

# Parking Management Presentation – City of Placerville

**T. Saito, Executive Director, Facilities and Support Services**  
**Kay Iida, Safety and Security Supervisor**  
**F. Venter, Kimley Horn Engineers**  
**March 18, 2025**



# Topics



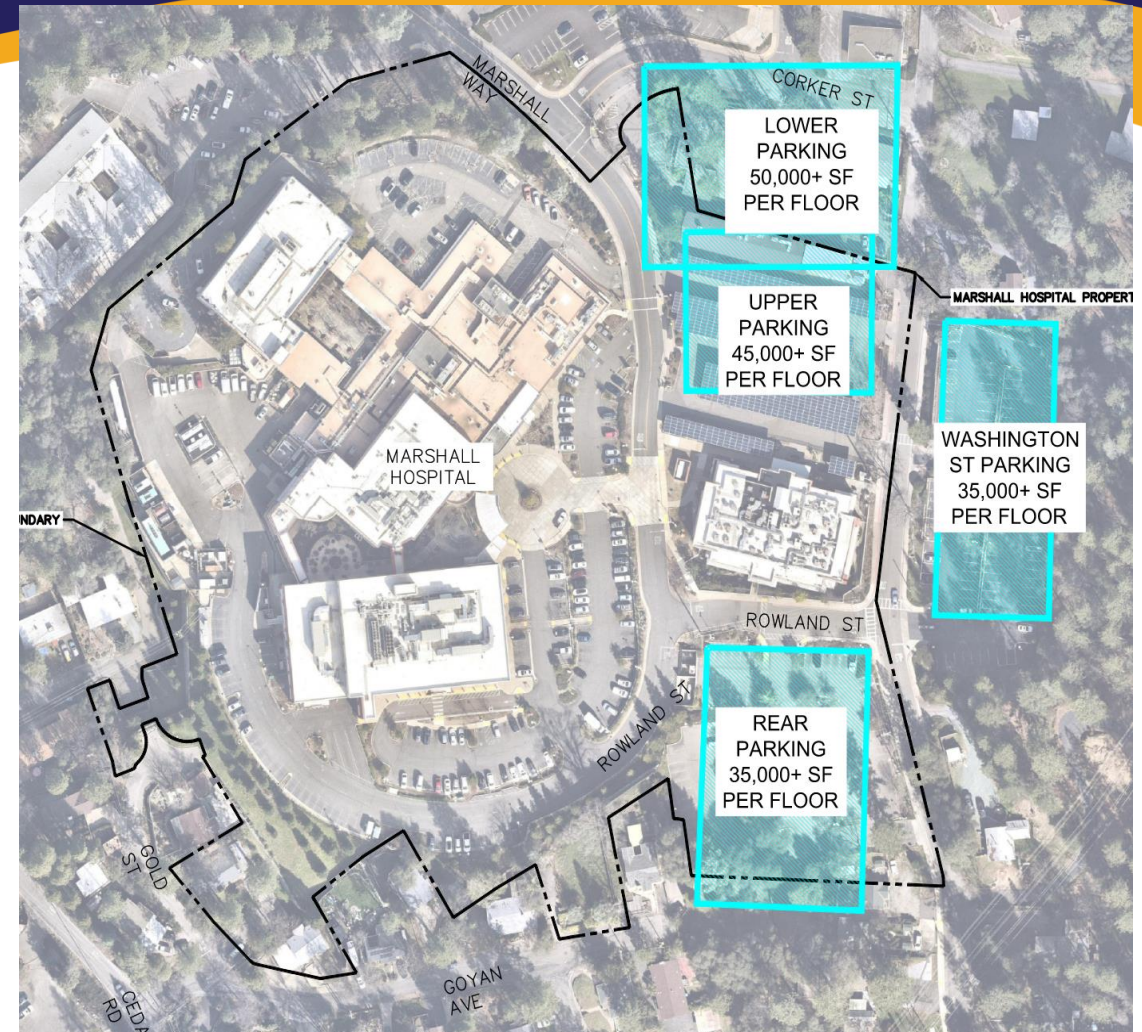
## Update on parking at the hospital

- Where we have been (History)
- Where we are now
- Next steps – Parking Management

## Property Activities

# History

- April 9, 2019. Planning Commission presentation on potential future expansion of the hospital.
  - Construct new outpatient facility of 50,000-100,000 square feet. The current plan is **not** to expand the hospital
  - Provide parking as required by the City of Placerville
  - Shortage: previous analysis included hospital parking rates that showed that there was a shortfall.
  - Options: four possible locations along Washington Street identified (structure: \$50M, surface lot options)



# Surface Lot at Washington



April 15, 2019

Pierre Rivas, Director  
Development Services Department  
City of Placerville  
3101 Center Street  
Placerville, CA. 95667

RE: Parking structure construction implementation plan.

Mr. Rivas,

Marshall Medical Center is committed to constructing a parking structure at the hospital campus with a completion date in 2024. We have taken the following steps in this endeavor:

- Purchased properties strategically necessary to construct a parking structure of sufficient size to meet the required needs. All of the properties on the south side of Corker Street bordering the 1095 Marshall Way parking lot are now owned by MMC.
- Contracted with an architectural and a civil engineering firm to perform a feasibility study to determine the most appropriate location to construct a parking structure and possible medical office building. See the attached renderings of possible sizes, locations, and orientations of the structures that will be presented at the next Board of Directors meeting.
- Formulated the costs associated with the project and applied for funding using United States Department of Agriculture loans. See the attached cost spreadsheets.
- Created a construction schedule to monitor milestones and ensure completion of the project in 2024. See the attached construction schedule.

