The Petition Committee and the Health Minister: November 29th 2011

A petition has been before the petitions committee for the last three and a half years without any resolution.

The motivation for bringing the petition was the problem caused by vehicles, used by people going to Heath Hospital, being left on the streets nearby. Since the petition was raised the situation has greatly worsened, caused in part by the additional services that have been brought to the hospital. These additions include the PET scanner, the construction of the Woman's unit, neurosurgery, neurosciences, and the new medical school. Work on the children's hospital is still ongoing.

At last there is some movement, insomuch that the Minister for Health is due to answer questions from you in the Senedd.

This is now a crucial juncture as, dependent on the answers given by the Health minister to *relevant enquiries* raised by the petitions committee, **you** ought to be able to decide a way forward for yourselves. Your conclusion might be either that the petitions committee does indeed have a role to play, or that there is nothing further you can do.

It is extremely important that the questions asked of the minister are relevant, and that they get to the heart of the problem. When Heath Residents Association raised queries at a liaison meeting with hospital authorities in relation to the Sustainable Travel Plan, the chairman of that meeting said that it was not our place to scrutinize them by asking in-depth questions. Even though the questions arose from the plan itself, were straightforward, and had been forwarded in advance of the meeting.

So, prior to your meeting with the Health Minister, Heath Residents Association is laying out our concerns, and some examples of the questions we would liked asked at your meeting.

1. The Sustainable Travel Plan

From the outset this plan was flawed. The hospital committee charged with the responsibility to compile the report worked for 12 months before issuing copies to the ward Councillors and others. Two days later it was presented to Heath Residents Association, but in the meantime it had had to been substantially changed. (Your committee had been supplied with copies of the Introduction previously)

A lot of the **facts** in the introduction were found to be wrong, and were subsequently altered, but because of the shortness of time we received the document without the body of the report having been checked. We submitted **nine** pages of queries and questions outlining the errors, and the report was amended again prior to being handed to the Health Minister.

Yet this is the document that is being relied upon as a basis for sensible discussion.

Possible QUESTION

Does the health Minister believe this is a reliable document to work from?

a) How the Survey was conducted

The Sustainable Travel Plan starts by saying that it "has been developed to generate benefits to the Trust, the staff, patients and visitors and for the wider community".

To achieve this, the survey would have to be quite wide- ranging to encompass all those mentioned. What took place was quite different. The so called survey was in fact only a request to those wanting a permit for parking within the hospital grounds to apply by returning the issued form. It had nothing to do with how the staff got to work, or what form of transport visitors used, and did not address any of the problems of the wider community.

Possible QUESTION

Does the Health Minister feel that the way the "survey" was carried out satisfactorily addressed the quoted reasons given for developing the plan?

b) STAFF NUMBERS

The number of hospital staff quoted in the Sustainable Travel Plan is 8,000 but its accuracy is questionable. Over the years attempts have been made to determine how many people are actually employed on site. The lowest estimate is 10,000 (this figure includes 1,000 students).

The hospital site is occupied by a number of different groups and a more definitive answer has never been forthcoming. The site is occupied by the Hospital, the Dental Hospital, and the University. The total figure of people who use the site should have been the major

starting point for the plan but this appears not to be the case. How one can work out transport requirements without knowing how many one is providing it for is a mystery is not common knowledge.

Possible QUESTION

Does the Health Minister agree with the above observations? If so, how has she attempted to obtain the necessary statistics?

- c) HOW THE OBJECTIVES SET OUT IN PARA 2.3 WERE TO BE ACHIEVED
 In this section we look at the new ideas being considered by the
 Authority that will enable them to achieve the objectives set out.
 - i) **New Bus Routes -** We do not believe there are any new bus routes. Recently when the Authority decided to exclude all staff living within a 7 mile radius from holding permits, it was found that there were no buses running from near their homes to the hospital at the times they needed, especially early in the morning and late at night.
 - The reception desk of the hospital was recently asked for a timetable and route planner for buses to and from the hospital. The receptionist stated they used to have them but had not had any for the last 3 or 4 months.
 - ii) Park and ride services Although this was included in the original plan, to date there are no park and ride services to the hospital. The only one being talked about is at Pentwyn. This facility would only be able to take a very small percentage of staff, and if it ever comes to fruition, it cannot be seen as the answer to all problems.
 - iii) Introduction of inter hospital shuttle At a liaison meeting with the hospital HEATH RESIDENTS ASSOCIATION were given to understand that this was already up and running. When asked as to its usefulness, they were unable to say as it had never been monitored.
 - iv) New and Improved Cycle routes This is quite easy to deal with, there are none, only additional signs showing the Taff trail.
 - v) **More Priority for Pedestrians, cyclist and buses-** There is no evidence that any of this has been introduced.
 - vi) More car parking for patients and visitors There is no sign of any progress in this area. In fact it is probably true to say that

with the increase of services at the hospital, proportionately there are less parking places.

- vii) Car parking reviews and allocation of permits –Permits have recently been re-issued (1st November 2011). It is not known whether any review has taken place, and more likely the process was carried out because the number of permits issued was previously over the prescribed limit (3,500).
- viii) (Tighter control over parking on the streets The hospital states that this factor was considered even though they had no jurisdiction, and that they would work with the Local Authority. Recent observation shows that the congestion on the roads around the hospital, and in the park adjacent to it, has got substantially worse. We have made requests for Petitions Committee members to see this for themselves and the same invitation has been offered to the Health Minister, but all requests have been turned down. In a recent survey carried out by Cardiff Council the Heath area had by far the highest return requesting the introduction of residential parking into streets already affected by congestion. This, even though residents realise they will have to pay for this system.

