

A&E Private Ambulance Service (PAS) Dynamic Purchasing System (DPS)

OJEU Notice Ref No: 2017/S 136-279092

DPS Master Reference Number: CA4154

Governance Inspection Visits (GIV)

DPS Call off Reference Number:	CA4502
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Instructions To Suppliers

Instructions to Bidders: Governance Inspection Visits (GIV)

At Point of Award of a Call off Contract

At the point of Award of any call off contract; the Lead Authority recommends that the Authority(s) calling off from the DPS conduct a Governance Inspection Visit (GIV) prior to award; to the 1st ranked supplier

The Authority reserves the right during the Award Governance Inspection Visit (GIV) to verify both the SQ and ITT information submitted for example but not limited to: checks on premises: vehicles:crews. The Authority may request additional information in support of your submission

There is no additional score attached to the GIV.

If the relevant documentary evidence referred to in the SQ Part 1, Part 2 or Sections 3 – 12 is not provided upon request and or any policy or certificates are not provided where specifically requested at the Governance Inspection Visit (GIV), and or without delay the Authority reserves the right to amend any decision to Award their call off contract and look to the 2nd Ranked Supplier to conduct the GIV with the aim of Award

On-Going Contract Management

Governance Inspection Visits are not just at point of Award of a contract. The Authority(s) will set up regular GIV's during the life of any call off contract in order to verify, some or all of the SQ and ITT details and continued KPI details as outlined between each Authority and the supplier (s)

The on-going contract management can include planned or unplanned visits to business premises or on supplier's vehicles working in the Authority(s) region. The Governance Inspection Visits as a means ensuring clinical compliance and quality of patient care continues to be met by the bidder performing the service delivery for the Authority.

A&E Private Ambulance Service (PAS) Dynamic Purchasing System

OJEU Notice Ref No: 2017/S 136-279092

DPS CALL OFF Reference Number: CA18-01

Governance Inspection Visits (GIV)

A&E Private Ambulance Service (PAS) Dynamic Purchasing System (DPS)

[Index 2 ITT](#)

Index SQ

Selection Questionnaire (SQ)	Governance Inspection Visits (GIV)
Section 6.1.6	<u>Business Continuity</u>
Section 9	<u>CSR - Diversity</u>
Section 9	<u>CSR - Environment</u>
Section 9	<u>CSR Waste Management</u>
Section 9	<u>Data Protection - Patient Information</u>
Section 6.6	<u>Disclosure and Barring Services</u>
Section 6.9	<u>Driving Licence C1</u>
Section 10	<u>Licences & General Disclosure</u>
Section 9	<u>Health & Safety</u>
Section 8	<u>Insurance Certificates</u>
Section 6.10	<u>Medical Equipment, Devices and Consumables</u>
Section 6.11/12	<u>Medicines Governance</u>
Section 6.6	<u>NHS Employment Checks</u>
Section 6.8	<u>Occupational Health</u>
Section 6.13	<u>Operational Policies</u>
Section 6.4	<u>Qualifications Clinical</u>
Section 6.2	<u>Qualifications Tutors</u>
Section 9	<u>Safeguarding</u>
Section 6.4.6	<u>Training Record</u>
Section 7	<u>Vehicle Inspection</u>

A&E Private Ambulance Service (PAS) Dynamic Purchasing System (DPS)

[Index](#)

Index 2 Call off (Invitation to Tender)

Bidders to submit a binding tender for the specific requirements (SR) to be evaluated and awarded according to the optional criteria set out below in the DPS, and adjusted more precisely for the specific requirement (SR) (Regulation 34(23) & (24) PCR2015

Schedule 6 - Price Submission (50% +/- 10%)		Max Points Available (120)
Formulae	$(A/B) \times 100 = ()$: Where A= price of lowest compliant bid: B = price of the bid being scored.	100
Score	<u>Contract Management Cost Savings Initiatives</u>	20
Quality	Quality (Award Criteria) (50% +/- 10%)	Optional as appropriate
Compliant	Verification that all data and information supplied at the SQ remains valid	SR
Operational Performance	<u>Availability and Management Of Resources</u>	SR
Clinical Performance	<u>Clinical Performance & Improvement Strategy</u>	SR
Clinical Performance	<u>Clinical Performance Indicators (CPI)</u>	SR
Operational Performance	Contract Management and MI Reports	SR
Operational Performance	<u>Contract Management Key Performance Indicators (KPI)</u>	SR
Clinical Performance	Infection Prevention Control (IPC)	SR
Operational Performance	<u>Medical Equipment Management</u>	SR
Clinical Performance	Medicine Management	SR
Operational Performance	<u>Patient Experience & Care</u>	SR
Operational Performance	Patient Care - Bariatric	SR
Operational Performance	<u>Staff Management & Development</u>	SR
Operational Performance	Working Time Directives (WTD)	SR
Operational Performance	<u>Workwear-PPE</u>	SR

