



Clinical Passenger/Observer Policy and Procedure

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Contents (this is an automatic table, use the headings throughout the document and then **right** click on the table and select update field, then update entire table)

- 1. Introduction 3
- 2. Scope..... 3
- 3. Equality Statement 3
- 4. Aim..... 4
- 5. Roles and Responsibilities 4
 - 5.1 Trust Board 4
 - 5.2 Chief Executive 4
 - 5.3 Executive Director 5
 - 5.4 Director of Patient Care and Service Transformation..... 5
 - 5.5 Chief Operating Officer 5
 - 5.6 Managers and Supervisors 5
 - 5.7 All staff 6
 - 5.8. Scheduling Department..... 6
 - 5.9 Clinical Passengers/Observers 7
 - 5.10 Duties of Education and Training Department 8
 - 5.11 Risk Team..... 8
- 6. Definitions 8
- 7. Criteria for Clinical Passenger/Observer shifts/placement for Trust employees (outside their usual working area) 8
 - 7.1 Criteria for Clinical Passengers/Observers – Non Trust employees..... 9
 - 7.2 Application process 9
 - 7.3 Trust process 10
 - 7.4 Termination of the Clinical Passengers/Observer’s placement 11
- 8. Suitable and sufficient risk assessment on Clinical Passengers/Observers..... 11
- 9. Health and Safety..... 11
- 10. Management 12
- 11. Training 12
- 12. Equality and Diversity..... 13
- 13. Monitoring 13
- 14. Consultation and Review 13
- 15. Implementation (including raising awareness) 14
- 16. References..... 14
- 17. Associated documentation 14
- 18. Appendix 1: Review Table 15
- 19. Appendix 2: Confidentiality Agreement 20
- 20. Appendix 3: Ambulance Clinical Passenger/Observer application form 22
- 21. Appendix 4: Ambulance Clinical Passenger/Observer Briefings 24
- 22. Appendix 5: Clinical Passenger/Observer Placement Agreement Form 25
- 23. Appendix 6: Code of conduct 26
- 24. Appendix 7: Trust’s Generic Risk assessment form..... 27
- 25. Appendix 8: Responsibility Matrix – Policies, Procedures and Strategies..... 28
- 26. Appendix 9: Equality Impact Assessment Form Section One – Screening 31
- 27. Appendix 10: Equality Impact Assessment Form Section Two – Full Assessment
35
- 28. Appendix 11: Ratification Checklist 40



1. Introduction

1.1 This policy has been designed by South Central Ambulance Service NHS Foundation Trust (hereinafter referred to as the Trust) to manage both external and internal ad-hoc observer placement requests falling outside of agreed contractual placement obligations. The Trust frequently receives requests for Clinical Passengers/Observers to accompany ambulance staff to experience their unique working environment. This has been facilitated and accepted as good practice as a means of increasing awareness of the difficult and demanding role of the modern ambulance service. However, it has now become necessary to review this practice for the following reasons:

- The increase in requests and escalation of demand for placements
- The risk to Clinical Passengers/Observers when conveyed in the Trust's vehicles, particularly in emergency situations
- The legislative duties upon the Trust, particularly in regard to ensuring the health and safety of Clinical Passengers/Observers as per the Health and Safety at Work Act 1974
- The duty of care placed upon the Trust by allowing such practices
- Moral, ethical and confidential considerations.

1.2 Patient confidentiality, Clinical Passenger/Observer health and safety and staff welfare and well-being have been taken into account during the development of this policy.

2. Scope

2.1 This policy applies to all departments within the Trust and all SCAS staff and non-SCAS personnel over the age of 18 who make a request to become a Clinical Passenger/Observer at the Trust, this includes any requests for ad-hoc shifts and placements and any initial training and/or on-going development.

3. Equality Statement

3.1 The Trust is committed to promoting positive measures that eliminate all forms of unlawful or unfair discrimination on the grounds of age, marriage and civil partnership, disability, race, gender, religion/belief, sexual orientation, gender reassignment and pregnancy/maternity or any other basis not justified by law or relevant to the requirements of the post. The Trust will therefore take every possible step to ensure that this procedure is applied fairly to all employees regardless of the afore mentioned protected characteristics, whether full or part time or employed under a permanent or a fixed term contract or any other irrelevant factor.

3.2 By committing to a policy encouraging equality of opportunity and diversity, the Trust values differences between members of the community and within its existing workforce, and actively seeks to benefit from their differing skills, knowledge, and experiences in order to provide an exemplary healthcare service. The Trust is committed to promoting equality and diversity best practice both within the workforce and in any other area where it has influence.

3.3 Where there are barriers to understanding; for example, an employee has difficulty in reading or writing, or where English is not their first language, additional support will be put in place wherever necessary to ensure that the process to be followed is



understood and that the employee is not disadvantaged at any stage in the procedure. Further information on the support available can be sought from the HR Department.

4. Aim

- 4.1 The aim of this policy is to set out the arrangements, processes and management of SCAS employees and non-employees of the Trust applying and being accepted to become a Clinical Passenger/Observer.
- 4.2 The objectives of the policy are to ensure that the Trust has clear and defined arrangements for:
- the application process to become a Clinical Passenger/Observer, including the process for approving applications
 - the placing of a Clinical Passenger/Observer on a placement; and the review of this placement
 - ensuring that the placement is time specific
 - ensuring that the learning needs of Clinical Passengers/Observers is achieved
 - the management and control of risks to Clinical Passengers/Observers
 - the carrying out of risk assessments on the placements of Clinical Passengers/Observers
 - the regular review of these risk assessments.

5. Roles and Responsibilities

5.1 Trust Board

- 5.1.1 The Trust Board will ensure that there suitable and sufficient arrangements and adequate resources for the application process and management of Clinical Passengers/Observers at the Trust; and also for ensuring the health and safety of Clinical Passengers/Observers whilst they are on placement at the Trust.

5.2 Chief Executive

- 5.2.1 The Chief Executive has overall responsibility for:
- the effective implementation of this policy within the Trust and for ensuring that there are suitable and sufficient arrangements for the application process and management of Clinical Passengers/Observers at the Trust
 - ensuring the allocation of enough resources to maintain efficient and effective health and safety arrangements to ensure the health and safety of Clinical Passengers/Observers
 - ensuring that policies are reviewed to secure compliance with existing legislation and any changes to this legislation.



