Extract from Hansard

[COUNCIL — Thursday, 16 August 2012] p5076d-5077a Hon Dr Sally Talbot

JOINT STANDING COMMITTEE ON DELEGATED LEGISLATION

Fiftieth Report — "Hospital Parking Fees: Queen Elizabeth II Medical Centre (Delegated Site) Amendment Bylaws (No. 2) 2011, Royal Perth Hospital Amendment By-laws (No. 2) 2011, Women's and Children's Hospitals Amendment By-laws (No. 2) 2011 and Osborne Park Hospital Amendment By-laws (No. 2) 2011" — Tabling

HON SALLY TALBOT (**South West**) [10.05 am]: I am directed to present the fiftieth report of the Joint Standing Committee on Delegated Legislation in relation to the Hospital Parking Fees: Queen Elizabeth II Medical Centre (Delegated Site) Amendment By-laws (No. 2) 2011, Royal Perth Hospital Amendment By-laws (No. 2) 2011, Women's and Children's Hospitals Amendment By-laws (No. 2) 2011, Fremantle Hospital Amendment By-laws (No. 2) 2011 and Osborne Park Hospital Amendment By-laws (No. 2) 2011.

[See paper 4822.]

Hon SALLY TALBOT: On behalf of the committee, I make the following statement. The Joint Standing Committee on Delegated Legislation recommends that the house disallow the five named hospital amendment by-laws, which impose hospital parking fee increases at six metropolitan hospitals. The committee is of the view that the by-laws offend the committee's term of reference 3.6(a) in that they are not authorised or contemplated by the empowering legislation. The Hospitals and Health Services Act 1927 and the Queen Elizabeth II Medical Centre Act 1966 authorise the executive to impose a fee for service at hospitals. Therefore, hospital parking fees are authorised only if there is an appropriate cost recovery basis for the fee imposed.

Hospital parking fees are set in accordance with the Department of Health's access and parking strategy for health campuses in the Perth metropolitan area. Also, parking fees at the Queen Elizabeth II Medical Centre recover costs incurred pursuant to a commercial arrangement. The department anticipates further six-monthly increases in parking fees. The department contends that, notwithstanding the policy basis of the parking fees, fees at each hospital reflect cost recovery based on a costing methodology outlined in tables provided to the committee. The committee takes issue with the costing methodology the department relies on to determine the cost of providing the parking service, and, in particular, objects to the way in which capital costs are allocated in full and recouped in one financial year. This full allocation of one-off capital costs in one financial year is occurring in the context of significant redevelopment and the upgrading of parking "pay-as-you-go" equipment at hospitals. For example, costs incurred in building a car park at QEII are allocated and recouped in one financial year. Today's parking fee payers are paying the full costs for infrastructure and equipment that other fee payers will benefit from for many years.

The committee does not accept, and is of the view that Parliament should not accept, capital costs being allocated in full in one financial year as an appropriate methodology on which to base a fee for service. Given this inappropriate costing methodology, the committee is not persuaded that the parking fees imposed reflect cost recovery.

I commend the report to the house.