Please feel free to contact me with any questions regarding this project and thank you for your continued support of our efforts to provide healthcare of superior quality and value to the residents of El Dorado County.

Sincerely,

James Whipple  
Marshall Medical Center  
CEO 530-626-2601



# History: Post COVID



- February 2020, COVID conditions affected parking demand and operations. Hospital decided to assess parking.
- Marshall conducted four parking occupancy analysis (2022-2025)
- Results indicated that a parking structure may not be required, if Marshall can manage parking demand and find the "**right size**" of parking, which is a balance of parking demand (occupancy) and supply (spaces)

# Right Sizing Parking



- Providing additional parking spaces is prohibitively expensive
- High turnover parking spaces are at capacity at about **85%** occupancy
- If occupancy is higher, parking should be managed or additional parking supplied
- For low turnover in staff parking spaces, occupancy can be **higher than 85%**





# Right Sizing Parking (continued)

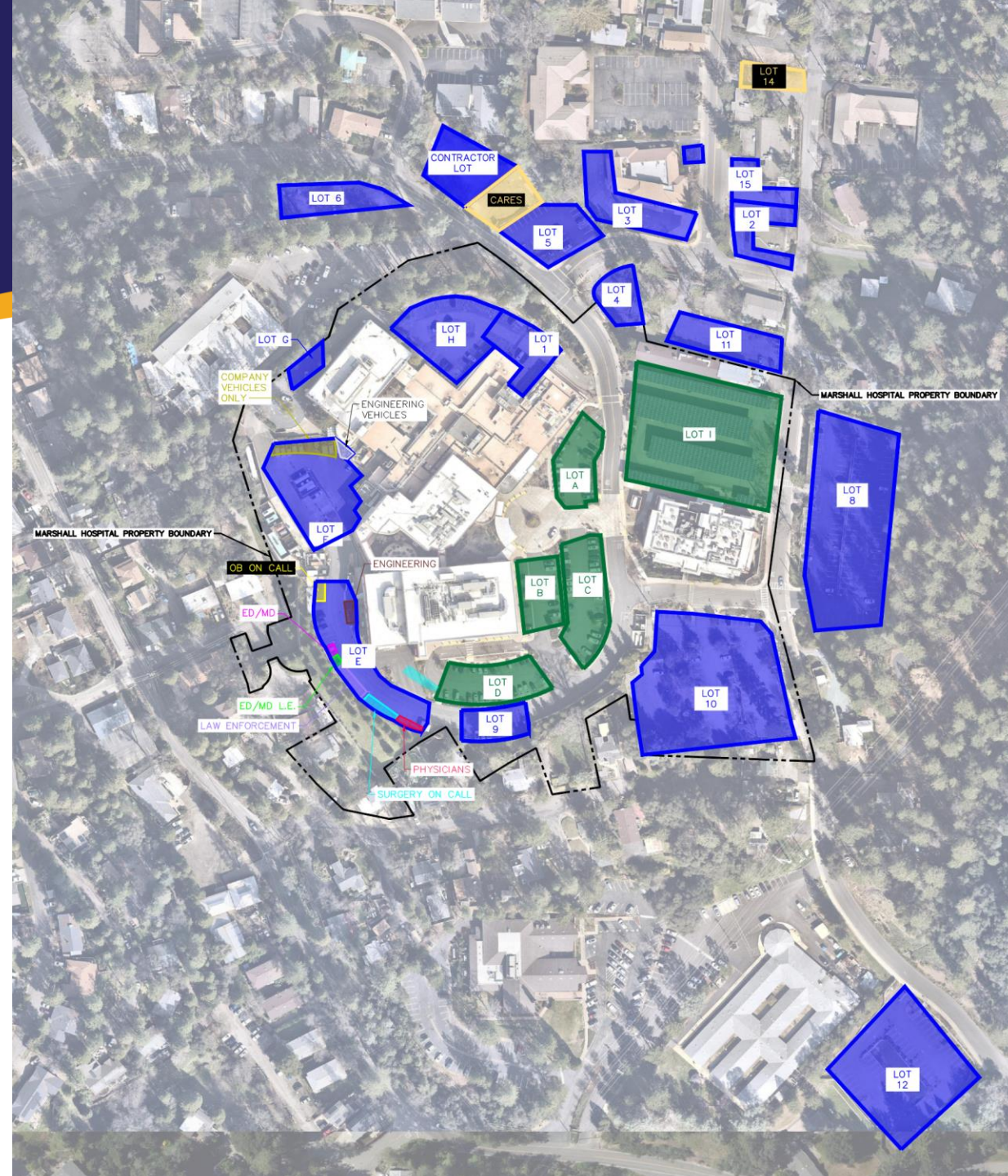


- If staff park inappropriately, parking should be managed
- Parking lots further from the “front door” are least desirable and we need strategies to park them (Lot 12)
- Hospital to provide additional features for staff to parking in Lot 12 – cameras, 911 phone and potential shuttle transportation
- **Patients should not have to drive around looking for parking and 85% is a right size parking occupancy goal to maintain**

