

Service name	Non-Emergency Patient Transport Service (NEPTS) Discharges, hospital transfer, enhanced priority, HDU, and ‘on-the-day’ activity.							
Service specification number	QVV/0298							
Population and/or geography to be served								
<p>The service is for those registered with a GP practice in Dorset who meet the NHS Dorset - Eligibility Criteria Framework for NEPTS.</p> <p>As of January 2024, 830,710 people are registered with a GP in Dorset.</p> <p>Patients Registered at a GP Practice - NHS Digital</p>								
Service aims and desired outcomes								
<p>1. Service aim</p> <p>1.1. Service users who are eligible for transport will receive safe, timely and comfortable transport to their destination, without detriment to their medical condition.</p> <p>2. Desired outcomes</p>								
<table border="1"> <thead> <tr> <th data-bbox="132 1059 809 1122">Principle</th> <th data-bbox="809 1059 1461 1122">Outcomes</th> </tr> </thead> <tbody> <tr> <td data-bbox="132 1122 809 1709"> <p>Prevention and early help</p> <p>The service is to be responsive and organised to meet people’s needs. This includes service planning and delivery to meet the requirements of local people and their individual needs in accessing care and treatment flow in a timely way.</p> <p>Health systems suffer alongside Service Users if transport is delayed:</p> <ul style="list-style-type: none"> ○ Creating disruption and unnecessary cost. ○ Holding back the use of beds for others who need them. ○ Undermining a Service User’s continued recovery and wellbeing during discharge. </td> <td data-bbox="809 1122 1461 1709"> <ul style="list-style-type: none"> ● Service Users are collected within agreed time thresholds of their Booked or Agreed time. ● Service Users are delivered home or to their agreed destination within 10 minutes of a “Time to Specific Home Visit” journey. ● Service Users arrive at ultimate destination within defined thresholds. ● Service Users are collected at their agreed ready time within defined thresholds. </td> </tr> <tr> <td data-bbox="132 1709 809 2022"> <p>Thriving communities</p> <p>NHS Dorset are invested to grow a strong network representing all our communities to help with integration challenges and design solutions with professionals.</p> <p>Services need to be safe, protecting people from abuse and avoidable harm.</p> </td> <td data-bbox="809 1709 1461 2022"> <ul style="list-style-type: none"> ● Journeys must comply with access criteria contained within the Service Specification and the NHS Dorset Eligibility Criteria Framework Non-Emergency Patient Transport Services (NEPTS). ● A Service User’s need will determine the required vehicle, crew, and any escort/s. </td> </tr> </tbody> </table>			Principle	Outcomes	<p>Prevention and early help</p> <p>The service is to be responsive and organised to meet people’s needs. This includes service planning and delivery to meet the requirements of local people and their individual needs in accessing care and treatment flow in a timely way.</p> <p>Health systems suffer alongside Service Users if transport is delayed:</p> <ul style="list-style-type: none"> ○ Creating disruption and unnecessary cost. ○ Holding back the use of beds for others who need them. ○ Undermining a Service User’s continued recovery and wellbeing during discharge. 	<ul style="list-style-type: none"> ● Service Users are collected within agreed time thresholds of their Booked or Agreed time. ● Service Users are delivered home or to their agreed destination within 10 minutes of a “Time to Specific Home Visit” journey. ● Service Users arrive at ultimate destination within defined thresholds. ● Service Users are collected at their agreed ready time within defined thresholds. 	<p>Thriving communities</p> <p>NHS Dorset are invested to grow a strong network representing all our communities to help with integration challenges and design solutions with professionals.</p> <p>Services need to be safe, protecting people from abuse and avoidable harm.</p>	<ul style="list-style-type: none"> ● Journeys must comply with access criteria contained within the Service Specification and the NHS Dorset Eligibility Criteria Framework Non-Emergency Patient Transport Services (NEPTS). ● A Service User’s need will determine the required vehicle, crew, and any escort/s.
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<p>An effective service, delivered in line with evidence-based guidance, <i>will</i> enable people's care and treatment to support good outcomes.</p>	<ul style="list-style-type: none"> • Service Users do not spend more than 120 minutes on a vehicle on either an outward or return journey.
<p>Working better together Services need to be well-led such that the leadership, management and governance of the organisation assures the delivery of high-quality, person-centred care.</p> <p>The Provider will work together with Dorset ICS system partners to deliver effective care and treatment through participation in effective system working and shared situational awareness.</p> <ul style="list-style-type: none"> ○ This will include anticipation of resource and capacity risks, and co-ordination with other providers in the use of NHS Operational Pressures Escalation Levels (OPEL). 	<ul style="list-style-type: none"> • Transport planning is expected to be an integral part of Service User care. • The Provider will give Healthcare providers at least 30 minutes notice of any change to a Service User's drop off or collection time. • The Provider must use all reasonable endeavours to ensure that the number of aborted journeys is kept to a minimum. • It is expected that no journey cancellations will be attributable to the Provider.

