

Service name	Lot 3: Unplanned Non-Emergency Patient Transport Services (NEPTS)
Service specification number	QVV/275
Service description and location(s) from which it will be delivered	

1. Service Type: Unplanned Non-Emergency Patient Transport Services (NEPTS)

- This specification relates to the provision of an Unplanned Non-Emergency Patient Transport Service for eligible journeys that will be available 24 hours a day, 7 days a week, inclusive of bank holidays.
- While a 24hour unplanned service is required, the numbers overnight are small and these activity numbers for days and times will be shared with the provider.
- To promote access to healthcare provision through an NHS funded transport service for those Service Users registered with a GP in NHS Dorset meeting the [Eligibility Criteria as set down by NHS England](#). Including vulnerable people by reason of mental health or learning disability, children, and eligible escorts.
- The Provider will manage the entire NEPTS journey requirements for all Service Users including out of area transfers, Service Users defined as bariatric, Service Users with mental health needs or identified as having complex manual handling needs. Please note that secure mental health transport for high-risk Service Users is contracted separately from this non-emergency patient transport contract.
- NEPTS operating hours are to be 24 hours a day, 7 days a week, inclusive of bank holidays. With sufficient night cover to serve the whole county, ensuring shift planning provides sufficient overlap to allow return to base travel without impacting on service provision in any location.

1.2. Discrete processes within the service must be available for the following activities:

- Transportation of Service Users from pickup/drop off to handover of care
- General Service User risk assessments for safe transportation
- Risk Assessments and transportation of bariatric Service Users
- An enquiry line for Service Users, their carers, and healthcare professionals whilst the service is operational

1.3. The service will be resourced:

- To optimise flow within hospitals by facilitating an up to 2-hour discharge window from:
 - Acute Trusts
 - Community Hospitals
 - Mental Health inpatient units
 - Same Day Emergency Care (SDEC)
- To provide a 2-hour response time for enhanced priority journeys:
 - End of life
 - Maternal transfer

- Mental health inter-facility transfers
- Cardiac transfers
- Paramedic resource where a higher level of crew skill is required
- To be able to utilise provider vehicles for inter-hospital transfers and admission into hospices, residential or nursing homes for End-of-Life care with a 2-hour response time.
- Provide a transfer service to a mother who has been discharged from maternity care and eligible for NEPTS to accompany her neonate or new-born to the receiving hospital.
- To convey incubators in vehicles adapted to safely secure the equipment/trolley assuming mother / baby are both in a stable condition. A medical team provided by the referring unit may need to travel with the mother / baby and be responsible for their care.
- To undertake low-risk Mental Health inter-facility journeys within a 2-hour response time to reduce risk or distress of Service User.
- To undertake urgent transfer to cardiac tertiary units for planned cardiac following the [NHS England "Who Pays?"](#) Guidance.

1.4. Due to the growing use of specialist or tertiary centres there is a requirement for NEPTS to provide 'out of area' movements. Transfers of Service Users outside of the area in which they are registered with a GP forms an integral part of the NEPTS service. This service is only eligible for Service Users registered with a Dorset GP.

2. Service Future Requirements

- 2.1.** NHS Commissioning Standards, local emergency and urgent care strategies will continue to evolve over the life of the contract to improve efficiency and integration across the Service User journey pathway.
- 2.2.** Given this continual change it is anticipated that there will be service changes to ensure that the service remains compliant with NHS Commissioning Standards and local emergency and urgent care strategies

3. Service Delivery

- 3.1.** Unless otherwise specified, the service shall be available to all eligible Service Users, each of whom may be accompanied by no more than one eligible escort and (if deaf, blind, or partially sighted) no more than one Assistance/Support Dog
- 3.2.** This service is required 24 hours a day, 7 days a week, inclusive of bank holidays. Sufficient staff coverage will be resourced to ensure this activity is met without service and / or locational gaps. The providers call centre will need to be resourced to meet the demand of these requests.
- 3.3.** To ensure that sufficient Paramedic resource is available 24 hours a day, 7 days a week inclusive of bank holidays across the whole of Dorset, without service gap, and to agree with commissioners what quota that resource will be.
- 3.4.** Paramedic resources available to undertake journeys where a higher level of crew skills will be required such as cardiac and complex medical needs.
- 3.5.** To flex resource according to system needs and pressures, for example provide additional resource to support discharge pre-bank holiday weekends.

