Driving Standards Policy and Procedure

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The East of England Ambulance Service NHS Trust has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, gender, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups. This policy applies to all individuals working at all levels and grades for the Trust, including senior managers, officers, directors, non-executive directors, employees (whether permanent, fixed-term or temporary), consultants, governors, contractors, trainees, seconded staff, homeworkers, casual workers and agency staff, volunteers, interns, agents, sponsors, or any other person associated with the Trust.

All Trust policies can be provided in alternative formats.
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1. **Introduction**

1.1 The aim of this policy is to promote the highest standards of driving conduct within the East of England Ambulance Service NHS Trust (EEAST). The manner in which Trust vehicles are driven has a direct bearing on the public’s perception of the EEAST as a professional organisation. All staff must therefore strive to safeguard the Trust’s reputation by displaying high standards of driving and road behaviour at all times.

1.2 In addition to ensuring compliance with Road Traffic Law, all staff have a duty to protect the safety and wellbeing of other staff, patients, passengers and other road users.

1.3 Drivers of Trust vehicles must adhere to the level of training and standards commensurate with their role. This includes maintaining a thorough working knowledge of the Highway Code, Road Traffic Regulations Act 1984, appropriate current supporting training and education material, policies, procedures, bulletins and information that is circulated within the organisation via the corporate communications system, the weekly Need to Know Bulletin.

1.4 All staff, whether driving or not, when approaching and parking at incidents should ensure a suitable and sufficient dynamic risk assessment is undertaken.
1.5 Emergency driving is a privileged skill underpinned by advanced training and assessment. With this privilege comes significant personal responsibility. Failure to act in accordance with the provided training or compliance with policy or procedure can result in internal disciplinary action by the Trust and legal proceedings against both the individual and the Trust. All staff should be aware of the implications of prosecution and the potential effect on their liberty in serious cases. Managers, prior to taking action will seek advice from Human Resources.

1.6 All drivers need to be aware that the consequences of actions and non-compliance to the provided training and/or policy, procedure and bulletins can lead to serious injury or death of staff or others.

2. **Scope**

2.1 This policy applies to all authorised drivers of EEAST vehicles. Vehicles may include those that are owned, hired, leased or borrowed. It also applies to staff and volunteers who drive vehicles on behalf of the Trust (Inc private vehicles for business use).

3. **Objectives**

3.1 To provide guidance to all drivers in support of their legal and professional responsibilities in driving on EEAST business and where authorised claiming legal exemptions.

3.2 To ensure the safety and wellbeing of staff, patients, passengers and other road users.

3.3 To maintain a framework in which the Trust can measure and monitor the standards of driving of those persons authorised to drive on EEAST business.

4. **Responsibilities**

4.1 All authorised persons who drive on EEAST business are responsible for complying with current Road Traffic Law, driver training and educational material, EEAST driving policies, procedures and bulletins at all times.

4.2 Line managers are responsible for overseeing compliance with this policy.

4.3 The Trust Accident Reduction Group is responsible for developing the strategic direction of driving related projects and initiatives, as well as monitoring the outcomes from current motor risk activity and data collection sources. The Group reports to the Executive Management Team on a regular basis.

4.4 All members of staff are expected to challenge unacceptable driving behaviour or standards observed in the overall interests of maintaining the highest professional standards and safety of all concerned.
4.5 Whilst it is the driver’s ultimate responsibility, all crew staff must jointly undertake a dynamic risk assessment when approaching and parking at incidents.

4.6 All drivers are responsible for undertaking and recording a road worthiness check of their vehicle in accordance with Statutory Vehicle Checks.

4.7 All staff must be aware that it is an offence to cause or permit a person to use a vehicle that is not legally roadworthy.

4.8 Employees and volunteers are responsible for:

- Ensuring that they follow this policy at all times.
- Be aware of specific terminology definitions related to driving
- Driving with the appropriate safe attitude to safety and risk
- Use Trust vehicles and associated correctly with due care and attention.
- Ensuring adherence to current Road Traffic Regulations. It should be clearly understood that private vehicles must observe speed restrictions and all other road traffic regulations, even when responding to an emergency call and that there are no exemptions from the law. It is in everyone’s interest that proper care should be taken when responding to emergency calls and there should be appreciation that the difference between a reasonable response and an unreasonable response may only amount to a few seconds. Community responders and others driving on behalf of the Trust must not take unnecessary risks. It is better to arrive a few seconds later than not at all.
- Compliance with their statutory duty under section 7 of the Health and Safety at Work Act 1974, i.e. to co-operate with their line manager so they can comply with their duties e.g. use vehicles in accordance with training and following procedures.
- Taking reasonable care of their own health and safety and that of others which may be affected by their actions, this includes driving vehicles safely.
- Ensuring that, if driving in their own car is part of their role e.g. non-operational (attending meetings or training courses) they make provision with their insurance company that they have the relevant cover for the journeys they undertake.
- The Trust Fleet department will ensure the Trust vehicle has valid road fund licence.
- Ensuring that all privately owned cars used for work, which are over three years old, have a current MOT and valid road fund licence.
- Ensuring that their driving licence is current and they inform their line manager of any endorsements as soon as they occur.
- Ensuring that lease/hire cars are serviced, maintained and MOT’d where appropriate, according to the manufacturers recommendations.

- Ensuring compliance with the requirements of the Trust's Lease Car Agreement and the Business Travel Policy, where appropriate.

- Ensuring they are fit to drive at all times and be aware of the implications which alcohol, illicit substances and medication have on driving (see also the Trust's Alcohol and Drug Misuse Policy). There are no limits imposed for illicit substances and employees found to be under the influence of drugs could be arrested and prosecuted by the police if caught in charge of a vehicle. Impairment to drive is a serious offence and those found unable or unfit to perform their duties, even if under the legally prescribed limits, may face disciplinary action. Managers, prior to taking action will seek advice from Human Resources.

5. Definitions

5.1 Throughout this document the term ‘Trust vehicle’ refers to all types of vehicle operated by the EEAST. The terms ‘driver’ refers to all grades of staff who have been authorised to operate a Trust vehicle.

5.2 An authorised driver is any person who is driving any vehicle operating on Trust business with the permission and knowledge of their line manager.

5.3 A dynamic risk assessment can be defined as: “The continuous process of identifying hazards, assessing risk, taking action to eliminate or reduce risk, monitoring and reviewing in the rapidly changing circumstances of an operational incident.”

- Cancelling Notices of Intended Prosecution/Camera Activations

(etc.) [Main body of document – further headings]

6 Trust Legal Requirements

6.1 The Trust has a legal responsibility to identify the driver of the vehicle concerned in the above usually within 28 days of receiving the request. All requests for driver details must therefore be dealt with urgently and result in the driver's identification.

