

POLICY DOCUMENT

Policy Title:	Transport
Policy Group:	Whole Organisation
Policy Owner:	Chief Executive
Issue Date:	July 2019
Review Period:	24 months
Next Review Due	July 2021
Author:	CEO, Social Activities Coordinator
Cross References:	Maintenance, Wheelchair
Evidence:	CTA, DoT
How implementation will be monitored:	Supervision of volunteers and others by Social Activities Coordinator, weekly and monthly vehicle checks, policy audit
Sanctions to apply for breach:	Drivers not complying with policy may be removed from list of those authorised to drive or other disciplinary measures applied.
Computer File Ref.	O: new policy book: whole organisation: transport
Policy Accepted by MT	3 rd July 2019
Sign-off by CEO	

Statement of Purpose

This policy sets out the way in which the Hospital makes arrangements for transport whether of persons or goods. The policy makes particular reference to the use of the minibuses for patient transport and also covers the use of employees' own vehicles. The policy is designed to ensure that patients are safely transported, that vehicles used for transport are properly maintained and that the appropriate form of transport is correctly ordered.

Policy Statement

1. Responsibility for Transport

The Chief Executive has general responsibility for transport arrangements. Responsibility for co-ordinating use of the hospital minibuses is delegated to the Social Activities Coordinator. The Coordinator's responsibility is to make arrangements for external social and cultural events and to co-ordinate use of the hospital's two minibuses and the single wheelchair vehicle. It is hospital policy to give every patient the support and encouragement needed to make full use of such opportunities to promote independent living and the best possible quality of life

The Support Services Team is responsible for routine "user" maintenance of all vehicles and for liaison with contractors for periodic servicing and repair.

2. Ordering Transport

Arrangements for patient transport are likely in three circumstances - to meet urgent medical needs, for routine medical appointments and for social functions. Medical authority is required for the first two, which should be carried out by NHS patient transport. NHS ambulances should be ordered through Reception and 48 hours notice is required for non-emergency transport. Social functions are usually organised by the Social Activities Coordinator in liaison with a Senior Nurse.

3. Hospital Vehicles

Holy Cross Hospital provides vehicles suitable for use by people in wheelchairs to extend the range of activities and facilities accessible to them, to encourage independent living and to promote

rehabilitation. The availability of transport and the organisation of outings is not an integral part of the service that the hospital contracts to provide, but an extra amenity provided in so far as the means exists to support the work. The Hospital cannot undertake in general terms to provide transport to meet the specific needs of an individual patient although every effort is made to meet all reasonable requests.

4. Financial Guidelines

All NHS-funded patients are entitled to NHS ambulance transport without charge when travelling to receive NHS treatment and the patient's condition makes an ambulance necessary.

Non-NHS medical appointments should not be made through the NHS ambulance service. If a private ambulance is required the patient or their representative must agree in advance to meet all the charges.

The Hospital vehicles have been purchased out of charitable money. It is the hospital's policy to ask for contributions to meet the running costs from those who use the vehicle. There is no formal charge and no intention that any hospital patient without the means to contribute should be disadvantaged. Charitably donated funds may also be used for this purpose at the discretion of the Management Team. Advice about the current suggested contribution is available from the Social Activities Coordinator or Finance Manager.

5. Options Available for Patient and non-patient transport

Hospital Disabled Passenger Vehicle (Minibuses and Car)

There are three vehicles all of which are equipped for use with wheelchairs.

NHS Patient Transport

For use in connection with transport for NHS appointments or emergency treatment.

Private Ambulance

For use with non-NHS appointments or other journeys (e.g. to an airport) if a hospital minibus cannot be used.

Private car or Taxi

In exceptional circumstances it might be appropriate to use a private car or a taxi for patient transport. The Director of Clinical Services or a deputy must authorise such arrangements.

Private cars may be used for business purposes including transport to other hospitals for pre admission assessments, transport undertaken for marketing purposes, to training venues and for sundry other purposes including banking by accounts staff. Staff must check with a senior person (normally the Chief Executive or Director of Clinical Services) that the use is approved. It is the car driver's responsibility to ensure that there is suitable insurance cover for use of the car in this way. The procedures attached to this policy include the procedure for reclaiming transport costs.

This policy has been reviewed for overt or implied discrimination within the scope of the Hospital's policies on equality and diversity and none was found.

PROCEDURES

1. Arrangements for Use of Hospital Minibus

The Social Activities Coordinator makes all arrangements for transport and use of the vehicles. Detailed instructions for those driving the vehicle or participating as attendants are attached. On occasions outside bodies may wish to use the hospital vehicle for their own use. Such arrangements are also made by the Coordinator.

