



CLIENT TRANSPORT POLICY

STANDARD

It is the policy intent of Te Kaokao o Takapau Health and Disability Services that the provision of transport will be undertaken when there is an agreed identified need consistent with the services that Te Kaokao o Takapau provide. Wherever possible, client/whānau are transported in the least restrictive manner possible.

OBJECTIVE

- To ensure that transport by staff of proposed and current client/whānau is carried out efficiently, safely and effectively and in compliance with all relevant legislation.
- All steps are taken to ensure that the transport process is carried out in a manner which is respectful of the client/whānau
- Staff recognise their responsibility for the safety of all those that travel in Te Kaokao o Takapau service vehicles.

STANDARDS TO BE MET

1. Transportation Assessment

Before transporting any client/whānau a transportation risk assessment must be completed in consultation with people currently involved with the client/whānau (e.g. staff, family/friends where appropriate).

The assessment will consider the following:

- Purpose of travel and number of client/whānau (e.g. direct transportation of one person to another facility or group outing).
- Mode of transportation, e.g. ambulance, Te Kaokao o Takapau vehicle, taxi, public transport.
- Time of day and distance to be travelled.
- Client/whānau characteristics: age, gender, culture, physical strength and health; current predictability, cooperation, current mental state; previous history and risk behaviour.
- Current risk assessment and risk management plan where indicated, check for any existing plans for transportation.



- Where a community based client/whānau is assessed as high risk (i.e. currently exhibiting threats of violence or decreased co-operation) an assessment will be made to determine the most appropriate transportation plan. Where transportation by Police is indicated Transfers from Ward 8 or to another DHB the transportation plan will be arranged between the primary nurse, clinical co-ordinator and the responsible clinician.

2. Transportation Planning

The Transportation Plan will be developed based on the assessed needs of the client and the staffing and resources required for appropriate and safe transportation of the client/whānau
The plan will consider:

(a) Communication and Safety

(b)

- The Clinical Co-ordinator/Team Manager is notified of destination, purpose and expected time frame of transportation.
- Where assessment/risk assessment indicates transportation of a client/whānau, the transportation plan will be recorded in the health records of the client/whānau
- If a client/whānau is being transported this is only initiated after consultation with, and agreement of the service.

(c) Client needs as per assessment

- When transporting a child under the age of sixteen (16) years, staff must first obtain permission from the designated caregiver (parent/guardian - person legally responsible for the child) and approval from the Team Leader.

(d) Staffing requirements

- Such as if two (2) staff are required to transport a tangata whaiora/client.

(e) Mode of transport

- Ambulance: - Careful consideration to be given to using ambulance for transfer if medication needs to be given prior to transfer.
- Taxi: - MH&AS staff sit in the back either side of tangata whaiora/client if appropriate or indicated.



- Te Kaokao o Takapau Vehicle: - One (1) staff member drives, the other sits in back with client, behind the driver. Client sits behind front passenger seat. One relative or friend may accompany to support the client. They are seated in the front passenger seat (this person is not counted as transportation resource).

(f) **Appropriate skills**

- Community Safety Training is mandatory.

3. Resources and Equipment

The clinical co-ordinator/Team Manager may be consulted to access required resources. These include:

- Cellphone
- Vehicle appropriate to assessed needs e.g. Te Kaokao o Takapau vehicle with safety locks where required. Private vehicles must not be used.
- It is the responsibility of the driver to ensure that appropriate restraints are available and utilised. Seat belts are to be worn by all passengers and children must be restrained in appropriate restraint seats. Children under nine (9) years should be seated as follows:
0 - 4 years - seated in a Standards Approved restraint
5 - 8 years - seated in a Standards Approved safety belt and in the back seat if seating is available.

4. Auahi kore vehicles under the Smoke-free Environment Act 1990

- The operator of a passenger service vehicle shall not permit any person to smoke in that vehicle while it is carrying passengers.
- No person shall smoke in any passenger service vehicle while it is carrying passengers.

PROCEDURES

1. Community Mental Health Services

- Professional clinical discretion should be used when assessing whether a tangata whaiora/client should be transported without assistance.
- Professional discretion should be used when deciding if the tangata whaiora/client sits in the back or front seats.

2. Admission under the Mental Health Act (1992)



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- The client/whānau will travel in the rear seat of the vehicle, behind the front seat passenger side. **The Duly Authorised Officer (DAO)** or Team Manager is present during the transportation.
 - If the client/whānau is medicated before or during transportation, the DAO will travel in the back seat and monitor the patient for any adverse effects of the medication. Consideration is given to the use of an ambulance in these situations.
 - In an emergency when the proposed mental state of the client/whānau is such that restraint is required for safe transport, the team will contact the Police. All reasonable steps are taken to ensure the safety of the service user, staff and public until Police arrive. The DAO will accompany and monitor the proposed patient for physiological changes throughout the journey.
 - Where Police transport is used and Police mechanical restraints are applied to the of the client/whānau, the DAO will accompany the Police and monitor the proposed patient for physiological changes throughout the journey. The Police are responsible for the application and monitoring of the mechanical restraints during transportation.
 - Where the use of mechanical restraints is required during transport they are required to be charted by the Responsible Clinician.
 - Where the Corrections Service are transporting an inmate/proposed tangata whaiora/client under Section 45 MH Act for the purpose of further assessment under the MH Act, the inmate/proposed client/whānau remains the responsibility of the Corrections Service. The DAO will accompany the Corrections staff and monitor the proposed patient throughout the journey.
3. All issues related to transportation are documented in the patient's/proposed health record of the client/whānau by the DAO. The DAO is also responsible for reporting any incidents as per the Te Kaokao o Takapau Incidents policy

4. Occupational Therapy and/or Social Work

- The client/whānau should be given the choice to be involved in outings as part of their treatment, social interaction and recreation.
- The client/whānau participation on outings is based on their current level of wellness and at the discretion of their key worker/primary nurse.
- Staff on the outing should be aware of:
 - tangata whaiora/client legal status Mental Health Act 1992, and Amendments Act 1999 and the Criminal Procedures (Mentally Impaired Persons) Act 2003
- Any special observations required:



- If the client/whānau has a medical condition, i.e. asthma, diabetes or angina - any necessary medication should be taken on the outing.

- Staff will have knowledge of emergency procedures e.g. the 111 system.
- Staff will have knowledge of the legal/safety/ethical aspects of outings.
- A list of tangata whaiora/clients on the outing must be taken with the group and a copy left with the receptionist.
- Routine sightings and head counts must be undertaken during the outing, particularly at the resumption of travel after stops.
- In case of any client/whānau leaving the group without staff permission, the ward (and the Police if appropriate) will be notified.