# Parking Area Studied

## LEGEND

-  STAFF/EMPLOYEE PARKING
-  PATIENT/VISITOR PARKING
-  MIXED PATIENT & STAFF PARKING
-  NON-PERMITTED STAFF PARKING



# Average Parking Supply and Demand – February 2025

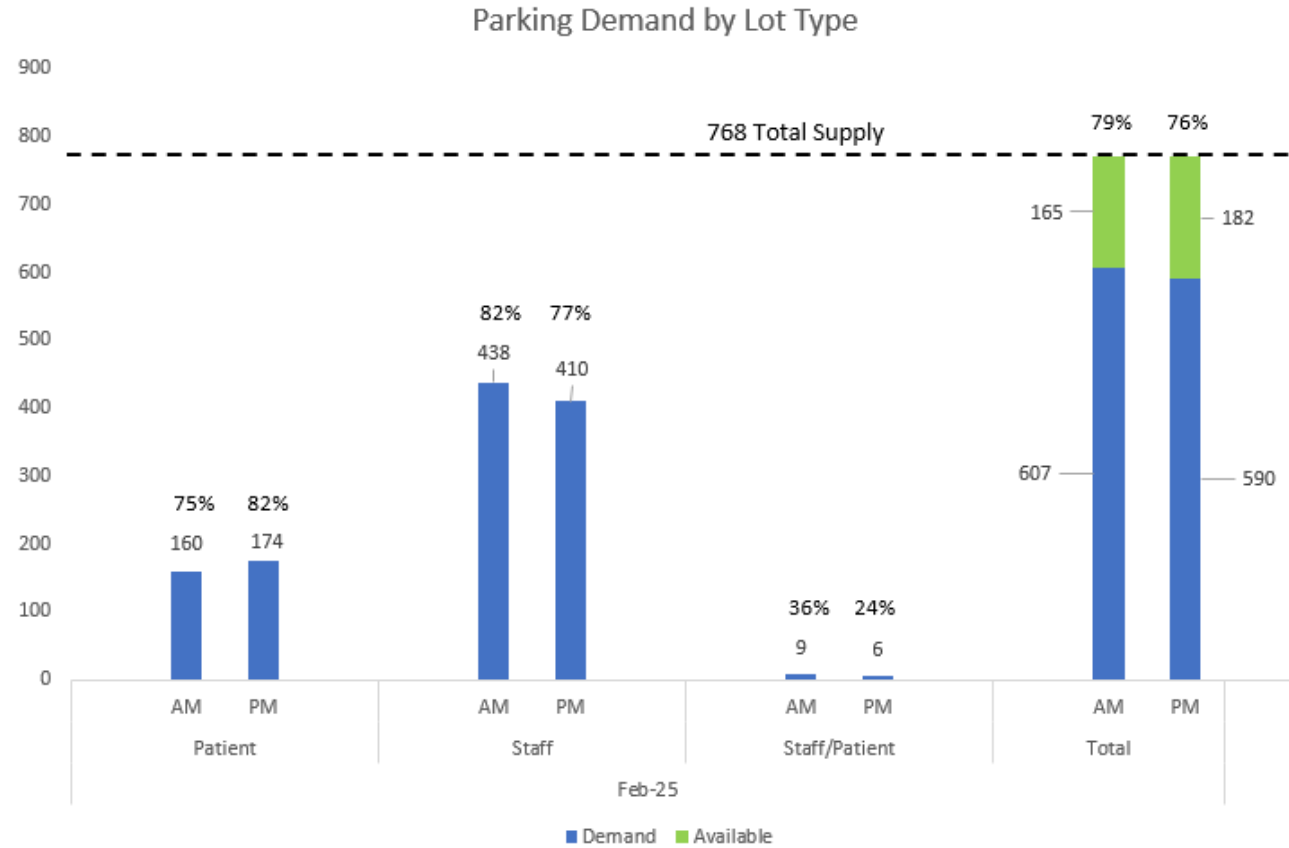


Date	Type	Supply	Demand		% Occupancy	
			AM	PM	AM	PM
Feb-25	Patient	213	160	174	75%	82%
	Staff	534	438	410	82%	77%
	Staff/Patient	25	9	6	36%	24%
	Total	772	607	590	79%	76%
	Available Spaces		165	182		

