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By Chris Traber

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Markham hospital volunteer opposes fees Hospital parking costs barrier to health care: doctor

'A lot of people can't afford a lot in life, the least of which is hospital parking.'

By the numbers

Parking spaces:

- Southlake: 500 public, 1,300 staff
- Markham Stouffville: 1,396 public and staff
- York Central: 365 public

Fees:

- Southlake: \$3.50 half hour, \$17 daily, \$20 daily in/out, \$37 weekly, \$110 monthly
- Markham Stouffville: \$3.55 half hour, \$15 daily, \$45 weekly, \$90 monthly
- York Central: \$4 half hour, \$17 daily, \$22 daily in/out, \$47 weekly, \$95 monthly

Staff parking fees:

- Southlake: \$45 to \$70 per month
- Markham Stouffville: \$38 per month
- York Central: \$42 per month

Annual parking revenue:

- Southlake: \$3 million
- Markham Stouffville: \$4.3 million
- York Central: \$2 million

Fines for illegal or expired parking:

At our three hospitals parking violation fines are directed by municipal bylaws and internal parking management services.

- \$150.00 if parked in a fire route; \$300.00 if parked in handicap spots without properly displaying a valid permit.
- In the pay and display lots, \$25.00 to \$40.00 depending on the violation.

None of the hospitals collect revenue from parking fines.

— Sources: Figures supplied by hospitals.

Parking is one of the many things we have in abundance in York Region. Vehicle spaces are plentiful and if not free, modestly priced. That is, until you're parked at one of our three hospitals. Depending on where you park, how long and what fee option, hospital parking can cost you from \$3.50 up to \$22 for the day. Gambling on illegal hospital parking can net you a major fine. Anyone who has parked at one of the

hospitals can attest to the sticker shock. A two-hour visit can run \$14. We mutter, grumble and gripe.

Markham's Alan Powell, 81, does more than that. A passionate advocate for free or at least fair hospital parking, the retiree is the reasoned and compassionate voice for the vulnerable and marginalized. They are hurt most financially and, at times, medically, by the prohibitive costs associated with parking, he said, adding parking expense can be a barrier to accessing health care appointments.

"There are so many stories about people being mistreated by the hospital parking system," he said, adding a friend recently discovered a \$300 ticket after a post-hip replacement checkup at a local hospital. Although the friend had a valid handicap parking permit, the violation cited was an obscured expiry date.

Mr. Powell wants to champion the hospital parking cost issue in an equitable manner. He understands it's a delicate dance. Hospital parking is a significant revenue stream that helps defray the cost of health care. He knows, too, more than one in 10 York Region residents live below the poverty line and our food banks add clients daily.

"A lot of people can't afford a lot in life, the least of which is hospital parking," Mr. Powell said. "I know Markham Stouffville Hospital. They do tremendous and difficult work, but there are misconceptions about revenue."

A volunteer at Markham Stouffville, his parking is free while on duty. Still, the board is working at cross purposes, he said. The hospital's foundation is on an ambitious \$50-million fundraising campaign for an expansion. All significant six figure salaries of hospital CEOs and administrators are published via the annual sunshine list. The public perception is medical infrastructure is well funded and hospitals could well afford to forego the parking charges.

Mr. Powell, in partnership with three like-minded friends, created a website, fairhospitalparkingcharges.org, that's become the epicentre of a grassroots groundswell. The quest for reasonable hospital parking everywhere has some considerable support.

Dr. Brian Goldman, a veteran ER physician and host of White Coat, Black Art on CBC Radio One, devoted an entire episode last fall to the issue of parking fees at hospitals.

The Canadian Medical Association Journal's interim editor, Dr. Rajendra Kale, recently argued parking fees are a barrier to health care and add avoidable stress to patients who have enough to deal with. He cited a case in which the search for a parking spot and the ongoing need to feed a parking meter interfered with a clinical consultation.

Dr. Kale continued, saying parking charges are a user fee and, therefore, both a barrier to health care and a possible violation of the Canada Health Act. He recommended

hospitals consider providing free parking to patients. York Region's hospitals are empathetic and realistic.

Markham Stouffville's 1,396 staff and visitor parking spots generated \$4.3 million in the last fiscal year, public relations director Lisa Joyce said, adding operating and maintenance costs during the same time were \$1 million. The hospital continues to look for additional revenue sources to support hospital operations, she said, all the while the health facility endeavours to make parking provisions for visitors and patients. There are short-term paid parking spots close to the emergency department. The facility is sensitive to those challenged by parking costs. In extenuating circumstances, the team at the hospital works with individual patients or their families to assess their individual situation and see what arrangements, if any, the hospital is able to make, she said. The hospital will validate parking, she said. Each circumstance is reviewed individually. For example, if a patient was given a wrong appointment date or an appointment was cancelled, free parking would be considered.

"Parking revenues are a significant source of revenue for all hospitals when the province funds only about 80 per cent of the cost of operation," Southlake Regional Health Centre facility operations and paramedical services vice-president Paul Clarry said. "Parking revenues account for approximately 1 per cent of the total hospital budget at Southlake."

The Newmarket health facility's 500 public parking spots and 1,300 staff parking spots cost \$1 million a year to maintain. After these expenses, Southlake earns about \$3 million annually, he said.

"These revenues are typically dedicated to the purchase of clinical equipment, which is not usually funded by the province," Mr. Clarry said.

There are 21 pay-and-display parking spaces outside the ER entrance for short-term parking and drop-off. Up to half of these spaces may disappear due to property loss associated with the Davis Drive Viva transitway project, he said.

The hospital is working with the construction company to determine how some of these spaces might be preserved. There are a further 18 pay-and-display spaces on the ground floor of the parking garage adjacent to the ER. The hospital does not typically validate public parking, he said, adding circumstances that might warrant consideration of the hospital validating some or all of a parking pass are considered on a case-by-case basis.

York Central Hospital has 364 visitor parking spots and another 26 designated as handicap parking, finance and corporate services vice-president Richard Tam said. Its \$4 per half hour rate and \$17 daily fee is almost in line with Southlake and Markham. Parking revenue is about \$2 million per year, he said. Short-term ER parking is available. In certain instances, the facility provides discounted rates for patients or

family members in such areas as dialysis, chemotherapy, mental health and long-term care or for veterans with valid veteran ID card, he said.

“The capital and operating costs of providing parking spaces and services are not funded by provincial funding,” Mr. Tam said. “Therefore, I am open to new revenue ideas so we can continue to provide parking services if there will be reduced or free parking services to all.”

That’s what Mr. Powell wants to hear. “Ultimately, there should be no fee or fair price parking,” he said. “I believe we can do it.”

He admits it will be a difficult issue to resolve. As such, he’s confident political will and divine intervention is the answer. He and an interfaith group have created prayer partners.

“We pray for the hospital administration, the doctors, nurses, volunteers,” he said. “Our hope is healing.”