5.3 Executive Director

- 5.3.1 Executive Directors are responsible for the effective implementation of this policy within their directorates and for ensuring that there are adequate resources available to fulfil the requirements of this policy.

5.4 Director of Patient Care and Service Transformation

- 5.4.1 The Director of Patient Care and Service Transformation is directly accountable to the Chief Executive and will advise and assist the Trust Board in fulfilling its duties under the relevant statutory legislation. In particular, the Director of Patient Care and Service Transformation is responsible for:

- ensuring that workplace health, safety and welfare procedures are constantly reviewed
- ensuring that there are arrangements for liaising with the Health and Safety Executive (HSE)
- ensuring that the Trust Board are kept abreast of relevant new legislation and guidance in order to ensure on-going compliance with the law.

5.5 Chief Operating Officer

- 5.5.1 The Chief Operating Officer has direct responsibility for implementing the policy including:

- coordinating and ensuring the implementation and continued development of risk management in relation to Clinical Passengers/Observers within the Operational environment
- identifying and interpreting new legislation and Government guidance in relation to Governance, Health and Safety and Risk with regard to Clinical Passengers/Observers
- advising the Chief Executive, Directors and Board on matters of risk in relation to Clinical Passengers/Observers
- coordinating and obtaining assurances from each of the Executive Directors in relation to risk management and controls with regard to Clinical Passengers/Observers
- receiving and monitoring all risk and adverse incident reports about Clinical Passengers/Observers, via the Health, Safety and Risk Group and using this information to identify any trends and to produce statistical data for the Trust Board in order to provide a satisfactory resolution.

5.6 Managers and Supervisors

- 5.6.1 The responsibilities of Managers and Supervisors (including Clinical Operations Managers, Team Leaders, Clinical Mentors) are:

- to attend any training to enable them to fulfil their responsibilities outlined in this policy
- to bring this policy to the attention of their staff and ensure that this policy is implemented effectively within their area of responsibility
- to carry out or arrange for the carrying out of suitable and sufficient risk assessments on the placements of the Clinical Passenger/Observer within their



area of responsibility; and any revisions to these assessments using the Trust's generic risk assessment form in Appendix 7

- to make arrangements to ensure, so far as is reasonably practicable, that all identified controls and further controls identified by the assessment and any subsequent reviews are put into place
- to inform the Clinical Passenger/Observer of the hazards and risks associated with their placement and the control measures, including any safe systems of work, put in place to protect them; and how to avoid such problems and what they should do if problems occur
- where applicable and appropriate, to supervise the work of the Clinical Passenger/Observer within their area of responsibility to ensure their health and safety and that they abide by any safe systems of work or safe operating procedures
- to encourage their staff and any Clinical Passengers/Observers within their area of responsibility to report all incidents connected to their placement using the Trust's Incident reporting system, Datix
- to arrange for the investigation of any matters/reported incidents involving Clinical Passengers/Observer within their area of responsibility
- to contact and confirm the placement with the Scheduling Department
- to brief the Clinical Passengers/Observers with regards to their behaviour, code of conduct, health and safety, procedures, patient confidentiality and privacy; and insurance liability prior to the commencement of their shifts
- to complete and sign the relevant sections of the forms in Appendices 2, 3 and 5 (Confidentiality agreement and Ambulance Clinical Passenger/Observer application form and Clinical Passenger/Observer Placement Agreement Form respectively)
- where applicable and appropriate, to inform the Clinical Passenger/Observer of the information in the Ambulance Clinical Passenger/Observer Briefing outlined in Appendix 4.

5.7 All staff

5.7.1 The responsibilities of staff are:

- to make themselves fully aware of the policy and to abide by it
- Take reasonable care for the health and safety of themselves and any other persons who may be affected by their acts or omissions at work
- to co-operate with the Trust in relation to the completion of any risk assessments done in relation to the placement of a Clinical Passenger/Observer
- to report any incidents in relation to Clinical Passengers/Observers using the Trust's incident reporting system, Datix
- where applicable, to supervise the Clinical Passengers/Observers whilst they are on placement.

5.8. Scheduling Department

5.8.1 The responsibilities of the Scheduling Department are:

- to receive and process applications and requests from staff and non-staff to become Clinical Passengers/Observers
- to authorise placements



- to send a Clinical Passenger/Observer Placement Agreement Form in appendix 5 to successful applicants; and advise them of the start time and agreed date of the placement/shift/plan, this will be done not less than a fortnight before the date of the placement
- to manage the process of Clinical Passenger/Observer shifts and ensure that all relevant personnel are kept informed interested parties informed
- to ensure that all appropriate forms are fully completed and held securely in accordance with the requirements of the General Data Protection Regulation (GDPR)
- to produce and maintain an up-to-date record of Clinical Passengers/Observers
- to ensure that the personal details of the Clinical Passengers/Observers are kept on file in a secure place and, in the case of an emergency, made available
- to inform successful internal Trust applicants of this policy and to provide a copy of this policy to successful external applicants.

5.9 Clinical Passengers/Observers

5.9.1 The responsibilities of Observers/Clinical Passengers are:

- to make a written request to the Scheduling Department to become a Clinical Passenger/Observer
- to complete the relevant sections and sign the documentation in appendices 2, 3 and 5 (Confidentiality agreement and Ambulance Clinical Passenger/Observer application form and Clinical Passenger/Observer Placement Agreement Form respectively) and return them to the Scheduling Department so that they can process the request as appropriate
- to disclose any health issues that could affect the health and well-being of staff, patients and the public they could come into contact with
- to provide, prior to the commencement of the placement, some means to verify their identity such as a University identity card, or a valid passport or a photocard driving licence
- to provide written support from a recognised Health care manager or course lead who will confirm the clinical need and clinical skills for the Clinical Passenger/Observer shift and their current job role and course of study
- to take all reasonable steps to ensure their own and other's safety who may be affected by their acts or omissions
- if they are a non-employee of SCAS, to inform whoever is supervising them whilst they are on placement of any incidents that occur during their placement so that their Supervisor can report the incident on the Trust's Incident reporting system, Datix
- whilst on placement, to ensure if they are required to perform any clinical treatment, they do so within their accredited clinical skills. They **must** practice in a manner which would be accepted by their regulatory body
- to ensure that whilst they are on placement and where appropriate, they wear any personal protective equipment provided to them
- to ensure that, whilst they are on placement and where applicable, they comply with the Trust's Uniform policy
- to wear, where applicable, Trust uniform and if this is not applicable then suitable clothing and footwear must be worn
- to ensure that whilst they are on placement abide by:
 - The confidentiality agreement outlined in appendix 2



- The requirements of the Ambulance Clinical Passenger/Observer application form in appendix 3
- The Code of conduct outlined in appendix 6.
- To provide, upon request, an evaluation of their Clinical Passenger/Observer shifts with the Trust (so that the Trust can ensure that best practise is being followed and educational requirements are being met).

