consulted upon with key partners and other stakeholders, and Sustrans Cymru in particular who have provided valued support. Their comments have been taken into account as appropriate.

At Executive level within the Health Board, the Executive Sponsor is the Director of Planning who is responsible for delivering Welsh Health Circular WHC (2008) 058. This is being taken forward via the Environmental Management Strategy Group.

This Travel Plan is specific to UHW and will include:

- Motivation for producing a Travel Plan
- Roles and responsibilities within the Health Board
- Identifying key stakeholders
- Communication and marketing strategy
- The outcomes of a site audit
- The results of the staff travel survey undertaken in the Winter of 2011-12
- The results of the patient/visitor travel survey undertaken in the Winter of 2011-12
- Objectives, measures and implementation
- Identification of potential funding sources
- Monitoring
- Action Plan

The overall objective of this Travel Plan is to seek to ensure that, wherever possible, our staff, patients and visitors use more environmentally friendly alternatives to driving in a vehicle as a single occupant. This will deliver benefits to Health Board sites, patients, visitors, staff and generally to the local environment.
3. MOTIVATION

The key motivations for developing a Travel Plan for the UHW are as follows:

3.1 Benefits to the Health Board

Compliance with WG requirements such as:

- Corporate Health Standard
  All Health Boards in Wales have to achieve Platinum standard in corporate health by 2013. The Travel Plan has already made a huge contribution towards achieving the Gold Standard and will continue to contribute significantly towards the Platinum Standard because of the links to physical activity and transport. A corporate health standard working group has been set up with representation from a wide range of departments and divisions within the Health Board. A representative of the Health Board's Transport and Travel Group sits on the working group and is the lead on physical activity, due to activities centred around walking, cycling, general health and fitness promotion. The group also provides a communication medium for the support of Travel Plan activities.

- Environmental Management Systems (EMS)
  In 2002 WG issued a Welsh Health Circular (WHC) stating that all Trusts must work towards accreditation of an EMS. The Health Board achieved ISO 14001 in 2005 and the Travel Plan is fundamental to its on-going accreditation.

- WHC (2008) 058
  The Circular, entitled Sustainable Travel Plans in NHS Wales (Site Specific) to include Car Parking Plans, instructed (former) Trusts to develop Action Plans to demonstrate how they would deal with instructions from WHC (2008) 011 and develop site specific sustainable Travel Plans containing sustainable transport measures that will:
  - Improve accessibility of NHS sites for all users
  - Promote more sustainable alternatives to single occupancy car journeys
  - Promote the health benefits of active travel

- WHC (2008) 011
  The Circular introduced free car parking to all NHS Hospital sites without external contracts in place. Where external contracts exist, reduced cost schemes were required from 1st June 2008. The Circular aimed to achieve:
  - Increased business efficiency from reduced business mileage payments
  - Improved coordination of patient transport services
  - Improved access to services
  - Reduced site congestion

3.2 Benefits to staff

- Increased and improved travel options to and from work
- Awareness of greater number of travel options
- Flexibility of travel options for walkers/cyclists (i.e. no waiting for public transport)
- Reduced travel costs due to Travel Plan measures e.g. car sharing
• Improvements to health and motivation (and consequent reduction in staff absenteeism) with increased ‘active travel’
• Increased accessibility to alternative (to single car occupancy) travel information
• Less time spent on work day commute due to less congestion, and availability of other transport options

3.3 Benefits to patients/visitors

• Improved access to Health Board sites
• Increase in range of transport options available
• Reduced stress due to less congestion
• Reduction in missed appointments due to lack of travel options

3.4 Benefits to community/environment

• Less pollution from CO2 emissions
• Improved public transport services (including “Park and Ride”)
• Improved cycle and pedestrian routes/paths both on and off site
• Reduced congestion on and around site
• Increased positive attitudes towards active travel options and public transport
• Parents encouraged to increase confidence in active travel, and therefore encourage more active lifestyle with children

3.5 General

• Improved site environment
• Improved air quality on site and surrounding area
• Safer environment to walk and cycle
• Increased access for emergency vehicles
• Improved health and correlated reduced sickness
• Growing amount of research points to the connection between the more active an individual, then the greater the productivity
4. SITE AUDIT

As services are developed and facilities improved, the Health Board will have an increased number of patients, visitors and staff travelling to this site from across Wales and parts of England. This is due to the tertiary nature of some of the services provided. As the site is land locked, existing infrastructure is lost in order to accommodate new buildings.

The site has a daily footfall of circa 12,000 people, of which, about 8,000 are staff and students. This footfall is facilitated by the numerous walking and cycling routes which enter the site, or run close to it. These are a mixture of both traffic free and main routes. There are also large residential areas within very close proximity to the hospital which provide residents with the opportunity to use these routes e.g. access to the A48(M).

As staff numbers are increasing, and the pressure on car parking spaces is also increasing, it is important that the Travel Plan continues to provide a range of travel options for its staff, patients and visitors that will reduce the impact of parking and vehicle congestion within the Hospital and its surrounding streets. However, these plans may be limited by resource availability and will be dependent upon the close working relationships with stakeholders. In particular, proposals by Cardiff Council for “Park & Ride” facilities will be of key importance.

A UHW site plan, indicating facilities (including car parking, cycling, bus stops, taxis, disabled parking, etc.) is attached as Appendix A.

4.1 Internal Pedestrian Routes

All pedestrian routes within the site are well maintained without hazards. Pedestrian crossings are provided in key locations to assist pedestrian traffic flow. There are direct pedestrian routes to all bus stops serving the site, and a covered walkway from the main hospital multi storey car park to the main hospital entrance.

We are also fortunate that the hospital is served by car park facilities adjacent to the main site. These areas are serviced by hard walkways but in some cases there is a need for improved lighting, particularly in the winter months, to ensure safety for pedestrians. This will be part of the Travel Plan action plan for discussion with Cardiff Council.

Access to and from the Taff Trail is also indicated and these routes are included in the Health Board’s Active Travel maps.

4.2 Cycling

Cycle parking is situated in many locations around the site. These locations are strategically placed at main entrances and lecture theatres to ensure that the staff and student population are well served.

Where possible the Health Board has provided secure under cover accommodation. In other locations, covered cycle parking or Sheffield Stands have been installed to provide secure anchorage points for cycles.
The cycle racks and shelters are not maintained regularly but are secure. They are conveniently located to hospital entrances but some departments have limited access to them due to their location. Cycle parking is well used in summer months less so in winter months. During periods of increased cycling activity there is insufficient cycle parking provision on site. The Health Board is working with Cardiff University to improve the situation.

The installation of stands/anchor points is an on-going process to accommodate the increasing number of cycle users as the cycling fraternity increases. This process is overseen and supported by the Health Board’s Bicycle User Group (BUG) and improvements are undertaken as funding becomes available.

Roads accessing the site incur heavy traffic use by other forms of transport which may impact on cycling. The roads around the hospital have a very high volume of all classes of road vehicles. However, there are a number of off road routes which can be used and there have been some progressive moves with Cardiff Council in providing link cycle ways with key points such as the Gabalfa Interchange. Cardiff Council also produce cycle route maps and these are be made available within the Health Board.

Access to and from the Taff Trail is also indicated and these routes are included in the Health Board’s Active Travel maps.

4.3 Public Transport

There are seven bus stops strategically located across the site. These are located as close as possible to the main buildings, clinics and other main departments on the site. These bus stops are identical to the bus stops located throughout the city providing passengers cover during inclement weather, lighting and satellite information on bus arrivals/departures. In addition, there is a large screen in the hospital main concourse displaying bus destinations, arrival and departure times.

Due to significant building works relating to the second phase of the Childrens’ Hospital for Wales, Central Way has been partially closed resulting in no through access. This will remain in force until 2014 and has resulted in the need for temporary bus stops to be installed on the Gateway and Academic Avenue.

The site is served by two main bus operators – Cardiff Bus and Stagecoach – who run in excess of 25 services per hour through the site. The first buses onto and departing the site in the morning are at about 5.00am and last buses at night are at about 10.50pm. There are direct services to the site from Cardiff Central railway station.

Work is on-going to improve the north/south/east/west bus links to the hospital and the Health Board is working closely with local bus operators and Cardiff Council to this end.

Cardiff Council has increased “Park & Ride” facilities within the city and it is anticipated that this will also positively impact upon parking and traffic congestion within and around the hospital. A Park and Ride facility has now been established in North Cardiff, three miles east of the hospital site. Discussions will take place with the Council in order to develop the facility to service the site and it is hoped the UHW site will be included during 2012. This will be part of the Travel Plan action plan for discussion with Cardiff Council.
The site is served by two railway stations – Heath Halt High and Low levels – which receive frequent services from Cardiff Central station to the Rhymney Valley and Coryton, during normal working hours Monday to Friday. Outside of these times the services are less frequent. These stations are approximately one mile from the UHW site and the walk/cycle to the site would be considered to comprise part of an active commute.

4.4 Highways

The main roads serving the UHW site are a busy dual carriage way with two sets of traffic signals (A48M). This is at the cross roads of the main north/south/east/west arterial links to the city of Cardiff and beyond. This presents an opportunity to increase the potential to bring bus routes through the site. Negotiations are on-going with bus operators to increase this facility which is seen as integral to the Travel Plan.

The four main road entrances to the UHW site are from:

- A48M – from the east of the City, and from east Wales and England, through links to the M4 motorway.
- A48/Gabalfa Interchange - this gives excellent access from the A470 north and south bound roads, and from the west of the capital.
- Allensbank Road – this provides access from the north, north east and south of the city
- Rhydhelig Avenue – provides access from the north, north west and south of the city

In addition air access to the site by rotary wing helicopter to a purpose built H1 elevated platform located immediately adjacent to the Emergency Unit. This provides immediate access to the hospital from all parts of Wales.

The continuing development of the site to facilitate increased services to patients has resulted in lengthy periods of building construction work within the confined area of the site. This frequently results in road closures and can often lead to congestion at “pinch points”, frustrating road users in the site and in streets immediately adjacent to the hospital. Traffic congestion has therefore been identified as a major issue particularly at peak times.

4.5 Vehicles

Table 1 below details surveys undertaken over one day from 08.00 hours to 17.00 hours of vehicles using the Concourse area of the hospital. This information forms a picture of the increasing pressures that the hospital is enduring in this key location which provides access to the main hospital building. It is also indicative of increasing traffic flows through the site.

These snapshot surveys were undertaken during July 2005 and April 2012 and generally support the trends evidenced in the travel surveys (see Paragraph 5) indicating increased patient and general site activity.
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<th>Number (2012)</th>
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<td>85</td>
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<tr>
<td>Taxis</td>
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<tr>
<td>Cyclists</td>
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<tr>
<td>Motorcycles</td>
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<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,560</strong></td>
<td><strong>2,146</strong></td>
</tr>
</tbody>
</table>

### 4.6 Congestion

One of the most pressing problems at UHW is the traffic congestion within the site. Traffic congestion delays legitimate through traffic such as ambulances and buses and increases localised air pollution. For out-patients attending clinics it increases the levels of stress connected with being in a hospital environment. Furthermore, stress levels are compounded by the fear of being unable to park and missing an appointment.

While congestion can occur at any time, it is most severe during the morning and late afternoon commuting peaks – 08.30 to 09.30 and 16.30 to 17.30 hours – and early afternoon patient appointment/visiting arrivals – 14.00 – 15.00 hours.

The Health Board manages car parking and restricts the number of employee cars accessing the site, through reviewing and allocation of permits. This, together with a robust traffic management scheme, which is managed by an external contractor, will reduce traffic congestion and manage illegal car parking.

Car sharing, public transport, cycling and walking will be made more attractive in an effort to encourage car users to change travel habits. Cardiff Council has ambitious objectives in its Local Transport Plan to widen travel choices and the Health Board will be working closely with the Council to attain these objectives.

### 4.7 Cardiff University

The UHW site is shared with Cardiff University and there is therefore a large student population living in and around the site. Following the recent car parking review, students are not permitted to park private vehicles on the site. The impact of this on surrounding roads is difficult to measure although the University actively discourage students using cars in any event. Furthermore Cardiff Council and the University are also working to reduce the number of students bringing cars to adjacent off-site accommodation. There is a University operated bus service between the Main Campus and the Heath Park Campus which runs weekdays from 8.00am until 5.30pm during the academic year.

The Health Board works closely with the University on Sustainable Transport and Travel issues with the University being represented on the Health Board’s Sustainable Transport and Travel Group, and vice versa. This ensures both organisations agree on mutually beneficial strategies. For example, the recent refurbishment of a “university” building on site included the provision of additional cycle racks and improved changing/shower facilities for use by both students and staff alike.
5. TRAVEL SURVEY

5.1 Staff Travel Survey

One of the key aims of the Travel Plan is to encourage staff away from single car occupancy to other more sustainable forms of travel. To this end a Health Board staff Travel to Work survey was undertaken during January to April 2012, using the South East Wales Transport Alliance (Sewta) online survey tool, in order to ascertain current staff travel patterns and potential changes that would incentivise staff to move to more sustainable forms of transport. This builds upon previously undertaken annual surveys, the combined result of which are detailed and analysed in Appendix B.

The Health Board is committed to supporting and promoting respect and dignity at work by creating an inclusive working environment. The Health Board believes that staff should be able to fulfil their potential in a workplace free from discrimination and harassment where diverse skills, perspectives and backgrounds are valued. In order to achieve this, and meet legal obligations, it is important that workforce data is collected, stored and analysed. The equality/workforce information provided via the survey is treated with the highest standards of confidentiality and will only be used to improve employment practice to ensure that staff can work in an environment free from discrimination. It is stored and used in accordance with The Data Protection Act 1998.

