



COVID-19 Non-Emergency Patient Transport Services (NEPTS) requirements and funding

1. Introduction

This document sets out the patient transport requirements for Non-Emergency Patient Transport Services (NEPTS) in Wales during the COVID-19 emergency response. These requirements will be kept under review.

Non-Emergency Patient Transport Services are key to ensuring there is capacity to support the patient movement requirements arising from COVID-19 plans.

Effective patient movement can only be achieved through collaborative working across the Welsh Ambulance Service (WAST) and partners.

As well as supporting safe and faster transfer and discharge, we must also continue to provide patient transport for those needing to attend ongoing care appointments and for Renal and Oncology patients requiring enhanced service to and from care settings safely and swiftly during the COVID-19 emergency response, as set out in Section 2 below.

NEPTS in Wales is delivered by WAST using a plurality model. This model is coordinated by WAST and involves non-emergency transport provided by WAST and a range of additional providers.

The document outlines how WAST will be the central conduit for the procurement and deployment of additional capacity during the COVID-19 emergency response to ensure that all available resources can be centrally managed to respond to Health Boards COVID-19 plans during the current period.

We will also be encouraging friends, family and neighbours to help with transport to help the NHS cope during the COVID pandemic.

2. What does this mean for patients?

2.1 Patients being transferred or discharged

In line with the National NEPTS Commissioning arrangements, all Non-Emergency Patient Transport will be coordinated through WAST. Patients requiring a NEPTS response will either:

- Contact WAST directly through the national NEPTS number, or
- Have a Healthcare Professional contact WAST on their behalf.

2.2 Prioritising Non-Emergency Patient Transport

WAST in line with their pandemic response plan will:

- Ensure that patients requiring discharge can be transported to their destination where family/carers are not able to provide this facility.
- Ensure that NEPTS call handling and booking systems are able to operate to facilitate effective patient discharge.
- Identify non critical services which can be withdrawn and staff redeployed to backfill critical services where necessary.
- Facilitate the increased demand for movement of the patients between sites
- Maintain enhanced renal and oncology provision.

3. What are the actions for Welsh Ambulance Services NHS Trust?

WAST will continue to coordinate all non-emergency patient transport across Wales including provision currently delivered under the plurality model.

WAST will:

- Identify all transport capacity across sectors to meet anticipated demand.
- Ensure the process for patient and Healthcare Professional bookings is clear, straightforward and communicated to primary, acute and community care services.
- Work collaboratively with Health Boards and Commissioners to agree globally available resources in line with escalating demand.
- Notify the Chief Ambulance Services Commissioner at the earliest opportunity of any breaches in the quality, safety and core requirements of the NEPTS commissioning framework.
- Ensure the use of personal protective equipment (PPE) and decontamination of vehicles, are met in delivering services.
- Ensure guidance on 'shielding' and protecting people defined on medical grounds as extremely vulnerable from COVID-19 described in *Annex A* are adhered to.
- WAST will coordinate transport logistics nationally from all partners that contribute during the COVID-19 pandemic.

4. What are the actions for Health Boards?

Health Boards must ensure that additional capacity plans are shared through the existing mechanisms with WAST and the Commissioners at the earliest possible

time. They must also ensure WAST is regularly updated on changes to these plans.

Health Boards must engage with WAST, as close to the point of inception of the change, on any changes to service delivery ensuring that full details of the proposed change are disclosed where appropriate.

Health Boards must ensure that patients are booked in for transport in accordance with the WAST mandated system and are ready to be transported without any delays.

To support WAST in planning and co-ordination of resources, a list of patients to be discharged must be shared as soon as it is available and at regular intervals throughout the day on a continual basis through existing Tier 2 and 3 mechanisms.

Health Boards will **not** contract independently with providers of transport. Health Boards will work with WAST to identify transport requirements in line with plans.

5. What are the actions for the ambulance commissioners?

The commissioners of NEPTS, in line with the national commissioning arrangements, will:

- Work collaboratively with WAST and Health Boards to support planning and delivery of core and surge capacity NEPTS based on predicted demand during the COVID-19 pandemic.
- Liaise with Health Boards, local authorities and the wider system to provide a joint strategic response to transport requirements, including helping to identify options for additional capacity or procurement of equipment if needed.

6. Role of multi-sector partners providing transport during the COVID-19 pandemic.

NEPTS in Wales is delivered using a plurality model. WAST already contract with independent, third and voluntary sector organisations to deliver the plurality model.

In the current situation, WAST must immediately seek to increase capacity by fully utilising all available capacity across existing sectors as well as identifying contributions from sectors who currently do not deliver patient transport e.g. armed forces.

7. Safety and staff wellbeing

WAST will ensure the quality standards and core requirements of the commissioning framework are adhered to, so that the safety and well-being of patients and staff is protected.

During this period WAST/NEPTS must adhere to extant and emerging guidelines on the use of PPE and decontamination of vehicles.

Any deviation from this must by highlighted to the Chief Ambulance Services

Commissioner by the Executive Pandemic Cell. To minimise the risk of infection, staff and volunteers supporting the transport of patients with confirmed or suspected diagnosis of COVID-19 should implement current guidance for the NHS on appropriate and proportionate use of PPE and decontamination of vehicles.

To protect NEPTS staff and patients from potential infection with COVID-19:

- All vehicles are to be fitted with temporary bulkheads an immediate measure
 can be two sheets of polythene sealed separately with heavy duty tape, with
 fitted hard plastic bulkheads if required.
- All vehicles must be additionally cleaned. Vehicle interiors are to be wiped down with chlorine wipes after each journey and deep cleaned with 1000ppm chlorine-based solution once a day.
- The service should put in place arrangements to enable volunteer services to meet these arrangements if they are using their own vehicles.

Non-essential persons are not to travel in the patient compartment with a possible COVID-19 case. Family members and relatives of these patients, unless they are also acting as carer, must be asked to remain at home and not attend the hospital. They should be left with contact details for the hospital the patient is being taken to and asked to phone later if necessary. Parents or guardians must accompany children under 18.

Efforts should be made to transport symptomatic patients on their own whenever possible, such as those with a continuous cough and/or high temperature. However, if the service is under high pressure, two patients with symptoms of COVID-19 may be transferred together and should wear a fluid repellent surgical mask (FRSM).

Every effort will be made to help ensure that NEPTS staff are protected during this time. In addition to the above precautions, NEPTS staff will have access to COVID-19 testing in line with that available to clinical staff, as soon as this comes on stream. Testing will be prioritised and carried out at a local level.

8. Funding

The Chief Ambulance Services Commissioner will act as the co-ordination point on behalf of Health Boards (EASC) and WAST with Welsh Government on any additional funding requirements.

Further guidance on transfer / NEPTs and field hospitals will be made available shortly.

Annex A: High-risk patients

As stated in the guidance on shielding and protecting people defined on medical grounds as extremely vulnerable from COVID-19, high-risk patients include:

- 1. Solid organ transplant recipients.
- 2. People with specific cancers:
 - lung cancer: who are undergoing active chemotherapy or radical radiotherapy
 - cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma: who are at any stage of treatment
 - those having immunotherapy or other continuing antibody treatments for cancer
 - those having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
 - those who have had bone marrow or stem cell transplants in the last six months, or who are still taking immunosuppression drugs.
- 3. People with severe respiratory conditions, including cystic fibrosis, severe asthma and severe COPD.
- 4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
- 5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
- 6. Women who are pregnant and have significant congenital heart disease.