7. NIP cancellation Actions Required

7.1 If the driver is claiming a legal exemption, then all relevant paperwork must be endorsed by a manager above the rank of the driver. The Driver Training Unit
has its own instructions for dealing with these issues for students under instruction.

8. **General Procedures**

8.1 **Authorisation to drive EEAST Vehicles**

8.1.1 Staff are responsible for ensuring that they have a valid driving licence for the category of vehicle that they are required to drive. Staff should keep their licence and National Insurance Number available for inspection at all times to conduct an online licence check via the DVSA and where required by a manager should produce this on request and normally within 24 hours.

8.1.2 Staff should refer to the driving licence policy for further details for licence category requirements.

8.1.3 Non-operational drivers such as but not limited to courier transport service, fleet and non-operational lease car users adhere to the above requirements and must drive with full compliance to the Highway Code and driving assessment requirements as determined by the Trust.

9. **Drivers Re-joining or Transferring to the Trust**

9.1 Employees who re-join the Trust, or transfer from another NHS Ambulance Trust, can be re-authorised providing they meet the Trust standards and requirements appropriate to their role.

10. **Training by Outside Agencies**

10.1 Trust drivers who receive training from outside agencies, including other Ambulance Trusts, will be required to meet the Trust standards appropriate to the authorisation required.

11. **Administrative Records**

11.1 A driver’s authorisation to drive Ambulance vehicles is kept on their training record.

12. **Non Trust Employees driving EEAST vehicles**

12.1 In exceptional circumstances, e.g. major incidents and with authorisation of the Trust. Anyone external to the Trust e.g. a police officer who has a relevant licence category and approved training in the relevant sized vehicle can be permitted to drive a Trust vehicle under normal road conditions deemed necessary by a uniformed officer or operational manager.

13. **Vision (Spectacles/Contact Lenses/Sunglasses)**

13.1 All Trust drivers must ensure that their vision meets with the legal requirement at all times. This is specified in the Highway Code (Rule 92) and drivers are strongly encouraged to have regular eyesight tests (every two years at least) to help maintain this requirement. Drivers who need to wear spectacles or contact lenses for driving
must do so at all times when driving and must carry a spare pair of spectacles when on duty.

13.2 In accordance with Rule 94 of the Highway Code, sunglasses/tinted spectacles may only be worn during bright sunlight. The wearing of such spectacles could be dangerous in other conditions, due to the reduction of vision and subsequent risk of not observing another road user, for example pedestrian or bicycle.

13.3 Drivers who use tinted prescription spectacles to correct vision must also carry a pair of spectacles with clear lenses in case weather conditions change during the period of duty.

13.4 Spectacles and/or Sunglasses should be of a colour and style in keeping with the professional image of the EEAST.

Further advice and guidance to welfare and medical driver related issues can be found in Driving SOG 2 on the Driver Training Unit internet page.

14. Non-Emergency Driving Procedures

14.1 In addition to the requirements contained within the Trust’s Policy for Driving Licences, before a driver can be authorised for non-emergency driving they must:

   i. Successfully complete a trust approved non-emergency driving course, including both practical and theoretical elements for PTS staff.
   
   ii. Be aware that after authorisation, the driver will be subject to periodic re-authorisation as deemed necessary by legislation or the Trust.
   
   iii. Lease car Users, eligibility to scheme and further details of vehicle usage can be found within the Trust’s Business Travel Policy

14.2 Patient Transport Staff (PTS) and other non-emergency staff are not permitted to claim any exemption afforded to emergency vehicles, other than those relating to ‘stopping’ and ‘parking’ as defined in other relevant documentation. The circumstances must dictate that no other legal stopping/parking alternative was available, and that the exemption can be claimed safely with all due consideration to other road users. Exemptions listed below:

   • Stopping on clearways
   • Parking within the zigzags of a pedestrian crossing
   • Parking in areas controlled by double white/yellow lines
   • Stopping the engine whilst parked
   • Parking on the offside of the road at night
   • Parking on footway/verge/central reservation

15 Emergency Driving Procedures

15.1 The overarching principle is the Road Traffic Regulation Act 1984, section 87 which permits the use of exemptions by the driver where by otherwise the vehicle may be hindered for the purpose for which it is being used on that occasion.
The over-riding priority in all driving situations is the safety of staff, patients, passengers and other road users. It is essential that ambulance vehicles are driven at a speed where the vehicle can be stopped within the driver’s range of vision. Speed must be conducive to the prevailing road, weather and traffic conditions existing at the time. The speed must be compatible with the patient's condition and that allows the attendant to safely provide the appropriate level of care. The Trust cannot prescribe for all situations or circumstances that a driver may face. Therefore, it is as important for the driver to decide on the use or non-use of exemptions on a case by case basis.

15.2 On receipt of a call requiring an emergency driving response, the crew will immediately progress to the given location by the quickest route available using appropriate visual warnings devices, together with audible warning devices as considered necessary. The route will normally be pre-selected by the satellite navigation system, although staff can apply local knowledge and judgement in avoiding matters such as road-works and known traffic delays. In cases where a pre-selected route is not available through an electronic system the driver will establish the most direct route using a map book. Where appropriate the attendant should provide the navigation guidance.

15.3 Except when on emergency calls, drivers are bound by the restrictions on waiting, sounding of audible warning devices and positioning on the road when stationary. An ambulance is only exempt from such regulations if conformity would hinder its use for its intended purpose. Where no exemption applies and the driver incurs parking fines, a fixed penalty notice and/or a summons, it will be their responsibility to address these and resolve the matter with their line manager. All staff are reminded that they must declare all such matters. The Trust will not cover the cost of any financial penalties that are incurred in this regard.

15.4 In the interests of both safety and legal requirements, drivers should not normally use a hand held device, which is not docked in a suitable carrier mounted in the vehicle. This includes the use of mobile phones, mobile data terminal (MDT) and navigation systems whilst driving or manoeuvring a vehicle. The wearing of headphones or earpieces, other than those connected to an airwave radio, must not be used when driving Trust vehicles.

15.5 The domestic radio must be switched off when responding to emergency calls.

16. Audible and Visual Warnings

The claiming of legal exemptions whilst using audible and visual warnings is always the responsibility of the driver.

16.1 Visual warnings (blue lights) and flashing headlights (wig-wags) should be used when responding to all calls requiring an emergency driving response. Such a call can be defined as a call originating from a 999 call; a call from another health care professional or a call appropriately authorised and made in connection with...
ambulance purposes. Audible and visual warnings may also be used when conveying a patient to hospital where the patient’s condition justifies their application. The use of audible warnings is permitted throughout the 24 hour period and may be used at the driver’s discretion. Wig – Wags must NOT be used when lighting conditions require the use of headlights.