Service description and location(s) from which it will be delivered

3. Service Description

- 3.1. This Service will be available 7 days a week, inclusive of bank holidays.
- 3.2. The Service will be operational for an earliest Service User collection time of 08:00hrs and latest collection time of 22:00hrs Monday to Friday (excluding bank holidays) and an earliest Service User collection time of 09:00hrs and a latest collection time of 19:00hrs Saturday, Sunday, and bank holidays. Vehicle collection and return to base will happen outside of these hours.
- 3.3. The booking cut off time is one (1) hour prior to the end of service operational hours.
- 3.4. All journeys must be completed in such a way that Provider vehicles are able to return to their base location within one (1) hour of the end of the latest collection time. This requirement is aimed at ensuring that all vehicles can be safely and securely stored at their base locations at the end of each day, while also allowing for any necessary maintenance or cleaning to take place prior to the start of the next day's service.
- 3.5. A notice of at least twenty-four (24) hours is required for the Provider to accept the following types of journeys: those to 'out-of-area' destinations and those that require Service User risk assessments. If such journeys are requested over a weekend or bank holiday, the deadline for making the request is midday on Friday, unless the Friday is a Bank Holiday, in which case the deadline is midday on Thursday.

4. The Service will:

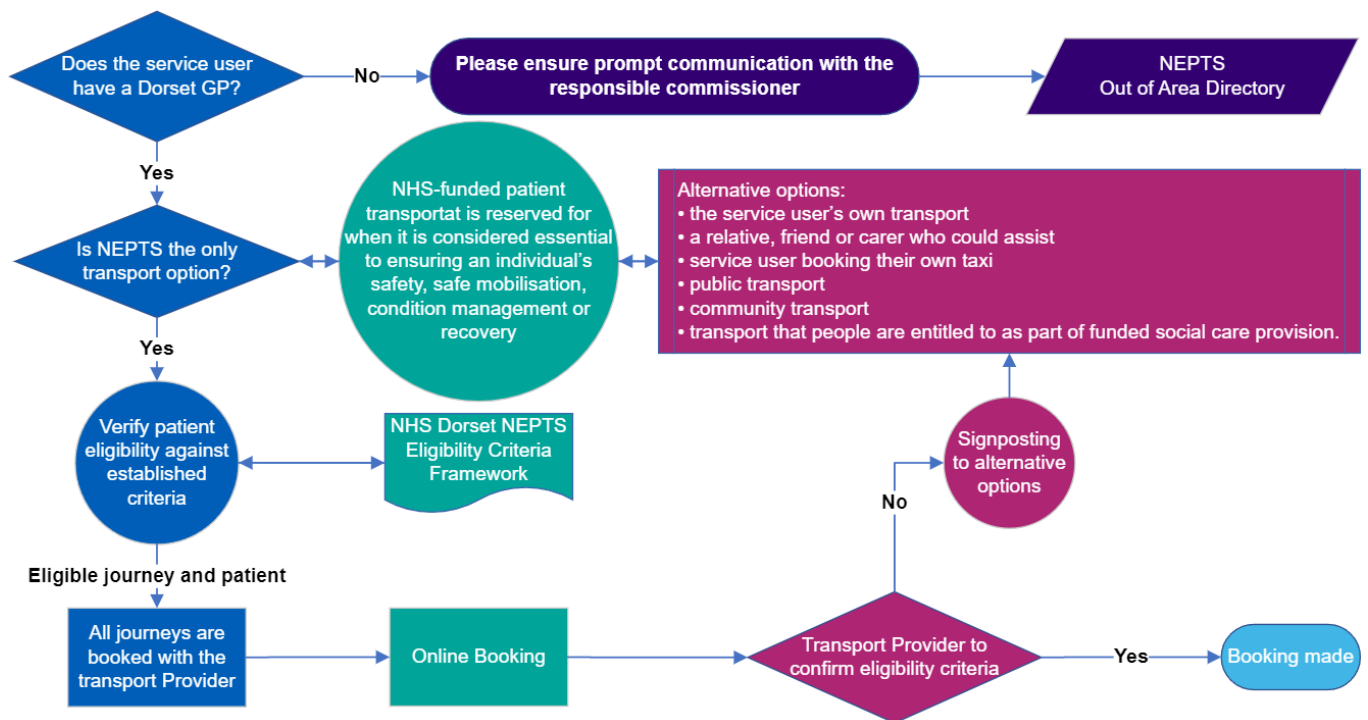
- 4.1. Collect Service Users being discharged or transferred from NHS-funded treatment within agreed time thresholds.