The survey response from UHW was low (268 completed questionnaires) and cannot be considered as statistically significant. The survey results for this site are therefore considered on an indicative basis only. A further survey will be undertaken in the winter of 2012-13 and the Travel Plan monitoring updated accordingly.

5.1.1 Key Findings

- Distance Travelled to UHW

Figure 1

The survey shows that 54% of people live within seven miles of their place of work (see Figure 1). Equally, 46% of respondents live outside the city limits of seven miles.
Of these figures, almost 40% live within 4 miles suggesting that active travel and improved public transport options could generate a change in travel behaviour. Maps illustrating the distance travelled by staff to UHW are attached at Appendix C.

- **Modal Split**

The staff survey revealed that most members of staff (55%) commuted to work in a car on their own or in a car with others (9%) (see Figure 2). This demonstrates the heavy reliance on cars to commute to work. The next most common modes of transport were cycling (12.7%) and bus (10.1%). Train use was 3.7% reflecting the walking distance from the local station. Although this distance is approximately one mile, this will be marketed as part of active commuting.

![Figure 2](image)

The general trend across the 2009 – 2012 monitoring period (see Appendix B) indicated by respondents is that there is a reduction in the numbers of staff travelling to work in their cars alone and that this is supported by a general increase in use of other more sustainable travel modes.

- **Reasons for Using a Car**

The top three reasons for using a car has remained similar across the monitoring period. Approximately 38% (see Figure 3) cite lack of alternative and comments received refer to public transport deficiencies. This suggests that active travel and improved public transport options could generate a change in travel behaviour. To this end the Health Board will work with Cardiff Council and Bus Operators to achieve improved public transport options.
- Car Parking Location

The parking location has remained similar across the monitoring period (see Figure 4) with about 75% of staff parking on site. This compares to approximately 95% at other Health Board sites.

The level of on-site parking can be influenced by external factors such as parking restrictions and the development of park and ride facilities. A major internal influence remains that parking on the UHW site is managed under contract, with car parking charges in operation. These combined internal and external factors can be used to influence staff parking patterns.
• Incentives to Cycling

Although the percentage of respondents already cycling to work has almost doubled during the monitoring period (see Appendix B), the factors influencing behavioural change with respect to cycling remain fairly consistent. The Action Plan addresses these priorities. It is noted that almost 62% indicated that they would be prepared to cycle to work if there were better cycle paths, more direct cycle paths to the work place and there were improved changing facilities in the workplace (see Figure 5). This supports the development of maps, working groups, health and wellbeing groups, etc. working to promote cycling and leisure walks and rides.

Figure 5

![Incentives to Cycle](image)

• Walking

Figure 6

![Incentives to Walking](image)
Of the respondents to the survey the vast majority, 54%, stated that no incentive would make them consider walking to work (see Figure 6). This is reflective of the distances that staff live from the site. However, the Health Board will continue to work with its key partners to improve footpaths, lighting, security and access. Further, the Geographical Information System (GIS) maps (see Appendix C) indicate that there is a relatively high number of staff living within one or two miles of the site who do not walk. Again, this group will be targeted to be influenced under the marketing/communication strategy.

Although the percentage of respondents walking to work has reduced, the factors influencing behavioural change with respect to walking remain fairly consistent. The Action Plan addresses these priorities.

- **Public Transport**

The percentage of respondents using public transport to travel to work has generally remained consistent across the monitoring period, as have the factors influencing behavioural change with respect to public transport (see Figure 7). The Action Plan addresses these priorities.

- **Incentives to Car Share**

Of those prepared to car share, almost 30% stated that no incentive (see Figure 8) would make them car share. However, it is noted that over 12% already car share informally and of those requiring an incentive, almost 15% required help in finding a car share partner. The Action Plan addresses the priorities indicated by these results which demonstrate the opportunity to grow the Health Board’s car share scheme.
• Hours of Work

Of the respondents to the survey, over 77% indicated that they work normal office hours i.e. between 08.00 and 18.00 on Monday to Friday. This indicates that public transport and car sharing initiatives are reasonably likely to be successful. This staff group will therefore be targeted under the marketing/communication strategy.

• Awareness of Sustainable Travel Initiatives

The vast majority of respondents to the survey, over 76%, stated that they were aware of the Health Board’s initiatives to encourage sustainable travel (See Figure
9). All of the activity undertaken on sustainable travel has had some impact. The Action Plan addresses the priorities in terms of improved communication.

- Active Travel Intentions

Although over two thirds (69%) of respondents have indicated they will not change their travel behaviour in the next six months, almost one third (30%) have indicated that they have either changed or are thinking of changing their travel behaviour with respect to active travel (see Figure 10). The percentage of respondents indicating that they have or are thinking about changing their travel behaviour has increased from about 25% in 2010 to 33% in 2011, and has remained consistent during 2012.

![Active Travel Intentions](image)

**5.1.2 Conclusions**

From the foregoing, the following conclusions can be drawn:

- The survey shows that there are a large number of staff (54%) living very close to where they work (within 7 miles) but still travel by car.

- There are indications from the survey regarding facilities improvements for cyclists, e.g. if the Health Board want more people to cycle then improvements to showers, changing rooms and cycle parking must be carried out. However, the key to encouraging cyclists to UHW is improving access to and around the site. The Health Board will require the support of its partners to provide safe, well lit cycle paths to the site.

- Car sharing results showed potential with over 57% of staff expressing an interest in car sharing. The incentive that would most likely encourage more staff to car share is help finding a partner. The Health Board’s car share scheme will need to be more actively promoted.

- There is a clear indication that of those respondents prepared to move to public transport, more direct bus routes to UHW would be an advantage. To that end, the Health Board is working closely with Bus Operators and Local
Councils in the region to encourage and increase direct service levels to UHW. Park and Ride options will also be explored.

- One quarter of staff would not be prepared to cycle to work for whatever reason. Reasons indicated include: distance; carer commitments; safety; etc.
- Improved communication/marketing of current travel arrangements (car share, bus, rail, cycling, walking) and facilities could impact on existing staff modes of travel.

These conclusions are considered in conjunction with the results of the patient/visitor survey to inform the Travel Plan Action Plan (Appendix D).

5.2 Patient/Visitor Travel Survey

One of the key aims of the Travel Plan is to encourage patients/visitors away from single car occupancy to other more sustainable forms of travel. To this end a Health Board Patient/Visitor Travel survey was undertaken during January to April 2012, in order to ascertain current patient/visitor travel patterns and potential changes that would incentivise them to move to more sustainable forms of transport. Based upon their most recent visit to UHW, the survey was undertaken by post and in person, and returned questionnaire data inputted using the Sewta on line survey tool.

The survey response from UHW was low (127 completed questionnaires) and cannot be considered as statistically significant. The survey results for this site are therefore considered on an indicative basis only. A further survey will be undertaken in the winter of 2012-13 and the Travel Plan Action Plan and Monitoring Report will be updated accordingly.

5.2.1 Key Findings

- Attendance Category

Figure 11

![Category of Attendance](image)

- An out patient: 6.30%
- An in patient: 9.45%
- Visitor: 84.25%
The survey indicated that the vast majority of attendances (84%) related to outpatient appointments (see Figure 11). In keeping with this, over 96% of attendances were undertaken between Monday and Friday inclusively, peaking (over 45%) between 08.00 and 11.00 hours.

- **Distance Travelled**

Over 50% of patients/visitors travelled 4 miles or less suggesting that improved public transport options could generate a change in travel behaviour (see Figure 12). However, almost one third (32.28%) indicated that they had a disability which would affect their travel arrangements. The local distribution of patients/visitor is displayed on the GIS map (Appendix C). It should be noted that over 22% travelled over more than 10 miles to attend.

**Figure 12**

![Distance Travelled](image)

**Figure 13**

![Age Profile](image)
The age profile of patients/visitors indicates that over 54% were aged 60 or over (see Figure 13). While there may be an opportunity here to encourage use of public transport (particularly taking advantage of the concessionary bus pass scheme) the survey also showed that almost one third (32.28%) indicated that they had a disability which would affect their travel arrangements.

- Modal Split

The modal split (see Figure 14) indicates that the majority (over 43%) of attendees arrived in a car as a passenger. This would seem to support the data reported in the age profile and reported percentage with a disability. However, it is also noted that nearly 12% indicated that they used the bus to get to UHW, and of those, over 86% used their concessionary bus pass. Furthermore, when asked how they would prefer to attend the UHW site 21% indicated they would prefer to use the bus (see Figure 15), an increase of almost 10%. Interestingly, there is a corresponding 10% reduction in those indicating that they would prefer to attend by car.

Figure 14

![Modal Split](image)

Figure 15

![Preferred Modal Split](image)
• Parking Location

Of those respondents attending the UHW site by car, either alone or as a passenger, (76%), almost three quarters (73.4%) parked on site (see Figure 16). Nearly 16% were dropped off on site with free off site parking representing only 2%.

![Figure 16](image)

• Incentives to use Public Transport

Over 68% of respondents indicated that faster, more reliable, frequent, direct and cheaper services would encourage them to use public transport (see Figure 17). Furthermore, 6% indicated a willingness to use a park and ride facility were it available.

![Figure 17](image)
5.2.2 Conclusions

From the foregoing, the following conclusions can be drawn:

- The vast majority of respondents attended UHW for out-patient purposes;

- Over half of patients/visitors travelled 4 miles or less suggesting that improved public transport options could generate a change in travel behaviour;

- The data suggests that there is a linkage between distance travelled, disability and travel arrangements, particularly car usage;

- Over half of the respondents were aged 60 or over. There is evidence to suggest a link between age profile and bus pass usage. The results for preferred mode of travel suggest that this is an area that can be further developed through improved public transport services to the site;

- While the majority of car users parked on site there is evidence to suggest demand for alternative parking and travel options e.g. Park and Ride

These conclusions are considered in conjunction with the results of the staff travel to work survey to inform the Travel Plan Action Plan (Appendix D).
6. OBJECTIVES, MEASURES AND IMPLEMENTATION

This section will detail all relevant areas that need to be considered for successful travel planning within the Health Board. The aim is to outline the current issues, and explain what package of measures can be introduced to address these issues.

For ease of reference the Travel Plan measures have been organised under the following headings:

- Car Parking
- Car Sharing
- Public Transport
- Cycling
- Powered Two Wheelers
- Walking

6.1 Car Parking

As part of an on-going process, it was recognised in 2011 that the car parking permit issue criteria required meaningful review if the Health Board wished to reduce congestion and manage car parking on the UHW site. The need for this was clearly evident by the number of concerns received from staff experiencing parking difficulties during peak periods. It was acknowledged that there is no parking congestion or difficulties for staff working ‘out of hours’, which is accepted as being after 5 p.m. and before 8 a.m. Monday – Friday, weekends and Bank Holidays.

There are 3,002 available parking spaces at UHW, with 1,770 allocated to staff permit parking. However, the number of staff that meet the criterion to park on site exceeds this number and over 5,000 permits have been issued (as at March 2012). These permits were issued against agreed criteria in partnership with Staff Representatives, Community Health Council Members and representatives from Cardiff University. The main priority for the Health Board is to ensure service delivery and this has predominantly formed the basis for the revised permit issue criteria which is:

- Permits will be issued based on the need for individuals to use their vehicles / Health Board fleet vehicles to undertake and deliver Health Board or University business;
- Consideration will be given to the distance / complexity an individual has to travel from their home to their permanent work base at UHW;
- Any medical condition that necessitates an individual to use their own transport to travel to their permanent work base at UHW;
- Permits will not be issued to students;
- Being issued with a permit does not guarantee staff a parking space.

Car parking administration continues to review and audit staff parking permit database taking account of staff terminations/transfers to maintain timely and accurate data.
This Travel Plan should be read in conjunction with Reform of Car Parking in NHS Hospitals (Appendix E) and the UHW Car Park Tariff, Permit and Dispensation Summary (Appendix F). It should be noted that Appendix F is currently under review but is the most up to date version at the time of writing.

The Health Board is aware that, while the percentage of staff travelling to work alone in the car has reduced from 85% in 2009 to 55% in 2012, 16% of these staff continue park off-site in surrounding roads.

Taking this, and other indicators into account, the Travel Plan identifies measures in the following sub-sections to encourage staff away from single car use to alleviate car parking pressures on and around the site.

TARGETS: The long term target would be to reduce the staff car parking requirement to that set down in the contract, which is 1,770 staff parking spaces at peak times. This will not be achieved in the short term but efforts will be made to achieve a reduction of staff cars accessing the site for parking from it’s current level of 76%. The Health Board will continue it’s campaign to encourage staff to move away from single occupancy car use to more sustainable forms of travel e.g. transferring to car sharing, public transport and active travel.

6.2 Car Sharing

The introduction of revised car parking permit criteria at UHW has resulted in a reduction in the number of car parking permits available for staff and students. Furthermore, the Health Board is committed to reducing the number of single occupancy vehicles which access the site during the working day, particularly Monday to Friday. Car sharing is an important element in working towards this reduction and the Health Board is working with Cardiff University to ensure car sharing is promoted to staff and students.

Car sharing will reduce the total number of cars accessing the site, which in turn will reduce congestion.

Car sharing is an attractive option for those who are unable or unwilling to change their travel to work patterns. It is intended that regular and active car sharers will have the advantage of a parking permit and a designated parking area. However, this will be dependant upon discussions with the Health Board’s car parking contractor.

Should the Park and Ride discussions come to fruition, this will also present a parking location for car sharers.