16.2 Drivers should ensure that audible warning devices are activated in good time to help, warn or inform other road users and give them adequate time to react.

16.3 In situations where it is evident that passage cannot be safely gained through, sirens should be turned off to avoid causing other road users to feel intimidated or panicked.

16.4 Unnecessary use of audible warning devices, especially at night can cause disturbance to the public. However the most overriding decision when using them is to achieve progress and arrive safely at an incident.

16.5 Use of audible warning devices whilst en-route to hospitals may not ease the feelings or condition of a conscious patient and it will be particularly important to reassure the patient when they need to be used.

16.6 Audible and visual warnings are not to be used when routinely returning to the base station unless directed by EOC, for example to hand the vehicle to another crew to respond to an emergency call.

16.7 Table 1 below sets out when audible and visual warning may be used by EEAST staff. It is always the responsibility to the driver to claim legal exemptions and be capable of justifying them in law, should the need arise.

16.8 It is normal that as a call develops, the category may change. Drivers are expected to drive in accordance with the information available at the time and to dynamically assess and re-assess the situation.

<table>
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<tr>
<th>Emergency Call Category</th>
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<th>Permitted use of Audible/Visual emergency devices Response</th>
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<tr>
<td>Category 1, Category 2</td>
<td>999/111/Fire/Police/Coastguard with or without confirmed diagnosis predicted C1 coded calls and emergency call in progress)</td>
<td>Permitted</td>
<td>The initial predicted category will come from pre-triage questions or key words at the start of the emergency call (part of Nature of Call/Dispatch on Disposition process). Prediction will only occur for C1 with other categories normally expected to be reached via MPDS triage before dispatch. Emergency calls in progress will not normally be dispatched on unless there is an extended delay in triage and/or a concern for the patient identified in call taking.</td>
</tr>
<tr>
<td>Category</td>
<td>Description</td>
<td>Permitted</td>
<td>Notes</td>
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</tr>
<tr>
<td>Category 3</td>
<td>999/111/Fire/Police/Coastguard emergency calls categorised under NHSE ARP as ‘Urgent’</td>
<td>Permitted</td>
<td>These are emergency calls and patients may have had to wait longer than higher priority calls. Driver discretion applies on use of lights/sirens based on the information available (such info may relate to road and traffic conditions, patient condition, environment and length of wait).</td>
</tr>
<tr>
<td>Category 4</td>
<td>999/111 calls categorised as less urgent and suitable for Hear and Treat, face to face assessment or transport</td>
<td>Not permitted unless additional clinical information indicates</td>
<td>Hear and treat calls may require a physical response after triage or assessment by an ECAT clinician. Some Category 4 calls will require a transport or non-urgent face to face response. Driver discretion applies based on available information.</td>
</tr>
<tr>
<td>HCP Urgent</td>
<td>Urgent</td>
<td>Not permitted unless additional clinical information indicates</td>
<td>Patient travelling to hospital for admission or assessment by a health care professional</td>
</tr>
<tr>
<td>No Category</td>
<td>Hot 1 or Hot 2 Back up</td>
<td>Permitted</td>
<td>When a solo clinician requires back up under emergency conditions.</td>
</tr>
<tr>
<td>No Category</td>
<td>Cold 3 Back up</td>
<td>Not permitted unless additional clinical information indicates</td>
<td>When a solo clinician requires back up as a non-blue light response.</td>
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16.9 Unless the vehicle is likely to be kept at an incident for an extended time, the blue lights, hazard warning lamps and rear red flashing lights should be kept on as a scene protection whilst stationary where deemed necessary. Where parking and displaying hazard warning lights may be obstructed by another stationery vehicle and confusion created to other road users by the signal they can see, consideration should be given as to their ongoing use.

16.10 EEAST cars, and particularly Cycle Response Unit (CRU) vehicles are far less visible than ambulances, and generally do not provide the driver with the same level of vision as from an ambulance cab. Equally, such vehicles may not always
be as visible to other road users, so staff must constantly bear these factors in mind when responding to emergency calls.

16.11 Audible and visual warning devices may be used for ambulance purposes in circumstances when not assigned to a 999 emergency call, but where the balance of need is deemed reasonable and proportionate to aid the prompt and effective provision of emergency ambulance services. Such cases must be authorised by an officer of at least Silver level Manager (or nominated appropriate deputy in the case of control services) rank. Such authorisation will be recorded on the event log/decision log and must be reasonable, necessary and proportionate in the circumstances. Further advice and guidance relating to emergency warning equipment use can be found on the Trust Driver Training Unit intranet pages.

17. Exemptions

17.1 All drivers are reminded that they are obliged under the Corporate Manslaughter and Homicide Act 2007, the Road Traffic Act 1988, Road Traffic Regulation Act 1984 and the Road Safety Act 2006 to afford, at all times, the maximum protection to other road users and to drive with care and consideration for other road users. At no time must the vehicle be driven recklessly, or in a manner, or at a speed likely to cause danger to another road user (including those near to but not on the road). The only circumstances in which these exemptions can be considered are during the initial response to an emergency call, or when the patient’s condition warrants the emergency transfer to a treatment facility.

The Driver must always be able to justify the need for claiming of any exemptions and the manner in which it was claimed, possibly in a court of law.

Exemptions afforded to drivers engaged in an emergency response are:
- Stopping on clearways
- Parking within the zigzags of a pedestrian crossing
- Parking in areas controlled by double white/yellow lines/red lines
- Stopping the engine whilst parked
- Parking on the offside of the road at night
- Parking on footway/verge/central reservation
- Exceeding statutory speed limit.
- Treating red light as a Give Way.
- Using audible warnings at night.
- Observing keep Left/Right signs.
- Motorway regulations (where you need to do so to avoid or prevent an accident, or to obtain or give the help required at an accident or emergency).
- Entering a bus lane/street.
- Entering a pedestrian precinct.

18. Speed
18.1 A vehicle being used for ambulance purposes may exceed any statutory speed limit (those governing roads and vehicles) if observance of the limit would hinder the use of the vehicle for its official purpose on that occasion. The exemption may be claimed when travelling to an emergency or on the journey to hospital providing the patient’s condition can justify use of the exemption.

18.2 The Trust has issued guidance for a speed cap of a maximum of 20mph over the posted road speed limit. Further details can be found on the Driver Training Unit intranet page.

18.3 CRU cyclists may claim exception from the Highway Code mandatory ‘Must Not’ rules when cycling on a pavement or pedestrian area in response to an emergency call. More details can be found in the CRU handbook.

19. Negotiating Red Traffic Lights
19.1 Drivers have discretion to regard a red traffic light as a ‘Give Way’ sign rather than a ‘Stop’ sign when ‘observance would hinder the use of the vehicle for its official purpose on that occasion’.