- 4.2. Transport Service Users to attend urgent on the day Outpatient appointments including Same Day Emergency Care (SDEC). Service Users to arrive at ultimate destination within defined thresholds and be collected at their agreed ready time within defined thresholds.
- 4.3. Collect enhanced priority journeys within two (2) hours of the booking time.
- End-of-Life care admissions and hospital transfers into hospices, residential or nursing homes.
 - Maternal transfer for a mother, eligible for NEPTS, who has been discharged from maternity care and to accompany her neonate or new-born to the receiving hospital.
 - Low-risk Mental Health inter-facility journeys.
 - Transfer to cardiac tertiary units for planned cardiac intervention.
- 4.4. HDU resource/s to include pulse oximeter, oropharyngeal, nasopharyngeal airways, Automatic Emergency Defibrillator (AED), nasal cannulas, multi-flow rate mask and non-rebreathe bag and mask will be available to undertake journeys where a higher level of crew skill is required.
- HDU resource/s will be trained to meet the Pre-Hospital Emergency Medicine (PHEM) Skills Framework at Grade D.
5. [Management of On-the-Day Discharge Pressures](#)
- Flow out of acute hospitals is of paramount importance, and strict adherence to Key Performance Indicators (KPIs) cannot always capture its complexities. Certain discharges require guaranteed arrival times at the designated location, and accommodating these requests can impact the overall discharge capacity. Therefore, this section outlines a framework for managing same-day discharge pressures and ensuring transparency through clear communication and data recording.
- 5.1. [Recording and Reporting](#)
- 5.1.1. The Provider will ensure accurate and detailed recording of the following time points for each discharge request, reporting these in a monthly aggregated format for review and evaluation against established KPIs:
- Time of Booking: The exact time the discharge request is entered into the booking system.
 - Booked Pick Up Time: The requested time for collection from the ward/unit, as initially communicated by the hospital.
 - Booked Ready Time: Reported separately from the Booked Pick-Up Time.
 - Specific Pick-Up Time: a requested specific collection time for “priority discharge” Service Users.
 - Agreed Pick Up Time: Any agreed-upon changes to the booked time, either earlier or later, to achieve the priority discharge journeys.
- 5.1.2. This allows for a comprehensive understanding of discharge patterns and to facilitate informed decision-making.
- 5.2. [On-the-Day Communication Strategy](#)
- 5.2.1. The Provider and the acute hospital flow teams will establish a collaborative approach for on-the-day communication, encompassing the following key aspects:
- The hospital can allocate a reasonable number of “priority discharge” Service Users for whom the Provider will concentrate on achieving a requested “specific” collection time.
 - To maintain overall discharge efficiency, the Provider may adjust the booked times for an equal (reasonable) number of other discharges to accommodate these priority requests. Any such

adjustments will be documented as "agreed time", potentially deviating from standard KPIs if necessary.

- 5.2.2. Reasonable is a term that refers to a mutually accepted number that has been agreed upon by both parties, as required.
- 5.2.3. This decision-making process will occur at the organisational level, not at the individual ward/unit level.
- 5.2.4. This fosters transparency and collaboration in managing same-day discharge pressures, ensuring timely delivery of critical discharges while promoting efficiency in the overall discharge process.

6. Booking of Transport



6.1. Booking amendment, cancellation, and aborts

- 6.1.1. Cancellation and abort codes are defined in Schedule 6 Part A, 1.1b NEPTS Data Spec
- 6.1.2. An existing booking can be amended without being classified as cancelled or aborted, until the time the vehicle has been dispatched.
- 6.1.3. No charge will be made by the Provider for booking amendments or booking cancellations.
- 6.1.4. Cancelled journeys refer to bookings that were made but were subsequently cancelled before the vehicle was dispatched.
- 6.1.5. Journeys will be considered as aborted:
 - If the transportation is no longer necessary and no cancellation notice is provided before the vehicle is dispatched.
 - The Service User is not ready to travel after the Provider has waited fifteen (15) minutes following notification to a responsible staff member of their arrival to collect a Service User.

- 6.1.6. Aborts require double signing by the Provider and HCP (Health Care Professional), to ensure validity and authenticity.
- 6.1.7. The provider is required to work with the system to keep the aborted journey rate at less than 3%, this is the percentage of aborted activity that has been included in the Indicative Activity Plan. If this threshold is breached it will be managed in line with the contract under Service Condition SC29.
- 7. Transportation of Goods, Equipment and Service Users' Possessions**
- 7.1. Where an eligible Service User requires a support dog to be conveyed, no other Service User shall be transported in the same vehicle.
- 7.2. 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.
- 7.3. The Provider must also provide carriage for three-day supply of 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.
- 8. Location/s from which it will be delivered.**
- 8.1. The Provider will have depots in places such that KPIs can be met within the defined limits as set out in Schedule 4 Local Quality Requirements.
- 8.2. Due to the growing use of specialist or tertiary centres the Provider will be required 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.