Spaces reallocated from Lot 6 and Contractor Lot for 2024 Data

- Includes ADA/LM spaces
- Available spaces spread out overall all lots

# Parking Supply and Demand User Comparison



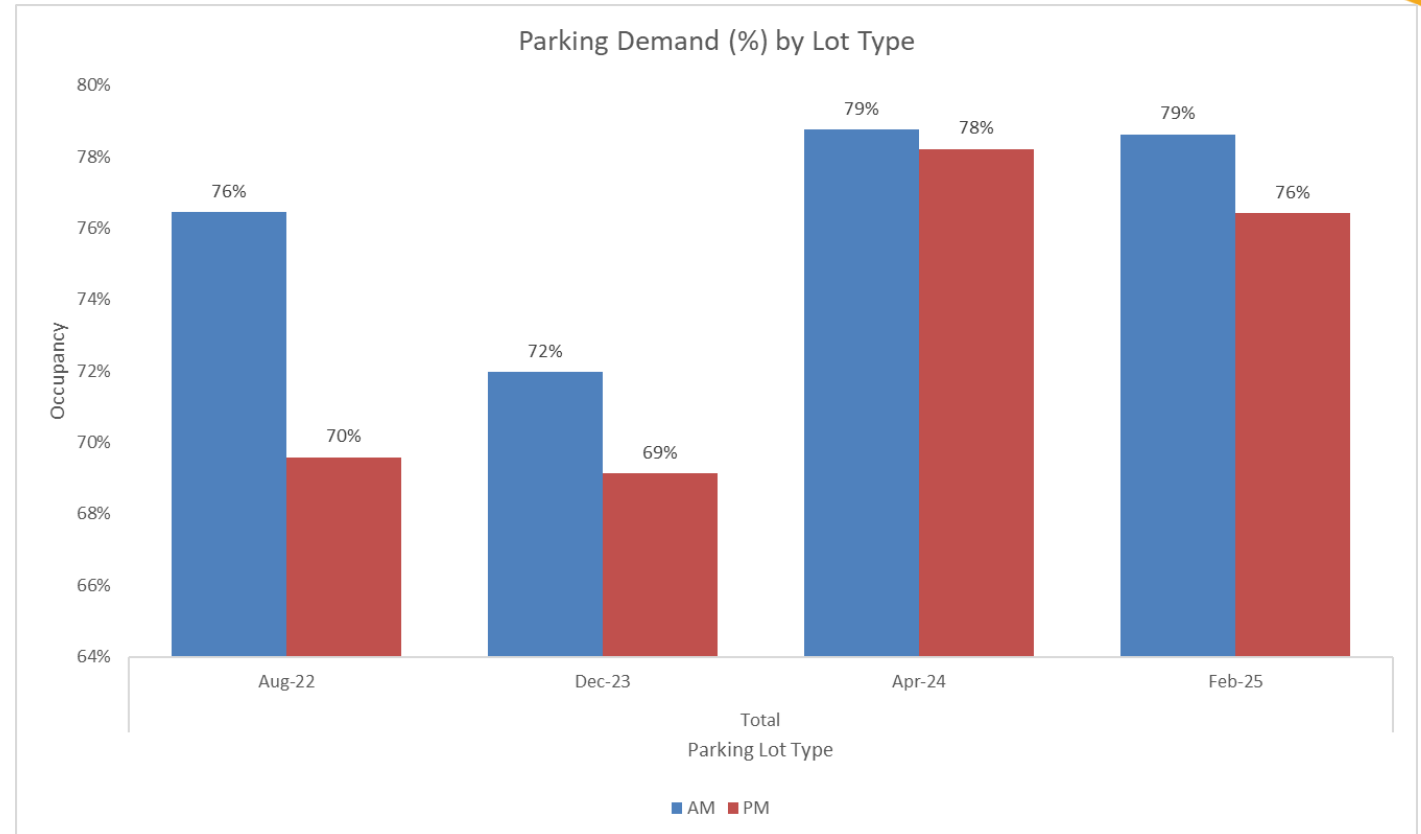
- Spaces reallocated from Lot 6 and Contractor Lot for 2024 Data
- Includes ADA/LM spaces

# Total Parking Supply and Demand Percent (2022-2025)



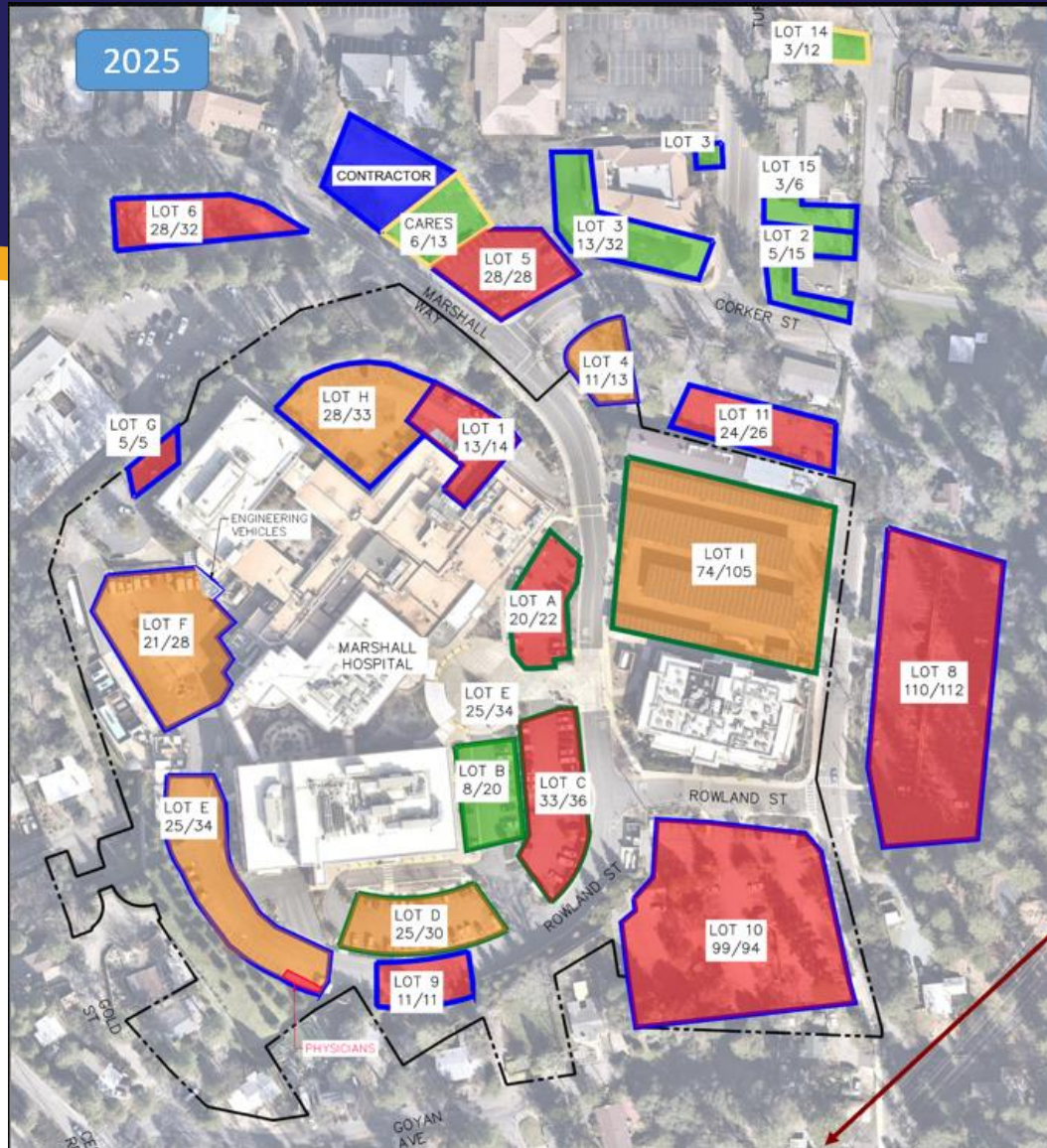
Date	Type	Supply	Demand		% Occupancy	
			AM	PM	AM	PM
Aug-22	Total	730	558	508	76%	70%
Dec-23	Total	742	562	548	72%	69%
Apr-24	Total	730	575	571	79%	78%
Feb-25	Total	772	607	590	79%	76%