The recent Health Board Travel to Work Survey indicates a very low level of car sharing currently (8.96% of respondents). Of those who responded positively to the idea of using other forms of transport other than their normal mode, approximately 21% indicated that they occasionally car share. Of those who responded positively to the idea of car sharing, the following main incentives were cited as encouraging to car share:

- 15.5% indicated reduced or free parking;
- 14.8% indicated a reserved parking space
- 14.5% indicated help in finding prospective car share partners
- 12.6% indicated guaranteed lift home
The Health Board has a contract with Vinci Park (Cardiff) Ltd. (see Appendix E) and cannot offer free or reduced rate parking. However, taking other indicators into account the Travel Plan identifies the following measures to encourage car sharing:

**Measures**

- The Health Board has designated a Car Share Scheme via Sewta and Liftshare. The Scheme will be administered by Patient Environment Services
  
  http://www.liftshare.com/content/default.asp?sid=1868&sid2=948&skin=297&lang=EN&country=GB

- The Car Share Scheme will be regularly and widely publicised through the Health Board Intranet, “Adminstrator” round robin e-mails, notice board leaflets, road shows and staff and union representatives etc.

- A location for preferential parking will be explored with the Health Board’s car parking contractor.

- Should preferential parking be identified, active car sharers will get parking permits. “Active” is defined as car sharing at least 3 times a week or pro-rata for part time workers.

- Participants will be encouraged to sign up to be both drivers and passengers, thus increasing the opportunities for a match.

- Non-drivers/non-car owners are also welcome to join the scheme.

- A “Guaranteed Ride Home” is a key incentive of the car share scheme. This matter is still to be agreed by the Health Board and strict guidelines will be laid down to prevent abuse.

- Once established, the Health Board will consider widening the scope of its car share database to include other local employers in order to ensure that the scheme has sufficient participants and is successful.

**TARGET:** In the first year to increase car sharing from its present levels to 12% and to 15% by March 2015.

**6.3 Public Transport**

UHW is reasonably well served by public transport provision in terms of services and frequency. Cardiff Bus and Stagecoach, operate bus services which access the site’s seven bus stops. All the stops have shelters, lighting and real time satellite information on arrivals and departures. They also have hard copy timetable information.

It should be noted however, that at times of significant on site building schemes, road closures may affect bus services and temporary re-location of bus shelters may be required

Heath Halt Railway Stations are approximately one mile from the site. Access from the stations to UHW is possible by walking through Heath Park and entering the site
via a number of access gates on Heath Park Way, the closes being located adjacent to Denbigh House.

In the 2012 staff survey over 11% of those surveyed responded that public transport was not a feasible alternative compared to over 35% in 2009. Further, 13.8% currently use public transport to get to work compared to only 1.56% in 2009. The trend is pleasing. However, more direct bus routes, greater reliability and more frequent services would make public transport easier for approximately half those responding. These were also reflected as being key incentives in the patient/visitor survey.

Taking the results of the surveys’ indications into account the Travel Plan identifies the following measures to encourage use of public transport:

**Measures**

- The Health Board will work with Cardiff Council and bus operators to bring additional services onto UHW site.

- A UHW Transport Users Group will be established to meet from time to time as a forum for discussion between all public transport operators and users.

- Real time information is available at bus stops and has been installed in the Concourse.

- Discussions will continue with operators to give discounted travel passes and payment via salary deductions. The potential for salary sacrifice will be explored.

- Discussions will continue with operators to provide improved access to ticket purchase on site.

- The Traveline Cymru telephone number will be widely circulated to enable people to access quality information about public transport.

- The Health Board will work with local bus and train operators to coordinate services from Heath Halt and other stations and provide information on accessing UHW from stations.

- The Health Board will work with Cardiff Council and bus operators to ensure that services accessing UHW are grouped at the same stop, thus giving users increased service options.

- The Health Board’s salary sacrifice scheme for the introduction of assisted cycle purchase (when implemented) will include an option to purchase folding cycles to facilitate the combining of cycling with the use of public transport.

- On site bus stops have included raised bus stops to facilitate the use of low rider buses and real time satellite bus timetable information.

- Improved communication/marketing of current public transport travel arrangements and facilities could impact on existing staff modes of travel e.g. links to Traveline Cymru via Health Board Intranet Transport page.
In order to continue to increase the use of public transport, increases and improvements to service provision are necessary. In the first year, to increase public transport use from its present levels to 15%, and to 18% by March 2015.

6.4 Cycling

UHW already has a high proportion of cyclists because of its student population. The Travel Plan supports current cyclists and encourages more people to cycle. During the term of the previous Travel Plan a number of infrastructure improvements were made for cyclists. These included provision of secure cycle storage, additional cycle storage and shower/changing facilities.

Of those who responded to the survey, over 12% regularly cycled to UHW in 2011 and 2012 compared to 2.3% in 2009. The staff/visitor survey indicated little demand for cycling. However, any improvement for cyclists will generally be available to both categories of survey respondent.

Taking these results and indications into account the Travel Plan identifies the following measures to encourage use of public transport.

Measures

- The Health Board will work towards achieving the Platinum Corporate Health Standard as an indication of the Health Board’s commitment to cycling to work options as a health alternative to other modes of transport. This commitment will influence all measures taken by the Health Board.

- More cycle shelters/Sheffield stands will be located in different parts of the site and be well signposted. These will be for irregular users and patient/visitors as well as staff.

- Showers, lockers and changing facilities should be considered for improvement, although a lack of appropriate space and resource may make this difficult to achieve in the short term.

- Information on cycling will be sent to new employees in the employee pack.

- Cycle safety, training and maintenance lessons will be offered via Cycle Training Wales (CTW) – The UK’s National Cyclists’ Organisation.

- A cycle route map showing routes to the site has been produced with the help of the Cycling Officer at Cardiff Council and is distributed to and by members of BUG.

- Continue to promote locally developed UHW Active Travel maps with rail, bus, walking and cycling links to site, including areas of interest/facilities.

- Signposting on site for local requirements such as the Taff Trail, railway stations and the city centre.

- The Health Board will introduce salary sacrifice scheme for bicycle purchase. This will include the option to purchase folding cycles in order to facilitate combining cycling with other forms of transport.
• All new developments should ensure that provision for cyclists is included and should not impair existing facilities.

• The Health Board will pay business mileage for cyclists at the locally negotiated rate.

• Improved communication/marketing of current cycling travel arrangements, facilities and flexibility could impact on existing staff modes of travel. Cycling offers no waiting for public transport, and a cheap, relatively speedy (in comparison to the standing traffic) option, with long term health benefits.

• Work with Sustrans Cymru to support the uptake of active travel. This may include:
  • Drop in work shops
  • Signing of paths on site (as mentioned above)
  • Work with Health and Wellbeing Group to promote walking and cycling—Evidence suggests that people taking such activities up in leisure time are more likely to maintain practise and include the activity in every day life.
  • Support changes to website, particularly with active travel directions, etc.
  • Work with Cardiff Council to initiate more signing off site, to the hospital for walking and cycling

• Participation in national and local events to increase interest through competition e.g. Cardiff Cycle Challenge

TARGET: To increase cycling to work from its present levels to 15% by March 2015.

6.5 Powered Two Wheelers (Motorcycles)

No respondents to the staff survey, nor the patient/visitor survey, indicated that they regularly travel to the site by motorcycle or moped. Observational evidence would suggest otherwise and improvements to the secure cycle storage during 2011 included provision for motorcycles.

Measures

• Areas for motorcycle and moped parking have been created but will be improved.

• The option of parking spaces in the Multi Storey Car Park for motorcycles and mopeds within the multi storey car park will be explored.

TARGET: Given the very low numbers who currently use motorcycles and the lack of survey information of future intentional use it is only feasible to set a target of 1% in the first year by March 2013.

6.6 Walking

The layout of the site, coupled with the number of conveniently placed entrances and exits, encourages vehicles to use the site as a through route. This increases the average speed of vehicles making walking potentially dangerous. The pedestrian infrastructure should therefore ensure that pavements are wide enough and well illuminated, crossings are well located and safe, street furniture is restricted and
signposting is suitable. Equally, the Health Board will continue to work with key partners to improve footpaths, lighting, security and access to the site.

8.9% of UHW staff who responded to the survey live within 1 - 2 miles of the site making walking a viable option for many people. Of those surveyed 7.46% staff respondents already walk compared to 1.42% in 2009. Furthermore, 5.11% of patient/visitor respondents also walked to the site. Therefore the purpose of the walking strategy is to ensure that those who walk to the site continue to do so and are joined by others.

Taking these results and indications into account the Travel Plan identifies the following measures to encourage walking.

**Measures**

- The Health Board will work towards achieving the Platinum Corporate Health Standard as an indication of the Health Board’s commitment to walking to work options as a health alternative to other modes of transport.
- Where no pavements exist or have been cut off they should be reinstated.
- On site signposting, lighting, crossing points, wheelchair and pushchair access will be improved (this will be necessary in order to comply with the Disability Discrimination Act).
- Access to and from the footbridge spanning Eastern Avenue (A48(M)) will be improved.
- Having due regard to Health and Safety issues pedestrian crossings will be conveniently located.
- The Health Board will work with Sustrans Cymru and Cardiff Council to develop well signposted and safe routes to the site.
- The health benefits of regular walking will be highlighted through articles in “Administrator” round robin e-mails, Intranet, leaflets etc.
- A detailed map showing suitable routes into the site and average time taken to walk in (i.e. a 20/30/40 minute route) will be developed with the help of Cardiff Council and Sustrans Cymru. This would show well populated but preferably traffic light routes.
- The feasibility of a “Walk Together” (walking buddy) database will be examined to encourage walkers.
- Work with Sustrans Cymru to support the uptake of active travel. This may include:
  - Drop in work shops
  - Signing of paths on site (as mentioned above)
  - Work with Health and Wellbeing group to promote walking and cycling—evidence suggests that people taking such activities up in leisure time are more likely to maintain practise and include the activity in every day life.
  - Support changes to website, particularly with active travel directions, etc.
• Develop maps with rail, bus, walking and cycling links to site, including areas of interest/facilities.
• Work with Council to initiate more signing off site, to the hospital for walking and cycling

• Participation in national and local events to increase interest through competition e.g. Pedometer Challenge

TARGETS: Given the health benefits of walking the Health Board should aim for an increase in the number of walkers to 10\% by March 2015.

6.7 Other

Other measures the Health Board will introduce in order to actively support travel alternatives include:

• Teleconferencing – this has already been introduced into a number of departments (e.g. Procurement, ALAS, etc.) within the Health Board and has resulted in reduced time and business mileage for meetings etc.
• Pool Vehicles – the piloting of pool vehicles in certain suitable departments has proved successful and is encouraged where appropriate in terms of mileage, time, frequency of use, etc. Use of electric pool vehicles will also be explored where appropriate.
• Work-Life Balance – The Health Board operates systems of flexible working (including flexi-time, compressed hours, etc) in order to retain staff. This also offers the staff involved the flexibility to use public transport outside of peak times in order to support the Health Board in its delivery of services.
7. **ROLES AND RESPONSIBILITIES**

7.1 **Senior Management Support**

Sustainable Transport and Travel within the Health Board receives Executive sponsorship from the Director of Planning. The Health Board’s Environmental Management Steering Group provides strategic direction for Sustainable and Environmental Management with the Health Board.

Operationally, the requirements of Sustainable Transport and Travel are undertaken via the Patient Environment Services Division.

7.2 **Patient Environment Services (Transport/Travel Section)**

Although the Health Board does not have a dedicated Travel Plan Coordinator, the management of the development and implementation of the Travel Plan is undertaken via this Section.

One of the roles of this Section is to raise awareness of alternative travel throughout the Health Board and to manage the day to day schemes identified within the Travel Plan. The Section also advises Health Board Management of best practice and is responsible for identifying and reporting on new ways of encouraging sustainable travel among staff, visitors and patients thus reducing reliance on single occupancy car journeys.

7.3 **Sustainable Transport and Travel Steering Group**

Travel Plans are integrated into corporate objectives (e.g. the attainment of the Corporate Health Standard, accreditation of EMS, etc.) and can be seen as a tool for fulfilling social and environmental objectives. To facilitate this culture change it is important to have a group of dedicated staff responsible for driving forward the objectives of the Travel Plan.

The Health Board’s ‘Sustainable Transport Group’ convenes as necessary. Within its remit, members of the Group would be responsible for facilitating the development and implementation of the measures listed within this report.

The membership takes account of the results of The Welsh Partnership Forum NHS Wales Staff Survey 2000-07 and represents the different interests of health sectors, both internal and external to the Health Board, including the following:

- Cardiff University
- Staff Organisations
- Community Health Councils
- Welsh Government
- Local Councils
- Public Transport Operators
- Regional Transport Consortia (Sewta)
- Local Health Board
- Sustrans Cymru

The Group has a clearly defined Terms of Reference including:

- Securing management support to take ideas forward;
- Identifying Travel Plan issues and address them accordingly;
Set tasks and actions and establishing specific Task and Finish Groups to that end;
Identify funding requirements and sources;
Identify targets and reviewing progress;
Communicating Travel Plan successes and problems.

Examples of Task and Finish Groups include:

- BUG - including Assisted Cycle Purchase Group
- Car Share Group

7.4 Car Park Strategy Group

The Car Park Strategy Group, under the Chair of the Assistant Director of Patient Environment, was established to manage car parking issues within the Health Board.

Car parking at UHW has reached a critical point with demand outstripping supply. In addition the Health Board must meet its contractual requirements with its car park contractor, Vinci Park (Cardiff) Ltd. and its statutory requirements as determined by WG. To this end, the UHW specific response to WHC (2008) 011, Reform of Car Parking in NHS Hospitals, is detailed at Appendix E.

The Car Park Strategy Group works in close liaison with the Sustainable Transport and Travel, and this Travel Plan aims to alleviate car parking issues on the site and surrounding areas by encouraging transport alternatives to the car.

