

PATIENT TRANSPORT POLICY



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PATIENT TRANSPORT POLICY

1. Purpose

1.1 The purpose of this policy is to set out, in summary form, the Trust's guidelines and procedures regarding the provision and management of patient transport. More detailed guidance is provided by the accompanying Patient Transport Manual.

1.2 Patient transport is defined as:

Transport provided free by the Trust to patients who, due to their medical condition, would otherwise be prevented from receiving treatment by the hospital.

2. Principles

2.1 Patients will be assessed equally and fairly to establish their need for patient transport.

2.2 Where it has been decided that patients qualify, patient transport will be provided free by the Trust through statutory ambulance services or other appropriate transport providers as an integral part of the medical care offered by Trust.

2.3 Where patients are not entitled to receive patient transport, the Trust will provide information indicating the alternatives available; for example, how some patients may be able to receive help towards their travel costs under the Department of Health's Patients' Travel Costs Scheme.

3. To Whom the Policy Applies

3.1 The policy applies to all Trust staff, namely:

- Executive Directors
- Clinicians
- Allied Health professionals
- Senior managers
- Heads of Department
- Clinical administration staff
- Non-clinical administration staff.

3.2 The policy also applies to:

- Patients
- Other stakeholders, and
- To the service provided by patient transport providers on behalf of the Trust.

4. Environment

The Trust must have a patient transport office which satisfies the following criteria:

- Be located so as to allow easy access for patients and staff
- Provide a confidential environment for patients discussing personal details
- Provide a safe and secure environment for the handling of the cash used to reimburse patients for their travel expenses.

5. Legal Obligations

The policy incorporates and reflects relevant legislation, Government and NHS guidance relating to the provision of patient transport, including:

- Guidelines set by the Department of Health
- Guidelines laid down by the National Health Service Finance Manual.

6. Aim and Scope

6.1 The policy, and its accompanying Patient Transport Manual, provides clear guidelines and procedures regarding the use and management of patient transport which Trust staff must follow.

6.2 In addition, in conjunction with the Patient Transport Manual, the policy provides a framework which the Trust will use to periodically review its patient transport procedures and practices through which the Trust can facilitate a programme of continuous improvement.

6.3 This will ensure that:

- The quality of patient care is, and remains, the primary consideration in relation to the Trust's patient transport service
- There will be robust procedures in place to confirm that value for money is being achieved, and
- The use of patient transport is not being abused.

7. General Guidance

To ensure that both staff and patients understand the basis on which patient transport is provided, the Trust will publish and distribute clear guidelines covering the following:

- The criteria which will be applied by Trust staff in deciding whether a patient under the Trust's care is entitled to patient transport
- The process by which patients who are to be provided with patient transport will have their transport authorised and booked for them
- Information for patients which explains the patient transport service and how it operates so that they can more readily understand why it has been provided or withheld. In particular, this will make clear that, even if they are provided with transport at some stage during their treatment, their entitlement will be routinely reviewed; for example, at each subsequent appointment. The guidance will also clearly state what a patient should do if their appointment is changed or cancelled
- What other help may be available when a patient is not entitled to receive patient transport; for example, by drawing their attention to the Trust's free shuttle-bus service and the Department of Health's Hospital Travel Costs Scheme.

8. Operational Guidance

8.1 Assessing a Patient's Need for Transport

8.1.1 A key element of the Trust's transport policy is to ensure that only patients in genuine and demonstrable medical need receive patient transport.

8.1.2 This means that, while under the Trust's care, those patients who indicate they wish to use patient transport must have their need for transport assessed by qualified medical staff and that any resulting transport requests are authorised by a Doctor. This is set out in paragraph 3.1.1 of NHS "Ambulance and other Patient Transport Services Operation, Use and Performance Standards".

8.1.3 Normal practice should be to assess a patient's need for transport at the first opportunity available to the Trust. Therefore, the Trust should have in place procedures which facilitate this assessment when patients first arrive at the Trust. This applies, for example, to pre-clinical assessments, outpatient appointments and admissions.

8.1.4 Nevertheless, as a patient's condition is likely to change during their course of treatment, it is essential that transport need is re-assessed at appropriate intervals and that any changes in transport entitlement are communicated to transport staff.

8.1.5 In addition to the general guidance covered above, The Trust will provide staff with clear instructions and procedures on the following:

- Applying, consistently and corporately, Department of Health instructions regarding the provision of patient transport
- Making appointments for patients who are travelling using patient transport at appropriate times, and, whenever possible, prioritising the treatment of transport patients so that transport costs can be kept to a minimum
- Ensuring changes to those appointments involving patients receiving transport are notified to Transport staff so that appropriate action can be taken
- How to ensure that patients who do not qualify for patient transport may, under limited circumstances, be guided to making claims for help with their travel expenses.

8.2 Transport Booking Forms

The Trust must have in place patient transport request forms designed to clearly set out what transport is required. Such forms should successfully balance the need to correctly describe the mobility and other requirements of patients with the need to ensure that the categories of patient mobility are easy to use.

8.3 Transport Booking Procedures

The Trust will ensure that, whenever possible, transport booking forms are completed by medically qualified staff as part of a patient's transport need assessment. This has the advantage of maximising the chance that a patient's transport needs are correctly recorded and communicated to transport providers.

8.4 Confirming with patients that transport is still required.

The Trust will put in place procedures which allow it to confirm that patients for whom it has booked transport still intend to use it.

8.5 Giving Adequate Notice for Booking Transport

Adequate notice must be given to the Trust's transport staff so that they have sufficient time to place bookings with the appropriate provider. As a general rule, minimum notice of 1 week should be provided whenever possible.

8.6 Who Makes the Bookings?

Except in emergencies, all patient transport bookings should only be made by the Trust's transport staff to ensure that correct procedures are being followed.

9 Communication

- 9.1 Transport User Group (TUG)** meetings give staff an opportunity to raise issues concerning patient transport and to suggest solutions to any problem areas. TUG meetings should normally be held monthly and, as they work best if a broad cross-section of staff attend, attendance at all levels should be encouraged.
- 9.2 Promotional Materials** - The Trust should have a stock of promotional literature which can be distributed widely to enable patient transport issues are given a high profile.