- Includes ADA/LM spaces
- No morning counts were captured in 2021



# Parking Demand Heatmap

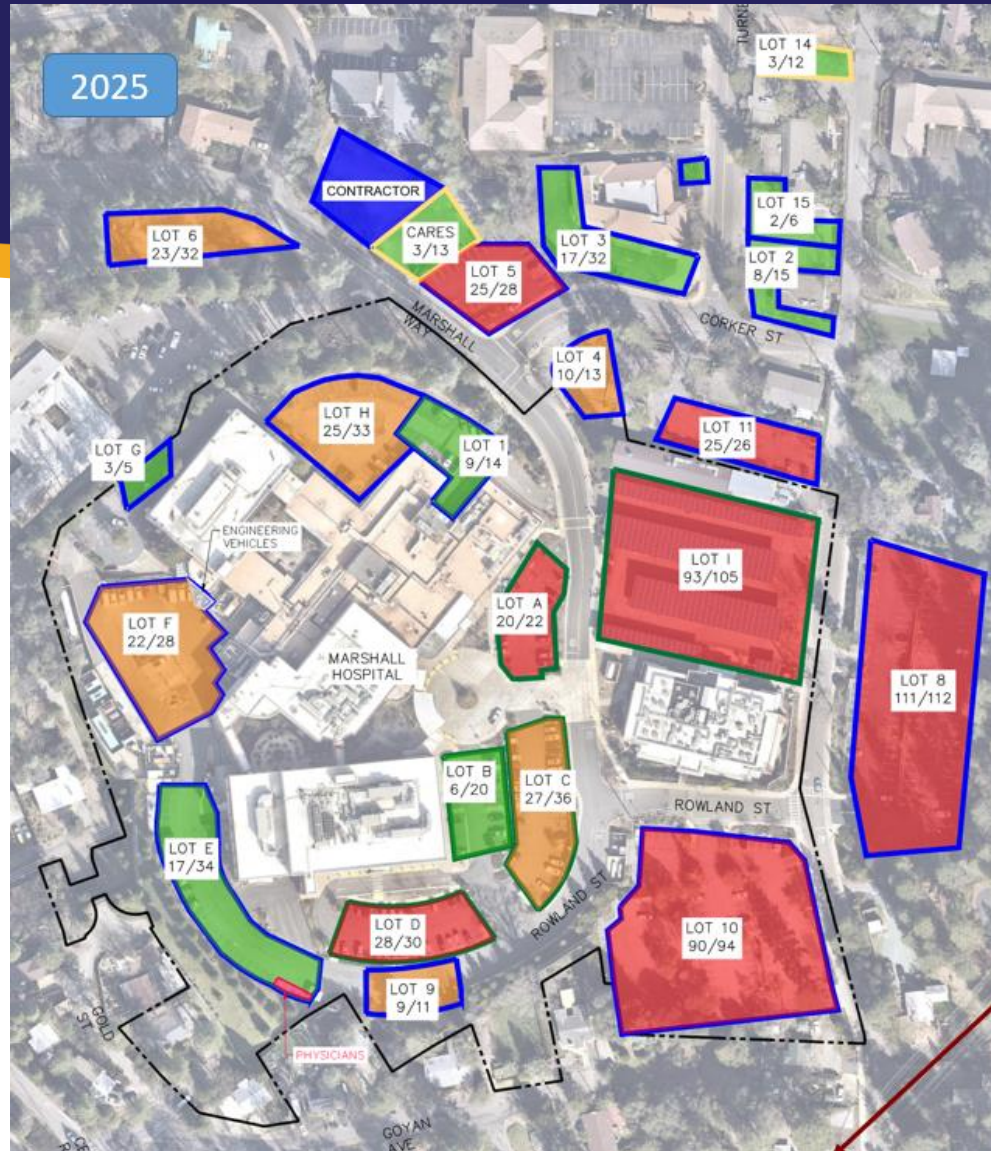
## February 2025 - AM Peak Hour



- Includes ADA/Limited Mobility spaces
