

Hospitals and Healthcare Facilities February 17, 2005

Available exclusively to Best Workplaces for Commuters, Phone Forums provide cutting-edge information on a range of topics related to commuter benefits. Moderated by the U.S. Environmental Protection Agency (EPA), these forums feature experts on key topic areas.

On February 17, 2005, *Best Workplaces for Commuters* hosted a Phone Forum to discuss the commuter benefits offered by hospitals and healthcare facilities. Steve Offutt, EPA forum moderator, began the discussion with the following announcement.

Last month, FORTUNE magazine released its list of the "100 Best Places to Work". We were pleased to see that 18 of those 100 employers are also *Best Workplaces for Commuters!* With several million employers in the United States and fewer than 2,000 employers who are Best Workplaces for Commuters, it is remarkable that such a high percentage of the "100 Best Places to Work" are also *Best Workplaces for Commuters*. Congratulations!

Featured Speakers

Patsi Davis, Texas Children's Hospital

In 2001, Texas Children's Hospital embarked on a campaign to hire 2,600 additional employees. At the time, the hospital employed roughly 5,000 people and did not offer any commuter benefits. They had some remote parking facilities, which about five percent of employees took advantage of.

Now, the hospital offers bus passes, vanpool vouchers, a carpool allowance, employee shuttles, bike racks, and two different emergency ride home programs—one for transit riders and one for those who walk, bike, or carpool to work. All employees are eligible for these benefits, including full time, part time, per diem, and summer interns. This full suite of commuter programs has improved morale and attracted new employees to the hospital. Currently, more than 20 percent of the 6,100 employees participate in the transit election program—a process that allows employees choose on a monthly basis how they will to commute to work. The hospital then provides the employee with support for

that commuting mode.

Texas Children's hospital has learned that it is very important to be flexible. Originally, employees were required to decide on their commuting strategy for three months at a time, but employees didn't like that system. They were afraid that if they decided on a commuting method they later found didn't work for them, they would be trapped in that method for too long. By shortening the decision period to a single month, the hospital relieved their employees' fears of being "stuck" in a certain mode. Employee participation, and appreciation of the hospital's commuter programs, grew.

Kai Abelkis, Environmental Coordinator, Boulder Community Hospital

Boulder Community Hospital is a non-profit organization with about 250 beds and 2400 employees. The hospital's commuter program is successful because of the variety of commuter options offered to employees. Like many healthcare professionals, many employees at the hospital do not work traditional hours. Adaptability to varying employees' needs is the key to a successful program.

In addition to providing commuter benefits, it is important to help change the workplace culture to one that values non-car commuting. The majority of public transit riders at Boulder Community Hospital ride transit because they "believe in it." They believe that it is good for the community and the environment. Boulder Community Hospital makes efforts to support those values.

In the mid-1990's, the hospital's board of directors adopted their Principles of Environmental and Recycling Efforts, which stipulated that the hospital would continue to provide financial as well as other incentives for alternative transportation. In addition to providing employees with commuter benefits and subscribing to their board of directors' Principles, the hospital's commuting program also helps keep employees out of parking spaces needed for patient and visitor parking.

The hospital is a leader in alternative transportation programs in the Boulder area. In fact, the hospital was the first business in the city to sign up for the EcoPass program, through which it purchases a transit pass for every employee. The hospital has also created a “bike team” to support the 150 employees who bike to work. In addition, employees who ride public transit are given access to a “shared car” for use during the day. Mr. Abelkis also is part of an organization of environmental coordinators in Boulder. Through his discussions with other members, he learns of new ways to implement commuter benefits and develops strategies for overcoming commuter program difficulties.

Mr. Abelkis explained the importance of having a single person within an organization who is responsible for implementing the commuter benefits program. That person acts as a guide and a promoter, working with administration and employees to encourage and support the use of transportation benefits. Having a single individual responsible for the commuting benefits program is an especially valuable resource for employees, so they know who to contact with their questions and concerns.

Shirley Maike, State Psychiatric Hospital of Eastern Washington

State Psychiatric Hospital of Eastern Washington has 274 beds and 700 employees. Because of the hospital's distance from the local urban center, biking and walking are not feasible for many employees. Recognizing this, the hospital focuses its alternative commuting efforts on encouraging carpooling, vanpooling, and use of public transit. A State of Washington mandate requires the hospital to reduce the number of drive-alone commuters 37 percent by 2008, and to complete surveys every two years to measure progress toward that goal. To meet this requirement, the hospital offers employees \$2 each day they ride in a carpool or vanpool, and offers free bus passes to employees who use public transit. To further encourage employees to leave their cars at home, the hospital participates in local trip reduction campaigns held by the county air pollution control authority.

Ms. Maike found that with four distinct seasons, there are peaks and valleys in transit use. During the summer, many employees like to drive themselves so that they can adjust their work schedules to leave early.

When there is snow in the winter, many more ride the bus.

