



Public – To be published on the Trust external website

Taxis and Secure Patient Transport Procedure

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1 Introduction

Tees, Esk and Wear Valleys NHS Foundation Trust (the Trust) recognises the necessity for a consistent and documented approach to the appropriate use of taxis and secure patient transport, and the avoidance of misuse.

This procedure is critical to the delivery of [Our Journey To Change \(OJTC\)](#) and our ambition to co-create safe and personalised care that improves the lives of people with mental health needs, a learning disability or autism. It helps us deliver our three strategic goals as follows:

- This procedure supports the Trust to co-create a great experience for all patients, carers and families from its diverse population by ensuring access to appropriate care via the use of appropriate transport resources
- This procedure supports the Trust to co-create a great experience for colleagues by providing concise and transparent guidance for the appropriate use of transport services to be well led and managed
- This procedure supports the Trust to be a great partner by having a shared understanding of the needs of our communities

2 Purpose

This procedure will assist the Trust to simplify the process for patient transport to ensure timely, safe and efficient patient transport across all parts of the Trust.

3 Who this procedure applies to

- All Trust employees

4 Related documents

This procedure also refers to:

- [Medicines - Ordering Storage Security Transporting and Disposal](#)
- [Transport Procedure for Trust Pool Vehicles and Transport Services Provided by External Providers](#)
- [Safe Use of Mechanical Restraints Equipment](#)
- [Travel and Subsistence policy](#)
- [Records Management - Moving Records and Sensitive Information Procedure](#)

- [Conveyancing of Patients Under The Mental Health Act 1983 Inter Agency Policy](#)
- [Mechanical Restraint Equipment – Safe use of - Procedure](#)

5 Procedure - Overview

A Clinical Risk assessment must be completed and documented prior to transportation.



NHS funded transportation is reserved for when it is considered essential to ensure patient safety, safe mobilisation, condition management or recovery. Trust employees are **not permitted** to approve transport provided by the NHS to non-eligible people.

Please refer to Section 3. Qualifying Criteria of the NEPTS guidance, summarised in Section 5.1.1 Eligibility.

5.1 Procedure - Non-emergency Patient Transportation (NEPT)

NEPT is provided to a patient who requires:

- Admission from home/temporary address to an inpatient unit or place of safety (POS); this may include detention under the Mental health Act dependent on risk
- Transfer between Trust inpatient units; this may include detention under the Mental health Act dependent on risk
- To/from home/potential accommodation as part of a planned discharge process
- Discharge from an inpatient unit or POS to a home/temporary address or another service
- To/from home/temporary address to attend a therapy/treatment session whereby a patient has been assessed as eligible in accordance with the Non-emergency Patient Transport Service (NEPTS) eligibility criteria

5.1.1 Eligibility

Where transportation is not considered essential to ensure patient safety, safe mobilisation, condition management or recovery in accordance with Section 3. Qualifying Criteria of the NEPTS guidance, NHS funded transportation is not permitted. Patients are to use:

- Own transport or non-NHS funded taxis
- Assistance from a relative, friend or carer using own their own vehicle or escorting on public transport or in a non-NHS funded taxis
- Public transport, including community transport
- Mode of transport entitled to as part of funded social care provision or a social security benefit i.e. PIP
- A local authority issued bus pass

NHS funded transport may only be used if there is a medical, mobility or safeguarding requirement, namely:

- Require oxygen during transit and unable to self-administer
- Need specialised equipment during transit
- Need to be specially monitored during transit
- Need to be transferred to another hospital
- Have a medical condition, have undergone major surgery i.e. a transplant and/or the potential side effects of treatment are likely to require assistance or monitoring during transit
- Have a medical condition or disability that may compromise personal dignity or cause public concern on public transport or in a licenced taxis or private hire vehicle and do not have access to appropriate private transport (patient ambulance)
- Have a communicable disease thereby travel on public transport or in a licenced taxis or private hire vehicle is not advised and do not have access to appropriate private transport (patient ambulance)
- Have been clinically determined as at risk from using public transport due to being immunocompromised and do not have access to appropriate private transport (patient ambulance)
- Have a cognitive or sensory impairment requiring the oversight of a member of specialist or non-specialist patient transport staff or suitably trained driver e.g. dementia, confused state of mind, learning/communication difficulties, hearing loss, severe impaired sight, personal risk travelling independently (refer to Section 5.2)
- Have a significant mobility need thereby unable to travel relatives/friends and/or escorts/carers whether by private transport (including a specially adapted vehicle if appropriate for the journey), public transport, licenced taxi private hire car e.g. need to travel lying down, special bariatric transport, unable to self-mobilise (refer to Section 5.2)
- A safeguarding concern raised by a professional involved in the patient's life in relation to travelling independently (refer to Section 5.2)

