# Falkland Islands Government Item 10.2

#### Department of Health and Social Services



## Non-Emergency Transportation for Service Users Policy

- Author: Healthcare Governance Manager
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## **Amendment History:**

Version	Status	Summary of changes	Date of issue	
V1.0	Final	<b>Ratified by Senior Management Team</b>	Aug 2014	
V2.0	Draft	Reviewed and Revised by HM – Changes made to Mobility categories		
V2.0	Final	Ratified by SMT - To be submitted to HMSC M for approval		
V2.1	Draft	Changes to eligibility criteria and assessment tool added- JW	January 2022	
V3.0	Final	Ratified by SMT Feb 2022		

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## 1. Introduction

The Health and Social Services department recognises that some service users, due to their identified health/medical condition, are unable to make their own travel arrangements to attend Health and Social Services appointments/activities.

The Health and Social Services department is responsible for, and recognises its obligation to; provide a safe, effective, punctual and professional non-emergency transportation service for identified service users.

The use of hospital-provided transport must be judiciously sanctioned. All means to reduce reliance on hospital-provided transport should be exercised where available.

Transportation will be provided in a range of vehicle types, each with levels of care consistent with the service users identified needs.

The policy provides information for all healthcare professionals who will be eligible to make transportation arrangements on behalf of service users.

## **2.** Aim

To ensure all staff are aware of the correct procedure for booking transportation in a non-emergency situation, and to ensure appropriate use of the service by ensuring that service users meet the eligibility criteria or have had a needs led assessment prior to being offered non-emergency transport.

## **3.** Objectives

To define the eligibility criteria that service users must meet in order to have access to the non-emergency transportation service, and to provide a needs lead assessment tool.

To ensure all staff have clear guidelines as to who is able to book this service for service users.

## 4. Scope

This policy applies to all staff involved in authorising and ordering service users transportation within the Health and Social Services Department.

### **5.** Definitions

A **non-emergency** service user is one who, whilst requiring treatment (which may or may not be of a specialist nature), does not require an immediate or urgent response. A clinical need for treatment does not imply a medical need for transportation. Nonemergency service users assessed to be in medical need of transportation may not necessarily require an ambulance; other forms of transportation may be more appropriate and cost-effective.

## 6. Policy

### 6.1 Eligibility

To be eligible for transportation, a service user must clearly meet the criteria laid out in appendix A, or score 5 of more in a needs lead assessment (appendix B), identifying what prevents **te**m from using public or private/personal transportation. Financial or social care grounds are not reasons for granting transportation. If a service user can normally get around without support and assistance they should not be offered transportation.

#### 6.2 Assessment

Qualified healthcare staffs need to assess;

- a) That the service users need non-emergency transportation by the Health andSocial Services Department
- b) How they normally get around and why this is not suitable
- c) The type of transportation most appropriate to meet the needs of the serviceuser
- d) Whether an escort is needed
- e) Inform the duty driver of the needs
- f) Complete the initial documentation
- g) Review the need at a maximum of 12 weeks, if referred back by driver.

#### 6.3 Availability

The department recognises that service users should be able to travel to and from appointments/activities in a reasonable time and in reasonable comfort without detriment to his or her clinical condition.

The service user has to understand that the duty driver is also the EMERGENCY driver and that any emergency call will take priority. The service user may therefore have to wait while alternative transportation measures are arranged.

Service users with their own specially adapted wheelchair may travel in them so long as the driver knows in advance in order to use the correct vehicle. Other wheelchair users may be asked to transfer from a wheelchair to a seat for their own comfort and safety. Other forms of specialist equipment can be catered for.

The process of booking service user transportation is centralised and controlled. It will be audited for efficiency and effectiveness.

Those members of staff who have the relevant licenses/insurance to carry passengers in government vehicles can transport service users to and from the appointments/activities, if the need arises.

#### 6.4 Needs led assessments

Only clinically qualified staff may authorise the provision of transportation, these include:

- a) Doctors and Dentists
- b) Registered Nursing Staff, including Community Support Staff, and PracticeNurses
- c) Registered Professionals Allied to Health including, Physiotherapists, Speechand Language and Social Services

This list is not intended to be exhaustive. It does demonstrate that it is clinically qualified staff who are authorised to make the needs led assessment that the service user meets the criteria.