4. Booking of Transport

- 4.1.** All journeys shall be booked via the NEPTS Unplanned Service Provider
- 4.2.** The Provider shall ensure that the eligibility criteria are adhered to by completing a full screening and assessment of whether a Service User meets the criteria for each booking with the person booking the transport or online, this assessment will be recorded by that Provider.
- 4.3.** All requests will be entered directly onto the NEPTS Provider's booking system.
- 4.4.** All bookings must have a booking reference number which must be confirmed to the individual or team making the booking:
 - Using electronic means if booked online
 - Verbally or by electronic means if booked by telephone
 - Booking confirmation must also include date and details of the planned time (or time window) of pick-up
 - This information must be provided at the time of booking, in-line with the need for 2-hour response times, as this allows the service users to plan flow.
- 4.5.** The Provider will allow authorised users with access to an Online Booking System. Authorised users will be nominated by the service user, either individually or as collective groups of individuals.
New authorised users may be nominated by the service user throughout the duration of the contract.
- 4.6.** The Online Booking System must: -
 - Be accessible through a standard internet browser using a secure (<https://>) connection.
 - Enable authorised users to submit, amend and cancel booking requests.
 - Enable authorised users to screen and assess Service User eligibility.
 - Enable authorised users to submit Service User Readiness Notifications.

- As part of service development provide a system that has the ability or can develop the ability to track the Service User's journey/vehicles for viewing by Service providers staff at NHS funded Treatment centres
- Provide a fully automated 'Text Ahead' and functionality to inform Service Users of transport booked should be available on a 24-hour basis

4.7. Service Users must be given the option to opt out of receiving text (SMS) alerts from the Provider.

4.8. The Provider will inform the ward/department/clinic of any expected late collection.

5. Journey Classification

5.1. At the time of booking, the journey classification, journey type, escort requirement and Service User mobility must be recorded in accordance with the classification's details

5.2. The Provider must ensure that the appropriate vehicle is used, based on the Service User's mobility, clinical needs, and subject to the notes detailed in the journey classification Service User mobility table

5.3. Where the eligible Service User's mobility category is "Wheelchair", the Provider must record any details necessary to ensure that the vehicle and crew dispatched are capable of safely transporting the Service User, considering the type of wheelchair (e.g., conventional, or electric) and any access or egress considerations.

6. Data Requirements

6.1. The provider will collect a data set relating to the Service User or client to enable dispatch of the most appropriate vehicle. As a minimum this must include:

- Service User Information
 - Name of Service User (Surname and Forename)
 - Address of Service User
 - NHS number of Service User
 - Date of Birth of Service User
 - Contact number for Service User
 - Specific mobility needs including where relevant vehicle model needed
 - Escort (Medical or Relative)
 - Escort Assistance/Support Dog
 - Any specific needs
- Journey information
 - Pick up location Including full post code
 - Destination location Including full post code
 - Journey type (admission/discharge/transfer/out Service User appointment/dialysis)
 - Journey Classification
 - Mileage/Distance band
 - Journey Timings (arrival at pick up/leaving pick up/arrive destination) and/or time of collection from appointment if appropriate
- GP details
 - Service Users GP Name

- GP surgery details and telephone number
- ICB
- System details
 - Unique Booking Reference Number
 - Time booking received
 - Caller identification
 - Any special instructions that the crew may require to support the Service User's journey such as:
 - Request a male or female crew member (for acceptable reasons)
 - Infection Status (Service User has been recently treated, or is currently being treated for an infectious disease such as norovirus, MRSA, C Diff)
 - Service User requires a continuous supply of oxygen (% or litres)
 - Service User has pumps/drips and drains which must not be disconnected during the journey
 - Terminally ill Service User requiring rapid journey at short notice
 - Do Not Attempt Cardiopulmonary Resuscitation (DNACPR)
 - Bariatric Service User requiring specialist equipment
 - Psychiatric Service User requiring support, or anyone assessed as not suitable to transfer with others
 - Service User requires any major complex support during the journey such as spinal injury management

7. Booking Amendment

- 7.1.** The amendment of an existing booking to reflect a change in pick-up or drop-off location will be accepted without resulting in the journey being classified as cancelled or aborted, provided that the amendment does not result in a change of Healthcare Provider site or residential address and takes place at least one hour prior to the scheduled pick-up time
- 7.2.** No charge will be made for booking amendments.
- 7.3.** Providers must not change the Service User's mobility request prior to the journey taking place unless they have spoken directly to the Service User and new information regarding the Service User's mobility is highlighted and recorded. Comments must be made in the booking notes given the reason for the change and who authorised the change