- Wider mobility or medical needs resulting in treatment or discharge being missed or severely delayed (refer to Section 5.2)

5.1.2 Type of Transport

Advance planning of all journeys is required by staff members to ensure the most appropriate mode of transport is used. Examples of NHS funded NEPT transport include:

- Pool cars
- STR worker, discharge facilitators and Care Navigators
- Clinical staff using private vehicle (must have the appropriate vehicle insurance for the transportation of patients; this is not restricted to Trust business use - refer to the [Travel and Subsistence Policy](#))
- Transport entitled to in accordance with funded social care provision or a social security benefit (please refer to [Healthcare Travel Costs Scheme \(HTCS\) - NHS \(www.nhs.uk\)](#))

5.1.3 Taxis Transportation

A taxi is only to be used where:

- There is no alternative transport available and travel is urgently required, for example an urgent discharge
- Urgent transportation to the Trust or an Accident and Emergency department
- Unable to drive or use public transport due to a medical condition
- Agreement with a Local Authority at Overview and Scrutiny Committee as a consequence of Trust transformational projects, schemes or changes associated with capital programmes and decant programmes resulting in extended patient
- Commissioned services with a care delivery plan requiring patients to access service locations on a daily basis, for example Adult Eating Disorder Day Services, where no alternative and appropriate mode of transport is available
- Repatriation to home area for patients:
 - Placed by the Trust outside of home area due to bed availability and clinical pressures, where no alternative and appropriate mode of transport is available
 - Accessing Section 136 Suites outside of home area due to lack of availability within home area, where no alternative and appropriate mode of transport is available

- Access to specialist services requiring an intense period of care at a specific Trust site, for example ECT provision, where no alternative and appropriate mode of transport is available
- Travel distance is exceptional and travel by public transport is onerous and difficult
- Limited and complex public transport options exist, particularly in rural areas, where no alternative and appropriate mode of transport is available



Pre-agreed NHS funded transportation via a Care arrangement is permitted.

NHS funded transportation is not permitted for carers. The Trust will support carers in the use of public transport, local voluntary options and local carers resources, where required. A refund of reasonable travel costs may be available under the Healthcare Travel Cost Scheme (HTCS), if eligible.

Where medical care is being provided 'out of area', the travel distance is considered significant, private transport is not available and use of public transport, local voluntary options and local carers resources is not available or practical, NHS funded transportation is permitted, including mileage reclaim. This is to be assessed on a case by case basis and approved by a Band 6 or above.

5.2 Secure Transportation

Secure transportation is permitted where there is a medical, mobility or safeguarding requirement per the eligibility criteria.

5.2.1 Eligibility

- Admission to, or transfer between, an inpatient unit (including out of area) requiring additional ambulance crew(s) with additional training due to the assessed risk of the person to self and/or others; this may include detention under the Mental Health Act dependent on risk
- People subject to a Community Treatment Order recall
- People supported to return from being Absent Without Leave
- People subject to detention under the Mental Health Act attending court
- Ministry of Justice patients
- Have a cognitive or sensory impairment requiring the oversight of a member of specialist or non-specialist patient transport staff or suitably trained driver

- e.g. dementia, confused state of mind, learning/communication difficulties, hearing loss, severe impaired sight, personal risk travelling independently
- A safeguarding concern raised by a professional involved in the patient's life in relation to travelling independently



When using NHS funded transportation there may be cultural, religious or specific requirements that should be considered when making a reservation, for example gender of the escort/driver.

A Travel Risk assessment must be completed prior to arranging secure transportation.



When using secure transport, Trust employees must ensure the appropriate classification of transport is selected, ensuring the security level of the vehicle and staffing of the vehicle is in accordance with the Clinical Risk assessment.