5.9.2 If the Clinical Passenger/Observer fails to follow the instructions they are given then the placement will be terminated immediately and the Clinical Passenger/Observer will be asked to leave the SCAS premises/vehicles immediately at a safe place – there will be no requirement or expectation to take the Clinical Passenger/Observer back to the location where they commenced their observational shift.

5.10 Duties of Education and Training Department

5.10.1 The Education and Training Department will authorise an honorary contract for any placement of four weeks or more for non-employees.

5.11 Risk Team

5.11.1 The Risk Team will, upon request, assist with the carrying out of risk assessments on Clinical Passengers/Observers on placement at the Trust.

6. Definitions

Ad-hoc observer shift is a request for a 1 day observer shift.

Placement – any request covering a period of time, over and above 1 shift that sits outside of the Trust's contractual obligations as a defined placement provider.

Clinical Passenger/Observer is a SCAS employee and/or non-SCAS personnel who undertakes an ad hoc observer shift and/or a placement within the Trust.

7. Criteria for Clinical Passenger/Observer shifts/placement for Trust employees (outside their usual working area)

7.0.1 This section may apply to staff employed in the following areas; Clinical Coordination Centre, non-emergency Patient Transport Service, Student Paramedics, Community Responders, Corporate staff, Military, other Emergency Service personnel & Fire Co-responders (although this list is non-exhaustive).

7.0.2 Clinical Passengers/Observers will demonstrate clear development outcomes to their respective line managers. This may be highlighted within Trust Appraisals. The following resources are identified as possible placement/observer areas:

- *Emergency and Urgent Ambulance*
- *Solo Response Vehicles*
- *Specialist Paramedic Teams*
- *Non-emergency Patient Transport Ambulance*
- *Clinical Co-ordination Centre (CCC)*



- *Hazardous Area Response Team (HART).*

The above list is **not** exhaustive and observer/placement requests may be declined at any time due to the current demands on the Trust and capacity.

7.1 Criteria for Clinical Passengers/Observers – Non Trust employees

7.1.1 Clinical Passengers/Observers undertaking a defined placement will demonstrate a clear development outcome to their line managers. The following resources are identified as possible placement/observer areas:

- *Emergency and Urgent Ambulance*
- *Solo Response Vehicles*
- *Specialist Paramedic Teams*
- *Non-emergency Patient Transport Ambulance*
- *Clinical Co-ordination Centre (CCC)*
- *Hazardous Area Response Team (HART).*

7.1.2 Clinical Passenger/Observer or Placement requests will be considered providing they fit into the following criteria:

- *You are on a recognised clinical course of study whereby an observer shift is a requirement of the course.*
- *You are a registered Nurse / GP / Doctor / Military / Medic or other healthcare professional requiring a one-off shift, to further advance your career/development.*

7.1.3 Clinical Passengers/Observers will always be supervised by predetermined and appropriate Trust Employee.

7.1.4 The following are **NOT** valid reasons to apply for an observer shift:

- *To obtain work experience from a school or college*
- *To gain experience of a shift in order to help with a University application / healthcare course*
- *Currently working within a healthcare setting, although in a non-clinical role*
- *Working in a clinical role within a healthcare setting but not on a recognised clinical programme of study which requires a Clinical Passenger/Observer shift and not requesting a shift to advance their career/development*
- *Applications under 18 years of age.*

The above list is **not** exhaustive and observer/placement requests are handled on a case by case basis and may be declined at any time due to the current demands on the Trust and capacity.

7.2 Application process

7.2.1 Clinical Passenger/Observer and placement requests must be made in writing to the Scheduling Department.

7.2.2 The person making the application for a Clinical Passenger/Observer placement must complete and sign the documentation in Appendices 2, 3 & 5 and submit to the following for initial authorisation:



- *Section 5 - Line Manager or Clinical Operations Manager or Head of Operations*
- *Section 6 - Line Manager or Planning Manager*
- *Written confirmation from a recognised healthcare manager or Course Lead to confirm the clinical need for a shift and to confirm the Clinical Passenger/Observer's current job role/course of study.*

7.2.3 The Trust reserves the right to make or withdraw final authorisation of the placement without providing a reason.

7.2.4 The following must be considered before authorisation is given:

- *Reasons for the placement*
- *Benefits to the Trust*
- *Benefits to the observer*
- *Part of a recognised Course of Study*
- *Number of times applicant has requested placement*
- *Time extensions may be allowed in exceptional circumstances*

7.2.5 All applications will then be sent to the Scheduling Department for placement authorisation.

7.2.6 The Scheduling Department will send the Clinical Passenger/Observer Placement Agreement form (Appendix 5) to the applicant with the start time and date agreed not less than two weeks before the date of placement.

7.2.7 Signed copies of the completed documents in Appendices 2, 3 and 5 will be returned by Applicants to the Scheduling Department who will process the request as appropriate.

7.2.8 Applicants must submit the relevant signed forms (Appendices 2, 3 and 5) not less than four weeks before the proposed placement/observer shift and applications completed and authorised within 2 weeks, where possible.

7.2.9 Each placement period should be no longer than is necessary to achieve the learning outcomes.

7.2.10 Any external placement greater than 1 shift will need to be authorised by the Trust's High Education Team and will be subject to a different process and requirements that sit outside of this policy.

7.3 Trust process

7.3.1 The Scheduling Department will produce an up to date record of Clinical Passengers/Observers and ensure appropriate forms are fully completed and logged, as appropriate.