(See also the Minibus Risk Assessment statement.)

2. Booking NHS Patient Transport

a. Booking Procedure

Ward staff should complete a transport request form and give it to reception. Reception will then call the ambulance booking department with all the details and will be given a reference number which will be recorded in the ambulance bookings diary at reception. The request form is kept for reference.

Medical authority is required for all bookings except emergencies. Current telephone numbers are kept in the front of the book.

b. Urgent Bookings

In an emergency, any member of staff may dial (9)999 and ask for an ambulance.

c. Planned Bookings

At least 48 hours notice is required and bookings for two days later should be made by 1200 hours.

A request for the same day transport will be assessed on its merits and on vehicle availability but, in most cases, the request is not accepted.

In most cases Ambulance Control will only book “am” or “pm” requiring the patient to be ready for collection from either 0800 hours or 1200 hours respectively.

Routine transfer/discharge journeys are not carried out by the NHS over a weekend.

There is no guarantee that the journey will be undertaken at the time requested, although every effort will be made to deliver the patient on time for an appointment.

Patients requiring a return journey on the same day may have several hours wait before an ambulance is available.

Patients’ NHS status must be made clear at the time of booking.

The hospital may be requested to provide an escort. Escorts who are not returning with the patient will generally have to make their own way back to Holy Cross Hospital. Please consult with Nursing Administration about the return journey.

3. Hospital Car: Purpose and Authority to Use

The Hospital Car is adapted to transport one patient in a wheelchair. The vehicle is licensed for general use and may be used by staff for other business journeys, such as collection of light goods from local shops. Use of the car other than for official business is not permitted without the specific approval of the Chief Executive or Director of Clinical Services.

4. Vehicle Maintenance

Users should check fuel levels before setting out on a journey. Fuel in vehicles is checked weekly but there is no means of guaranteeing that sufficient remains for any particular journey.

Routine checks including water, tyre pressures and lights are carried out by the Support Services Team who are also responsible for cleaning the inside and outside of the vehicles. However all drivers are responsible for making their own checks that the vehicle is safe for use before taking it on the road.

The Hospital shall make arrangements for each vehicle to be serviced annually or as required.

Any faults found with the vehicle should be reported in writing to the General Manager or Assistant immediately. Similarly any accidental damage, however caused, should be reported immediately on completing the journey.

All users are requested to leave the vehicle on return in as clean a state as possible and to park it in the place allocated. The vehicle's log book must be completed after every journey.

5. Financial Procedures

Claim forms for petrol costs etc. will only be approved if prior authorisation was given to the car's use. A travel claim form, available from the Accounts Office, must be completed and authorised before payment can be made. It is the responsibility of the car driver to ensure that the insurance cover is appropriate for the journey in question.

The hospital will normally only reimburse petrol costs for journeys in connection with training courses. In other circumstances a mileage rate may be paid.

The hospital derives much assistance from volunteers to make the trips possible. Volunteers drive and accompany wheelchair patients. We are very grateful to all those who give their time in this way and we will reimburse all out-of-pocket expenses incurred. Sometimes a family member accompanies a patient as an attendant and in these cases only one contribution is requested for the transport. All theatre tickets, meal costs etc. for the family member must be paid in full in advance to the Social Activities Coordinator. When an escort is needed in the theatre (or wherever) and a volunteer undertakes this role, the volunteer's expenses may be met.

Management Team will set out suggested levels of contribution and revise them from 1st April each year.

The rates will vary depending on whether the trip is in-house for a single user or multiple users or external use by another charitable organisation.

Information on these suggested rates is available from the Social Activities Coordinator or Director of Finance.

Occasionally individual patients need transport to other hospitals for medical treatment etc. If the journey would be eligible for NHS ambulance transport but there are special reasons why the journey would be better undertaken in the hospital vehicle, the Chief Executive should be consulted. Approval to reimburse may be given by the "purchaser" (i.e. Primary Care Trust or other funding body) to reimburse the hospital's costs in providing the transport and any escorts needed so long as the application is made in advance.

GUIDELINES AND INFORMATION FOR ALL DRIVERS OF MINIBUSES

This statement is applicable from January 2017 and will be due for review by December 2019.

- 1.1 The Hospital has established the following arrangements for use and operation of its minibuses. The purpose of making the minibuses available is to enhance the patients' quality of life and all use should be planned with this objective in mind.
- 1.2 The Social Activities Coordinator will hold an approved list of drivers and all must be assessed regarding their competency. Only assessed and authorised drivers may use Hospital minibuses. All drivers must complete the Drivers' Declaration Form.
- 1.3 The importance of safety of patients and other passengers on all journeys cannot be overstated. Staff and volunteers are to give this priority when planning trips. Staff and volunteers are required to consider all of these guidelines when planning journeys that involve the transportation of patients in Hospital minibuses.