8. PARTNERSHIP WORKING

In order for the Travel Plan to be a success, the Health Board has recognised the need to engage with external agencies. As such, partnership working has been established with the following organisations:

- WG
- Regional Transport Consortia - (Sewta)
- Local Authority – Cardiff and the Vale of Glamorgan Councils
- Traveline Cymru
- Sustrans Cymru
- Local Bus Operators – Cardiff Bus, Stagecoach, Newport Transport,
- Sports Council for Wales
- Cycle purchasing solutions
- Voluntary/Community transport providers
- Welsh Health Estates
- Cycle Training Wales - CTW
9. COMMUNICATION/MARKETING

9.1 Provision of Information

Transport and Travel information within the Health Board is provided in many ways, to staff, patients and visitors, including:

- **Intranet**
The Health Board has a dedicated Intranet page for public transport information, car sharing details, cycling routes and information etc. The pages are informative and comprehensive, but require regular maintenance in terms of monitoring and updating.

- **Internet**
The internet pages are also updated regularly so that Patients and Visitors have got access to information regarding directional travelling to the sites. However, this needs further development to include a greater emphasis on alternative modes of transport, and active travel directions.

- **New employees**
All new employees within the Health Board are sent an information pack by the Human Resources department which includes information on travel options to and from the Health Board’s sites, including salary sacrifice options.

- **Health Board Induction**
All new starters within the Health Board have to complete the staff induction course. This includes information relating to public transport options, cycling facilities and car parking.

- **Infopoints**
The Health Board has installed Infopoints in all its sites. These Infopoints provide users with access to Travel Information and are co sponsored by Traveline.

- **Travel Information Days**
The Health Board regularly runs travel information days designed to encourage staff, patients and visitors to use sustainable forms of transport. These days are attended by local bus operators, Traveline Cymru, Sustrans Cymru, Sewta, etc.

- **Public Transport Timetable Information**
At strategic locations in hospitals throughout the Health Board leaflet racking has been installed to accommodate public transport timetables in an effort to encourage staff, patients and visitors to use the services provided.

9.2 Gaps in Provision

The Health Board’s Sustainable Transport and Travel Section are continually seeking to improve information provided to its staff, patients and visitors. Areas have been identified where travel information can be improved. These include the Health Board’s intranet site (currently under review), internet web site, secure cycle storage, availability of motorcycle storage, etc. These areas are included in the action plan.
9.3 Marketing/Publicity

Marketing of the Travel Plan will take place through the following mechanisms:

- Re-launch of this revised Travel Plan
- Articles in staff newsletters
- Flyers, posters and leaflets on departmental notice boards and virtual Noticeboard Network throughout the Health Board
- Information and briefing for senior managers
- Publicity on Intranet/internet
- Information in induction packs
- Focus groups
- Alternative Transport Events to combine promotion of active travel for events such as Bike to Work week; In Town Without My Car; Environment Week; European Mobility Week, etc
- Press launches to local papers
- Maintain links with students via University representatives
- Dissemination of information via the Bicycle User Group

Marketing will take a targeted approach based on the information gathered from the 2011-12 travel surveys.
10. **ACTION PLAN**

A detailed action plan for 20012/2013 has been developed and is attached at Appendix D.

11. **ADVERSE WEATHER**

Adverse weather conditions can lead to disruption to transport and affect staff and patient/visitor ability to travel to and from the hospital. Therefore under a Health Board wide service continuity review, an agreed outcome was that a transport coordination and communication facility be established within the Health Board immediately such conditions present.

The trigger for the establishment of the helpdesk will be when the Meteorological Office is predicting a 40% chance of snow and a protocol is attached as Appendix G identifying the actions and responsibilities necessary to ensure that the service is established effectively.

12. **FUNDING SOURCES**

The following potential funding sources for investment in sustainable transport and travel have been identified and will be pursued:

- Revenue stream – there is no budget at present and this will need Health Board commitment;
- Endowment funds – these can be legitimately used for the provision of facilities that will enhance staff or patient experience
- Sponsorship – this will be explored wherever possible although sponsors tend to want high profile areas with maximum exposure and this is not always appropriate
- Grants – certain grants are available via various agencies e.g. Councils, Regional Transport Consortia,

Other potential funding sources may include:

- Carbon management agenda on site
- Funds available through Regional Transport Consortia, connected to the Regional Travel Plan
- Safe Route to Communities (especially linking in with schools and other local community based areas) - application through the Local Authority
- Grants from the Local Authority. Areas to research might include: health, education, road safety and highways.

13. **MONITORING**

It is essential to monitor and evaluate the Travel Plan on an annual basis to ensure the following:

- The targets within the Travel Plan are being progressed or have been achieved
- Future targets reflect changes in travel behaviour (based on further surveys)

The Travel Plan will be monitored through use of an annual travel survey. The outcomes of the monitoring will be reflected in future versions of the Travel Plan.
Action Plan, and the Health Board will be kept informed of progress. Further, Annual Performance/Monitoring will be submitted to Welsh Government.

The Health Board will continue its commitment to working with key stakeholders and will share the outcome of this monitoring information.

Monitoring and trend analysis of the impact of the Travel Plan actions over the period 2009 to 2012 is contained in Appendix B.
### General Comment

The 2012 UHB Travel to Work Survey was facilitated by SEWTA and was undertaken between January and April (having been extended by one month) and was promoted across the Intranet and e-mail. Hard copies were made available at each site for those staff unable to complete on-line. The number of respondents was low despite the above interventions. Therefore the results are considered to be indicative rather than representative. The Survey has evolved over four years of use and the comments below have been made against those areas which remain directly comparable. Other detail is included for general information.

### Gender

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<th>2011</th>
<th>2012</th>
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<td>Male</td>
<td>103</td>
<td>87</td>
<td>77</td>
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<td>The split between male and female respondents reflects the proportions across the organisation as a whole - 25% male and 75% female</td>
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<td>Female</td>
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<td>239</td>
<td>191</td>
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<td>Totals</td>
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<td>326</td>
<td>268</td>
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### Do you have a disability which impacts on your travel arrangements

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<th>2011</th>
<th>2012</th>
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<tr>
<td>Yes</td>
<td>3.07%</td>
<td>4.10%</td>
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<td></td>
<td>The majority of respondents do not have a disability which impacts on their travel arrangements. Action plan addresses accessibility/equality requirements</td>
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<td>No</td>
<td>93.25%</td>
<td>91.42%</td>
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<tr>
<td>Prefer not to say</td>
<td>3.68%</td>
<td>4.48%</td>
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### Do you normally work

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<td>Normal working day (between 0800 and 1800)</td>
<td>80.98%</td>
<td>77.61%</td>
<td></td>
<td>The majority of respondents work normal office hours. Increase in &quot;Other&quot; category reflects increasing flexibility in work patterns which may be due to improved work-life balance options</td>
<td></td>
</tr>
<tr>
<td>Out of hours or night shift</td>
<td>6.13%</td>
<td>5.60%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>12.88%</td>
<td>16.79%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Distance travelled to work

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 1 mile</td>
<td>1.74%</td>
<td>4.32%</td>
<td>3.99%</td>
<td>3.73%</td>
<td>The distance travelled to work by respondents has remained similar across the monitoring period. Approximately 90% live within seven miles of UHW. Approximately 40% live within 4 miles of UHW suggesting that active travel and public transport options could generate a change in travel behaviour</td>
</tr>
<tr>
<td>1 - 2 miles</td>
<td>5.51%</td>
<td>5.59%</td>
<td>11.96%</td>
<td>9.96%</td>
<td></td>
</tr>
<tr>
<td>2 - 3 miles</td>
<td>10.16%</td>
<td>15.59%</td>
<td>12.27%</td>
<td>13.43%</td>
<td></td>
</tr>
<tr>
<td>3 - 4 miles</td>
<td>10.43%</td>
<td>12.47%</td>
<td>14.11%</td>
<td>13.43%</td>
<td></td>
</tr>
<tr>
<td>4 - 5 miles</td>
<td>7.19%</td>
<td>6.47%</td>
<td>3.68%</td>
<td>6.34%</td>
<td></td>
</tr>
<tr>
<td>5 - 6 miles</td>
<td>5.99%</td>
<td>4.08%</td>
<td>5.52%</td>
<td>4.10%</td>
<td></td>
</tr>
<tr>
<td>6 - 7 miles</td>
<td>8.13%</td>
<td>4.32%</td>
<td>5.21%</td>
<td>4.48%</td>
<td></td>
</tr>
<tr>
<td>7 - 10 miles</td>
<td>52.85%</td>
<td>11.27%</td>
<td>14.11%</td>
<td>13.43%</td>
<td></td>
</tr>
<tr>
<td>over 10 miles</td>
<td>31.89%</td>
<td>29.14%</td>
<td>29.14%</td>
<td>32.09%</td>
<td></td>
</tr>
<tr>
<td>How do you usually travel to work</td>
<td>Target</td>
<td>2009</td>
<td>2010</td>
<td>2011</td>
<td>2012</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
</tr>
<tr>
<td>Car alone</td>
<td>85.14%</td>
<td>60.43%</td>
<td>55.70%</td>
<td>54.85%</td>
<td></td>
</tr>
<tr>
<td>Car with others</td>
<td>15%</td>
<td>8.24%</td>
<td>13.19%</td>
<td>8.86%</td>
<td>8.96%</td>
</tr>
<tr>
<td>Bus</td>
<td>10%*</td>
<td>1.48%</td>
<td>7.87%</td>
<td>10.13%</td>
<td>10.07%</td>
</tr>
<tr>
<td>Bicycle</td>
<td>5%</td>
<td>2.31%</td>
<td>3.36%</td>
<td>12.34%</td>
<td>12.69%</td>
</tr>
<tr>
<td>Walk</td>
<td>5%</td>
<td>1.42%</td>
<td>8.87%</td>
<td>8.23%</td>
<td>7.46%</td>
</tr>
<tr>
<td>Motorbike</td>
<td>2%</td>
<td>0.06%</td>
<td>0.24%</td>
<td>0.63%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Train</td>
<td>10%*</td>
<td>0.08%</td>
<td>2.40%</td>
<td>4.11%</td>
<td>3.73%</td>
</tr>
<tr>
<td>Other</td>
<td>0.28%</td>
<td>3.84%</td>
<td>0.00%</td>
<td>2.24%</td>
<td></td>
</tr>
</tbody>
</table>

* Combined public transport target
Reasons for using a car:

<table>
<thead>
<tr>
<th>Year</th>
<th>Car essential for job</th>
<th>Dropping off/collecting children</th>
<th>Health reasons</th>
<th>Personal security</th>
<th>Give someone a lift</th>
<th>Lack of alternative</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>18.18%</td>
<td>19.89%</td>
<td>2.84%</td>
<td>10.23%</td>
<td>1.14%</td>
<td>37.50%</td>
<td>10.23%</td>
</tr>
<tr>
<td>2010</td>
<td>24.49%</td>
<td>19.73%</td>
<td>2.72%</td>
<td>5.44%</td>
<td>0.68%</td>
<td>38.10%</td>
<td>8.84%</td>
</tr>
</tbody>
</table>

The top three reasons for using a car have remained similar across the monitoring period. Approximately 38% cite lack of alternative and comments received refer to public transport deficiencies. This suggests that active travel and improved public transport options could generate a change in travel behaviour.

Modal Split:

- Car alone: 90.00%
- Car with others: 5.00%
- Bus: 3.00%
- Bicycle: 1.00%
- Walk: 0.00%
- Motorbike: 0.00%
The parking location has remained similar across the monitoring period. This can be influenced by external factors such as parking restrictions and the development of park and ride facilities. A major internal influence remains that parking on the UHW site is managed under contract, with car parking charges in operation.
The Action Plan aims to affect small and frequent changes in travel behaviours. These figures indicate a general positive trend towards this. The 2011 and 2012 results indicated that approximately 45% of respondents occasionally used alternative forms of transport. This indicates that there is opportunity to further influence staff travel habits.
Which of the following would encourage you to cycle to work

<table>
<thead>
<tr>
<th>Year</th>
<th>Already Cycle</th>
<th>Safer Better Lit Work Cycle Paths</th>
<th>Maps Showing Cycling Routes to Work</th>
<th>Improved Cycle Paths on Journey to Work</th>
<th>Improved Cycle Parking at Workplace</th>
<th>Workplace Showers and Changing Facilities for Cyclists</th>
<th>Workplace Lockers for Cyclists</th>
<th>Arrangements to Buy a Bicycle at a Discount</th>
<th>Promotion of Associated Health Benefits</th>
<th>Nothing</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>3.78%</td>
<td>4.98%</td>
<td>3.78%</td>
<td>8.97%</td>
<td>1.80%</td>
<td>3.06%</td>
<td>0.34%</td>
<td>0.34%</td>
<td>0.30%</td>
<td>72.77%</td>
<td>5.09%</td>
</tr>
<tr>
<td>2010</td>
<td>6.83%</td>
<td>6.44%</td>
<td>5.23%</td>
<td>12.46%</td>
<td>9.66%</td>
<td>11.06%</td>
<td>8.82%</td>
<td>8.40%</td>
<td>1.12%</td>
<td>34.45%</td>
<td>5.72%</td>
</tr>
<tr>
<td>2011</td>
<td>6.46%</td>
<td>6.25%</td>
<td>2.40%</td>
<td>13.52%</td>
<td>8.28%</td>
<td>11.77%</td>
<td>9.30%</td>
<td>9.74%</td>
<td>1.02%</td>
<td>22.97%</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>7.93%</td>
<td></td>
<td></td>
<td>11.99%</td>
<td>7.93%</td>
<td></td>
<td></td>
<td></td>
<td>0.74%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Although the percentage of respondents already cycling to work has almost doubled during the monitoring period, the factors influencing behavioural change with respect to cycling remain fairly consistent. The Action Plan addresses these priorities.
Which of the following would encourage you to walk

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Already walk</td>
<td>15.81%</td>
<td>10.79%</td>
<td>11.17%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improved layout of workplace footpaths</td>
<td>2.13%</td>
<td>1.56%</td>
<td>3.15%</td>
<td>3.15%</td>
<td></td>
</tr>
<tr>
<td>Maps showing walking routes to work</td>
<td>0.89%</td>
<td>2.92%</td>
<td>2.01%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cleaner better maintained workplace footpaths</td>
<td>0.51%</td>
<td>2.45%</td>
<td>3.15%</td>
<td>4.30%</td>
<td></td>
</tr>
<tr>
<td>Better lighting on workplace footpaths</td>
<td>2.77%</td>
<td>4.23%</td>
<td>5.62%</td>
<td>5.16%</td>
<td></td>
</tr>
<tr>
<td>More presence of security staff round site</td>
<td>2.64%</td>
<td>2.00%</td>
<td>4.04%</td>
<td>2.01%</td>
<td></td>
</tr>
<tr>
<td>More conveniently places entrances to the site</td>
<td>0.63%</td>
<td>2.90%</td>
<td>2.92%</td>
<td>2.58%</td>
<td></td>
</tr>
<tr>
<td>Road safety improvements in local area</td>
<td>1.16%</td>
<td>2.90%</td>
<td>4.04%</td>
<td>2.01%</td>
<td></td>
</tr>
<tr>
<td>Better street lighting in local area</td>
<td>0.72%</td>
<td>3.12%</td>
<td>4.27%</td>
<td>2.87%</td>
<td></td>
</tr>
<tr>
<td>Promotion of associated health benefits</td>
<td>0.67%</td>
<td>1.11%</td>
<td>0.45%</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>Nothing</td>
<td>79.01%</td>
<td>63.03%</td>
<td>46.07%</td>
<td>54.15%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>8.32%</td>
<td>12.58%</td>
<td>10.60%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Although the percentage of respondents walking to work has reduced, the factors influencing behavioural change with respect to walking remain fairly consistent. The Action Plan addresses these priorities.
Which of the following would encourage you to use public transport?