7.3.2 Every Clinical Passenger/Observer will be briefed prior to their placement either by the Area Manager, Team Leader, Clinical Mentor or appropriate supervisor with regard to:

- *Required and expected Behaviours*
- *Code of Conduct*
- *Health & Safety procedures*



- *Patient confidentiality and privacy*
- *Insurance liability*
- *Follow reasonable instruction from the supervising member of staff.*

7.3.3 Failure to adhere to the above will result in the termination of the placement.

7.3.4 A copy of the Clinical Passengers/Observer's personal details will be kept on file in accordance with GDPR legislation and in the case of an emergency will be made available 24/7 to authorised Trust employees.

7.4 Termination of the Clinical Passengers/Observer's placement

7.4.1 The Clinical Passengers/Observer's placement can be terminated for the following reasons:

- *Breach of Code of Conduct*
- *Inappropriate behaviour*
- *Breach of confidentiality*
- *Breach of Health and Safety*
- *Failure to follow a reasonable instruction from a supervising member of staff.*

8. Suitable and sufficient risk assessment on Clinical Passengers/Observers

8.1 Wherever a Clinical Passenger/Observer is given a placement with the Trust it should be supported by the carrying out of a suitable and sufficient risk assessment using the Trust's generic risk assessment form, see appendix 7.

8.2 The assessment should identify hazards and the existing controls in place (if any) to protect the Clinical Passenger/Observer at work from those hazards and from this evaluate the level of risk. The level of risk should be reduced to the lowest level so far as is reasonably practicable. Therefore, it may be necessary to introduce further measures to manage and control the risks effectively. The significant hazards, risks and controls should be recorded on the risk assessment form.

8.3 When carrying out and reviewing the suitable and sufficient risk assessment the possible inexperience and lack of awareness of the health and safety risks that the Clinical Passengers/Observers may have, must be considered.

8.4 The risk assessment should be reviewed periodically to check and ensure that all of the controls that are in place are working effectively.

8.5 The risk assessment should be reviewed and revised following any significant changes to any aspect of the risk assessment. For instance, if there is a change in working practices or changes in work equipment. All revisions and changes to the risk assessment should be recorded.

9. Health and Safety

9.1 By completing Appendix 3 a Clinical Passenger/Observer is agreeing to the Trust's Health and safety requirements.



- 9.2 Clinical Passengers/Observers with the South Central Ambulance Service NHS Foundation Trust (SCAS) have a legal and moral responsibility to take all reasonable steps to ensure both their own and others' safety. The Trust has definitive policy and procedures that must be followed.
- 9.3 All necessary personal protective equipment will be provided and any other items required to protect the health and safety of the clinical passenger/observer.
- 9.4 Appropriate appearance/footwear and clothing should be worn which is in line with a professional ambulance service, and its internal policies. Therefore, all Clinical Passengers/Observers should be made aware of SCAS Uniform Policy, complying where reasonable and appropriate.
- 9.5 The Trust accepts no liability for injury, loss or damage caused by failure to follow the defined procedures or directions given by Trust personnel.

10. Management

- 10.1 The Clinical Passenger/Observer shall, at all times whilst on placement, follow any reasonable direction given by SCAS employees. At no time should a Clinical Passenger/Observer be left in a situation where they are solely alone with the patient.
- 10.2 Failure to follow these instructions will lead to immediate termination of the placement and the Clinical Passenger/Observer will be asked to leave SCAS premises/vehicles immediately.
- 10.3 If a Clinical Passengers/Observers is required to perform any clinical treatment, they do so within their accredited clinical skills. They **must** practice in a manner which would be accepted by their regulator body.
- 10.4 No additional remuneration will be provided by the Trust for completion of a clinical passenger/observer placement.
- 10.5 An appropriate form of photographic Identity document such as a University Identity card, passport or driving licence will need to be seen by at the commencement of the shift to confirm the observer's identity.
- 10.6 In the event that the Clinical Passenger/Observer is not identified on the daily control sheet or station log, the Team Leader/Clinical Mentor or appropriate Trust employee should confirm the placement arrangement with the Scheduling Department. Failure to obtain the appropriate authorisation will terminate the placement.
- 10.7 Any person requesting a placement has a duty to disclose any health issues that may compromise their suitability to attend placement, or the well-being of the patients, public and/or staff.

11. Training

- 11.1 The Trust will ensure that all individuals who become a Clinical Passenger/Observer will receive the necessary information, instruction and supervision to ensure their health and safety.



12. Equality and Diversity

12.1 An equality and diversity impact assessment has been carried out on this policy and can be found at appendix 9.

13. Monitoring

13.1 The effectiveness of this policy will be monitored in the following way.

Standard / process / issue	Monitoring and audit			
	Method	By	Committee	Frequency
a) The number of applications to be a Clinical Passenger/Observer .	a) Report from the Planning Manager (Workforce) on the number of applications to be a Clinical Passenger/Observer.	Planning Manager (Workforce)	Health, Safety and Risk Group.	Annually, as a minimum.
b) The number of applications to be an authorised Clinical Passenger/Observer .	b) Report from the Planning Manager (Workforce) on the number of authorised applications to be a Clinical Passenger/Observer.			
c) The number of risk assessments completed for authorised Clinical Passenger/Observer s completed as per legislation and policy in a financial year.	c) Report from the Planning Manager (Workforce) on the number of risk assessments completed for authorised Clinical Passengers/Observer s.			
d) Actions taken as a result of the risk assessments.	d) Audit on 10% of the risk assessments on the authorised Clinical Passengers/Observer s completed in a financial year.			

14. Consultation and Review

14.1 A consultation exercise on the policy will be carried out with the stakeholders listed below.

14.2 This policy will be reviewed every three years or sooner if there are any relevant changes to legislation or best practice.



Stakeholder or Group Title	Consultation Period (From-to)	Comments received (Yes/No)
All Managers and staff within the Trust	4/1/2019 to 25/1/2019	Y
Health, Safety and Risk Group	4/1/2019 to 25/1/2019	Y

15. Implementation (including raising awareness)

15.1 The policy will be implemented and communicated to managers and staff within the Trust via the weekly newsletter, Staff Matters.

15.2 Emails will also be sent to senior managers and area managers asking them to bring the existence of the policy to their staff.

16. References

- Health and Safety at Work Etc Act 1974
- Management of Health and Safety at Work Regulations 1992 (Amended 1999)
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
- Personal Protective Equipment Regulations 1992 (Amended 2002)
- Workplace, (Health, Safety and Welfare) Regulations 1992
- General Data Protection Regulation 2018.