## 7. Duties and Responsibilities

## The Hospital Manager

- a) Will ensure that the overall arrangements for the provision of service user transportation services are effective, represent value for money and are responsive to service users' needs.
- b) Will be responsible for preparing specifications that identify the numbers and types of service users to be transported, the areas and facilities to be served and the standards of service required.
- c) Will be responsible for ensuring that guidance on ordering transportation is up-to-date and available to staff throughout the department.
- d) Responsible for ensuring that the guidance attached at Appendices A D are prominently displayed and easily accessible at the point at which transportation is ordered by staff eligible to do so and that the guidelines are being adhered to at all times.

#### **Clinical Staff**

- a) Carries out a needs led assessment
- b) Completes the request form
- c) Re-assesses when requested to do

#### Driver

- a) Holds a drivers license to carry passengers
- b) Has completed the FIG motor insurance declaration form
- c) Has undertaken manual handling training
- d) Alerts clinical staff f re-assessment

required

#### 8. Auditable Standards

- a) All forms and documentation have been clearly and correctly completed.
- b) All service users meet eligibility criteria or score 5 or more on a needs lead assessment.
- c) All frequent use service user has their ongoing need for transportation assessed at least every 12 weeks, if referred back by driver.
- d) Drivers will have had mandatory training in moving and handling.



## **Eligibility Criteria for Service Users Transportation**

## Eligibility

Grounds for eligibility, which will be determined by a healthcare professional include:

- Service users with a medical condition, disability or infirmity that would make it impossible for them to use private transportation\*\*, or it would compromise their dignity to do so. This may include:
- Service users who require skilled medical assistance for transfers in and out of the vehicle.
- Service users who cannot walk without continual physical support (not including the use of a walking stick or Zimmer frame).
- Service users who may become very unwell during the journey e.g. as a result of side effects from treatment that they have received.
- Service users that can only be transported on a stretcher.

# This is provided that the service user does not ordinarily use private transportation means and has no access to such.

- Service users who have a clear need to **travel** in a wheelchair i.e. their wheelchair requires mechanical clamping in a vehicle during transport. This is providing they do not have a specially adapted vehicle available to them.
- Service users that require transport with specialist medical equipment or supervision from a healthcare professional, and transportation by private means would not be suitable. This may include:
- Patients with a continuous parenteral infusion.
- Patients with an oxygen cylinder.

\*\*Private transportation can be any privately-owned vehicle, friends, family, and can includetaxis

Transportation may also be provided to an eligible service user's escort or carer where this is deemed necessary. This decision should be made on a health/medical needs basis and again authorised as detailed above.

Where a service user has been granted eligibility and is a frequent user, the ongoing eligibility should be re-assessed on a regular basis, in most cases every 12 weeks. Drivers are responsible to refer service users back to a relevant professional where they feel the service user's circumstances have changed.

Distance from the hospital and financial concerns are not reasons for granting hospital-provided transport. Service users in receipt of an attendance allowance, or who may be eligible for one, can be referred to Social Services to ensure they are receiving sufficient allowances to cover their transportation needs.

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### Escorts

Escorts can only be provided if the following criteria are adhered to:

- The service user's clinician has requested an accompanying person
- The escort provides a skill or support to the service user which we would be unable to routinely supply. This can cover both emotional and/or physical or technical support
- The patient's condition makes in unsuitable/ unsafe for them to travel unaccompanied.
- Is a recognised parent/guardian/carer where a child is conveyed

Please note that the escort is in addition to the driver.

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## Appendix **B**

## Needs lead assessment for non-emergency transport



#### To be used if service user does not meet criteria in appendix A, but it is felt that a need still exists.

The following assessment criterion has been developed to ensure hospital-provided transport is granted to patients who are entitled to it. These questions enable those assessing a patient's entitlement to make a clear decision and to be able to give those asking for patients transport an understanding why they are not entitled to receive hospital-provided transport and what alternatives exist.

Assessing entitlement

(see next page).