2 Prior to journey

- (a) Drivers, driving times, rest stops and the route to be taken, must be planned before the journey is undertaken. For outward journeys greater than 100 miles or greater than 60 miles between 7pm and 5am, these details should be written down in advance and checked by the Social Activities Coordinator or an appropriate senior manager.
- (b) The condition of the minibus should be examined before departure to ensure that it is roadworthy and legal. Particular attention should be paid to:
 - lights, horn, indicators and stop lights
 - brakes
 - windscreen washers and wipers
 - tyres for inflation, wear and general condition
 - engine oil, fuel and water
 - reflectors
 - vehicle body for damage likely to cause injury. (NB: The driver is legally responsible for the roadworthiness of the vehicle. If the driver is not happy with the vehicle, he/she should not use it and should refer the problems to the Social Activities Coordinator or another appropriate senior manager.)
- (c) Once loaded
 - all gangways must be kept clear of baggage and exits must not be blocked
 - all doors must be checked to ensure they are secure and must not be locked. This must again be checked each time they are opened
 - where seatbelts are fitted, they must be worn
 - the seating capacity for the minibus must not be exceeded
 - the Log Book for the minibus should be completed before departure and at the end of its use

3 Whilst Driving

- (a) Drivers are reminded that the speed limits established by the Hospital for the safety and welfare of passengers in the minibuses are as follows:
 - i) 70mph on motorways
 - ii) 60mph on dual carriageways
 - iii) 50mph on all other roads subject to the national speed limit
 - iv) All other lower speed limits
- (b) Drivers are expected to observe all laws of the road with particular attention to speed limits.
- (c) Drivers must not use a mobile telephone whilst driving.
- (d) **No alcohol** is to be consumed within 8 hours of the commencement of any driving period and certainly not during a driving period.

- (e) Drivers should take a 20 minute rest stop, out of the minibus, after 2 hours of continuous driving. Drivers may drive a maximum of 4 hours in one driving session and should then take a least a 1-hour break before commencing another driving period.
- (f) Drivers should not drive for more than 6 hours in any 18 hour period without a minimum of 6 hours good sleep.
- (g) Drivers should limit driving between 11pm and 5am to 1 hour.
- (h) For outward journeys greater than 10 miles, two members of staff must be present in the minibus.
- (i) Parking: There is a disabled person's parking badge permanently available in the minibus. This entitles the vehicle to be parked in marked disabled areas of car parks etc. The driver is responsible for ensuring that the vehicle is parked legally.

4 Action in the event of breakdown or emergency

- (a) The Social Activities Coordinator will ensure that all Hospital vehicles have a suitable contract for breakdown recovery and roadside assistance and all Hospital vehicles should only be used on longer journeys with a mobile phone available to summon assistance.
- (b) In the event of a vehicle breakdown, then the driver in control of the vehicle must use appropriate breakdown services.
- (c) In the event of breakdown on dual carriageways or motorways, then the driver in control of the vehicle must ensure that all patients and other passengers are safe and must remain with the vehicle.
- (d) In the event of an accident, the driver must follow procedures detailed within the Hospital's vehicle insurance policies and arrange for appropriate emergency service attendance, contact the Hospital.

- (e) Contact details for the Chief Executive are as follows

Holy Cross Hospital, Haslemere, Surrey, GU27 1NQ. Tel 01428 643311; Fax 01428 644007; Email info@holycross.org.uk

5 On completion of a journey

- (a) The minibus should be returned to the parking area at the Hospital unless other instructions have been given;
- (b) The Log Book should be completed and any faults, no matter how minor, should be recorded;
- (c) Any waste should be removed from the vehicle. In the event of the spillage of body fluids during the period of use, the circumstances should be reported to the nurse-in-charge in the hospital on return of the vehicle;
- (d) Keys must be returned to the person or place agreed with the Social Activities Coordinator (or handed to the Nurse-in-Charge in the Hospital);

Where approved drivers (whether staff, volunteers or family members) have been seen to ignore these arrangements or breach the guidelines, consideration will be given to the withdrawal of approval to undertake driving duties. The decision of the Chief Executive in such matters will be final.

6 Competence and fitness of Drivers

1. Have had an assessment of suitability to drive conducted by a nominated member of the Hospital staff.
2. must have a valid driving licence
3. Must be able to satisfy the eyesight requirements set out in the Highway Code
4. Should not drive whilst taking medication that might impair judgment