17. Associated documentation

- Health and safety policy and procedures
- Personal protective equipment (PPE) policy
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) policy
- Risk Management Strategy
- Adverse Incident Reporting and Investigation Policy
- Driving and Care of Trust Vehicles Policy
- Infection Prevention, Control & Decontamination Policy & Procedures
- Waste Management Policy
- Security Policy
- Information Governance Policy
- Data Protection Policy.



18. Appendix 1: Review Table

Version	Reason for change	Overview of change
V2	Review of policy	Adoption of new policy template; and policy completely re-written.
V3	Review of policy	<p>Section 5.5.1 change to first bullet point: Reference to Operations changed to ‘...the operational environment.’</p> <p>Section 5.6.1, the penultimate bullet point changed to read: “to complete and sign the relevant sections of the forms in Appendices 2, 3 and 5 (Confidentiality agreement and Ambulance Clinical Passenger/Observer application form and Clinical Passenger/Observer Placement Agreement Form respectively)”</p> <p>Section 5.8.1, fifth bullet point: Change reference to ‘...held in a secure place’ to ‘...held securely in accordance with the requirements of the General Data Protection Regulation (GDPR).’</p> <p>Section 5.9.1, second bullet point changed to read: “to complete the relevant sections and sign the documentation in appendices 2, 3 and 5 (Confidentiality agreement and Ambulance Clinical Passenger/Observer application form and Clinical Passenger/Observer Placement Agreement Form respectively) and return them to the Scheduling Department so that they can process the request as appropriate”</p> <p>Section 5.9.1, fourth bullet point: Change ‘passport’ to ‘valid passport’; change ‘driving licence’ to ‘photocard driving licence’</p> <p>Section 5.9.1, fifth bullet point: change ‘written confirmation’ to ‘written support’.</p> <p>Section 5.9.1, final bullet point: Change ‘on’ to ‘of’.</p> <p>Section 5.9.2, addition of ‘at a safe place – there will no requirement or expectation to take the Clinical Passenger/Observer back to the</p>



		<p>location where they commenced their observational shift.</p> <p>Section 5.10, insertion of new 5.10 Duties of Education and Training Department.</p> <p>The old section 5.10 becomes 5.11 Risk Team.</p> <p>Section 6 Removal of 'An', 'A' and 'A' respectively in front of each of the definitions.</p> <p>Section 7.1: Add "Clinical Coordination Centre; non-emergency ..." and "other Emergency Service Personnel" to the sentence.</p> <p>Section 7.0.2 and section 7.1.1: Add "Non-emergency" to Patient Transport Ambulance.</p> <p>Section 7.1.4: Add fourth bullet point: <i>Working in a clinical role within a healthcare setting but not on a recognised clinical programme of study which requires a Clinical Passenger/Observer shift and not requesting a shift to advance their career/development</i></p> <p>Sections 7.2.7, 7.2.7 and 7.2.8, references to Appendices 1 and 2 changed to Appendices 2, 3 and 5.</p> <p>All appendix numbers have been changed throughout the policy to reflect the numerical layout of the Appendices.</p> <p>Section 7.2.3, Add "...or withdraw" and "...without providing a reason" to the sentence.</p> <p>Section 7.2.9 Delete "(are we setting a maximum)."</p> <p>Section 7.2.10: Change the sentence to read: Any external placement greater than 1 shift will need to be authorised by the Trust's High Education Team and will be subject to a different process and requirements that sit outside of this policy.</p> <p>Section 7.3.2, 1st bullet point, add: "and expected"</p>
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		<p>Section 7.3.4, add: "...in accordance with GDPR legislation..." and "...to authorised Trust employees."</p> <p>Section 8.3, add: "...must be considered"</p> <p>Section 9.1, add "requirements"</p> <p>Section 9.2, add "the"</p> <p>Section 9.3, add "...to protect..."</p> <p>Section 9.4, add "Clinical Passengers"</p> <p>Section 10.1, add: "...and follow any reasonable direction given. At no time should a Clinical Passenger/Observer be left in a situation where they are solely alone with the patient."</p> <p>Section 10.3, add: "...and only when..." and "...an appropriately qualified..."</p> <p>Section 10.5, add: "...form of photographic ..." and "a"</p> <p>Section 16: References, add: "General Data Protection Regulation 2018"</p> <p>Section 17: Associated Documentation, add: "Information Governance Policy" and "Data Protection Policy".</p> <p>Section 19: Appendix 2, add: "...the General Data Protection Regulation 2018" to the sentence (in bold) beginning: "The Trust policy adheres to the Data Protection Act 1988..."</p> <p>Section 20: Appendix 3, In the second sentence (in bold) the reference to "The Resource Centre" has been changed to The Scheduling Department.</p> <p>Section 20: Appendix 3, add: "...it" to the sentence (in bold) beginning: "Please complete this form electronically..." Also add: "Clinical Passenger" to the "Resource Centre Use" table; and under the heading "Health & Safety" add: "the" in the first sentence.</p> <p>Section 20: Appendix 3, delete "Briefing from crew" section.</p>
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		<p>Section 22: Appendix 5, add the Clinical Passenger/Observer Placement Agreement Form.</p> <p>Section 23: Appendix 6, under the heading “Sense of Responsibility” add: “...and vehicles” to the fourth bullet point.</p>
V4	Review of policy (as part of consultation.)	<p>Section 5.9.1, 5th bullet point: addition of “...and clinical skills...”</p> <p>Section 5.9.1, 6th bullet point: Changed to read: “whilst on placement, to ensure if they are required to perform any clinical treatment, they do so within their accredited clinical skills. They must practice in a manner which would be accepted by their regulatory body.”</p> <p>Section 5.9.1, Deletion of 9th bullet point about clinical interventions.</p> <p>Section 5.9.1, New 11th bullet point, which reads: “to wear, where applicable, Trust uniform and if this is not applicable then suitable clothing and footwear must be worn”</p> <p>Section 7.0.1, addition of “Corporate staff”</p> <p>Section 7.0.2, removal of 6th bullet point about “Helicopter Emergency Medical Services (HEMS)”</p> <p>Section 7.1.1, removal of 6th bullet point about HEMS (as above).</p> <p>Section 7.2.2, replacing ‘Scheduling’ with ‘Planning’</p> <p>Section 10.1, the first sentence changed to read: “The Clinical Passenger/Observer shall, at all times whilst on placement, follow any reasonable direction given by SCAS employees.”</p> <p>Section 10.3, this section changed to read: “If a Clinical Passengers/Observers is required to perform any clinical treatment, they do so within their accredited clinical skills. They must practice in a manner which would be accepted by their regulator body.”</p> <p>Appendix 3, addition of: “In accordance with the Motor Vehicles (wearing of</p>