<table>
<thead>
<tr>
<th>Comment</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Already use public transport</td>
<td>6.35%</td>
<td>8.12%</td>
<td>6.98%</td>
<td></td>
</tr>
<tr>
<td>More direct bus routes</td>
<td>35.40%</td>
<td>18.07%</td>
<td>15.16%</td>
<td>16.35%</td>
</tr>
<tr>
<td>More frequent bus services</td>
<td>7.31%</td>
<td>14.90%</td>
<td>13.80%</td>
<td>15.87%</td>
</tr>
<tr>
<td>More frequent train services</td>
<td>1.98%</td>
<td>4.15%</td>
<td>6.09%</td>
<td>4.60%</td>
</tr>
<tr>
<td>More reliable services</td>
<td>4.29%</td>
<td>10.50%</td>
<td>9.74%</td>
<td>10.00%</td>
</tr>
<tr>
<td>Better lighting at bus shelters and workplace</td>
<td>0.91%</td>
<td>2.44%</td>
<td>2.44%</td>
<td>3.02%</td>
</tr>
<tr>
<td>Discount tickets and passes available at work</td>
<td>2.98%</td>
<td>13.55%</td>
<td>13.40%</td>
<td>11.75%</td>
</tr>
<tr>
<td>More convenient bus drop off points</td>
<td>1.03%</td>
<td>5.86%</td>
<td>6.22%</td>
<td>8.25%</td>
</tr>
<tr>
<td>Better bus links to site from station</td>
<td>1.19%</td>
<td>3.91%</td>
<td>5.82%</td>
<td>4.92%</td>
</tr>
<tr>
<td>Public transport information</td>
<td>0.30%</td>
<td>2.20%</td>
<td>1.89%</td>
<td>2.54%</td>
</tr>
<tr>
<td>Nothing</td>
<td>35.55%</td>
<td>18.07%</td>
<td>12.04%</td>
<td>11.27%</td>
</tr>
</tbody>
</table>

The percentage of respondents using public transport to travel to work has generally remained consistent as have the factors influencing behavioural change with respect to public transport. The Action Plan addresses these priorities.

---

**Incentives to Cycle**

- **Already cycle**
- **Safer better lit work cycle paths**
- **Maps showing cycling routes to work**
- **Improved cycle paths on journey to work**
- **Improved cycle parking at workplace**
- **Workplace showers and changing facilities for cyclists**
- **Workplace lockers for cyclists**
- **Arrangements to buy a bicycle at a discount**
- **Promotion of associated health benefits**
Which of the following would encourage you to car share:

<table>
<thead>
<tr>
<th>Option</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Already car share informally</td>
<td>10.67%</td>
<td>12.31%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Already car share through Cardiff &amp; Vale car share scheme</td>
<td>0.20%</td>
<td>0.00%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Help in finding partners with similar work patterns</td>
<td>27.77%</td>
<td>31.67%</td>
<td>12.45%</td>
<td>14.57%</td>
<td></td>
</tr>
<tr>
<td>Lift home if let down by driver</td>
<td>10.77%</td>
<td>8.33%</td>
<td>11.07%</td>
<td>12.56%</td>
<td></td>
</tr>
<tr>
<td>Reserved parking for car sharers</td>
<td>12.35%</td>
<td>28.00%</td>
<td>14.62%</td>
<td>14.82%</td>
<td></td>
</tr>
<tr>
<td>Reduced or free parking charges for car sharers</td>
<td>2.79%</td>
<td>35.00%</td>
<td>17.39%</td>
<td>15.58%</td>
<td></td>
</tr>
<tr>
<td>Nothing</td>
<td>33.77%</td>
<td>28.85%</td>
<td>30.15%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>2.96%</td>
<td>4.74%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The Action Plan addresses the priorities indicated by these results which demonstrate the opportunity to grow the UHB's car share scheme.

Incentives to Walking
Cardiff & Vale UHB has a number of initiatives to encourage sustainable travel. Which of the following are you aware of?

<table>
<thead>
<tr>
<th>Initiative</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness raising events</td>
<td>4.03%</td>
<td>5.22%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiff &amp; Vale UHB private car share group</td>
<td>18.29%</td>
<td>15.86%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active travel maps</td>
<td>3.36%</td>
<td>3.17%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cycle skills training</td>
<td>6.38%</td>
<td>10.26%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cycle maintenance sessions</td>
<td>9.40%</td>
<td>12.87%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New/improved cycle storage facilities</td>
<td>11.07%</td>
<td>10.07%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Route signing to Taff Trail from UHW</td>
<td>3.69%</td>
<td>2.61%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regular updates via intranet/ email</td>
<td>11.41%</td>
<td>9.33%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual bus pass scheme</td>
<td>10.40%</td>
<td>10.45%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pont y Werin link to Llandough</td>
<td>1.01%</td>
<td>1.87%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None of the above</td>
<td>20.97%</td>
<td>18.28%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

All of the activity undertaken on sustainable travel has had some impact. The Action Plan addresses the priorities in terms of improved communication.
Of the following 5 options which best represents your travel behaviour with respect to active travel:

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>I do not intend to change my travel behaviour in the next 6 months</td>
<td>74.58%</td>
<td>66.56%</td>
<td>69.78%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am thinking of changing my travel behaviour but not currently doing so</td>
<td>9.83%</td>
<td>15.34%</td>
<td>16.04%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have begun to change but only occasionally do so at the moment</td>
<td>5.76%</td>
<td>6.75%</td>
<td>4.48%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have begun to change but have done so for less than 6 months</td>
<td>3.36%</td>
<td>4.29%</td>
<td>4.85%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have changed my behaviour and have done so for longer than 6 months</td>
<td>6.47%</td>
<td>7.06%</td>
<td>4.85%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The percentage of respondents indicating that they have or are thinking about changing their travel behaviour has increased from about 25% in 2010 to 33% in 2011, and has remained consistent during 2012.

**Incentives to use Public Transport**
APPENDIX D

ACTION PLAN
<table>
<thead>
<tr>
<th>No.</th>
<th>Task</th>
<th>Action</th>
<th>Requirement</th>
<th>Action Lead</th>
<th>Date</th>
<th>Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Travel Planning</td>
<td>Undertake Staff Travel to Work/Car Park Surveys</td>
<td></td>
<td></td>
<td></td>
<td><strong>Travel surveys are undertaken to inform the aims of the Travel Plan. Completed 2010 using SEWTA online survey tool. Completed 2011 using SEWTA online survey tool. Completed 2012 using SEWTA online survey tool.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Undertake Patient/VisitorTravel Surveys</td>
<td></td>
<td>Patient Environment</td>
<td>On-going</td>
<td><strong>Undertaken for the first time using SEWTA online survey tool, postal survey and face to face interviews. Completed 2012.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Liaise with Cardiff Council. Involve Staff Organisations, Public Transport Operators, Patient Groups (CHC’s).</td>
<td></td>
<td></td>
<td></td>
<td>Meetings are undertaken as necessary with Councils, Operators and User/Patient on specific projects. <strong>On-going</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Undertake regular site audit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Car Sharing</td>
<td>Continue to promote and renew Health Board Car Share Scheme</td>
<td>£1,100</td>
<td>Patient Environment/Cardiff University</td>
<td>Sep-12</td>
<td><strong>Car share scheme is open to all employees via Internet. Car share scheme to be renewed for 2012-13. Cardiff Council and University have their own schemes. Car share banner produced for use at Car Share promotional events.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Liaise with Cardiff Council and Cardiff University</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Investigate possibility of dedicated parking spaces for active car sharers</td>
<td></td>
<td>Patient Environment</td>
<td>On-going</td>
<td><strong>Discussions are on-going with PFI contractor. Spaces can be made available but “policing” and cost are issues to be resolved.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Establish guaranteed ride home scheme</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Review monitoring of car share registered numbers to establish impact of marketing</td>
<td></td>
<td>Patient Environment</td>
<td>Nov-12</td>
<td><strong>This may be put in place when the above issues have been resolved. Again cost may be an issue</strong></td>
</tr>
<tr>
<td>No.</td>
<td>Task</td>
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<td>Requirement</td>
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<tr>
<td>3</td>
<td>Public Transport</td>
<td>Seek to introduce discounted bus tickets</td>
<td>Patient Environment</td>
<td>On-going</td>
<td>Salary deduction scheme in place. Completed conversion to Iff Card and on-going annually</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Explore potential for discounted annual tickets for Arriva trains Wales on Valley Line routes</td>
<td>Patient Environment</td>
<td>Oct-12</td>
<td>Completed</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop, with Council or operators as appropriate, site specific bus timetable. Timetables to be devised and distributed for any new services.</td>
<td>Patient Environment / Council</td>
<td>On-going</td>
<td>Completed – Council timetabling format has changed to include bus/rail mapping guide. These are distributed to all sites.</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>To meet at 6 monthly intervals with each of the Public Transport Operators in reviewing their existing provision of Commercial and Supported Services and in liaison with Local Councils agree any revision of services to coincide with the half yearly revised Public Transport Guides that will be produced for each major Hospital Site</td>
<td>Patient Environment</td>
<td>On-going</td>
<td>Meetings have taken place and maps/guides produced. Completed – regular meetings held Discussions on-going with Newport Bus to bring X30 service onto site</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>To explore potential to utilise Cardiff East Park &amp; Ride, and to bring further services onto site e.g. Newport Bus</td>
<td>Patient Environment</td>
<td>May-12</td>
<td>Discussions are on-going with Cardiff Council</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>To bring new services onto UHW site in liaison with local bus operators</td>
<td>Patient Environment</td>
<td>May-12</td>
<td>Discussions are on-going with Newport Bus</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Work with Sewta to promote public transport and any new service provision.</td>
<td>Patient Environment</td>
<td>On-going</td>
<td>Promotional events held during 2011-12</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>To support new services with infrastructure changes e.g. utilising alternate bus lay-by, provision of shelter</td>
<td>£2,500</td>
<td>Sep-12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No.</td>
<td>Task</td>
<td>Action</td>
<td>Requirement</td>
<td>Action Lead</td>
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<td>Update</td>
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</tr>
<tr>
<td>4</td>
<td>Cycling</td>
<td>Implement salary sacrifice scheme for assisted cycle purchase</td>
<td>Patient Environment/Human Resources</td>
<td>Jul-12</td>
<td>Following detailed research and financial advice, a scheme has been selected for Board approval. Revised completion date July 2012.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Improve cycle secure storage and changing/shower facilities</td>
<td>Patient Environment</td>
<td>On-going</td>
<td>Additional storage provided by Cardiff University at new Cochrane Building.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Promote travelling expense incentivisation for cyclists</td>
<td></td>
<td></td>
<td>This will be clarified in relation to the launch of the Salary Sacrifice Scheme.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>In partnership with Sustrans Cymru, improve internal and external signage of safe cycle routes and develop safe cycle route maps</td>
<td>Patient Environment/Sustrans Cymru</td>
<td>Jul-11</td>
<td>Route signing completed for routes to and from the Taff Trail. Maps produced covering UHW, Whitchurch, Rookwood, and UHW, CRI &amp; St Davids. Completed.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Offer cycle skills training and maintenance via CTWales. No funding available for on-going dedicated training provision. Apply for Sewta Grant</td>
<td>Patient Environment</td>
<td>Jul-12</td>
<td>Basic cycle maintenance demo undertaken as part of “Bike to Work Week”. Completed. Cycle training &amp; maintenance sessions undertaken for UHB staff Sept 2011.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Work with Sustrans Cymru to promote cycling</td>
<td>Patient Environment/Sustrans Cymru</td>
<td>On-going</td>
<td>Number of cycle promotional events held in Concourse as part of on-going project. Completed and on-going. Collaboration with Health &amp; Wellbeing Group.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consider initiatives to promote and facilitate active travel in support of obligations placed upon Cardiff Council under the Active Travel (Wales) Bill</td>
<td>Patient Environment</td>
<td>Mar-13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No.</td>
<td>Task</td>
<td>Action</td>
<td>Requirement</td>
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<td>Date</td>
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<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td>5</td>
<td>Powered Two Wheelers (Motorbikes)</td>
<td>Review on-site motorcycle parking facilities</td>
<td>Patient Environment / Estates</td>
<td>On-going</td>
<td>Enclosed compound for cycle/motor cycle storage. <strong>Completed</strong> – Autumn 2010</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Walking</td>
<td>Review of site walking facilities</td>
<td>Patient Environment / Estates</td>
<td>On-going</td>
<td>Review of walking facilities undertaken as part of site audit. Route signing completed for routes to and from the Taff Trail. Walking routes maps produced covering UHW, Whitchurch, Rookwood, and UHW, CRI &amp; St Davids <strong>Completed</strong>.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop plan detailing walking routes to site and improve signage/lighting</td>
<td>Patient Environment</td>
<td>On-going</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Work with Sustrans Cymru to promote walking</td>
<td>Patient Environment / Sustrans Cymru</td>
<td>On-going</td>
<td><strong>Completed</strong> - Number of walking promotional events held in Concourse as part of on-going project. Travel champion training undertaken Sept 2010 Collaboration with Health &amp; Wellbeing Group</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Seek to establish a walking “buddy” system</td>
<td>Patient Environment / Facilities</td>
<td>Sep-12</td>
<td>Under review as part of the Sustrans project. Also linked to Health and Wellbeing Group. Option to manage under the car share scheme but funding implications Collaboration with Health &amp; Wellbeing Group</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consider initiatives to promote and facilitate active travel in support of obligations placed upon Cardiff Council under the Active Travel (Wales) Bill</td>
<td>Patient Environment</td>
<td>Mar-13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No.</td>
<td>Task</td>
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</tr>
<tr>
<td>7</td>
<td>Communication</td>
<td>To develop a Communication/Marketing Action Plan for all aspects of improving publicity and arrangements to existing and future staff, patients and their visitors</td>
<td>Patient Environment</td>
<td>Oct-12</td>
<td>A resource of promotional/marketing material has now been established including promotional banners for Car Sharing, Cycle Skills, Cycle Maintenance and Sustainable Travel and Transport. Given the progress now achieved, communication plan to be implemented. Revised target date Oct 2012</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>To maintain an up to date Transport &amp; Travel Web Page as part of the Patient Environment Department Web Site</td>
<td>Patient Environment</td>
<td>On-going</td>
<td>Intranet page regularly updated but currently under review to reflect organisational changes and travel opportunities Revised target date - August 2012. Travel plans also available via Environmental Management intranet page</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Car Parking</td>
<td>Improve new starter induction information</td>
<td>Patient Environment / OD&amp;T</td>
<td>Sep-12</td>
<td>HR have moved to on-line induction programme and meeting arranged to establish transport/travel links <strong>Completed</strong> – Travel Alternatives flyer provided to all new starters</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Equality</td>
<td>Undertake Equality Impact Assessment</td>
<td>Patient Environment</td>
<td>Mar-13</td>
<td>Following the issuing of staff questionnaires that link to the sustainable travel plan the UHB in collaboration with Vinci Park Cardiff and Cardiff University implemented a re-permitting exercise for the allocation of permits to park on site at the University Hospital of Wales. This was completed in October 2011 and is under constant review</td>
<td></td>
</tr>
</tbody>
</table>
REFORM OF CAR PARKING IN NHS HOSPITALS