19.2 A ‘Give Way’ sign has specific legal meaning and failure to comply with that meaning is in itself an offence. The sign means do not enter the major road in such a manner as to be likely to cause danger to, or collision with, a vehicle on the major road or to cause it to change speed or course.

19.3 In negotiating a red traffic signal:

- Drivers MUST be in a position to GIVE WAY to ANY vehicle that still has right of way in or entering the junction.

- In order to do this SPEED must be significantly reduced to a slow walking pace prior to arriving at the hazard.

- No DECISION is to be made to enter the junction before full VISION has been acquired and it can be seen that it is safe to proceed.

- Drivers must WAIT until all other drivers and road users have stopped or slowed to allow the ambulance vehicle precedence. EEAST drivers must NOT force their way through and cause other road users to alter direction or speed.

- Particular care must be taken where the junction has multiple lanes to cross and vision is obscured by large vehicles.

- Always ‘PLAN FOR THE WORST- DON’T HOPE FOR THE BEST’. If in doubt hold back.
Should a collision occur whilst crossing a red traffic signal, responsibility may rest with the Trust driver.

19.4 The degree of additional care and caution required to safely negotiate a red traffic signal cannot be overemphasised. Drivers must remain mindful that the use of audible and visual warnings does not give an ambulance vehicle ‘the right of way’ – they merely seek to alert the public to its presence. Equally, having the right to claim an exemption does not mean it is safe to use it.

19.5 Drivers of emergency vehicles should be particularly mindful that despite the use of audible warning devices, drivers of other vehicles may not hear sirens etc. due to other distractions in their vehicles, such as loud noise, headphones or health problems.

20. Pedestrian Crossings (All types)

20.1 The very nature of pedestrian crossings dictates that extreme caution MUST be exercised at all times on the approach and during the negotiation of crossings. Drivers MUST once again approach crossings at a slow walking pace (under 5mph), and NOT proceed until they are completely satisfied that any pedestrians present have observed the approaching vehicle and adopted a safe position. Drivers must then remain vigilant to any sudden or unexpected actions by pedestrians and/or other road users as the crossing is safely negotiated.

20.2 Due consideration should also be given to the potential of disability in pedestrians and/or other road users, particularly those affecting sight and hearing.

20.3 Legally, the driver must allow precedence to any pedestrian who is on any part of the crossing, and equally must not cause danger to any other vehicle approaching or waiting at the crossing.

20.4 Trust vehicles are permitted to park within the controlled area and on the crossing subject to the vehicle not remaining longer than is necessary, and/or it could not be parked effectively elsewhere. This exemption is to allow ambulance personnel to deal with the incident when no alternative parking is available. Drivers are reminded that there is no exemption for dangerous parking.

21. Parking within areas controlled by double white/yellow lines (or red lines)

21.1 Drivers should remember the following:

- Consideration of road layout to minimise risk
- Assessment of patient condition and mobility
- Keeping the parking time to a minimum

22. Parking on a footway, verge or central reservation (non-fast roads)
22.1 Drivers should not park on footpaths unless directed to do so. Where parking needs to occur, care should be given to ensure pedestrians and wheelchair users can pass. Care should be taken when moving onto soft ground so as to not to get the vehicle stuck or to cause damage to it.

23. Keep Left/Right

23.1 There are occasions when because of traffic or an obstruction, it becomes necessary for a Trust driver to claim an exemption for a keep right/left sign. This may include passing on the offside of a refuge to avoid delay when engaged on an emergency call. In these circumstances the greatest care must be exercised; the onus for ensuring that there is no possibility of a collision or of causing harm rests with the driver.

24 Use of bus lanes and during times of operation

24.1 Trust Drivers must comply with bus lanes regulations during their times of operation, although emergency vehicles responding to an emergency call and or when conveying a patient to hospital are exempt under emergency conditions.

24.2 Staff should check with their line manager to see if there are any local agreements or amended traffic orders allowing Trust vehicles under non-emergency conditions to utilise bus lanes applicable to emergency and PTS vehicles.

24.3 Drivers should avoid using Contra-Flow Bus Lanes, unless it provides the only means of access to a call. In such cases, all due care and consideration must be given to ensuring that a clear passage exists for the vehicle to reach the call without becoming ‘boxed in’ or a hazard to other road users.

25 Clearways

25.1 Trust vehicles are permitted to stop and park on clearways, subject to it being necessary to carry out essential duties that could not be done if the vehicle were parked elsewhere.

26 Parking on the offside of the road at night

Trust drivers claiming this exemption should remember the following:

- Switch headlights off and engage sidelights
- Use hazard warnings lights if causing an obstruction

27 Audible warnings at night

27.1 Sirens may be used at night where deemed necessary for the safety of all road users.

28 Entering a pedestrian precinct
32.1 Emergency vehicles may enter a pedestrian precinct when essential to provide patient care. Always consider if alternate access or parking would be appropriate to reduce risk to other road users

29 Motorway regulations (where you need to do so in order to avoid or prevent an accident, or to obtain or give the help required at an accident scene. Full guidance can be found on Trust document Fast Roads and Multi lane procedure on the Trust driver training unit intranet.

30 Progress through Road Works

30.1 Roadwork areas are created to protect the safety of the workforce, their engineering equipment and to segregate the travelling public.

30.2 Although the road surface at the entry may be secure and safe, hazards may be encountered in the road further on (e.g. holes, loose surfaces, dips etc).

30.3 Ambulance vehicles will not enter or pass through coned off road-works, even when responding to emergency calls, unless invited by contractors. On such occasions the speed limit for the site must be adhered to and warning equipment operated. Before entering, look for signage on the method of contacting the site safety manager/contractors before proceeding where applicable.

31 Non-Exemptions

31.1 There are no exemptions for the driver of an ambulance vehicle, even when responding to an emergency call, from the following list:

- Dangerous Driving
- Careless Driving
- Failing to stop if involved in a Road Traffic Incident
- Dangerous Parking
- Driving without wearing a seat belt (please refer to Section 6.5)
- Failing to obey traffic lights controlling a railway level crossing or fire station
- Crossing or straddling a solid white line nearest to you down the middle of the road (other than those occasions listed in the Highway Code, or if you have to pass a maintenance vehicle, a pedal cyclist or a horse being ridden, all of which must be travelling at less than 10mph)
- Failing to obey a ‘STOP’ or ‘GIVE WAY’ sign*
- Failing to obey a ‘NO ENTRY’ sign*
- Failing to obey a ‘ONE WAY TRAFFIC’ sign
- Failing to obey any other instructional sign, such as no right turn**.