8. Booking Cancellation

- 8.1.** The Provider will offer a telephone answering service linked to a dedicated line for the purpose of receiving cancellations 24 hours a day.
- 8.2.** This service may be provided using automated means.
- 8.3.** Bookings shall be treated as cancelled at the time messages are left via the service.
- 8.4.** The Cancellation Cut Off Time is 1 Hour prior to the scheduled collection time.
- 8.5.** Cancellations received prior to the Cancellation Cut Off Time will be treated as a No cost cancellation
- 8.6.** Bookings cancelled with less than an hours' notice or after the vehicle has commenced its journey, will be treated as aborted journeys, except where this is due to the Provider failing to collect a Service User on time.
- 8.7.** When a booking is cancelled, other than by the Provider, before the cancellation 'cut off' time, this will be treated as a No cost cancellation.
- 8.8.** No charge is to be made to the Commissioner in connection with any no cost cancellation.

9. Journey Cancellation

- 9.1.** Where a booking is cancelled due to the Provider failing to collect a Service User on time:
 - The cancellation 'Cut Off' Time shall not apply.
 - The cancellation shall be treated as a no cost cancellation.
 - The booking will be classified as "Cancelled due to late transport" or other such category as the Commissioner may request.
- 9.2.** Booked transportation may be cancelled without penalty by the Provider if:
 - The Provider is a Category 1 or 2 Responder (as defined by the Civil Contingencies Act 2004) and is required to reallocate resources to temporarily support a major incident; or
 - The Provider is not a Category 1 or 2 Responder (as defined by the Civil Contingencies Act 2004) and is requested by the Commissioner to reallocate resources to temporarily support a major incident.
- 9.3.** In the event of a major incident the Provider must liaise with the commissioner prior to cancelling any Service User journeys on mass.
- 9.4.** The decision to cancel must not be solely made by the Provider this needs to be done conjunction with the Commissioners
- 9.5.** The Provider will advise the Commissioner of any perceived severe weather conditions, and its effects on the provision of the Services. The Provider's Operations Manager, following prior discussions with the Commissioner and Treatment Centres/departments may arrange to cancel any pre-booked journeys in these circumstances (e.g., very heavy snowfall) with the safety of both staff and Service Users in mind.
- 9.6.** The provider will update the Commissioner with the number of journeys that will be cancelled, and the units/departments affected.
- 9.7.** The Provider will provide a detailed business continuity/contingency plan to demonstrate the resilience of the service.
- 9.8.** In the event of a Provider cancellation of an accepted booking, for reasons other than those detailed in point 9.2, the Commissioner shall be entitled to make alternative

transportation arrangements for eligible Service Users and/or eligible escorts at the Provider's cost

9.9. Cancellation Codes are as defined in Schedule 6 Part A, 1.1b NEPTS Data Spec

10. Aborted journeys

10.1. The Provider has a role in proactively managing the level of aborted journeys. These are defined as journeys where there is no notification of cancellation prior to the collection visit taking place.

10.2. Journeys shall be classed as aborted in cases where:

- The need for transportation no longer exists and notice of cancellation is not given prior to the cancellation 'Cut Off' time.
- The Service User refuses to travel.

10.3. After notification to responsible ward or department staff of the arrival of The Provider to collect Service Users:

- following Service User readiness notification, the Service User is not ready to travel after 15 minutes wait; or
- in response to a 'Fixed Collection Return Journey' booking the Service User is not ready to travel after 15 minutes wait.

10.4. Aborted journeys shall incur the same fee as would have been payable had the booked journey been completed.

10.5. The Provider must provide full details of all aborted journeys, monthly, to enable the Commissioner to identify patterns where service users consistently result in an aborted journey booked transport.

10.6. The information must be broken down by reason and by clinic/department/hospital as described in Schedule 6 Part A, 1.1b NEPTS Data Spec

11. Transportation of Animals

11.1. Following conveyance of a support dog, the Provider will undertake (at no additional cost) any cleaning that may be required to return the vehicle to an acceptable level of cleanliness for the conveyance of Service Users.

11.2. Where an eligible Service User requires a support dog to be conveyed no other Service User shall be transported in the same vehicle.

12. Transportation of Goods, Equipment and Service Users' Possessions

12.1. The Provider will allow carriage of two bags of personal property owned by each eligible Service User on the same vehicle as the Service User, at no additional cost.

12.2. The carriage of additional items quantities of Service Users' property shall be at the discretion of the Provider but, if accepted, shall be without charge.

12.3. The Provider must also provide carriage for special feeds or dialysis fluids, provided to Service Users during their appointment or at the time of discharge. Such products shall not be included with the Service User baggage allowance detailed in point 4.4.

