



TITLE

TRANSPORTATION OF PATIENTS

SCOPE

Provincial: Addiction and Mental Health

DOCUMENT #

AMH-05-01

APPROVAL AUTHORITY

Vice President for Research, Innovation & Analytics
Community, Seniors, Addiction and Mental Health

INITIAL EFFECTIVE DATE

June 15, 2017

SPONSOR

Executive Director, Provincial Addiction and Mental Health

REVISION EFFECTIVE DATE

Not applicable

PARENT DOCUMENT TITLE, TYPE AND NUMBER

Transportation of Patients Policy (#AMH-05)

SCHEDULED REVIEW DATE

June 15, 2020

NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

If you have any questions or comments regarding the information in this document, please contact the Policy & Forms Department at policy@ahs.ca. The Policy & Forms website is the official source of current approved policies, procedures, directives, standards, protocols and guidelines.

OBJECTIVES

- To outline **patient** transportation options that promote patient independence whenever possible.
- To provide guidance to staff pertaining to the transportation of patients by Addiction and Mental Health (AMH) staff in Alberta Health Services (AHS) fleet vehicles, rental or personal vehicles for routine and/or **scheduled** care.
- To ensure AMH staff are aware of personal responsibility in relation to vehicle use when transporting patients in non-emergent situations.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, Students, Volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary), working within Addiction and Mental Health.

ELEMENTS

1. Transportation of a Patient for Routine and/or Scheduled Care

- 1.1 When a patient requires transportation for routine and/or scheduled care as part of the service plan, AMH staff should assist the patient to consider the range of options available in the community for the patient. From most to least preferred, the options include:

- a) as outlined in local processes that give clear criteria for supporting patient use of public transport (e.g., community partnerships with service organizations, AHS-subsidized bus or taxi vouchers);
 - b) with **family** and/or community social supports; or
 - c) with a staff member in:
 - (i) an AHS fleet vehicle;
 - (ii) a rental vehicle; or
 - (iii) the staff member's personal vehicle.
- 1.2 When transportation is part of a patient care plan, staff may:
- a) accompany a patient on public transportation; or
 - b) transport a patient as outlined above in section 1.1c).
- 1.3 Staff may use an AHS fleet vehicle, rental or personal vehicle to transport a patient for routine and/or scheduled care under the following circumstances:
- a) when all other means of transportation have been considered and are not available or appropriate;
 - b) when the patient requires transportation to another care site, agency or appointment in the community that is part of routine and/or scheduled care;
 - c) when a member of the clinical team has completed a transport safety assessment/reassessment and has determined that the patient is safe for individual and/or group transport;
 - d) when the staff member is approved to transport patients by their manager and Fleet Services; and
 - e) when the patient, or **alternate decision-maker**, consents to the transportation plan.

Note: Family members may accompany patients. Consent to transportation must be obtained in advance from the family member. Decisions to offer transportation to family members must be made jointly between the staff member and the Manager, per their discretion.

2. Consent

- 2.1 Consent for transportation will be sought in accordance with the AHS *Consent to Treatment/Procedure(s)* policy suite.

- 2.2 The consent discussion shall include, but not be limited to:
- a) benefits and risks; and
 - b) limits to confidentiality in group transportation, as appropriate.
- 2.3 The patient's consent for transportation will be sought at the time of the patient safety transportation assessment or reassessment.
- 2.4 **Health care providers** shall use the AHS *Consent to Treatment Plan or Procedure* Form and shall ensure that the consent form indicates as clearly as possible the date(s) and purpose of the intended transportation. For example, but not limited to:
- a) "medication review appointment every Wednesday a.m." (weekly scheduled appointment);
 - b) "group outings – 1-3 times/month" (specific function, unscheduled at time of consent); or
 - c) "any outings with ABC Program" (unscheduled transportation within a program).
- 2.5 Consent discussion shall be documented on the *Consent to Treatment Plan or Procedure* Form and the signed consent form shall be placed on the patient's **health record**.
- 3. Patient Transport Safety Assessment or Reassessment**
- 3.1 Health care providers shall ensure a *Patient Transport Safety Assessment* (or reassessment) is completed prior to any transportation.
- 3.2 Reassessments must be completed:
- a) after a reasonable interval (in the health care providers' discretion) when the initial assessment indicated that the patient was not safe for transport at that time;
 - b) when the patient's condition has changed sufficiently to warrant reassessment;
 - c) upon significant change in the patient's program; or
 - d) at a minimum, annually.
- 3.3 All assessments and reassessments shall be placed in the patient's health record.