- Morning Peak: 10 – 11 AM

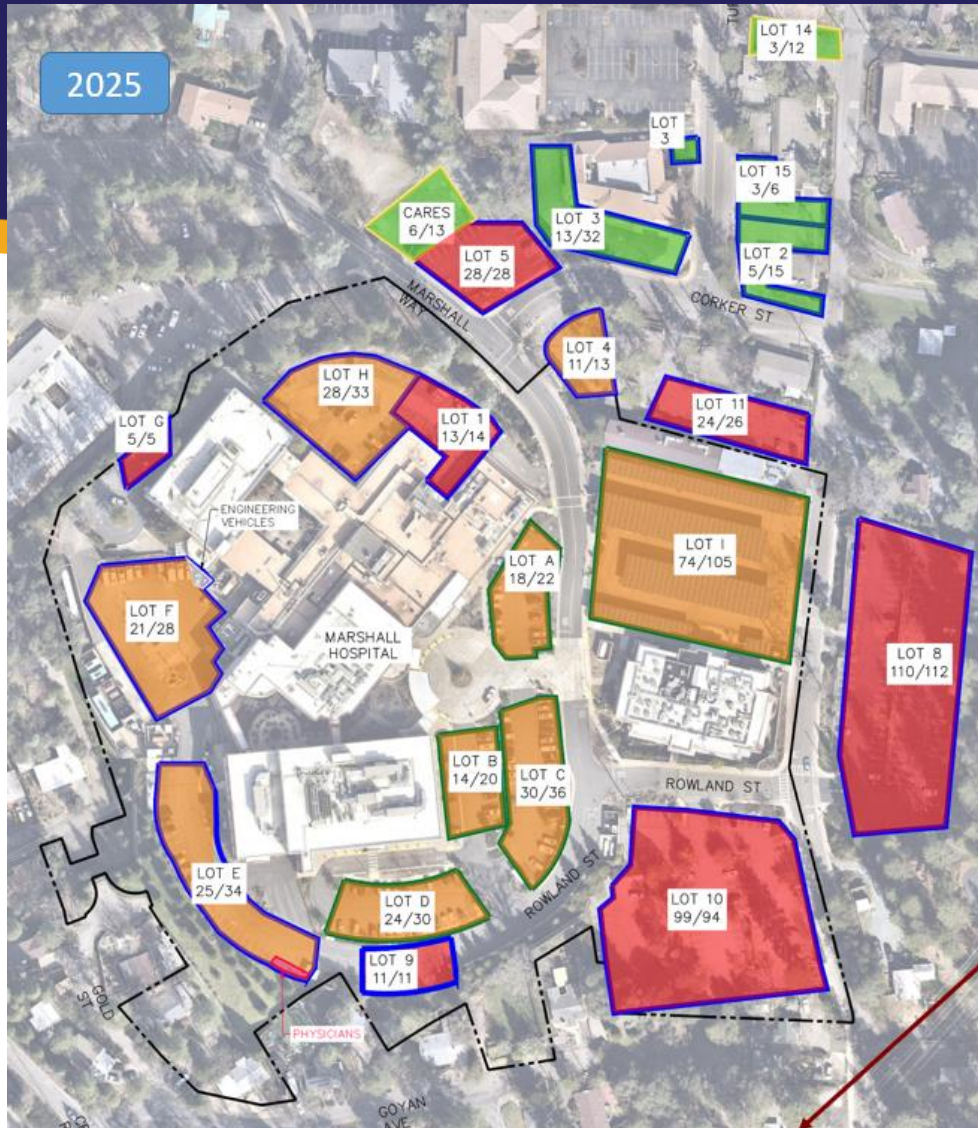
# Parking Demand Heatmap

## February 2025 - PM Peak Hour



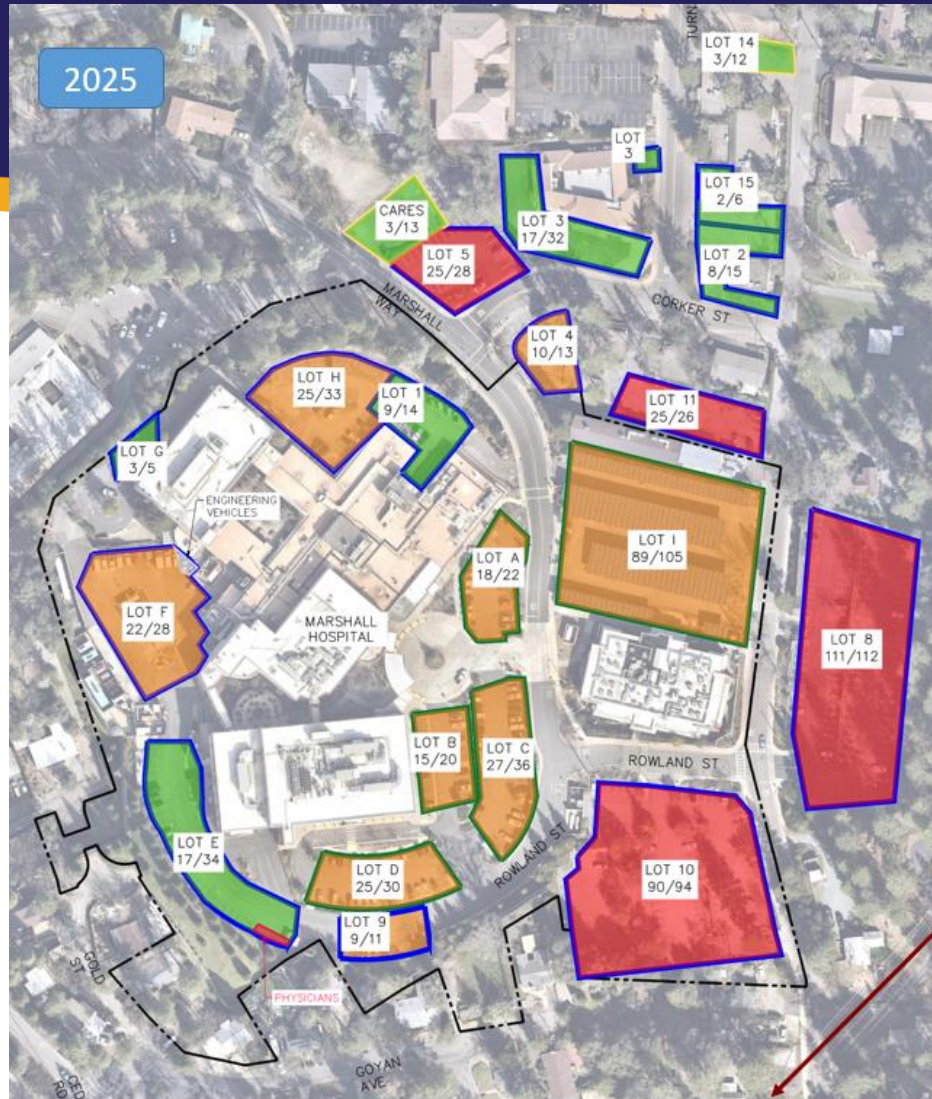
- Includes ADA/Limited Mobility spaces
- Afternoon Peak: 3 – 4 PM