1. BACKGROUND

At University Hospital of Wales parking is managed through a PFI agreement with Vinci Park which runs until 2018. A paper to the former Management Board (March 2005) outlined the growing problems faced on all hospital sites due to too many cars attempting to park during the peak hours for the spaces available. This situation resulted in significant congestion on some sites, roadways and building access blocked for emergency vehicles due to indiscriminate parking, damage to the grounds and gardens and major frustration for individuals who could not find parking spaces.

Based on the former Trust Transport and Travel Strategy agreed in 2003, the Management Board agreed on the:

- Introduction of charges on all former Trust sites during 2005/6.
- Use of increased income to fund the introduction of car parking management improvements including security patrols, CCTV, car parking information, signage etc.
- Staff permit system to manage access to limited spaces across the former Trust.
- Introduction of a penalty notice system.

By 2007/8, in partnership with stakeholders including staff side, all sites with the exception of St David’s had fully implemented a permit and charging system. Site access was significantly improved, with no complaints received from emergency services and a negligible number from staff and patients in the last two years.

2. WHC (2008) 011

WHC (2008) 011 notified the NHS in Wales of the new arrangements for car parking in NHS hospitals. In addition to introducing free car parking at all NHS Hospital sites without private contracts for patients, staff and visitors from 1st April 2008, it instructed Trusts to develop plans to reduce parking charges for those sites where external contracts are in place, and to prepare plans to encourage a reduction in the car usage of patients, visitors and staff.

3. CURRENT SITUATION

Access to sites, maintaining traffic flow and ensuring the provision of spaces for staff, visitors and patients has been the main basis of action to date. With removal of charges on 1st April 2008 at sites other than UHW, operational management of parking has been founded on:

- Ensuring sites do not become congested.
- Maintaining access to buildings/loading and delivery bays.
- Maintaining access for emergency vehicles (especially the Fire Service).
- Ensuring patients and visitors retain the opportunity to park on hospital sites.
- Ensuring staff parking is available for those with permits.

At the UHW there has been no significant change. Status quo arrangements continue to be applied via Vinci Park management who continue to be responsible for
on-site traffic management and control within the parking zones and car parks, of all
car parking by visitors, in-patients, out-patients, the disabled, resident and non-
resident staff, visiting staff, all motor cycle facilities and taxi rank parking. They are
responsible for the management of these car parks and any associated signage.
However, it should be noted that Vinci Park are only responsible for security, lighting
and CCTV within the Multi-Storey and Single Storey Car Parks on site. This
responsibility within the surface car parks remains with the Health Board.

In order to effectively manage the implications of WHC (2008) 011, a range of
medium / longer term proposals are being developed/implemented. These include:

- Loss of Revenue – the Health Board has agreed in its budget plan to continue
to cover the loss of revenue from car parking from internal cost reduction
schemes to enable active management of car parking to continue at UHW,.
- Communication – regular staff updates continue to be provided using the
existing Health Board communications network including the Health Board car
parking web page.
- Permits – In order to manage demand, a UHW permit re-issue exercise using
stricter criteria for allocating car parking permits to staff was undertaken in
2011.
- Sustainable Travel – initiatives contained in the Travel Plan to be
implemented across the Health Board via Sustainable Travel Group. A leaflet
containing sustainable transport options has been developed and was
distributed with letters informing staff of the outcome of the UHW parking
permit re-issue.
- Fly Parking – at present there is little evidence that this is a significant issue
on the UHW site. Existing monitoring arrangements remain in place.
- Parking Charge Notices – Vinci Park is not obliged to provide this information
under the terms of the Health Board’s legal agreement with them and they
have declined to provide information on the basis that it is “Commercial in
Confidence”. However, Vinci Park does operate a prescribed process which
includes an appeals mechanism, and is flexible in relation to genuine
extenuating circumstances, such as emergencies. Their approach to illegal
and unsafe parking is rigorously enforced, with the full support of the Health
Board. Vinci Park has not changed their procedures or approach since WHC
(2008) 011, and there is no evidence that the level of ticketing has increased
inappropriately.
- Current Car Park Charges

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<tbody>
<tr>
<td>Staff</td>
<td>Up to 12 hours</td>
<td>£1.05</td>
</tr>
<tr>
<td>Residents</td>
<td>Up to 24 hours</td>
<td>£1.05</td>
</tr>
<tr>
<td>Visitors</td>
<td>Up to 4 hours</td>
<td>£2.20</td>
</tr>
<tr>
<td></td>
<td>Up to 5 hours</td>
<td>£3.40</td>
</tr>
<tr>
<td></td>
<td>Up to 6 hours</td>
<td>£5.60</td>
</tr>
<tr>
<td></td>
<td>Up to 8 hours</td>
<td>£6.70</td>
</tr>
<tr>
<td></td>
<td>Up to 10 hours</td>
<td>£8.80</td>
</tr>
<tr>
<td></td>
<td>Up to 24 hours</td>
<td>£10.00</td>
</tr>
</tbody>
</table>
University Hospital of Wales, Cardiff

Car Park
Tariff, Permit & Dispensation
Summary
Version 18

in Partnership with

VINCI PARK

NHS Wales GIG CYMRU
## INTRODUCTION

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<table>
<thead>
<tr>
<th>INTRODUCTION</th>
<th>CAR PARK MAP</th>
<th>CAR PARK OVERVIEW</th>
<th>VISITOR PARKING</th>
<th>STAFF PARKING</th>
</tr>
</thead>
<tbody>
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<td>3</td>
<td>4</td>
<td>5</td>
<td>8</td>
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</table>

### CAR PARK OVERVIEW

<table>
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<tr>
<th>VISITOR PARKING</th>
<th>STAFF PARKING</th>
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### VISITOR PARKING

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<tr>
<th>STAFF PARKING</th>
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<td>13</td>
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### STAFF PARKING

<table>
<thead>
<tr>
<th>SPECIAL ARRANGEMENTS IN FORCE:</th>
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<tr>
<td>14</td>
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</table>

### SPECIAL ARRANGEMENTS IN FORCE:

<table>
<thead>
<tr>
<th>VISITOR PASSES FOR CARDIGAN HOUSE SPECIAL GUESTS CAR PARK 17.</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
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</table>

### VISITOR PASSES FOR CARDIGAN HOUSE SPECIAL GUESTS CAR PARK 17.

<table>
<thead>
<tr>
<th>SPECIAL CONCESSIONARY PERMIT CARDIGAN HOUSE CAR PARK 17.</th>
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### SPECIAL CONCESSIONARY PERMIT CARDIGAN HOUSE CAR PARK 17.

<table>
<thead>
<tr>
<th>PARKING DISPENSATIONS NOT COVERED BY MAIN STAFF PERMITS</th>
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<tr>
<td>16</td>
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</table>

### PARKING DISPENSATIONS NOT COVERED BY MAIN STAFF PERMITS

<table>
<thead>
<tr>
<th>ACCIDENT AND EMERGENCY</th>
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<tr>
<td>18</td>
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### ACCIDENT AND EMERGENCY

<table>
<thead>
<tr>
<th>CONTRACTOR PARKING</th>
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<td>19</td>
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### CONTRACTOR PARKING

<table>
<thead>
<tr>
<th>SPECIAL EVENTS PARK AND RIDE (FOOTBALL, RUGBY AND CONCERTS)</th>
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</table>

### SPECIAL EVENTS PARK AND RIDE (FOOTBALL, RUGBY AND CONCERTS)
Introduction

These Guidelines set out the procedures and administration for tariffs, dispensations and permits at the University Hospital of Wales, Heath Park, Cardiff site. It is intended to set out and give guidance on best practice within VINCI Park Cardiff Ltd (“VINCI Park”).

The provisions of these guidelines shall be binding on and enforceable against all employees and agents of VINCI Park and shall be deemed to be incorporated in the Terms and Conditions of employment of all VINCI Park employees.

VINCI Park reserves the right to amend and vary these guidelines as and when reasonably required.

Reference can also be made to the Car Park Terms & Conditions, Civil Penalty Notice Procedures & Code of Practice and Car Park Charter, details of which are available on request from the Parking Shop located in CP9 or in writing to:

The Car Park Manager
VINCI Park Cardiff Ltd
University Hospital of Wales
Heath Park
Cardiff
CF14 4XW.

This version of the document will be made available in Welsh when agreed.

Any request from or on behalf of the Trust to vary this Summary & Guidelines must be made in writing by the Trust, setting out the reasons behind such request for variation, so as to allow VINCI Park to properly evaluate such request.
UHW Staff & Visitors please note:
This site is a paid parking site.

**Pay & Display**
Please find a space before purchasing a payment ticket.

**Pay on Foot**
Please keep your ticket with you and pay at the pay station before returning to your vehicle.

Ensure that you are parking in the appropriate car park.

Park within marked bays only.

Disabled bays are available throughout the UHW site.

Hospital Staff must display a valid Permit & Payment at all times.

Failure to pay the required parking charge will result in a Civil Penalty Notice being affixed to the vehicle.
Car Park Overview

The agreement between the Trust and VINCI Park provides that VINCI Park are responsible for the management and control, within the Parking Zones and Car Parks, of all car parking by visitors, in-patients, out-patients, the disabled, resident and non-resident Staff, visiting Staff, all motorcycle facilities and taxi rank parking. VINCI Park is responsible for all the administration of these car parks and any associated signs etc.

VINCI Park manages 23 car parks at the University Hospital of Wales. 21 of these are open surface car parks, 1 is multi-storey and 1 has two levels. These Car Parks are divided between Public and Staff Parking with some having combined usage.

Civil Penalty Notices are issued for a range of offences such as illegal parking, non-payment, parking in the incorrect car park etc. For further details are available in the document “Penalty Notices – Frequently Asked Questions”.

In total 3,002 Parking spaces should be available as:

Visitor spaces - set by the Car Park Management Agreement at 1,180.

Staff (including Student) spaces - set by the Car Park Management Agreement at 1,770.

Drop Off, Ambulance & Taxi spaces - set by the Car Park Management Agreement at 52.

There are 30 Drop Zones with a 20 minute limit situated around the hospital in various locations to allow Staff / visitors and engineers to unload or load up.

Hackney Cabs / Taxi Ranks (4 spaces provided in CP 10).