5.3 Patient Ambulance Transportation

When it is not suitable to use modes of transportation per Section 5.1.2 and it is not necessary to use secure transportation, a patient ambulance is to be used.

6 Staff Transportation

Staff transportation by taxi is only permitted:

- To transport staff on call, where no other mode of transport is available
- To transport staff urgently required at a different Trust site, where no other mode of transport is available
- A staff member is unwell during work hours and it is deemed unsafe for the staff member to drive
- To support patient observation at a different hospital, where no other mode of transport is available
- For postgraduate doctors working 'out of hours' and feeling fatigued – Medical Staffing cost centre to be used (manager approval is not required)

7 Transportation of Goods

A taxi is not to be used for the transportation of goods unless it is deemed urgent, for example urgent bloods obtained during out of hours, the transfer of a medication card etc... If a taxi is required, consider if other goods going to the same location can also be transported.

All items are to be appropriately packaged and labelled to ensure security and confidentiality during transportation or patient related goods.

Transportation of goods such as mail, patient property and specimens with advanced notice are to be sent via scheduled Trust collections/deliveries.

Alternative modes of transportation for the transportation of goods are:

- Courier
- Porters
- Volunteer drivers
- Pool cars
- STR worker, discharge facilitators and Care Navigators
- Staff using private vehicle, including leased cars (must have the appropriate vehicle insurance for the transportation of patients; this is not restricted to Trust business use - refer to the [Travel and Subsistence Policy](#))

Courier transport is available for the transportation of medical records, x-rays, specimens, goods or equipment, where required. Please refer to the following policies:

- [Records Management - Moving Records and Sensitive Information Procedure](#)
- [Infection Prevention and Control Policy](#)
- [Infectious Diseases](#)

8 Taxis and Secure Transportation Booking



When appropriate use of a taxi or secure transportation is identified, approval must be obtained from the ward/unit/team manager or the nominated deputy prior to making arrangements.

All bookings must be recorded on the Transport Booking template, stored centrally by each ward/unit/team.

9 Taxis Waiting Times

It is the responsibility of all staff to ensure booking times are realistic to avoid the trust incurring unnecessary cost for waiting time by taxis providers.

If a return journey is required, a second taxi must be booked to prevent unnecessary cost for waiting time.

If a journey is out of area, bookings with two separate taxis providers are required based on the home and out of area location.

10 Invoicing and Budget Management

Taxis usage will be reported to budget holders on a monthly basis by Financial Management. It is the responsibility of all budget holders to ensure all taxis usage is approved and validated.

Non-adherence to procedure is to be addressed by budget holders in a timely manner.

10.1 Invoicing

It is the responsibility of the Financial Control Department to ensure the timely processing of taxis provider invoices to prevent delay in settlement of invoices and ensure continuity of service.

On receipt of invoices, details of all taxis journeys are collated within Excel and sent by email to budget holders for review, to provide approval within 5 working days of receipt of the information. Any journeys incorrectly invoiced and/or non-adherence to procedure are to be communicated to the Financial Control Department.

Failure to review and provide timely approval will be monitored and reported by the Financial Control Department.

10.2 Responsibilities

| Role | Responsibility |
|--|---|
| Service manager | <ul style="list-style-type: none"> ○ Monthly monitoring of taxis and secure transportation expenditure against budget and procedure within governance meetings, reporting any exceptions |
| Ward/team manager and clinical leads (or nominated deputy) | <ul style="list-style-type: none"> ○ Oversight of Clinical Risk assessments for the transportation of patients ○ Monitoring and oversight of taxis, secure and patient transportation expenditure against budget at point of booking ○ Ensure appropriate mode of transport is used ○ Approver of taxis, secure and patient transportation bookings ○ Attend quarterly management accountant meetings to review taxis, secure and patient transportation expenditure ○ Evidence staff members using private vehicles adhere to Trust policy, having the appropriate vehicle insurance |
| Finance | <ul style="list-style-type: none"> ○ Processing of monthly invoices from patient transportation providers for timely settlement of invoices ○ Provision of invoices, in Excel format, to budget holders for timely review and approval ○ Monitor and record non-adherence of procedure by budget holders |
| Budget holders | <ul style="list-style-type: none"> ○ Review and approval of invoices from patient transport providers within 5 working days of receipt from Finance ○ Communicate journeys incorrectly invoiced and non-adherence of procedure to Finance |
| All staff identifying or facilitating patient and goods transportation | <ul style="list-style-type: none"> ○ Ensure a Travel Risk assessment is completed where patient transport is required ○ Ensure a Clinical Risk assessment has been completed ○ Escorting staff members must ensure awareness of the Clinical Risk and Travel Risk assessment and any contingency plans, addressing any concerns |