		<p>seatbelts) Regulations 1993, you must wear a seatbelt whilst travelling in a SCAS vehicle.”</p> <p>Appendix 4, point 2, addition of “...and wearing a seat belt whilst travelling in a SCAS vehicle.”</p> <p>Appendix 6, Under ‘Personal Appearance’, addition of second bullet point: “suitable footwear”</p>
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19. Appendix 2: Confidentiality Agreement

Confidentiality Clause

The Trust policy adheres to the Data Protection Act 1998 and the General Data Protection Regulation 2018 and any patient information is strictly confidential and must not be discussed with anyone other than the crew.

1. Students/Clinical Passengers/Observers acknowledge that, by virtue of their position and in carrying out the duties associated with their role, they will have access to Trust secrets and confidential information belonging to or relating to the Trust or its suppliers, purchasers/clients, and patients. Students/Clinical Passengers/Observers therefore undertake that neither during their term of office nor after the termination of such, and without limitation of time they will not:
 - 1.1 Publish, disclose or otherwise communicate to any person, company, business entity or other organisation whatsoever, any Trust secrets or confidential information belonging to or relating to the Trust, its suppliers, purchasers/clients, and patients.
 - 1.2 Make use of any trade secrets or confidential information belonging to or relating to the Trust or its suppliers, purchasers/clients and patients for their own purposes or benefit, or for the purpose of benefit of any other person, company, business entity or other organisation whatsoever.
2. For this purpose 'confidential information' shall include, but not be limited to, any information relating to purchasers, marketing and sales plans and information, pricing information, annual and strategic plans, information concerning employees or patients, information relating to financial and business dealings, research activities, Policies, Procedures, Service Orders or any document marked 'confidential' or which the employees are advised to be 'confidential' or which they might reasonably expect to be regarded by the Trust as 'confidential'.
3. The Student/Clinical Passengers/Observers' obligations shall not apply in relation to any Trust secrets or confidential information which:
 - 3.1 They have been authorised by the Board to disclose, publish, communicate or make use of, or which is necessary to disclose, publish, communicate or make use of for the proper and efficient discharge of their duties.
 - 3.2 They are required by law or any Court or other similar judicial body or authority to disclose, publish or communicate.
 - 3.3 Have come into the public domain other than by way of unauthorised disclosure whether by themselves or by any other person, company, business entity or other organisation whatsoever.
4. The Student/Clinical Passenger/Observer shall not make or retain any copy of, nor make any notes, nor remove from the premises of the Trust, any trade secret or confidential information belonging to or relating to the Trust.



- 4.1 Without the prior written consent of the Chief Executive.
- 4.2 Unless such copying or making of notes is necessary for the proper and efficient discharge of duties.

I agree that in the event of such authorised removal or copying of such Trust secrets or confidential information, the Student/Clinical Passenger/Observer shall return such documents, papers, copies or notes to the Trust after the authorised purpose has ceased or has been completed or on the demand of the Trust.

Students/Clinical Passenger/Observers should be aware that any breach of confidence could result in termination of their placement and a civil action for damages.

Name (in capitals):	
Date:	
Signed:	
Current Job Role:	
Programme of Study:	



20. Appendix 3: Ambulance Clinical Passenger/Observer application form

CLINICAL PASSENGER/OBSERVER APPLICATION FORM

Please complete this form electronically and email it to your manager for authorisation. The Scheduling Department will only accept emails from your manager as proof of authorisation. Only bona fide NHS, Police, Fire and Rescue or Military email addresses will be accepted as proof of authorisation.

Today's Date:		Date Applied for:	
Name:			
Date of Birth:		Station Applied for:	
Contact Number:		Shift Applied for:	
Your email address			
Job Title and brief description of your role		Employer:	
Reason for Observing:			
Manager's Name: (For authorisation)		Title:	
Next of Kin (Name & Relationship):		Next of Kin (contact number):	

By completing this form you are agreeing to the following conditions:

Health & Safety

Clinical Passengers/Observers with the South Central Ambulance Service NHS Trust (SCAS) have a legal responsibility to take all reasonable steps to ensure their own and others' safety. SCAS has definitive procedures that must be followed. All necessary Personal Protective Equipment will be provided. Appropriate clothing and footwear should be worn by the Clinical Passenger/Observer and they are expected to maintain a level of personal appearance conducive with a professional ambulance service.



In accordance with the Motor Vehicles (wearing of seatbelts) Regulations 1993, you must wear a seatbelt whilst travelling in a SCAS vehicle.

The Trust accepts no liability for injury, loss or damage caused by failure to follow the defined procedures or directions given by the Trust personnel. No person under the age of 18 years is permitted to observe on a Trust vehicle.

Management

The Clinical Passenger/Observer, regardless of qualification or experience shall at all times while on attachment follow the directions given by SCAS employees present. Failure to follow these instructions will lead to immediate termination of the Clinical Passenger/Observer attachment and they will be asked to leave SCAS premises/vehicles immediately.

It is appreciated that some people on Clinical Passenger/Observer attachment may have clinical qualifications and an authority to practice clinical skills beyond those held by the Trust's personnel. The Clinical Passenger/Observer must be clear that the Trust will not accept any liability and/or responsibility for any clinical and/or procedures undertaken by the Clinical Passenger/Observer outside of the Trust's defined procedures or protocols.

Confidentiality

The Trust policy adheres to the General Data Protection Regulation 2018 and any patient information is strictly confidential and must not be discussed with anyone other than the crew.