Disabled (Blue Badge) Parking

There are 144 disabled Car Park Spaces located in selected Car Parks, the majority of which are situated within visitor Car Parks. Disabled drivers are required to pay for parking at the duly relevant applicable tariff. As car parks are re-lined these spaces are being widened and clearly designated for Blue Badge holders only.

Staff must register their disability with the Trust’s car park office at Llandough hospital who will request from VINCI Park that a disabled space within the closest Car Park to their work place can be made available and that the member of Staff can be issued with a Staff disabled Permit (see Staff Permit Categories below). For the avoidance of doubt, the number of Staff Spaces allocated by agreement with the Trust shall include any disabled spaces made available to Staff disabled Permit holders.
## Car Park Allocation:

<table>
<thead>
<tr>
<th>Car Park</th>
<th>Car Park Users</th>
<th>Blue Badge Spaces</th>
<th>No. of payment machines in Car Park</th>
<th>Machine Payment Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Visitor</td>
<td><img src="image" alt="Blue Badge" /></td>
<td>1</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>2</td>
<td>Staff</td>
<td><img src="image" alt="Blue Badge" /></td>
<td>1</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>3</td>
<td>Staff</td>
<td></td>
<td>1</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>4</td>
<td>Staff</td>
<td></td>
<td>1</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>5</td>
<td>Visitor</td>
<td><img src="image" alt="Blue Badge" /></td>
<td>1</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>6</td>
<td>Staff</td>
<td></td>
<td>1</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>7</td>
<td>Staff</td>
<td></td>
<td>NONE</td>
<td>NONE</td>
</tr>
<tr>
<td>8</td>
<td>Night Staff</td>
<td>Visitor</td>
<td>2</td>
<td>POF</td>
</tr>
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<td>9</td>
<td>Staff</td>
<td>Visitor</td>
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<td>POF</td>
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<td>10</td>
<td>Visitor</td>
<td></td>
<td>1</td>
<td>P &amp; D</td>
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<tr>
<td>11</td>
<td>Visitor</td>
<td><img src="image" alt="Blue Badge" /></td>
<td>2</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>12 A &amp; E</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>13</td>
<td>Staff</td>
<td></td>
<td>2</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>14</td>
<td>Staff</td>
<td></td>
<td>2</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>15</td>
<td>Staff</td>
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<td>P &amp; D</td>
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<tr>
<td>16</td>
<td>Staff</td>
<td></td>
<td>1</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>17</td>
<td>Staff</td>
<td><img src="image" alt="Blue Badge" /></td>
<td>1</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>18</td>
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<td></td>
<td>1 (Closed for construction)</td>
<td>P &amp; D</td>
</tr>
<tr>
<td>19</td>
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<td>P &amp; D</td>
</tr>
<tr>
<td>20a</td>
<td>Staff</td>
<td></td>
<td>NONE</td>
<td>NONE</td>
</tr>
<tr>
<td>21</td>
<td>Staff</td>
<td></td>
<td>NONE (Closed for construction)</td>
<td>NONE</td>
</tr>
<tr>
<td>22</td>
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</tr>
<tr>
<td>23</td>
<td>Staff</td>
<td></td>
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</tbody>
</table>
Methods of Operation

The multi-storey Car Parks (Car Park 8 & Car Park 9) operate Pay on Foot Systems (POF).

A limited number of car parks are Permit Only where pre-paid Staff permits or local permits are displayed, for example in the Dialysis area.

All other Car Parks operate Pay and Display Systems (P&D)

To accommodate the dual use of the car parks, two tariffs are in operation, one for Staff and one for visitors. These tariffs are laid out in the Car Park Management Agreement and are not determined by VINCI Park, other than as set out in that agreement. Tariffs are reviewed annually under the terms of the Car Park Management Agreement.

Staffs, and those directly associated with the Hospital, are able to pay for parking by a number of methods and permits designate areas where they can park. These will be fully outlined later. Staff can park in public areas but only on payment of the normal visitor tariff.

As part of the management of the Car Parks VINCI Park issue Civil Penalty Notices (CPN). Full details are outlined in VINCI Park’s Civil Penalty Notice Procedures & Code of Practice.

The Parking Card

The on site parking equipment provides the opportunity for greater flexibility in payment methods. Central to this is the Parking Card, a microchip reusable plastic card that holds all the information necessary to facilitate parking at the UHW. This card is available to users of CP9 who pay by Staff Salary deduction and can be obtained (with a £5 refundable deposit) by night users of CP8 & 9 and those Staff who wish to use the card to facilitate paying for parking in other car parks. The card can be “topped up” via the Pay on Foot Machines, the Pay and Display machines and via the Parking Shop.
Visitor Parking

Car Parks 1, 5, 8, 9 and 10 are designated for Visitor Parking. All visitor parking is charged at the relevant tariff. Car Parks for visitor use are clearly marked to assist the public. Payment is via pay and display in the surface Car Parks or Pay on Foot in Car Park 8 & Car Park 9.

Additionally, there are visitor Car Park areas adjacent to clinics situated within Staff Car 15, (visitor tariff is provided.)

Visitor Tariffs (from April 1st 2007):

- Up to 4 Hours £ 2.20
- Up to 5 Hours £ 3.40
- Up to 6 Hours £ 5.60
- Up to 8 Hours £ 6.70
- 8 to 10 Hours £ 8.80
- Up to 24 Hours £10.00

(Note, visitors will be allowed a grace period of 10 minutes either side of the normal paid for period.)

Whilst there are dedicated areas conveniently situated for Disabled visitors (Blue Badge Holders) parking in these areas is not free and is chargeable at the appropriate rate.

In addition to using Pay & Display and Pay on Foot facilities, visitors to the Hospital may purchase an Alpha Pass if they are attending for extended treatment or are visiting for an extended period. Being in possession of a pass does not guarantee that a space will be available.
Arrangements for Long-term Visitors (Alpha Pass)

An Alpha Pass can be issued for use within all of the visitor Car Parks at the UHW. In order to qualify for an ALPHA PASS, patients will be required to apply at the Parking Shop where the Alpha Pass will be issued on production of the applicable appointment card. Relatives will be required to bring to the Parking Shop evidence of eligibility (e.g. a letter from the hospital department) before an ALPHA PASS can be provided.

Patients attending for an extended period of treatment or Relatives visiting for an extended period (being for a continuous period of 48 hours or over up to a maximum of 7 days) will be able to purchase an Alpha Pass.

Holders of an ALPHA PASS will be able to use any visitor Car Park. The card will allow access to Car Parks 8 & 9 and will take the place of a Pay and Display ticket in other car parks.

Purchases of an ALPHA PASS are subject to the provisions as detailed below.

An ALPHA PASS will be charged at the following rates

- Days 1 to 14 £3.00 per 24 Hours
- Days 15 to 28 £2.00 per 24 Hours

- The pass can initially be purchased for between 1 and 7 consecutive days and then renewed as required. After being renewed for up to 14 consecutive days the lower tariff applies.

- Refunds for unexpired time will not be offered on any ALPHA PASS issued.

- ALPHA PASSES are non-transferable.

- Lost or materially damaged ALPHA PASSES will not be refunded unless caused by equipment failure.

- No ALPHA PASS may be purchased in retrospect.

- Car Park signs advise visitors to visit the Parking Shop for details of long-term parking.
Staff Parking

Staff may park in dedicated Staff Car Parks and in the mixed-use areas. Being in possession of a permit for a particular area does not guarantee that a space will be available. In the event of all Staff spaces being full and a member of Staff using a Visitor space then the full relevant visitor fee (see visitor tariffs) is payable.

The issued Permit only allows parking in the car park(s) shown on the permit. In the event of all spaces being taken other staff car parks cannot be used as this deprives those staff of their correct parking place.

Staff are required to purchase a pay and display ticket from a machine within the designated surface Car Parks at the Staff rates applicable (see below). Pay and display tickets are transferable to other Staff Car Parks provided that the ticket is valid and within the permitted time period. Staff experiencing difficulties with pay and display machines should report the failure to VINCI Park. An arrow will indicate the nearest pay and display machine and the Parking Shop contact number will be displayed to report problems. Should the machine fail to produce a ticket or have problems with accepting the money, Staff are requested to obtain a Pay and display ticket from the nearest machine. Failure to comply with this instruction may result in the issuing of a CPN for non-display of a valid parking ticket.

Additional Notes:

**Car Park 20a (2 Hour Short Term)**
Provided primarily as a Drop Off or Pick Up point, Staff must have a valid Staff parking ticket or pre-paid Permit and move to another designated Car Parks within the 2 hour time period.

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**Staff Tariffs and Payment Methods:**

- **12 Hours** £1.05 per 12 hour period – purchased from the P&D.

- **24 Hours (Residents)** £1.05 per 24 hour period – purchased from the P&D.

- **Beta Card (S)** £24.50 per calendar month – prepaid continuously through the Trust by Salary deductions - **unlimited visits in any 24 hour period in Car Park 9** - non refundable. The card will remain valid whilst salary deductions continue. The first card will be issued free for existing users but any replacement will require a £5 (refundable) deposit unless that cad has a technical problem. In the event of long-term sickness or absence from the Hospital these payments can be suspended and credit held pending a return to work.
• **Beta Card** (V)  Initial card £24.50 – Available to Essential Users and initially prepaid in full through the Parking Shop – can then be topped up through the Parking Shop or Pay on Foot machines - the card will initially be valid for 25 visits and offer unlimited entries in any 24 hour period in Car Park 9 for Staff who frequently travel on and off site. A £5 (refundable) deposit will be required.

• **Sigma Card**  Initial card £20.00 – prepaid in full through the Parking Shop - can then be topped up through the Parking Shop or Pay on Foot machines or Pay on Foot machines. 20 visit (12hr) card for parking in Car Park 9 and is also available to those Staff who park in Car Park 8 & 9 between 5pm and 6am. This card will be issued to authorised individuals (1st card issued without requiring a deposit for existing daytime users of Car Park 9, but users wishing to park in Car Park 8 or 9 between 6pm and 6am, or any replacement will require a £5 (refundable) deposit).

• **Pre-Pay Card**  Initial card £20.00 – 20 visit (12hr) card for parking in Pay & Display Car Parks, not time limited, card can be topped up via the Parking Shop, Pay on Foot machines or P&D machines. A £5 (refundable) deposit will be required.

• **Pre-Pay Card (Resident)** £20.00 – 20 visit (24hr) card for parking in Pay & Display Car Parks, not time limited, card can be topped up via the Parking Shop Pay on Foot machines or P&D machines. A £5 (refundable) deposit will be required.

If any Staff card is used in a Non-Staff car park or in Car Park 8 & 9 outside the agreed hours the full visitor tariff will be deducted.

**Note:** Residents may park in CP 14, 15, 16 & 18 only:

Note, All Staff will be allowed a grace period of up to 3 hours either side of the normal paid for period, except for use of Car Park 8, where a grace period of only 1 hour will apply as from 9.00 am.

1. Entrance to Staff parking areas within Car Park 8 & 9 (Essential Vehicle Users only for Car Park 9) is only possible with the use of a Staff Parking Card. This card will be issued to authorised individuals, the 1st card issued without requiring a deposit for existing daytime users of Car Park 9, but users wishing to park in Car Park 8 or 9 between 5pm and 9am or any replacement will require a £5 (refundable) deposit unless the card is being replaced through technical failure.

2. The Parking Card must be carried to exit Car Park 8 and 9. In the event of Staff not having their card then VINCI Park reserve the right to charge the Full Visitors tariff or the fee for Agency Staff, free exits will not be allowed.

3. Staff parking within Car Park 8 is restricted to between the hours of 5.00 pm and 9.00 am.

4. All Staff parking in the Multi-Storey Car Park is from level 3a and upwards. Staff who park below these levels may attract a Civil Penalty Notice.
5. All passes are non transferable and are not refundable. (Except for Beta Card (S) when Staff have sickness leave for a complete calendar month - verifiable in writing by the Trust.)

6. All passes are reusable.

7. Prior to or at the expiry of a Beta (V) or Sigma Card, the card should be taken to the Parking Shop, Pay and Display or Pay on Foot machines to be topped up.

8. Lost or materially damaged passes will be replaced on deposit of £5.00 (refundable) unless caused by VINCI Park equipment failure.

9. When all Staff spaces in Car Park 8 or 9 become full and Staff wishes to exit the Car Park within 10 minutes of entry, then Staff will not be charged for that visit.

10. No passes may be purchased in retrospect.
Staff Permit Categories

Qualifying Staff will be issued with a Staff Permit. A single standardised Permit will be issued which will display the Type of Permit, a Vehicle Registration Mark and Car Parks permitted. It should be noted the VINCI Park produce the permits but the determination of which car park is allocated is solely a Trust responsibility through the Car Park office at Llandough.

It should be noted that the Car Park allocation on the Permit is in force 24 hours a day. If late working/overnight staff park in Car Park where they do not have a Permit then, with day staff arriving early, there is the potential to deprive a Permit Holder for that car park of a space. Unless for a genuine clinical need (see Emergency Staff on Call) Permit holders should park in their allocated car park. If out of hours access is needed for dropping off, etc. then the Permit Holder is requested to call the Parking Shop to advise where they are parked to avoid a Penalty Notice.