| | |
|-----------|---|
| | <ul style="list-style-type: none"> ○ Identification of appropriate mode of transportation in adherence to procedure ○ Safe execution of the transportation of patients ○ Staff members designated as a pool vehicle to comply with the requirements of the Transport Procedure for Trust Pool Vehicles and Transport Services Provided by External Providers |
| All staff | <ul style="list-style-type: none"> ○ Adherence to, and compliance with, this procedure ○ Actively use alternative and appropriate modes of transportation to taxis, secure and patient transportation |

11 Clinical Management

Please adhere to the following guidance when arranging patient transportation.

11.1 Routine and Regular Transportation

For routine or regular transportation of patients the following actions must be to be adhered to:

- Prior to the first transportation both Clinical Risk and Travel Risk assessments must be completed and documented together with a management plan
- All considerations associated with patient transportation must be detailed in a patient Intervention Plan
- If a patient is considered high risk a Multi-Disciplinary Team must be held and an in-depth transport plan prepared
- Appropriate mode of transport is to be considered and agreed, ensuring the security level of the vehicle and staffing of the vehicle is in accordance with the Clinical Risk assessment
- Any required specialist equipment must be obtained and made available
- Staff members assisting with the transportation of patients must have local induction training, including:
 - Clinical and Travel Risk assessments
 - Travel and subsistence policy
 - Vehicle checks and requirements of the Drivers Handbook
 - Procedure for escorting and maintenance of staff, patient and public safety throughout the transportation process

- Staff using vehicles to transport patients must have the appropriate vehicle insurance for the transportation of patients; this is not restricted to Trust business
- Compliance and adherence to the travel and subsistence policy, clinical risk assessments, the procedure for escorting and maintenance of staff, patient and public safety throughout the transportation process

11.2 Ad-hoc Transportation

For ad-hoc unplanned transportation of patients supporting clinical care, both Clinical Risk and Travel Risk assessments must be completed and documented together with a management plan and the requirement for the journey.

11.3 Emergency Transportation

For emergency transportation of patients the following actions must be adhered to:

- Completion and documentation of a Clinical Risk and Travel Risk together with a management plan
- Escorting staff briefed by the Senior Manager/Clinician/Nurse in Charge prior to escort to ensure escorting staff are aware of the clinical and transportation risks and contingency plans and address any concerns
- The level of risk against the necessity for patient transportation must be considered
- Specific risks identified in relation to the patient, for example absconding, aggression, self-harm and violence, and risks to escorting staff, must be discussed and documented by staff members arranging the transportation
- Appropriate mode of transport is to be considered and agreed, ensuring the security level of the vehicle, staffing of the vehicle and vehicle adaptations required are agreed by the Nurse in Charge and transport provider prior to transportation
- In extreme emergencies it may be necessary to consider the use of private transport providers – the contract award for this service is currently being procured
- Escorting staff must be competent in Positive Approaches Level 2 training, first response and rapid tranquilisation (qualified nurses); this training is mandatory for all staff working in inpatient services
- Referral to the Trust Positive Approaches Training team should be considered for guidance in respect of high risk or complex patient transportation [Trust Positive Approaches Training](#)
- Transportation of patients subject to a Mental Health Act section must have the appropriate documentation completed and relevant agencies notified, for

example MAPPA or Ministry of Justice, prior to transportation, provided this does not place a patient at immediate and serious risk

- For patient transportation outside the geographical area of the Trust escorting staff are required to have a knowledge of the intended route, informing police constabularies within the out of area locations

For all emergency transportation of patients the following must be considered:

- Use or requirement for secure internal vehicle facilities if indicated by the Clinical and Travel Risk assessments (use of this approach must be in conjunction with the Trust policy for person centred behaviour support)
- Any use of secure internal vehicle facilities must be in accordance with any clinical procedures, for example the use of soft restraint equipment devices
- If required to use mechanical restraint equipment please refer to the Safe Use of Mechanical Restraints Equipment procedure
- Any use of mechanical restraints must be in conjunction with existing seat belts
- Authorisation from the Strategic On-call out of hours will always be required prior to using restraints or secure vehicle facilities; use of these methods should be reported by the service director following governance agreements
- Requirement for a police escort

Equipment required to be taken by escorting staff includes:

- Medication and medication card
- A patient profile
- Mobile phone
- Diet and fluids

Guidance on the transportation of people seated in a wheelchair:

- [International Best Practice Guidelines - BPG1 Transportation of People Seated in Wheelchairs](#)
- [Occupied Wheelchairs in Cars and Private Transport - Reminders of Safe Use \(MHRA\)](#)

12 Definitions

| Term | Definition |
|--|------------------------|
| Non-emergency Patient Transport (NEPT) | ○ Refer to Section 5.1 |
| Secure transportation | ○ Refer to Section 5.2 |
| Patient ambulance transportation | ○ Refer to Section 5.3 |

13 How this procedure will be implemented

- This procedure is to be published on the Trust Intranet and website
- Line managers to disseminate this procedure to all Trust employees through a line management briefing, ensuring adherence

13.1 Training needs analysis

| Staff/Professional Group | Type of Training | Duration | Frequency of Training |
|--------------------------|------------------------|-------------|-----------------------|
| All staff | Awareness of procedure | As required | Annual |

14 How the implementation of this procedure will be monitored

| Number | Auditable Standard/Key Performance Indicators | Frequency/Method/Person Responsible | Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group). |
|--------|--|--|---|
| 1 | Reduction in taxis, secure and patient ambulance transportation expenditure | Frequency = monthly and quarterly Method = management account and governance meetings Responsible = Ward/team manager and clinical leads (or nominated deputy) | Escalation of non-adherence |
| 2 | Audit trail supporting correct use of patient taxis, secure and patient ambulance transportation | Frequency = monthly Method = budget holder approval Responsible = Finance Control Department and budget holder | Escalation of non-adherence |

15 References

- [Conveyancing of Patients Under The Mental Health Act 1983 Inter Agency Policy](#)
- [NEPTS Eligibility Criteria](#)

16 Document control (external)

To be recorded on the policy register by Policy Coordinator

| Required information type | Information |
|--|--|
| Date of approval | 21 February 2024 |
| Next review date | 21 February 2027 |
| This document replaces | CLIN-0087-v2 |
| This document was approved by | Managing Director, Durham Tees Valley and Forensic & Deputy Chief Executive - Care Group Board |
| This document was approved | 15 February 2024 |
| This document was ratified by | Management Group |
| This document was ratified | 21 February 2024 |
| An equality analysis was completed on this policy on | 20 December 2023 |
| Document type | Public |
| FOI Clause (Private documents only) | N/a |

Change record

| Version | Date | Amendment details | Status |
|---------|-------------|---|-----------|
| v3 | 21 Feb 2024 | Full review with significant changes in line with NEPTS guidance to specify and stipulate the criteria for the use of NHS funded transportation. This review includes the outcome of a Quality Improvement event. | Published |

Appendix 1 - Equality Impact Assessment Screening Form

Please note: The [Equality Impact Assessment Policy](#) and [Equality Impact Assessment Guidance](#) can be found on the policy pages of the intranet

| | |
|--|--|
| Section 1 | Scope |
| Name of service area/directorate/department | Operations and Finance |
| Title | Taxis and Secure Patient Transport Procedure |
| Type | Procedure |
| Geographical area covered | Trust Wide |
| Aims and objectives | This procedure will assist the Trust to simplify the process for patient transport to ensure timely, safe and efficient patient transport across all parts of the Trust. |
| Start date of Equality Analysis Screening | 20 December 2023 |
| End date of Equality Analysis Screening | 20 December 2023 |