For Resource Centre Use	
Shift date	
Shift times	
Station	
Crew 1	
Crew 2	
Crew emailed and date	
Clinical Passenger/Observer contacted	
Notes	



21. Appendix 4: Ambulance Clinical Passenger/Observer Briefings

Briefing from the Ambulance Crew (please ask at the commencement of the shift/placement)

Prior to the shift the crew will brief you on the following issues:

1. Introduction to role of the ambulance service
2. Health and Safety, including the use of Personal Protective Equipment and wearing a seat belt whilst travelling in a SCAS vehicle
3. Approaching an incident safely including dwelling and public place,
4. Dealing with all types of patients
5. Dealing with relatives/bystanders
6. Patient confidentiality



22. Appendix 5: Clinical Passenger/Observer Placement Agreement Form

CLINICAL PASSENGER/OBSERVER PLACEMENT AGREEMENT FORM

The Trust accepts no liability for injury, loss or damage caused by failure to follow the defined procedures or directions given by the Trust personnel.

I, the signatory, accept all the provisions set out in this Agreement and confirm that I understand the risks inherent in the Ambulance Service. I am aware that, by nature, the duties and working environment of the Emergency Services has a potential to be hazardous at times without prior warning. South Central Ambulance Service Foundation Trust cannot accept liability for any injury, loss or damage caused by my failure to comply with Health and Safety, operational or management procedures. I am aware that any breach of confidence could result in termination of my placement and a civil action for damages. I have read and agree to comply with the Confidentiality Agreement (appendix 1) and the Code of Conduct (appendix 5). I consider myself healthy and fit enough to undertake this placement.

Signed:

.....

Name (in capitals).

.....

Date of Birth: *Age:*

No person under the age of 18 years is permitted to observe on a Trust vehicle/premises

Emergency Contact Details

Next of Kin (Name):..... *Relationship:*

Primary contact number (mobile):.....

Secondary contact (home and/or work):



23. Appendix 6: Code of conduct

PURPOSE OF THE CODE

- *Detailing the appropriate conduct for your placement*
- *Preparation for the placement*
- *General understanding of your role whilst on placement*
- *Underlying that the duty of care is to the patient and the Ambulance Service*
- *Understanding that your actions and behaviour may reflect on the Ambulance Service.*

PERSONAL STANDARDS

Personal Hygiene and cleanliness

- *Cleanliness and high standards of personal hygiene are of paramount importance in minimising the risk of cross infection*
- *Low personal standards of cleanliness and hygiene can make patients and other staff feel uncomfortable.*

Personal Appearance

- *Operational Uniform / smartly dressed*
- *Suitable footwear*
- *Hair should be kept under control and never loose/over the collar*
- *Excessive jewellery should be avoided.*

CONDUCT AND BEHAVIOUR

Conduct towards Trust staff

- *Choose appropriate times for questions*
- *Professional and courteous.*

Sense of Responsibility

- *Never divulge information to unauthorised people*
- *Do not give statements about the Trust to the media*
- *Comply with all Trust policies, procedures and protocol*
- *Smoking/Vaping is prohibited on all Trust premises and vehicles*
- *Alcohol is prohibited on all Trust premises*
- *Maintain a professional image- your manners and actions reflect on the Trust while on placement.*



24. Appendix 7: Trust's Generic Risk assessment form

South Central Ambulance Service NHS Foundation Trust Generic Risk Assessment Form							
Risk assessment on (Task/Activity/Environment, etc.):							
Person (s) carrying out the assessment:				Department/Area/Directorate:			
Risk assessment number:			Date of assessment:		Date of review of assessment:		
Ref	Hazards (List all of the identified hazards)	Existing Controls (List all of the measures currently in place to control exposure to the hazards)	Initial risk score (SxL =)	Further controls required- Action Plan (List all of the additional measures to be introduced to reduce the risk to the lowest level reasonably practicable)	To be Completed by: (Insert name of person)	When (insert date when further controls will be completed)	Final risk score (SxL =)
1.							
2.							
3.							



25. Appendix 8: Responsibility Matrix – Policies, Procedures and Strategies



Policy Group	Lead Director / Officer	Working Group	Committee	Board Ratification
Strategies	As appropriate	As appropriate	As appropriate	Required
Standing Orders & Standing Financial Instructions	Chief Executive + Director of Finance	Not applicable	Audit Committee	Required
Corporate Policies	Chief Executive +Director of Patient Care and Service Transformation	As appropriate	Quality and Safety Committee	Required/ Committee decision
Health and Safety Policies and Procedures	Director of Patient Care and Service Transformation	Strategic Health, Safety and Risk Group	Quality and Safety Committee	Health and Safety Policy – Required H&S Appendices – Committee decision
Control of Infection Policy and Procedures	Director of Patient Care and Service Transformation	Clinical Review Group	Quality and Safety Committee	Required
Personnel Policies and Procedures	HR Director	Staff Consultation Group	Quality and Safety Committee	Required for new policies. Committee decision for revisions
Financial Policies and Procedures.	Director of Finance	Not applicable	Audit Committee	Required for new Policies. Committee decision for procedural changes.
Operational Policies and Procedures	Chief Operations Officer	As appropriate or through Team Meeting	Quality and Safety Committee	Committee decision
Information and IT Policies and Procedures	Associate Director of Information Management and Technology (IM&T)	Information Management and Technology (IM&T) Control Board	Quality and Safety Committee	Committee decision
Emergency Operational Centre Policies and Procedures	Chief Operations Officer	As appropriate	Quality and Safety Committee	Committee decision



Clinical Policies and Procedures	Director of Patient Care and Service Transformation	Patient Safety Group	Quality and Safety Committee	Committee decision
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26. Appendix 9: Equality Impact Assessment Form Section One – Screening

Name of Function, Policy or Strategy: Clinical Passenger/Observer Policy and Procedure.

Officer completing assessment: Lynn Dove Dixon, Planning Manager (Workforce).

Telephone: 07799 640903.