Business Continuity Plans (BCP) - (GIV)

In plain language, BCP is working out how to stay in business in the event of disaster. Incidents include local incidents like building fires, regional incidents like earthquakes, or national incidents like pandemic illnesses.	In 2004, the United Kingdom enacted the Civil Contingencies Act 2004, a statute that instructs all emergency services and local authorities to actively prepare and plan for emergencies. Local authorities also have the legal obligation under this act to actively lead promotion of business continuity practices in their respective geographical areas.
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Selection Questionnaire	Governance Inspection Visits (GIV)	Internal Use only (GIV)		
		Site Visit Assurance	Comments	Auditor
Provide a copy of your Business Continuity Policy, version and date last reviewed?			Request to [REDACTED] on 06/12/18. Policy review due February 2019	
Evidence of Recent Review				
SQ:6.1.6 Using your most recent and relevant contracts please provide details of the business continuity arrangements that are in place to ensure early resumption of service delivery in the event of a service failure.				
Evidence BCP in place to cover E.g. plans that show the bidders contingency arrangements for vehicles, staff, medical devices and communications.				

Reference: In 2007, the BSI published the second part, BS 25999-2 "Specification for Business Continuity Management", that specifies requirements for implementing, operating and improving a documented Business Continuity Management System (BCMS).

Disclosure and Barring Service (DBS)

The Supplier and its staff who have patient or public contact, including access to confidential personal data, on behalf of the Authority(s) will have criminal records checked before they are permitted to work in any setting that will give them direct access to the public

Information only (DBS)		
Subsection Questionnaire	Comments	Auditor

Information Provided at SQ 4.6	Governance Inspection Visit	Site Visit Assurance	Comments	Auditor
S.6. Evidence to confirm that DBS checks including barred list are in place for all staff patient facing roles. (Note, only DBS reference numbers, not disclosure are returned by employer).			S.6.6 Barred check complete. Some names have only DBS reference numbers and their personal name have not been provided.	

Evidence of DBS checks including Barred list for patient facing roles. (Note, only DBS reference numbers, not disclosure are returned by employer).	Governance Inspection Visits (GV)	Information only (DBS)		
Member of staff	Grade	DBS Reference Numbers	Site Visit Assurance	Auditor
1	PMBA		Yes	
2	ECA		Yes	
3	PTA		Yes	
4	ECA		Yes	
5	EMT		Yes	

Evidence within employment contract for disclosure of any criminal record/convictions.	Governance Inspection Visits (GV)	Information only (DBS)		
Member of staff	Grade	DBS Reference Numbers	Site Visit Assurance	Auditor
1	PMBA		Yes	
2	ECA		Yes	
3	ECA		Yes	
4	ECA		Yes	
5	EMT		Yes	

Evidence of documented process for the management of police DBS and/or dealing with such matters disclosure statements.	Governance Inspection Visits (GV)	Information only (DBS)		
Member of staff	Grade	DBS Reference Numbers	Site Visit Assurance	Auditor
1	PMBA		Yes	
2	ECA		Yes	
3	ECA		Yes	
4	ECA		Yes	
5	EMT		Yes	

Reference: Health & Social Care Act 2008 (Regulated Activities) Regulation 10(1)
Schedule 12 (Regulation 12) Requirements relating to fitness to practise
Code of Practice
Schedule 13 (Regulation 13) Staffing

Data Protection Information Security & Confidentiality

Information security in general

Information security is a requirement for the enterprise for ensuring the protection, both in position to prevent, identify, document, and monitor threats to both digital and non-digital information. The authority must be aware of the potential loss of information because of their security system. The main quality assessment depends on the extent to which information security is an integral part of the overall security of the government, including in the case of service providers. The handling of sensitive information and the sharing of information with suppliers makes this a key aspect for authorities.