- 4. Staff Authorization to Drive Fleet, Rental or Personal Vehicles for Transportation of Patients**
- 4.1 Staff must submit a completed AHS *Driving Authorization Application* Form to AHS Fleet Services.
- 4.2 Fleet Services will advise the driver and their manager of the staff member's authorization status.
- 4.3 Staff shall not transport patients until authorized by Fleet Services.
- 4.4 Staff using their personal vehicles for AHS purposes are required to give advance notice to their own insurers in order to obtain appropriate coverage regarding the use of their vehicle for business purposes.
- a) Staff shall provide confirmation of this insurance to their manager and to the AHS Insurance Department.
- 4.5 Managers must maintain a record of staff authorized to transport patients.
- 4.6 Staff shall inform their manager of any changes to driving status or personal vehicle insurance.
- 5. Renting a Vehicle for Alberta Health Services Business**
- 5.1 Staff shall follow the AHS *Travel, Hospitality and Working Session Expenses* Policy when renting a vehicle.
- 6. Safety Procedures**
- 6.1 Managers should promote patient and staff safety by ensuring regular case conferencing as deemed appropriate for the patient population with clinical team members. Discussion should include:
- a) transport arrangements; and
- b) clinical information that may influence safe transport.
- 6.2 Staff shall abide by all traffic safety laws (e.g., ensuring seat belts are worn, no texting).
- 6.3 All personal belongings must be stored in a safe manner while transporting the patient(s).
- 6.4 Staff shall report any concerns about a patient at the earliest opportunity, as per the local program's processes.
- 6.5 Immediately prior to transport, staff are authorized, based on the staff member's judgement of safety at the time (relating to the patient, weather, or other

reasonable reason), to decide to not transport a patient who has been approved for transportation. As soon as is reasonably possible:

- a) the decision to not transport a patient is to be discussed with relevant member(s) of the clinical team and/or manager;
 - b) the care plan is to be reviewed, and a patient transport reassessment completed as determined by the team member(s); and
 - c) documentation of the above is to be entered in the patient's health record.
- 6.6 Staff shall ensure a Number 1 First Aid Kit provided by the program is in the vehicle when transporting patients, as per local processes.
- 6.7 Staff responsible for transport shall ensure that a working cell phone and their program's emergency contact list are available at all times during transport of patients, or per local processes.
- a) Staff are not permitted to use a cell phone, whether handheld or hands-free, while driving the vehicle except when responding to an emergency. (See the AHS *Cell Phones and Other Mobile Devices Policy*.)
- 6.8 Staff should comply with and support direction from the Manager per the Working Alone program plan (see AHS *Working Alone Policy*).
- 6.9 In the event of an accident while a patient is being transported by staff, the Manager shall notify AHS Legal Services and Workplace Health and Safety (WHS) as well as the Workers Compensation Board (WCB) (if appropriate) as soon as possible.

DEFINITIONS

Alternate decision-maker means a person who is authorized to make decisions with or on behalf of the patient. These may include, specific decision-maker, a minor's legal representative, a guardian, a 'nearest relative' in accordance with the *Mental Health Act* (Alberta), an agent in accordance with a Personal Directive, or a person designated in accordance with the *Human Tissue and Organ Donation Act* (Alberta).

Family means one or more individuals identified by the patient as an important support, and who the patient wishes to be included in any encounters with the health care system, including, but not limited to, family members, legal guardians, friends and informal caregivers.

Health care provider means any person who provides goods or services to a patient, inclusive of health care professionals, staff, students, volunteers and other persons acting on behalf of or in conjunction with Alberta Health Services.

Health record means the Alberta Health Services legal record of the patient's diagnostic, treatment and care information.

Patient means an adult or child who receives or has requested health care or services from Alberta Health Services and its health care providers or individuals authorized to act on behalf of Alberta Health Services. This term is inclusive of residents, clients and outpatients.

Scheduled health service means any non-emergent service where an appointment is booked ahead of the visit. A scheduled health service may also be known as “routine” or “elective” service.

REFERENCES

- Alberta Health Services Governance Documents:
 - *Cellphone and Mobile Device Policy* (#1160)
 - *Consent to Treatment/Procedure(s) Policy* (#PRR-01)
 - *Transportation of Patients Policy* (Addiction and Mental Health) (#AMH-05)
 - *Travel, Hospitality and Working Session Expense Policy* (#1122)
 - *Working Alone Policy* (#1154)
- Alberta Health Services Forms:
 - *Consent to Treatment Plan or Procedure Form* (#09741)
 - *Driving Authorization Application Form* (#09715)
 - *Patient Transport Safety Assessment Form* (#19355)

VERSION HISTORY

Date	Action Taken
Click here to enter a date	Optional: Choose an item