| Section 2 | Impacts |
|---|--|
| <p>Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?</p> | <p>Patients, families, carers and staff</p> |
| <p>Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?</p> | <ul style="list-style-type: none"> • Race (including Gypsy and Traveller) - no • Disability (includes physical, learning, mental health, sensory and medical disabilities) - no • Sex (Men and women) - no • Gender reassignment (Transgender and gender identity) - no • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) - no • Age (includes, young people, older people – people of all ages) - no • Religion or Belief (includes faith groups, atheism and philosophical beliefs) - no • Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) - no • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) - no • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) - no ○ Human Rights Implications (Human Rights - easy read) – no |
| <p>Describe any negative impacts / Human Rights Implications</p> | <p>N/a</p> |
| <p>Describe any positive impacts / Human Rights Implications</p> | <p>Supports all patients regardless of protected characteristics to ensure cost efficient and safe patient, staff and goods transportation.</p> |

| Section 3 | Research and involvement |
|---|---|
| What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.) | NEPT Eligibility Criteria |
| Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups? | Yes |
| If you answered Yes above, describe the engagement and involvement that has taken place | Previous versions have had consultation, this review acknowledges that it is pending results of a Quality Improvement event |
| If you answered No above, describe future plans that you may have to engage and involve people from different groups | N/a |

| Section 4 | Training needs |
|--|---|
| As part of this equality impact assessment have any training needs/service needs been identified? | No (please note this may be updated in future versions depending on the results of a Quality Improvement event) |
| Describe any training needs for Trust staff | N/a |
| Describe any training needs for patients | N/a |
| Describe any training needs for contractors or other outside agencies | N/a |

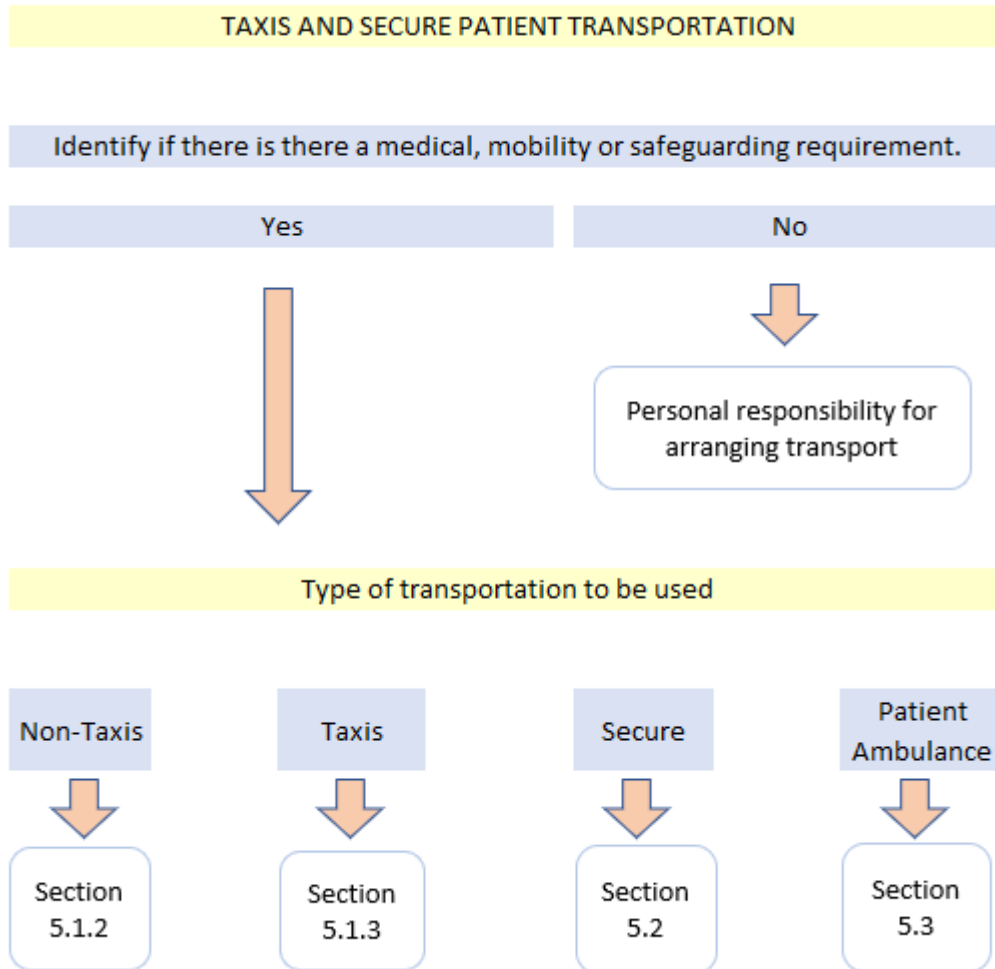
Check the information you have provided and ensure additional evidence can be provided if asked.