The employees at the hospital tell of their frustration in finding a parking space, even in the official car park within Heath Park, which is now always totally filled.

This leads to staff from the hospital using all other parts of the park, resulting in would-be park visitors not being able to come.

The Council are now coming up with recommendations that will restrict parking within the park, the consequence being that bone fide park visitors may find themselves having to pay – the only park in Cardiff where this will happen. Of course it will also mean more cars on our roads.

Development of purposeful and focused communications package- Since the meeting of 2010 and the reorganisation of the hospital we have not had meetings with the management and therefore it would be difficult to comment on this.

QUESTION

What gives the Health Minister any expectation that the Sustainable Travel Plan can possibly play any part in alleviating the problems to the residents of Heath?

Staff already have an extremely stressful job, what will be done to alleviate the added problem of how to get to work and where to park?

The next part of this report will deal with the targets set out in the Sustainable Travel Plan.

- a) **Car Parking** -A long term target to reduce staff car parking requirement. In the first year to achieve reduction of 400 staff vehicles entering the site. (para 9.1)
- b) **Car sharing-** In the first year to increase car sharing by 12% rising to 15% by March 2011. (para 9.2)
- c) **Public transport-** In the first year without any improvements to increase passengers by 3% increasing to 10% over a period of 3 to 5 years. (para 9.3)
- d) **Cycling-** To achieve a figure of 5% of staff regularly cycling to work (para 9.4)
- e) Motorcycles- To set a target of 2% of users by 2010
- f) Walking To increase the number of walkers to 5% within 2 years. (para 9.6)

Possible QUESTIONS

What action has been carried out to see whether any of the above targets have been met and what method was used?

What are the results?

The difficulty with these questions being answered goes right back to how the initial report was compiled. Only 4940 staff members filled in the questionnaire requesting a permit to park. To ascertain whether the above results have been achieved a survey of the same 4940 people would be necessary.

In the recent re—issue of permits any member of staff could apply, whether or not they lived within the 7 mile limit. The policy was that those living within the limit would not have a permit unless they could show that *their vehicle was used for work*. No personal reasons were to be taken into consideration, although this, by necessity has had to change.

If this is taken to its logical conclusion then this meant of the 4940 who applied in 2009, half would be disqualified from holding a new permit. The document

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clearly states that of the 4940 people who responded 50% lived within the 7 mile radius.

The result of this would be that 2470 respondents to the 2009 permit release would now have to find other ways of getting to work or else park outside the hospital.

In conclusion

What will you, the petitions committee, do?

Will you accept the Sustainable Travel Plan as it stands or will you agree that it leaves a lot to be desired?

Will the petition committee's questions to the Health Minister be probing, based on an in-depth knowledge of the Plan, or will there just be questions for questions sake? (Having watched many Parliamentary Committees enquiring into matters, it is good to see their knowledge of the subject and the in depth and probing questions that they ask. They are also willing to state when they are not satisfied with answers, their dismay at the lack of information forthcoming and the failure by anybody in the attention to detail.)

The Health Minister has recently been reported as stating that there will be consequences for the Health Board if they don't meet their targets. Does this apply to this matter or is the SustainableTravel Plan just a paper exercise?

Recently Heath Residents' Association held a meeting for members when they were invited to ask questions of a selected panel on the problems caused by Hospital parking. The Health Minister was invited but declined the offer. We have also asked to meet her but this has also been declined.

Julie MORGAN AM, present at the meeting, stated that she felt the *Petitions Committee had learned lessons and would now be more effective*. She also stated that she thought that your meeting with the Health minister on the November 29th would give definitive answers.

Mr. Neil PAUL, the manager at UHW in charge of the Sustainable Plan, who was also at the meeting, stated that the main reason for restricting permits to 4000 was on the grounds of safety.

Mr Paul Hollard, Deputy Chief Executive of Cardiff and Vale UHB was asked whether it would be feasible to construct more car parks on the site. He answered that he would have to say yes, but funds were limited.

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The roads and park within the Heath area have been overwhelmed by cars directly linked to UHW for many years. Recently, due in part to the relocation of services to UHW and the re—issuing of permits, the problems have increased. This is not just a case where residents want their own parking space in front of their house; it is a paramount case of safety. Much of the congestion is on main roads and great difficulty is experienced when trying to enter or exit properties. Problems arise for household visitors, especially the elderly or those with young children, who have to park great distances from the relatives or friends they are visiting in the area.

Heath Park is now just a car park for the hospital and the indiscriminate parking will one day result in an emergency vehicle being prevented getting to the location on the park where it is required. The council are working on proposals to alleviate this problem by resurfacing and lining out parking areas and they will also look to introduce limited waiting in areas that should be retained for park users.

We believe that the hospital authorities have done nothing to address these problems either for their staff, patients and visitors or the wider community. We firmly believe that the Welsh Government have a responsibility to oversee them.

What will the hospital authority do to show that the sustainable travel plan is not just a paper exercise? How will they bring about a resolution to these problems?

If an accident does happen or a clinical procedure could not proceed because staff had not been able to get to work how long will it take before we hear the infamous words "lessons will be learned"?

The first minister has stated that this government will be judged on its success to deliver for the people of Wales – well know this -we are those people to which he refers.