Recently, the hospital negotiated a new contract with an employees' labor union. One outcome of the negotiations was an extended employee workday. To ensure that employees affected by the negotiations will still be able to catch a bus home, the hospital is working with a local transit agency to increase its bus service.

Open Discussion

Q: What kinds of resources are necessary to implement a commuter benefits program?

A: Texas Children's Hospital's annual budget of \$4 million provides an entire suite of transportation services—including vanpool and transit subsidies, and more—to 6100 employees. Subsidized bus and vanpool passes alone cost \$450,000 each year.

Boulder Community Hospital pays the full cost of an EcoPass for every one of its employees, whether or not they actually choose to receive the pass from the hospital. That costs nearly \$40,000 each year and covers 2400 employees. The hospital spends an additional \$10,000 each year for its other programs, so their total yearly investment in commuter programs is roughly \$50,000.

The State Psychiatric Hospital of Eastern Washington spends between \$50,000 and \$75,000 each year on its \$2 per day reimbursement for employees who don't travel to work in a single-occupant vehicle. In addition, the hospital has designated one employee to commit ten percent of her time toward administering the commuting benefits program.

Q: Could you please explain further the \$2 per day reimbursement given at the Eastern State Hospital?

A: Employees who participate in either a carpool or a vanpool are eligible to receive \$2 every day they do so. Employees who use the bus receive a free bus pass, which costs roughly \$20 per month. The money that employees receive for using a vanpool is non-taxable, and the money that employees receive for using the carpool is taxable.

Q: What are the tax ramifications of Texas Children's Hospital's vanpool subsidy program?

A: The vanpool program provides up to \$165 dollars

per month to employees for vanpool use, but only \$105 is non-taxable under federal law. The remaining \$60 provided to employees is taxed.

Q: The ultimate goal of the *Best Workplaces for Commuters* program is to reduce the number of cars on the road, thereby reducing toxic emissions and improving air quality. Do any of the healthcare organizations participating in the Phone Forum have that same goal? Do any of you use that as a motivator for developing better commuting programs and encouraging administration buy-in?

A: The State Psychiatric Hospital of Eastern Washington keeps the pollution-prevention message in the forefront, with posters around the hospital promoting smart and less-polluting commuting. At Boulder Community Hospital, improving air quality is the single most motivating factor for employees to try public transit.

Kaiser Permanente, in Oakland, is in the process of creating a Vision and Values Statement for their transportation program. The statement includes information about air quality and community health benefits that result from commuter programs.

The community surrounding Bank of America, in Phoenix, has significant pollution problems, and so the hospital uses an anti-pollution message when promoting the organization's commuter benefits.

The Washington University School of Medicine in St. Louis partners with the American Lung Association to send emails to the local community on high-ozone days. The emails include information on the ozone level as well as recommendations for activities that will help reduce the ozone to a safer level.

Q: What does it take to convince management to make a \$4 million investment in commuter services?

A: At Texas Children's Hospital, the primary incentive to increase spending on transportation was a need to accommodate a rapidly growing staff as well as to attract new employees. The hospital formed a task force to determine what new employees wanted and developed a strategy to engage them. Ultimately, it was decided that a commuting benefits program would both attract new employees and improve the morale of current employees. The commuter benefits programs have been effective in increasing the retention rate of staff, especially nurses, and give the hospital a slight

advantage in hiring.

Q: Because employees receive money for participating in carpool programs, it seems likely that employees would try to claim that they carpool when they actually do not. How does an employee transportation coordinator verify employees' participation in carpooling programs?

A: At the State Psychiatric Hospital of Eastern Washington, employees have to fill out a quarterly calendar that indicates what days they carpooled. Because the number of employees is relatively small, the payroll staff can vet the calendars for accuracy by simple anecdotal evidence: "I know this person wasn't carpooling today, because I saw her walk in from the parking lot." If a person is found to be lying on their calendar, that person is sent a warning. If the warning is not heeded, then that person is eliminated from the commuting program and is not eligible to receive any transit reimbursement.

Q: Is there a particular hospital department that a transportation management professional should approach to promote commuter benefits and Best Workplaces for Commuters?

A: Human Resources offices should be the first stop, but in some cases, the receptionist at the hospital will know who is in charge of commuter benefits. It can be as simple as calling the hospital's main number and asking for the employee transportation coordinator (ETC). The staff at a hospital's administration office should also know who is in charge of commuting programs.

Conclusion

Mr. Offutt closed by thanking the employers for participating in the forum. He indicated that a summary of this forum would be posted at www.bwc.gov. If employers have topic ideas for future Phone Forums, they are encouraged to submit them by e-mailing bwc@epa.gov or calling 1-888-856-3131. If you have questions for any of the speakers, please refer to the information below.

Patsi Davis: padavis@texaschildrenshospital.org, (832) 824-2070

Kai Abelkis: kabelkis@bch.org, (303) 440-2265

Shirley Maike: maikeshi@dshs.wa.gov, (509) 299-4352