# February 2025 Reallocation – AM Peak Hour



- Includes ADA/Limited Mobility spaces
- Contractor Lot and Lot 6 are not in-use
- Morning Peak: 10 – 11 AM

# February 2025 Reallocation – PM Peak Hour



- Includes ADA/Limited Mobility spaces
- Contractor Lot and Lot 6 are not in-use
- Afternoon Peak: 3 – 4 PM

# Summary



- Marshall Medical Center parking demand has been increasing slightly (3%-6%) since data collection started in 2021. Only marginal increases occur, which can be ascribed to increased bed census.
- **No parking structure is needed.** Overall supply exceed demand by 162 spaces in February 2025 in AM.
- Staff and visitors want to park as close as possible to the “front door” to avoid walking. The result is higher demand closer to the hospital and lower demand farther from the hospital.
- Staff park “inappropriately” in patient lots.

# Summary

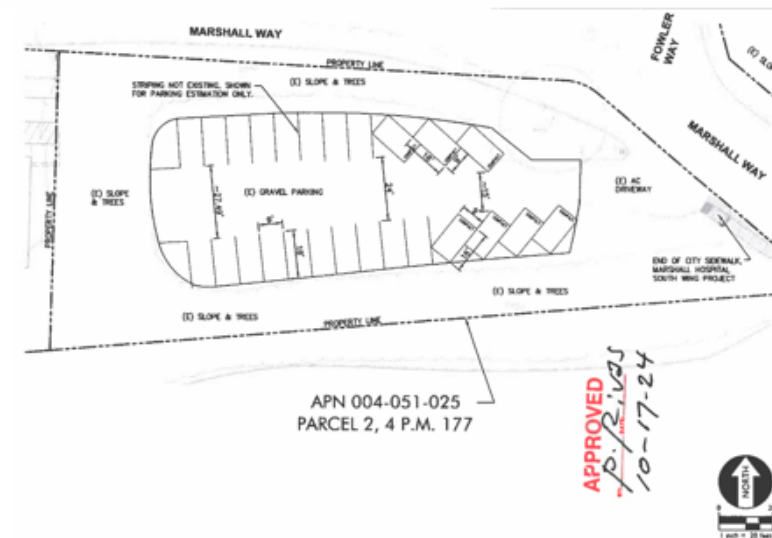


- The **Lot 6 and the Construction Lot** (currently under a temporary use permit) have gravel surfaces and cannot be included in the long-term parking supply data that will be submitted to the city.
- **Lot 6** provide overflow parking for staff.
- **Construction lot** provide parking for employees and construction workers as needed.
- The Lot 6 and Construction Lot can be included in the supply if they are paved (no dust) and lease agreements with landowner are signed.