Key Permit groups:

<table>
<thead>
<tr>
<th>CODE</th>
<th>Category</th>
<th>Areas Allowed</th>
</tr>
</thead>
<tbody>
<tr>
<td>GEN</td>
<td>General Parking</td>
<td>2,3,4,6,13,14,15,16,18,22,23</td>
</tr>
<tr>
<td>ESS</td>
<td>Essential User</td>
<td>7,9,17</td>
</tr>
<tr>
<td>RES</td>
<td>Resident Community</td>
<td>14,15,16,18</td>
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<tr>
<td>CM</td>
<td>Midwife</td>
<td>Midwife Zone</td>
</tr>
<tr>
<td>SAS</td>
<td>Sport &amp; Social</td>
<td>Evenings &amp; Weekends</td>
</tr>
<tr>
<td>SC</td>
<td>Special Category</td>
<td>Biochemistry, Pharmacy, On-Call</td>
</tr>
<tr>
<td>CS</td>
<td>Car Share</td>
<td>9</td>
</tr>
<tr>
<td>DIS</td>
<td>Disabled</td>
<td>Designated car park</td>
</tr>
<tr>
<td>HV</td>
<td>Trust Vehicle</td>
<td>2,3,4,6,13,14,15,16,17,18,22,23</td>
</tr>
<tr>
<td>CT</td>
<td>Contractors</td>
<td>Appointed Area</td>
</tr>
</tbody>
</table>
• Permits do not guarantee that a Staff space will be available.

• Permit holders must pay for parking at the published Staff tariff.

• General Permit and Essential User Permit holders who currently pay though salary deductions will continue to do so and the pre-payment will show on the Permit.

• Essential User Permit holders must purchase either a Beta or Sigma Card for use in Car Park 9. No daily purchases are available.

• VINCI Park reserves the right to offer a limited number of General Staff Parking users a Sigma Card for use in Car Park 9. No daily purchases are available. The card will require a £5.00 (refundable) deposit.

• If a permit holder cannot find a space a limited number of spaces in car park 9 are available with a daily charge of £3, staff must report to the Parking Shop on their arrival in car park 9 to pay the fee. This space availability is at VINCI Park’s discretion and the requirements of visitors and patient parking will be the priority at busy times.

Special Arrangements in force:

Children’s Hospital for Wales

VINCI Park will provide up to 10 passes for those attending the CHfW for an extended period this arrangement to be reviewed periodically, VINCI Park reserve the right to withdraw this concession with one months notice.

Maternity Unit

CP20a is available and on display of a VINCI/UHW pass midwives can use the Bus Stop/Drop Zone and the 4 allocated spaces.

Dialysis Unit

Passes are issued by this Unit to control parking
Visitor Passes for Cardigan House Special Guests Car Park 17.

The attached Permit may only be used for occasional special guests attending the management suite at Cardigan House; all other visitors must use the visitor Car Parks.

When a Permit is issued the appointed signatories must inform the Parking Shop of the issue so as to have this entered into the daily logbook. Visitors will be required to purchase a Staff parking ticket at the 12 hourly Staff rate applicable for the duration of their visit.

Official Signatories are:

Chief Executive’s Office: The College of Medicine:
Barbara Plummer Dr C. Turner
Barbara Pemberton Professor Tomlinson

Special Concessionary Permit Cardigan House Car Park 17.

In order to provide for special visitors to the management suite at Cardigan House the following arrangements are in operation:

A Daily Staff Permit can be issued (dependent on space availability) to authorised signatories to allow such visitors to park in Car Park 17 provided they Pay and Display the full relevant visitor tariff.
Parking Dispensations Not Covered By Main Staff Permits

Agency and Associated Trust Staff

Agency Staff, Associated Trust Staff (from other Cardiff & Vale Trust sites and other Trusts), Bank Staff and Locum Staff working at the Hospital may park in Car Park 9 staff allocated spaces at a discounted rate of £3 per 12 Hour period. To obtain this discount rate they must take suitable proof of identity when they arrive at the car park to the Parking Shop where their ticket will be validated to obtain the discounted rate. They will then need to take this ticket to a Pay on Foot machine to pay the required amount when they leave. Tickets that are not validated on arrival will be charged at the visitor rate.

Failure to obtain validation for the discounted rate will render the Staff liable to pay the full relevant visitor tariff.

Emergency Staff on Call (please note that this does not include rostered shifts)

Staff who are called in from home or from another hospital site whilst on call should ideally park in an allocated Staff space.

In an emergency Staff may park in drop zones or car park areas close to their facility. No payments will be necessary although contact should be made with the Parking Shop to inform them of the location, registration number and department being attended.

If attending the emergency precludes contact being made and a Civil Penalty Notice is issued contact must be made with the Parking Shop within 48 hours fully explaining the situation.

Staff are requested not to ignore the Civil Penalty Notice but to contact VINCI Park directly.
Resident Staff on Call within the Hospital

Staff that are required to work long shifts, where they are on call in their place of work, do not qualify as Staff on Call and must park in their respective Staff Car Park.

The following procedures are to be adopted when medical Staff are working long shifts within the hospital:

Staff who would normally pay for a 12-hour ticket would need to buy a second ticket to cover a long shift up to 24 hours.

Those who would normally buy a 24-hour ticket (Residents) would need 2 tickets to cover a shift that lasts longer than 24 hours.

Note, All Staff will be allowed a grace period of up to 3 hours either side of the normal paid for period, except for use of Car Park 8, where a grace period of only 1 hour will apply as from 6.00 am.

Specialist Part Time Staff and Voluntary Workers.

Specialist Part Time Staff and Voluntary Workers working at the Hospital may, by prior arrangement with VINCI Park, park in Staff allocated spaces in the Multi-Storey Car Park (Car Park 9) having purchased a Sigma Card. This card will be issued by VINCI Park to authorised individuals but will require a £5 (refundable) deposit. Specialist Part Time Staff being those, such as Pharmacists, who work a fixed roster e.g. 1100 to 1900 and require a Staff parking space.

Where Staff allocated spaces are not available and as a result the vehicle has to be parked in a visitor space then the full relevant visitor tariff will apply.

Reserved Spaces for Conferences & Functions

Specific Functions and Conference etc. held at the UHW may require reserved parking spaces. To this end VINCI Park will endeavour to provide up to a 100 Visitor spaces within Car park 9 (in so far as it is reasonable to do so and dependent on space availability) when required.

At least 2 weeks notice is required (application must be made directly to the VINCI Park Manager) and the tariffs charged for such events will be @ £3.00 per vehicle per 24 Hours for short functions etc. (up to 2 weeks). Pre-paid tickets will be issued to the organiser by VINCI Park and invoiced accordingly. The invoice must be paid for in full before the start of the conference. Refunds are not available.

Where all allocated spaces have been reserved and as a result the vehicle has to be parked in a visitor space then the full relevant visitor tariff will apply.
**Accident and Emergency**  
*(Car Park 12)*

This area is reserved for Emergency Vehicles consisting only of:

**AMBULANCES**  
*Ambulances once having discharged their patients and moved away from the hospital entrance should park in the Emergency Vehicles waiting area.*

**POLICE VEHICLES**  
Official marked police vehicles only; all other vehicles must park in a visitor’s Car Park and pay the applicable visitor tariff.

**FIRE TENDERS**  
In attendance.

**TRUST SECURITY VEHICLE**  
In connection with its duties.

**CAR PARK DROP ZONE SPACES**  
To drop off or pick up the infirm only.

After a 20-minute period vehicles must be relocated to a visitor’s Car Park and pay the applicable visitor tariff.
Contractor Parking

All contractors engaged on civil works contracts with the Cardiff and Vale NHS Trust and Cardiff University (CU) must be fully advised of the Parking Regulations in operation at the University Hospital of Wales.

It is incumbent upon all contractors that, where appropriate, they inform their respective sub-contractors of these regulations.

Under no circumstances should contractors utilise Staff Car Parks.

Contractors parking in visitor spaces may, if agreed in advance (minimum 2 weeks prior notice), be offered a maximum of 2 spaces at the rate of £5.00 per 24 hour period, for a maximum period of 4 weeks, to be invoiced and paid in full in advance. No refunds are available. The contractor vehicles will need to be clearly identified and registered with VINCI Park prior to the contract commencement and VINCI Park will issue Permits for each vehicle properly registered.

Contractors who require off-loading of materials or equipment near to their place of work must contact VINCI Park for permission to park for the required period. All special requirements must be discussed with VINCI Park and provided agreement is reached, they will be issued with special Permits to park during the agreed stated period.

Contractors who have been given a works compound may park vehicles within that compound area without payment providing that all vehicles are kept within the limits of that area.

All contractors must ensure that at no time do they or their sub contractors block or obstruct the roadways or any access to the Car Parks or emergency entrances or exits.

The use of part of any visitor Car Park as contract compounds for contractors must first be agreed in advance with VINCI Park. The Trust/CU must enter into discussion with VINCI Park for the use of such facilities and obtain permission prior to the tender stage of new contracts. It is recommended that the Trust and CU should ensure that the tender documentation inviting bids from contractors should include sufficient information and provision for the contractor to price for this item in the relevant tender price.

The loss of any visitor Car Park Spaces due to the need to utilise spaces as a compound will incur costs that have to be reimbursed to VINCI Park due to loss of such income. The contractor will reimburse VINCI Park, in advance for all lost visitor Car Parking spaces during the duration of the contract at the applicable full visitor tariff.
Special Events Park and Ride (Football, Rugby and Concerts)

Special Events must be agreed in advance between the event co-ordinator, the Trust and VINCI Park.

Tariff of £5.00 per vehicle per event.

The following procedures will apply:

In consultation and agreement with the Trust, coordination meetings will be held before and after the event to ensure the following:

All signage to the multi-storey Car Park will be in place from 6pm the evening before the event to inform all Staff and visitors of the forthcoming event. Portable Toilets will be placed in the area adjacent to the sports club shortly before the event and removed after the event.

CP 13 will be used to accommodate steward’s vehicles.

Hospital visitors and Staff will be directed to alternative Car Parks by temporary signs. These Car Parks will be signposted as available to Staff and visitors for the duration of special events.

Stewards will direct Staff and patients to the alternative Car Parks within the hospital.

Up to a maximum of 14 stewards including a supervisor will be provided at each event dependent on the expected volumes, and will provide both roadside and internal marshalling during and after the event. The council will provide all necessary personnel and equipment to clean up the Car Parks and roads after the event.

The buses will be provided by approved contractors to the council and will be supervised by the council. The bus contractors will be instructed on Health & Safety and modus operandi procedures whilst operating from the hospital. The buses will be marshalled in Car Park No.11 awaiting the first departure.

The barriers will be opened and staffed to receive by hand all entrance fees whilst stewards will direct traffic to available spaces on each level.

The traffic coordinator will monitor the traffic from their central traffic control room and adjust the traffic flow rate to the Car Park; they will maintain close contact with the parking supervisor and will summon assistance from the local constabulary if required.

VINCI Park will provide adequate staffing according to demand.
APPENDIX G

ADVERSE WEATHER PROTOCOL
ADVERSE WEATHER TRANSPORT TEAM
(Transport Dept. Internal Working Document)

During normal office hours the Transport Office will provide a communication and coordination service in respect of patient and staff transport requirements. Outside of normal working hours transport requests should be fed through to the Communications Hub.

Transport Dept – 029 2074 6388/4165
Unscheduled Care Communications Hub - 07890 510089

1. Staff Transport

The responsibility for identifying staff who are key to service continuity and who may have difficulty attending work in severe weather lies with the Divisions/Directorates/Departments. Staff will be expected to make every effort to get to agreed pick up points.

Requests for staff transport will be passed through to the Transport Team who will record the necessary information on the transport log sheet (see attached). The Transport Team will make the request through to WAST Health Courier Service (HCS) who will either respond or arrange a taxi. Contact numbers are as follows:

Normal Working Hours – 029 2034 5128:- HCS Day Control (this is to be used between office hours of 08:00-17:00 Monday to Friday).

Out of Hours/Weekends/Bank Holidays - 01633 626118:- Out of Hours Control (this is to be used O/O/H 17:00-08:00 Monday-Friday, also from 17:00 Friday to 08:00 the following Monday i.e. throughout the weekend/bank holiday)

In the event of difficulty in contacting Ambulance control HCS Manager/Supervisor can be contacted – either:

- Mark Dailey (07730 015761); or
- Julian Richards (07764 835755)

who will endeavour to resolve any issues.

In the event of failure to contact any of the above, Dragon taxis can be contacted direct on 029 2033 3333 quoting the PIN on the attached booking sheet.

Where taxi resource is limited, or unavailable due to high demand, the Communications Hub 4x4s can be accessed by contacting Chris Cashmore on 07890 510089.

If the Communications Hub 4x4s are unavailable or where staff are to be collected from “remote” areas, 4x4 Response Wales can be contacted:
2. Patient Transport

The responsibility for identifying patients who require treatment/admission/discharge and who may have difficulty travelling in severe weather lies with the Divisions/Directorates/Departments.

The Transport Team will liaise with relevant organisations as follows in order to maintain knowledge of services being operated:

- WAST (admissions/outpatients/out of area discharges)
- St John Cymru Wales (discharges)
- Taxi companies
- 4x4 Response Wales

WAST escalation policy will see them prioritise and maintain services for renal, oncology and paediatric patients and 4x4 resources will be focused on these services.

St John Cymru Wales have a 4x4 vehicle to support the discharge service and all St John vehicles are fitted with Winter tyres.

Information on service availability will be fed through to Command and Control.

3. Out Of Hours

Outside of normal office hours the tasks above will be undertaken by the Communications Hub – 07890 510089.

4. Communication

The Transport Team will liaise with relevant organisations, using prepared contact directory (attached), as follows in order to maintain knowledge of services being operated:

- WAST (admissions/outpatients/out of area discharges)
- St John Cymru Wales (discharges)
- Taxi companies
- Bus Operators
- Rail operators
- Cardiff Airport
- Road networks
- Weather conditions and travel advice
The Transport Team will forward Information on service availability through to Command and Control (Tel. nos. 029 2074 3775/5013) and contained in a bulletin which will be issued twice daily via the Communications Team.

A handover between the Transport Team and Communications Hub manager will take place twice daily (Monday to Friday) at 08.30 and 16.30 to ensure adequate transfer of information.