* Unless instructed to by a Police Officer or Traffic Warden in uniform ** Unless covered by a local authority notice

31.2 There is no legal definition of what would or would not constitute justification for ‘claiming ambulance exemptions’. However, the following guidance is given as to what the Trust would not normally consider justification:
• Attending meetings.
• Attending court or any other official engagement.
• Booking off at the end of a tour of duty.
• Taking refreshments.
• Familiarising yourself with a new make or model of vehicle. If this is felt necessary then the employee should consult the Trust lead for Driver Training.
• Attending a briefing unless it relates to an immediate, on-going incident such as, major or critical incidents etc and authorised by EOC/Silver level manager.
• When 'on call' unless the staff member is driving a Trust vehicle and is called out to attend an incident, such as the above, as a matter of urgency and authorised by EOC/Silver level manager with an associated CAD reference.
• Using an ambulance vehicle for work to home or home to work journeys.
• Using your own vehicle whilst on duty or on call, for example responding to a recall to duty incident.

32 Floodlights and Alley Lights

32.1 White lights, other than reversing lights, are allowed and can be used to the rear and/or side of an ambulance whilst stationary, to illuminate an incident. Floodlights are not to be used whilst the vehicle is in motion.

32.2 Some vehicles are fitted with alley lights to assist with the searching for an address and operate at speeds under 10mph. When manual use is required, these should only be used at under 10mph.

33. Negotiating Rough Ground/ Vehicle Use Off Road

33.1 Unless the vehicle being used is specifically designed for use off-road and the driver has been trained / familiarised to drive in such circumstances, the vehicle should not normally be used off-road e.g: do not drive onto fields.

33.2 There will be occasions when there is an urgent operational necessity for a vehicle to be taken into an off-road situation. However, this should be treated as a last resort.

33.3 The term off-road covers many varied areas and types of surface and can include: footpaths, bridleways, canal towpaths, parks, parkland, alleyways, rough ground or common land etc.

33.4 This list is not intended to be exhaustive and a common sense approach should be taken in determining what is off-road or not.

33.5 Drivers should be aware that the vehicle may perform differently and that there are other dangers in such situations. The following factors should be taken into account:
• Consider assessing the area on foot.
• Handling characteristics.
• Traction available.
• Braking distances.
• Ground clearance reduced (serious risk of underside damage).
• Approach angle.

EEAST: POL016 – Driving Standards Policy and Procedure
November 2017, V2.0
• Ramp angle.
• Departure angle.
• Available vision – forward and lateral.
• Pedestrians, pedal cyclists etc. may not expect a vehicle and not act as assumed.
• Vehicle getting stuck.
• Environmental damage.
• Legality of using vehicle in that location.

Approach Angle
• The angle between the front tyre of a vehicle and the lowest point of the vehicle forward of the wheel.

Ramp Angle
• The angle between the tyre and the underside of the vehicle midway between the wheel centres.

Departure Angle
• The angle between the rear tyre and the rear lowest point of the vehicle.

33.6 Every effort must be made to avoid a Service vehicle being driven off road unless it has been designed to do so and the driver trained to use it in these conditions, as this may cause the vehicle to get bogged-down and/or cause damage to the vehicle or property, e.g. playing fields. When driving onto a property all reasonable permissions of the owner should be obtained and steps taken to avoid damage to premises consistent with needs of the patient.

33.7 If it is necessary to negotiate prepared or soft ground to reach the patient and driving over the area is likely to cause damage, crews should approach the patient on foot and give consideration to the way in which the patient will be conveyed back to the ambulance.

33.8 In the event of any uncertainties about the surface, staff must not commit the Vehicle until they have satisfied themselves that the vehicle will not sink and become impeded.

34. Reversing & Manoeuvring

34.1 Double Resourced Vehicles

34.1.1 Prior to reversing, the driver must agree with a responsible assisting person (for example other ambulance staff, police officer, Highways Agency Traffic Officer, fire fighter) a safe path for the vehicle to take. They will then act as a guide and the driver must not reverse until they have checked that the area into which the vehicle is to travel is clear. The assistant must then stand in the position outside of the vehicle from which they can best be seen and heard by the driver. Verbal instructions alone are inadequate as they may be drowned out by the vehicle engine
or other noise. For added safety, where possible assistants should wear their Hi Vis jacket/tabard whilst assisting the reversing or manoeuvring of the vehicle into position.

34.1.2 When the assistant’s view is restricted from the front or side of the vehicle they should take up a position towards the rear of the vehicle. Eye contact must be maintained between the driver and assistant. Where the attendant is working with the patient and other assistance cannot be achieved. Extreme care and cautions should be taken to complete the manoeuvring task.

34.1.3 A driver who does not obtain assistance when they could reasonably do so may be held responsible for any collision that occurs.

34.1.4 Where it is not possible to gain assistance, the principles shown under the single resourced vehicles section should be applied.

34.2 Single Resourced vehicles

34.2.1 The vehicle must not be reversed until the driver is satisfied that the way is clear and sufficient space exists for the manoeuvre to be completed safely. Even then particular care must be taken in case a person approaches unseen behind the vehicle. There should be no hesitation by the Trust driver in calling on other persons to assist with reversing manoeuvres. Where necessary, the Trust driver should get out of the vehicle and carry out an adequate assessment prior to the manoeuvre.

34.2.1 A driver who does not obtain assistance when they could reasonably do so may be held responsible for any collision that occurs.

34.3 Reversing during the hours of darkness

34.3.1 Additional caution must be exercised when reversing during the hours of darkness, and when visibility is reduced by weather and environmental factors.

34.3.2 All reversing manoeuvres must be carried out at low speed and where fitted the reversing alarm and/or cameras should be used. Staff must remain mindful that reversing aides have limitations and are not a substitute for the attendant / passenger alighting from the vehicle to assist. Discretion should be used during night periods with regard to the use of audible reversing and tail lift alarms.

35 Police Escorts

35.1 Drivers should be aware that the Police Services will only provide an escort under very specific circumstances. Both services have agreed that Ambulance staff are skilled and appropriately trained drivers in their own right and that a police escort is usually unnecessary. What circumstance of exception arise, this should be discussed with an EOC manager.

36 Leading or following other emergency vehicles
36.1 Other road users may not anticipate a second emergency vehicle and may not behave as you may normally anticipate when emergency driving. Other road users may close into the gap created once the lead vehicle has passed. This provides an increased risk of a collision occurring.

36.2 Drivers must not directly escort or follow any ambulance vehicle to an incident. Under no circumstances should a vehicle follow or escort another ambulance to a hospital under emergency conditions.

36.3 Where a situation arises where two emergency vehicles find themselves in close proximity attending an incident, the second vehicle should drop back to a sufficient distance to be able to drive independently so as to minimise the risk above. Drivers should also use different siren tones to help inform other road users of the presence of more than one emergency vehicle.