1. What is the main purpose of the strategy, function or policy?
The aim of this policy is to set out the arrangements, processes and management of SCAS employees and non-employees of the Trust applying and being accepted to become a Clinical Passenger/Observer.
2. List the main activities of the function or policy? (for strategies list the main policy areas)
The objectives of the policy are to ensure that the Trust has clear and defined arrangements for: <ul style="list-style-type: none">• the application process to become a Clinical Passenger/Observer, including the process for approving applications• the placing of a Clinical Passenger/Observer on a placement; and the review of this placement• ensuring that the placement is time specific• ensuring that the learning needs of Clinical Passengers/Observers is achieved• the management and control of risks to Clinical Passengers/Observers• the carrying out of risk assessments on the placements of Clinical Passengers/Observers• the regular review of these risk assessments.
3. Who will be the main beneficiaries of the strategy/function/policy?
All Trust employees and non-employees who will become Clinical Passengers/Observers.
1. Use the table overleaf to indicate the following:- <ul style="list-style-type: none">a. Where do you think that the strategy/function/policy could have an adverse impact on any equality group, i.e. it could disadvantage them?b. Where do you think that there could be a positive impact on any of the groups or contribute to promoting equality, equal opportunities or improving relations within equality target groups?



		Positive Impact	Negative Impact	Reasons
GENDER	Women	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
	Men	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
RACE	Asian or Asian British People	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
	Black or Black British People	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
	Chinese people and other people	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
	People of Mixed Race	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
	White people (including Irish people)	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
DISABILITY	Disabled People	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
SEXUAL ORIENTATION	Lesbians, gay men and bisexuals	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
AGE	Older People (60+)	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
	Younger People (17 to 25) and children	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.



RELIGION/BELIEF	Faith Groups	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.
	Equal Opportunities and/or improved relations	✓	N/A	Policy is designed to protect all Clinical Passengers/Observers within the Trust.

Notes:

Faith groups cover a wide range of groupings, the most common of which are Muslims, Buddhists, Jews, Christians, Sikhs and Hindus. Consider faith categories individually and collectively when considering positive and negative impacts.

The categories used in the race section refer to those used in the 2001 Census. Consideration should be given to the specific communities within the broad categories such as Bangladeshi people and to the needs of other communities that do not appear as separate categories in the Census, for example, Polish.



5. If you have indicated that there is a negative impact, is that impact:		
	Yes	No
Legal (it is not discriminatory under anti-discriminatory law)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Intended	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Level of Impact	High	Low
	<input type="checkbox"/>	<input type="checkbox"/>
If the negative impact is possibly discriminatory and not intended and/or of high impact then please complete a thorough assessment after completing the rest of this form.		
6(a). Could you minimise or remove any negative impact that is of low significance? Explain how below:		
6(b). Could you improve the strategy, function or policy positive impact? Explain how below:		
7. If there is no evidence that the strategy, function or policy promotes equality, equal opportunities or improves relations – could it be adopted so it does? How		
Please sign and date this form, keep one copy and send one copy to the Trust's Equality Lead.		
Signed:.....		
Name: Lynn Dove Dixon, Planning Manager (Workforce).		
Date: 3/1/2019.		



27. Appendix 10: Equality Impact Assessment Form Section Two – Full Assessment

Name of Function, Policy or Strategy: Clinical Passenger/Observer Policy and Procedure.

Officer completing assessment: Lynn Dove Dixon, Planning Manager (Workforce).

Telephone: 07799 640903.

Part A

Looking back at section one of the EqIA, in what areas are there concerns that the strategy, policy or project could have a negative impact?

- Gender
- Race
- Disability
- Sexual Orientation
- Age
- Religion/Belief

2. Summarise the likely negative impacts:-

.....

.....

.....

3. Using the table below, give a summary of what previous or planned consultation on this topic, policy, function or strategy has or will take place with groups or individuals from the equality target groups and what has this consultation noted about the likely negative impact?

Equality Target Groups	Summary of consultation planned or taken place
Gender	



Race	
Disability	
Sexual Orientation	
Age	
Religion/Belief	

4. What consultation has taken place or is planned with Trust staff including staff that have or will have direct experience of implementing the strategy, policy or function?

.....
.....

5. Check that any research, reports, studies concerning the equality target groups and the likely impact have been used to plan the project and guide or indicate what research you intend to carry out:-

Equality Target Groups	Title/type of/details of research/report
Gender	
Race	
Disability	
Sexual Orientation	



Age	
Religion/Belief	

6. If there are gaps in your previous or planned consultation and research, are there any experts/relevant groups that can be contacted to get further views or evidence on the issues?

Yes (Please list them and explain how you will obtain their views)

.....
.....

No

Part B

Complete this section when consultation and research has been carried out

7a. As a result of this assessment and available evidence collected, including consultation, state whether there will be any changes made/planned to the policy, strategy or function.

7b. As a result of this assessment and available evidence is it important that the Trust commission specific research on this issue or carry out monitoring/data collection?

(You may want to add this information directly on to the action plan at the end of this assessment form)

.....
.....
.....
.....

8. Will the changes planned ensure that negative impact is:

Legal?

(not discriminatory, under anti-discriminatory legislation)



Intended?

Low impact?

9a. Have you set up a monitoring/evaluation/review process to check the successful implementation of the strategy, function or policy?

Yes

No

9b. How will this monitoring/evaluation further assess the impact on the equality target groups/ensure that the strategy/policy/function is non-discriminatory?

Details:

.....
.....
.....
.....

Please complete the action plan overleaf, sign the EQIA, retain a copy and send a copy of the full EQIA and Action Plan to the Trust's Equality Lead.

Signed:.....

Name:.....

Date:.....



EQIA ACTION PLAN

Issue	Action Required	Lead Officer	Timescale	Resource Implications	Comments

Please continue on another sheet if you need to.



28. Appendix 11: Ratification Checklist

Section 1: To be completed by Author prior to submission for ratification

Policy Title	Clinical Passenger/Observer Policy and Procedure
Author's Name and Job Title	Lynn Dove Dixon, Planning Manager (Workforce)
Review Deadline	
Consultation From – To (dates)	4/1/2019 to 25/1/2019.
Comments Received? (Y/N)	Y
All Comments Incorporated? (Y/N)	Y
If No, please list comments not included along with reasons	
Equality Impact Assessment completed (date)	3/1/2019.
Name of Accountable Group	Health, Safety and Risk Group
Date of Submission for Ratification	

Section 2: To be completed by Accountable Group

Template Policy Used (Y/N)	Y
All Sections Completed (Y/N)	
Monitoring Section Completed (Y/N)	
Date of Ratification	
Date Policy is Active	
Date Next Review Due	
Signature of Accountable Group Chair (or Deputy)	
Name of Accountable Group Chair (or Deputy)	Chief Operating Officer.