FULFILLING ANY OF THE ENTITLEMENT CRITERIA IN APPENDIX A WILL MAKE THE PATIENT ELIGIBLE TO HOSPITAL PROVIDED TRANSPORT	If patients do not have a medical reason listed or are assessed as not eligible for booking hospital-provided transport the following advice should be offered.
<ul> <li>If the MEDICAL reason is not detailed in the entitlement criteria the assessment team will use the next series of questions</li> <li>Part 1 <ul> <li>What medical condition does the patient have that requires skilled assistance to transfer to and from a vehicle?</li> <li>What disability or condition does the patient have that makes it impossible or medically undesirable to travel by private transportation?</li> <li>What medical condition does the patient have that means there is a likelihood that an event could occur during transit that would require skilled assistance?</li> <li>What medical condition or disability does the patient have that may result in a risk to themselves or others?</li> </ul> </li> </ul>	<ul> <li>Patients should be reminded that hospital transport is only provided for those people with a medical need.</li> <li>Contact details of local taxi companies can be provided.</li> <li>In the case of financial concerns consider referral to Social Services.</li> </ul>
<ul> <li>Part 2</li> <li>How would the patient usually travel to other appointments or engagements?</li> <li>Does the patient routinely (at least monthly) get into a normal car by themselves and travel as a passenger? This includes taxis.</li> </ul>	
Hospital-provided transport will only be provided if after answering any combination of the above the patient achieves the assessment weighting of +5 as assessed	

## <u>Part 1</u>

- What medical condition does the patient have that requires skilled assistance to transfer to and from a vehicle?
- What disability or condition does the patient have that makes it impossible or medically undesirable to travel by Public transport?
- What medical condition does the patient have that means there is a likelihood that an event could occur during transit that would require skilled assistance?
- What medical condition or disability does the patient have that may result in a risk to themselves or others?

## <u>Part 2</u>

- How would the patient usually travel to other appointments or engagements?
- Does the patient routinely (at least once a week) get into a normal car by themselves and travel as a passenger?
- Does the patient use private taxis?

Assessment score for entitlement +5

#### Part 1

- Medical Condition/Disability is such that further assessment is not needed + 5
- Medical Condition/Disability is such that further assessment is needed + 3

#### Part 2

- Patient uses private transport, taxi, own car or walks to other appointments 3
- Patient only receives home visits from GP + 2
- Patient routinely travels in a car as a passenger (at least once a month)
   3

Hospital-provided transport will only be granted if after answering any combination of the above the patient achieves the assessment weighting of +5 as assessed.



## **Mobility Categories**

Please help the transportation providers to dispatch the right vehicle by selecting the appropriate mobility type from the list below:

CategoryNumber	Definition
C1 Car and Driver	<ul> <li>Service user can walk without assistance and has no problems with getting in and out of low access vehicles</li> <li>For walking service users unable to use public transportation due to their health/medical condition</li> <li>Service users able to get into a car with the assistance of a voluntary care driver; or</li> <li>Service users able to travel by car but who need to take their own folding wheelchair</li> <li>Service user requires a wheelchair to and from the vehicle, and requires minimal transfer assistance.</li> <li>Service user who can get in and out of a car.</li> <li>For Service users who need assistance with walking</li> <li>Service user needs child or baby seat and is travelling with parent or guardian</li> </ul>
	*Please note that we do not provide car seats for infants/children – these must be provided by the parent/guardian.
L1 Landrover and Driver (only to be used if car unavailable)	<ul> <li>Needs 2 members of staff to transfer</li> <li>The service user has a wheelchair, but can transfer to a seat on the vehicle, with the chair travelling as a stowed item</li> </ul>
TIC Travel in Chair	<ul> <li>The service user has own <u>manual</u> wheelchair and will be required to stay in this chair for the duration of the journey. No manual handling of the service user will be undertaken.</li> <li>The service user has own <u>electric</u> wheelchair and will be required to stay in this for the duration of the journey. No manual handling of the service user will be undertaken.</li> <li>The service user requires a wheelchair to be provided by the department and will need to remain in this for the duration of the journey.</li> <li>Service user is unable to transfer without lifting aid</li> </ul>



# Service user Transportation Request Form

Service users Name:			
Meets eligibility criteria OR Scores 5 or more in needs led assessment [] (tick as appropriate)			
Collect from: (Full Address)		Deliver to:	
Date and Time (if applicable – single use)		Date and Time (if applicable – single use)	
Mobility		Journey Type	
CategoryNo.	Comments	Primary Care Apt – return journey required	
		Day Case - return journey required	
		Admission	
		Discharge	
		Transfer	
		Other	
Is escort medically necessary? Yes/No		<b>Booked by</b> Dr/Nurse/AHP/Other – please state	
Medical reason for transportation		Print Name	
		Signature	
Special Instructions:		Date	
		Review Date (no longer than 12 weeks from dateabove)	