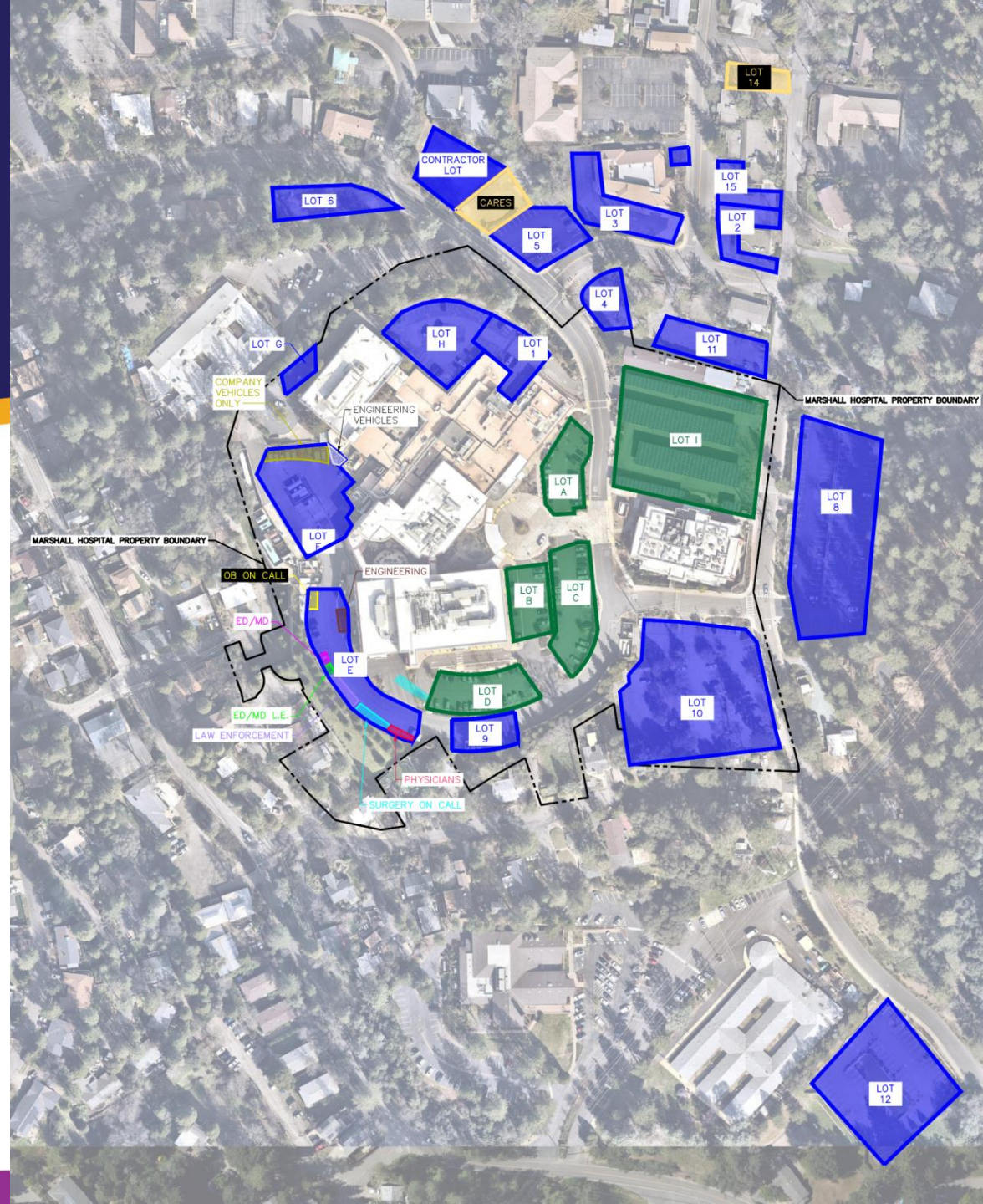
# Construction Lot and Lot 6 Temporary Use Permits



1. Permit holder shall maintain as approved and conditioned the portion of the site shown on the approved site plan attached as Exhibit A.
2. The parcel shall be maintained free of all trash and debris at all times. The parcel shall be free of dry grass and other dead flammable vegetation or materials at all times to the adjoining property boundaries. All trees on the parcel 20 feet in height shall be limbed up 6 feet from the ground and all trees more than 20 feet in height shall be limbed up 10 feet from the ground.
3. The driveway and parking areas shall be sufficiently graveled to prevent the creation of any fugitive dust or tracking of soil and mud onto the roadway.
4. Access to the temporary parking lot shall be from Marshall Way. An encroachment permit from the Engineering Department, if required, shall be subject to any necessary improvements at the drive approach to prevent damage to the City roadway and for prevention of stormwater drainage and siltation onto the roadway.
5. Signage shall be maintained to identify the parking lot for use by employees only.
6. The temporary parking lot is for use by Marshall Medical Center employees only. No storage of, or inoperative abandoned vehicles shall be permitted within the parcel.
7. A representative(s) of Marshall Medical Center shall coordinate with the Development Services Department to schedule presentations to the Planning Commission and City Council for review of a draft Marshall Hospital Parking (Plan) Analysis (Note: last submission - Administrative Draft dated September 29, 2021) and project overview and update on the development of the Washington Street Parking Lot which was scheduled for construction completion by May 2023. Said presentation shall occur no later than the end of February 2025. (Note: The proposed parking structure proposal replaced by the Washington Street Parking Lot had a completion date of July 2024.)
8. TUP 19-04 shall expire on October 17, 2025, unless extended by the Planning Commission. An application for an extension must be received prior to the permit expiration.



# Lot 12



# Summary



- **Lot 12** on Washington Street has low parking demand and is not in a desirable location. This lot is the “least favorite” based on demand data and observations, terrain, security and distance from the hospital. **Higher utilization.**
- **Overall demand for the campus is at 79%**, even though some lots are over capacity, given the spread and location of the parking lots.
- **Implement parking management strategies (April-May, 2025)**
  - **Parking decals**
  - **Simplified parking lot allocations (patients/visitors, staff, physicians)**
  - **Greater enforcement of patient parking use (no staff)**

# Property Activities



## Changes in Residential Properties

- 1124 Sherman Street – Vacated – With the City Engineer
- 1081 Goyan – Sold
- 1093 Goyan – Plan to sell
- 3185 Washington – Sold
- 3187 Washington – Sold
- 1126/1128 Corker – Plan to demolish

# Parking



Thank you!