36.4 Drivers should avoid, in so far as is possible, driving under emergency conditions in convoy. It is recognised that in exceptional circumstances such as major incidents, this may be unavoidable and extreme caution should be taken.

36.5 In exceptional cases, such as serious burns or conveyance of a spinal case when a slow journey is required, police may assist with a ‘slow ambulance journey’. Only the EOC Senior Manager may make a request for a ‘slow journey’ escort. This must be agreed with the police supervisor in the relevant Police Service operations centre.

36.6 Before commencement of the journey the crew must liaise with the police driver. They will jointly determine the route to be taken and appropriate speed to be travelled. This will be determined by the patient’s condition and treatment being given.

36.7 It is best practice to ensure that a line of communication is established between the ambulance crew and police escort. This can be via the Airwave digital radio system, mobile telephone or other appropriate means.

36.8 When following the police escort the following factors must be considered by the driver:

- Separation distance between vehicles must be compatible to prevailing traffic conditions (i.e. not so close that a collision with the Police escort vehicle could occur upon harsh braking, nor too far back as to allow other traffic to move into the space between)

- During the journey, drivers should attempt to use a different audible warning tone to that being emitted by the Police escorting vehicle to help alert other road users to more than one emergency vehicle. Although the use of audible warnings must always be applied at the discretion of the driver, they should be utilised in unison with those of the Police vehicle wherever possible.

- Be cautious and aware of vehicles pulling out behind the police escort vehicle.
• The driver must be aware that the ambulance in many instances is larger than the escort vehicle so more room will be needed to proceed through closing gaps. Larger vehicles generally have longer stopping distances.

36.9 Accurate driving plans, good forward vision, hazard perception and close cooperation with the police escort vehicle will determine the success of police escort journeys.

37. High Security Police Convoys

37.1 Staff will be aware that the Police/security services occasionally provide a high security escort function for vehicles carrying VIP’s such as members of the Royal Family and to respond to specific operations. Escort vehicles are often highly liveried motor cycles and/or cars, but on occasion are unmarked vehicles using various configurations of audible and visual warning devices and may display warning signs in rear windows instructing not to pass.

37.2 In recognising that terrorist and security threats that are now part of daily life, it is essential that crews remain mindful of how their presence and vicinity may be perceived by security forces when operating in close proximity to police convoys. The potential for criminals to use stolen/bogus ambulance vehicles as a means to breach security measures is widely accepted as an on-going risk.

37.3 Staff should therefore adopt the following practices when encountering a high security convoy under emergency driving conditions:

• Use continuous audible and visual warnings to highlight your presence to the escort group.

• Reduce driving speed on approach, and if appropriate, wait until you have been signalled through by the escort if the circumstances require you to ‘give way’. If in doubt hold back and await clear signal from the security vehicle.

• Avoid coming between escort vehicles and their ‘principal’ vehicle or joining the convoy. Avoid following closely and if necessary be prepared to stop and allow a reassuring distance to be created between you.

• Give principal vehicles as much space as the circumstances reasonably allow.

• Be aware that such convoys may change direction with little or no advance warning.

• Always be mindful of how your approach may be interpreted by the escort group.

• Keep both hands visible on the steering wheel to the security convoy.
APPENDIX 1

Attitude

1 The attitude of drivers themselves, to the task of driving, plays an important part in not having and reducing collisions.

1.1 All Trust trained drivers who are allowed to make use of legal exemptions have received instruction based on Roadcraft (the Police Drivers Manual) that will enable them to: "Ensure that their vehicle is always in the right place at the right time, travelling at the right speed and in the correct gear. Thus, a driver will be in complete control of any situation with which they might be faced".

1.2 A driver who is driving to the system of car control and in the way they were trained should not become involved in any collisions and the aim of the Trust is to have a zero blame collision record.

1.3 Drivers experiencing "red mist" tend to ignore normal risk factors. The consequence is a significant increase in the risk of a collision. It is important to recognise that this happens in all types of operational ambulance driving. It is a significant problem that ambulance drivers need to take steps to avoid. "Red mist" is indicative of unprofessional behaviour and will not be regarded as an adequate justification in the event of an adverse outcome.

1.4 Ambulance drivers must make a conscious effort not to get involved in a personality conflict with the task they are undertaking. They should remain dispassionate about the task and concentrate on the behaviour rather than the incident they are attending.

1.5 Ambulance drivers should develop positive attitudes that will assist reducing the risk of a collision by:

i. Recognising that all emergency driving situations are inherently dangerous.

ii. Making safety their primary concern in all driving decisions.

iii. Showing tolerance and consideration for other road users.

iv. Having a realistic understanding of their own abilities.

v. Having a high degree of care for their own safety, their passengers and/or patients along with other road users.

vi. Recognising that they are vulnerable.

vii. Considering and evaluating own experiences of near misses or accidents and learn from them.

1.6 There is a responsibility on all to act in a safe manner for themselves, the public and their colleagues, regardless of the nature of the incident being attended.

2 Consequences

2.1 The consequences of getting it wrong and ending up having a collision are many and varied and can affect both the individual driver and the Trust.

2.2 Consequences may include:

i. Injury or loss of life.

ii. Vehicle repair costs and 3rd party claims.

iii. Days lost to sickness.

iv. Fewer vehicles available for operational use.

v. Reputation of the Trust to the public.

vi. Individuals being prosecuted – can lead to personal welfare issues, stress etc

vii. Receiving penalty points on individual’s own licence with associated increased personal insurance costs.

viii. Being fined substantial amounts of money by a court.

ix. Being banned from driving all vehicles by a court. An individual may find themselves in a position whereby they are unable to fulfil the terms of their contract with the Trust.

x. Being relieved from driving within the Trust.
xi. Potential Health Care Professions Council (HCPC) investigation.

xii. Disciplinary action may follow.

(This list is not exhaustive)

Appendices
A Driving Assessments
B Welfare and Medical – Driving related
C Equality Analysis

1 Driving Assessments

1.1 General

1.1.1 Emergency response driver training can only be carried out by a qualified and approved driving trainer. All other assessments may be carried out by Trust approved driving assessors.

1.2 Assessors

1.2.1 Trust approved driving assessors have successfully completed a Trust course in driving skills recognition, including written feedback.

1.2.2 Assessors who are currently removed from ambulance driving duties or are disqualified from driving by a court may not carry out the assessment role until the period of disqualification or suspension from driving duties is complete. They must then be re-assessed by the Trust Driver Training Unit before recommencing their assessor role.