Appendix 2 – Approval checklist

| Title of document being reviewed: | Yes / No / Not applicable | Comments |
|---|---------------------------|----------------------------|
| 1. Title | | |
| Is the title clear and unambiguous? | Y | |
| Is it clear whether the document is a guideline, policy, protocol or standard? | Y | |
| 2. Rationale | | |
| Are reasons for development of the document stated? | Y | |
| 3. Development Process | | |
| Are people involved in the development identified? | Y | |
| Has relevant expertise has been sought/used? | Y | |
| Is there evidence of consultation with stakeholders and users? | Y | |
| Have any related documents or documents that are impacted by this change been identified and updated? | Y | |
| 4. Content | | |
| Is the objective of the document clear? | Y | |
| Is the target population clear and unambiguous? | Y | |
| Are the intended outcomes described? | Y | |
| Are the statements clear and unambiguous? | Y | |
| 5. Evidence Base | | |
| Is the type of evidence to support the document identified explicitly? | Y | |
| Are key references cited? | Y | NEPTS Eligibility Criteria |
| Are supporting documents referenced? | Y | |

| | | |
|--|-----|--------|
| 6. Training | | |
| Have training needs been considered? | Y | |
| Are training needs included in the document? | Y | |
| 7. Implementation and monitoring | | |
| Does the document identify how it will be implemented and monitored? | Y | |
| 8. Equality analysis | | |
| Has an equality analysis been completed for the document? | Y | |
| Have Equality and Diversity reviewed and approved the equality analysis? | Y | |
| 9. Approval | | |
| Does the document identify which committee/group will approve it? | Y | |
| 10. Publication | | |
| Has the policy been reviewed for harm? | Y | |
| Does the document identify whether it is private or public? | Y | Public |
| If private, does the document identify which clause of the Freedom of Information Act 2000 applies? | N/a | |
| 11. Accessibility (See intranet accessibility page for more information) | | |
| Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors) | Y | |
| Do all pictures and tables have meaningful alternative text? | Y | |
| Do all hyperlinks have a meaningful description? (do not use something generic like 'click here') | Y | |

17 Appendix 3 – Transportation Usage Flow Chart



18 Appendix 4 – Travel Risk Assessment

TRAVEL RISK ASSESMENT FORM

| | |
|----------------------------|--|
| Patient name: | |
| Patient ID: | |
| Date: | |
| From (ward/unit and site): | |
| To: | |
| Transport requirement: | |

Please consider all risks detailed below prior to patient transportation:

| | |
|---|----------|
| 1. Is transportation required in the next 2 hours? | Yes / No |
| 2. Risk of absconding? | Yes / No |
| 3. Recent change in mental health or behaviour? | Yes / No |
| 4. Risk of impulsive, violent, assaultive or para-suicidal behaviour? | Yes / No |
| 5. Risk to public safety? | Yes / No |
| 6. Recent significant change in family/personal circumstance? | Yes / No |
| 7. Mental Health Act change in legal status permitting NHS funded transportation? | Yes / No |
| 8. Potential media interest in patient? | Yes / No |
| 9. Non-compliance/engagement with treatment regime? | Yes / No |
| 10. Substance/alcohol abuse? | Yes / No |

Other considerations:

| | |
|-----------------------------------|----------|
| A. Police contact required? | Yes / No |
| B. Specialist equipment required? | Yes / No |
| C. Medication to be transported? | Yes / No |

Transportation Decision:

| | |
|--|--|
| NEPT transportation required? | Yes / No |
| NEPT transportation required based on risk assessment: (Pick one only) | <ul style="list-style-type: none"> <input type="radio"/> Pool Car <input type="radio"/> STR worker Discharge Facilitator Care Navigator <input type="radio"/> Staff Private Vehicle <input type="radio"/> HTCS Funded <input type="radio"/> Taxis <input type="radio"/> Patient Ambulance <input type="radio"/> Secure Transportation |

Contingency Plan for Escorting Staff:

Approval:

| | |
|---------------|--|
| Staff member: | |
| Designation: | |
| Date: | |