12.4. Other medical equipment provided to or used by the Service User (e.g., wheelchairs, walking frames, etc.) shall be conveyed.

13. Conveyance of the Service User - Pick-up

13.1. The Provider shall collect Service Users:

- For transfers or discharges: at the time for which the booking is confirmed.

13.2. The Provider must collect Service Users:

- For discharges to home journeys: the ward, clinic, or waiting area detailed on the booking.
- Using a vehicle appropriate to the Service User's mobility classification.

13.3. The Provider's Staff must show appropriate identification to the Service User being collected and to any other individual who may reasonably request it.

13.4. The Provider's Staff must:

- Confirm that the Service Users have their discharge medication, discharge letter, door keys if required and their belongings.
- The Provider must ensure Service Users are not left unattended whilst negotiating steps or stairs when entering the vehicle.

13.5. If a 'Service User Readiness Notification' is received, or the Provider arrives to collect a Service User in accordance with the confirmed collection time, and the Service User is not ready for collection from a ward or department (despite having been confirmed as being ready to travel), the Provider's staff must:

- Wait up to a maximum of 15 minutes, for the Service User.
- Note on the booking slip the reason for, and length of, the delay.
- Arrange the re-booking of the Service User's journey, as an 'On the Day' booking as appropriate.

13.6. If any Service User is found in a life-threatening situation the Provider must:

- Immediately inform staff

13.7. Contact their controller/dispatcher, who shall in turn inform the Service User's intended destination.

14. Conveyance

14.1. Service User comfort and safety must be always ensured during transportation.

14.2. The Provider must ensure that all passengers wear fitted seat belts (or other safety restraints/devices appropriate to their mobility classification) and that all vehicles are able to safely secure equipment by means of restraints/straps.

14.3. Service Users refusing to wear seat belts (or other safety restraints/devices appropriate to their mobility classification) must produce appropriate documentation that authorises the non-use of such safety devices.

14.4. Failure of a Service User to comply with this requirement will result in transportation being refused by the operator of the vehicle.

14.5. Subject to carrying out a full risk assessment through the providers safeguarding policy, the provider will only withhold or discontinue Service provision under the circumstances noted in Service Condition SC7.

14.6. In the event of a Service User becoming unwell during the journey, Provider Staff must:

- Inform the Service User's destination department, at the treatment centre, if the Service User becomes unwell whilst in transit to such a site.

- Inform either the Service User's relative, carer or GP if the Service User becomes unwell on a journey from a treatment centre.

14.7. In the event of a Service User becoming seriously unwell, such that their condition appears life-threatening, Provider Staff must:

- Immediately summon assistance by dialling 999.
- Stay with the Service User until emergency assistance arrives
- Inform the Service User's destination department, at the treatment centre, if the Service User becomes unwell whilst in transit to such a site.
- Inform the Service User's relative if the Service User becomes unwell on a journey from a treatment centre.

14.8. The Provider must ensure that, when a two-person (driver and attendant) crew is requested to convey any Service User, the attendant remains seated in the rear of the vehicle, travelling with the Service User(s), for the whole of the duration of the journey.

14.9. Where the Provider is notified that a Service User has an infectious disease (i.e., MRSA, Norovirus or blood borne viruses etc.), that Service User must be transported without other Service Users present, unless otherwise specified, and undertaking appropriate infection prevention and control (IPC) guidance.

- On completion of the Service User's journey the vehicle must be removed from service and cleaned in accordance with the Providers and Trust's Infection Control /decontamination procedures.

15. Drop-off

15.1. The Provider must offer Service Users appropriate help entering and/or exiting vehicles and buildings as required. This is regardless of the Service User's mobility or journey classification.

15.2. Staff of the Provider must ensure Service Users are not left unattended whilst negotiating steps or stairs when alighting the vehicle.

15.3. Service Users must not be left unattended by the Provider until a suitable handover of the Service User's care takes place with department/unit staff.

15.4. The Service User must be booked in at the clinic/department and not left unattended without a healthcare professional being aware of their presence

16. Dignity and Respect

16.1. The Provider will ensure that the contractual requirements set out in (but not limited to) Service Conditions SC13 Equity of Access, Equality & Non-Discrimination, SC17 Services Environment and Equipment and GC4 Staff are observed at all times

17. Confidentiality

17.1. The Provider must conform with the requirements set out in General Condition GC21 (Patient Confidentiality, Data Protection, Freedom of Information and Transparency)