1.3 Regular Driving Assessments (every 3-5 years)

1.3.1 All emergency response drivers will have regular re-assessment of their driving to ensure they are performing to the Trust required standards (Appendix B). This brings the Trust into line with legislation (Road Safety Bill 2006), that all ambulance drivers should be re-assessed once every three to five years.

1.3.2 The re-assessments are to be carried out by Trust approved driving assessors currently authorised by the Trusts Driver Training Unit.

1.3.3 This period is fixed and cannot be varied locally. Assessments will be on a maximum rolling five-year programme from the date of the last assessment.

1.3.4 Following the assessment, if successful, they will be authorised to continue at the current level until the next assessment (subject to driving incidents).

1.3.5 If the standard expected is not reached they will be removed from emergency response driving pending review by the Driver Training Unit. Following review actions may include further driving development and/or re-assessment. On advice from the Driver Training Unit it may be deemed necessary to performance manage the employee through the Disciplinary Policy (Managing Conduct and Performance). The Driver Training Unit prior to taking any action should seek advice from Human Resources.

1.3.6 Successful completion of a Trust driving course is regarded as a successfully completed assessment (this does not apply to new vehicle familiarisation activity).

1.3.7 An assessment covers all driving authorisations that a driver holds. Assessments will be competence-based and conducted in a vehicle that the candidate is authorised to drive operationally, and is appropriate to their position.
1.3.8 The assessment will include two real emergency response drives to which you have been allocated to by EOC. Only a Trust driving Instructor may conduct a simulated emergency response assessment. A written record of the date and times of a simulated emergency call will be recorded on the assessment sheet by the driving instructor.

1.3.9 The following forms part of any driving assessment:

- A physical check of the employee and/or volunteer’s driving licence, to ensure it contains the relevant groups and that endorsements and penalty points do not exceed the amount to necessitate an automatic ban.

1.3.10 Once the assessment has been conducted the appropriate form must be attached to the driver’s driving record and their training record updated.

2 Drivers in Roles where not Regularly Driving

2.1 Trained drivers may be employed in roles where they do not regularly have the opportunity to drive ambulance vehicles in a response capacity and use their legal exemptions such as speed, red lights, keep left/right signs etc.

2.2 Any employee and/or volunteer who has not driven operationally for a period of more than 3 months should be assessed by a Trust approved driving instructor prior to re-commencing emergency driving duties.

3 Risk Assessment by Line Managers

3.1 This does not necessarily prevent the employee and/or volunteer being employed, or used, in a role where they are required to drive ambulance vehicles in a response role using, or possibly using, legal exemptions. However, their line manager must be satisfied that they are still competent to use those skills and should carry out a risk assessment before requiring or allowing them to do so.

4 Considerations

4.1 Consideration should be given to when the employee and/or volunteer was last assessed or trained, how often, and how recently the employee and/or volunteer has driven ambulance vehicles, any health issues, the driver’s own confidence in their abilities and skills and the driver’s driving record.

4.2 If the line manager considers they may not be able to safely drive in a response capacity they should arrange for an assessment drive to be undertaken by a Trust approved Driving Instructor.

5 Drivers’ Concerns

5.1 Drivers who feel uncomfortable about driving using legal exemptions because of their lack of recent response / operational experience should not be made to drive. Consideration should be given to identifying and dealing with any underlying issues or welfare matters. If they wish to...
undertake an assessment drive to determine if they still have the required skill they should be allowed to do so with a Trust approved driving instructor.

6. Disqualified Drivers - Return to Driving

6.1.1 Any incidences of employees having been disqualified by a court from driving will be dealt with under the Trust’s Disciplinary Policy (Managing Conduct and Performance).

6.1.2 During this process the Trust will take into account relevant factors including: the seriousness of the offence for which disqualified, welfare issues, Health and Safety concerns, the needs of the service and the expectations and perception of the public.

6.2 Procedure – all cases

6.2.1 In all disqualification cases, the following will apply. Any Trust employee who is disqualified from driving by a court must be officially removed from driving on behalf of the Trust for the duration of the disqualification and until specifically re-authorised under these procedures.

6.2.2 Once the period of disqualification has ended, and following the return of their driving licence, current employees may apply for reinstatement to driving on behalf of the Trust subject to holding the correct licence categories for the employee’s role requirements (as per the Trust’s Driving Licence Policy).
Driving Appendix B - Welfare and Medical – Driving related

1 Fatigue / Tiredness

1.1 Fatigue and tiredness whilst driving could lead to collisions occurring where serious injury or death are a possible outcome.

1.1.1 There is a responsibility on employees to report for work rested and in a fit state to undertake the full range of duties required of them and that they should discuss any issues with these with their line manager, as fatigue and tiredness can lead to collisions occurring.

1.2 The Trust would advocate that the task of driving is rotated where possible especially on a double staffed ambulance where there are two crew members who are appropriately qualified to do so. The ability to rotate the driving task should be made in a planned way with a dynamic risk assessment based on the patient actual and/or anticipated care needs including the risk of deterioration with the need to intervene.

1.3 Line managers should be aware of the possibility of fatigue where employees are working varying shift patterns and if informed of such issues should take appropriate action.

1.4 The following points should be considered:

- Make sure you are fit to drive;
- Do not undertake a long journey if you feel tired;
- Consider if your journey is necessary;
- On long, planned, monotonous (motorway) journeys, take sufficient breaks. A minimum break of at least 15 minutes after every two hours of driving is recommended;
- If you feel at all sleepy, stop in a safe place;
- The most effective ways to counter sleepiness are to take a short nap (up to 15 minutes) or drink, for example, two cups of strong coffee. Fresh air, exercise, talking, singing or turning up the radio may help for a short time, but are not as effective.

1.5 If, as a line manager, you are informed by one of your employees that they are fatigued / tired, they must not be told to carry on driving unless there is an overriding necessity for them to continue at that time. A dynamic risk assessment must be carried out in such situations and a written record made detailing decisions made.

1.6 If the person has been told to continue driving, then at the earliest opportunity after that, the requirement to drive should cease until the driver is sufficiently rested, so that no further danger is likely to be caused.

1.7 If the same employee raises fatigue or tiredness issues on a regular or semi-regular basis, consideration must be given to any welfare needs the individual may have which may necessitate a referral to occupational health.
1.8 The employee’s responsibility to be fit for duty includes having sufficient rest/sleep to carry out their posted duties. On pre-planned operations, when it is known or expected that the tour of duty is likely to be extended, consideration should be given to having more than one driver available so the driving duties may be shared.

2 Occupational Health: Medical Fitness to Drive

2.1 The DVLA’s Guide to Medical Practitioners deals with the medical standards of fitness to drive. Group 1 medical standards apply to car drivers whilst the higher medical standards contained in Group 2 applies to medium sized vehicles between 3.5 and 7.5 tonnes (category C1) and minibuses of between 9-16 seats (category D1).

2.2 Although they do not have a specific licence for ambulance drivers, the DVLA recommend Group 2 medical standards as an Occupational Health Policy for all drivers of emergency vehicles.

2.3 The Trust therefore applies the Group 2 medical standards to all employees who drive ambulance vehicles (B, C1 and D1) or who drive vehicles under emergency (blue light) conditions. Details of the medical conditions covered by the Group 2 driver standards can be found on the DVLA website.

2.4 All prospective, current employees and volunteers who apply for roles where it is essential to drive class C1 and D1 vehicles, or any vehicle driven under emergency conditions, will be assessed to DVLA Group 2 standards by the Occupational Health and Wellbeing Department.

2.5 There is a mandatory requirement for employees who may develop a medical problem or condition that may affect their fitness to drive under the DVLA Group 1 and 2 standards to notify:

   a) The DVLA – this is a legal requirement;
   b) The Trust’s Occupational Health and Wellbeing Department;
   c) Their line manager.

2.6 Failure to disclose a medical condition which may affect their fitness to drive could result in disciplinary action under the Trust’s Disciplinary Policy (Managing Conduct and Performance). Managers, prior to taking any action should seek advice from Human Resources.

2.7 Should an employee disclose a medical condition which could affect the DVLA Group 1 or 2 standards they will be required to undergo an Occupational Health assessment to determine whether it is safe and suitable for them to be allowed to continue to drive Trust vehicles.

2.8 Each case will be treated individually and on its merits, however the DVLA standards must be applied. Where an employee is unable to meet the required DVLA standard, the Trust’s Sickness Absence Management Policy will apply.

2.9 Unless there is a clear and overriding need to remove the employee reporting the illness from driving duties immediately, a decision as to future driving will normally be made after the occupational health assessment.
3  **Eyesight**

3.1 Vision is particularly important for drivers as medical evidence indicates that vision starts to deteriorate at age 40+, with marked deterioration between 50 and 55. Anyone who has concerns about their fitness to drive should usually discuss this with their manager who will take advice from the Occupational Health and Wellbeing Department. If however you wish to have a confidential discussion please contact the Occupational Health and Wellbeing Department directly.

4  **Medication**

4.1 Employees must be aware of the possible effects of prescription and non-prescription medicines on their alertness and driving ability. The instructions contained with any drug or medication must be carefully read and adhered to. Where the advice is not to operate machinery and/or drive then this activity must not be undertaken and the matter brought to the attention of a line manager.

4.2 Line managers must give consideration to removing the employee from driving duties altogether; this should be done after consultation with Occupational Health and HR.

4.3 Employees are reminded that Section 4 of the Road Traffic Act (unfit through drugs) applies to any drug, not just illegal substances.
**Appendix C - Equality Analysis initial screening form (stage 1)**

<table>
<thead>
<tr>
<th>1. Name of policy/procedures/guidelines being assessed:</th>
<th>Title: DRIVING STANDARDS POLICY AND PROCEDURE</th>
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<td>2. Is this a new or existing document?</td>
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<td>3. What is the purpose of the document?</td>
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<td>highest standards of driving conduct within</td>
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<td>the East of England Ambulance Service NHS</td>
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<td>vehicles are driven has a direct bearing on</td>
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<td>professional organisation. All staff must</td>
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<td>reputation by displaying high standards of</td>
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<td>driving and road behaviour at all times.</td>
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<td>(b) Who is intended to benefit and how?</td>
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<td>All staff and volunteers who drive on behalf</td>
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<td></td>
<td>of the EEAST.</td>
</tr>
</tbody>
</table>

EEAST: POL016 – Driving Standards Policy and Procedure
November 2017, V1.0
| Trust, patients and other road users by reduction of collisions, associated risks and maintenance of high driving standards |  |
4. Tick the boxes below to assess the potential for differential impact (negative or positive) on any of the protected characteristics?

- [ ] Tick box for positive impact
- [ ] Age
- [ ] Disability
- [ ] Gender reassignment
- [ ] Marriage and civil partnership
- [ ] Pregnancy and maternity
- [ ] Race
- [ ] Religion or belief (including lack of belief)
- [ ] Sex
- [ ] Sexual orientation

- [ ] Cross box for negative impact
- [ ] Age
- [ ] Disability
- [ ] Gender reassignment
- [ ] Marriage and civil partnership
- [ ] Pregnancy and maternity
- [ ] Race
- [ ] Religion or belief (including lack of belief)
- [ ] Sex
- [ ] Sexual orientation

5. Is there the possibility of discriminating unlawfully, directly or indirectly, against people from any protected characteristic?

Types of Discrimination:
- Direct
- Indirect
- Associative
- Perceptive
- Harassment
- Third party harassment
- Victimization
- Institutional

- [ ] Yes
- [ ] No

If yes, please state the reason:
6. Could there be an effect on relations between certain groups?

| Yes ☐ | No ☒ |

If yes, please state the reason:

7. Does the policy explicitly involve, or focus on a particular equalities group, i.e. because they have particular needs?

| Yes ☐ | No ☒ |

If yes, please state reason:

8. PLEASE INDICATE BELOW ANY AMENDMENTS OR CHANGES TO THE POLICY/PROCEDURE:

If the answers are ‘no’ to questions 5, 6, 7 then there is no need to proceed to a Full Equality Analysis. Summary Form should be completed and submitted to the relevant committee(s).

*If ‘yes’ then a Full Equality Analysis* of the document will be required. (link to be added)
# 9. Executive Summary  Record Sheet

**Initial Screening - Equality Analysis (Stage 1)**

<table>
<thead>
<tr>
<th>Document reference:</th>
<th>Document Title: <strong>DRIVING STANDARDS POLICY AND PROCEDURE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment date: 11/10/17</td>
<td>Document type: Policy</td>
</tr>
<tr>
<td>Responsible director: Kevin Brown</td>
<td>Lead manager: Andy Reid</td>
</tr>
<tr>
<td>Conclusion of Equality Analysis: no equality issues identified</td>
<td></td>
</tr>
</tbody>
</table>

**Name of committee/board this document has been presented to:** SLB

**Chairperson:**

**Date of meeting:**

**APPROVED: YES ☐ NO ☐**

**If the documents have not been approved, then please indicate below the next steps agreed:**

**Signature of Chairperson:**

**Date:**

The initial Equality Analysis screening form (stage 1) should be stored with the master document and a final approved electronic copy must be sent to:

**Equality, Diversity and Inclusion Manager**  
**Hammond Road**  
**Elms Industrial Estate**  
**Bedford MK41 ORG**  
**Landline: 01234 243200 mobile: 07957626985**  
**Email: Navrita.Atwal@eastamb.nhs.uk**