Initial DPA audit 2018		
Prepared by	Reviewed by	Author

Data Protection Act 1998		Self-test assessment	Comments	Audit
Provide a copy of your Data Protection Policy, Date last reviewed and updated			Reviewed by: [redacted] Date: [redacted] February 2019	
Information documentation		Self-test assessment	Initial DPA audit 2018	Audit
Q1.6.1 Based on your current experience and protection can you give a statement to confirm that you have introduced policy given assurances relating to the safe and secure storage of patient records and data protection (general) (see 6.01-6.04)?			Reviewed by: [redacted] Date: [redacted] February 2019	
Q1.6.2 Based on your current experience and protection can you confirm all patient record information is retained for 25 years and that procedures are in place with your current plans to maintain such records, and that you can submit any request as requested by the authority or submit or agree such public enquiry within appropriate time frames as required?			Reviewed by: [redacted] Date: [redacted] February 2019	
Q1.6.3 Confirm your organisation is fully compliant with the Data Protection Act 1998?			Reviewed by: [redacted] Date: [redacted] February 2019	
Q1.6.4 Confirm your organisation is fully compliant with the Freedom of Information Act 2000?			Reviewed by: [redacted] Date: [redacted] February 2019	
Policy relating to storage and acquisition of patient records		Self-test assessment	Comments	Audit
Provide a copy of your policy relating to the safe and secure storage of patient records. Date last reviewed and updated.			Reviewed by: [redacted] Date: [redacted] February 2019 (Signed in control room: [redacted] only 1 copy)	
Retention of Patient Record Format		Self-test assessment	Comments	Audit
Provide a copy of the retention schedule or evidence where the schedule is contained?			Reviewed by: [redacted] Date: [redacted] February 2019	
Security systems for storage of patient information		Self-test assessment	Comments	Audit
Please confirm and provide information on our electronic systems that you have a plan to manage patient information, including how these are kept secure and how access is controlled.			Reviewed by: [redacted] Date: [redacted] February 2019	
Please confirm and provide information on our manual systems that you have a plan to manage patient information, including how these are kept secure and how access is controlled.			Reviewed by: [redacted] Date: [redacted] February 2019	
Confirm the audit frequency and confirm that you will not to breach your systems and protection are secure and safe?			Reviewed by: [redacted] Date: [redacted] February 2019	
Access to records of a breach in information law rules		Self-test assessment	Comments	Audit
Please declare if your organisation has had any incident of loss of patient information?			Reviewed by: [redacted] Date: [redacted] February 2019	
Confirmation of any action you will undertake where there is a breach of loss of patient information?			Reviewed by: [redacted] Date: [redacted] February 2019	
Provide a copy of your incident reporting policy which includes reference to confidentiality incidents.			Reviewed by: [redacted] Date: [redacted] February 2019	
Evidence that all patient records are stored safely and in compliance with statutory requirements.		Self-test assessment	Comments	Audit
Record on file				
Record off file				
Record on website				
System				
Other				

Reference:

Health & Social Care Act 2012 (Regulated Activities) Regulations 2012

Internal Site Visit (ISV)		
Vehicle Identification	Comments	Author

Information Provided at ISV 6.0		Governance Site Visit		Internal Site Visit (ISV)	
The Supplier must ensure that all drivers who are provided under the auspices of this agreement are in possession of a valid UK driving licence and the appropriate category, when undertaking work on behalf of The Authority		Site Visit Assessment	Comments	Auditor	
6.0.1. Evidence to reflect and confirm that staff currently meet Group 2 DVLA medical standards for all staff driving under emergency conditions and patient carrying vehicles (SV will be able to prior to the commencement of any contract)			Is there any provision as to a backup? How long to be fully compliant within 3 months?		
6.0.2. Confirmation that staff has the required driving entitlements on their licence for the vehicles in use (C1) (Where the supplied vehicles are over the 3.5 tonnes in weight)	Y	Yes			
6.0.3. Confirmation of Company Policy on Points and Limitations of max 3 for points on entry and no disqualifications within the last 5 years since the issue of the licence?					
6.0.4. Confirm staff driving licences are checked every 6 months and records maintained to evidence this. Staff are required to notify their employer immediately if any offences are recorded that result in a point being awarded?			Is there a system of awarded points? The system will automatically alert?		

Validation process for driving licences at recruitment and annually		Governance Site Visit		Internal Site Visit (ISV)	
Evidence of staff		Site Visit Assessment	Comments	Auditor	
Recruitment	Annual				
SV	SV				
SV	SV				
SV	SV				
SV	SV				

Evidence that staff have the required driving entitlements on their licence for the vehicles (over 3.5t) Where these vehicles are over 3.5 tonnes and require C1 licence		Governance Site Visit		Internal Site Visit (ISV)	
Evidence of staff		Site Visit Assessment	Comments	Auditor	
SV	SV	Yes C1			
SV	SV	Yes			
SV	SV	Yes, 2008			
SV	SV	Yes, 2008			
SV	SV	Yes, 2008			

Validation of Company Policy on Points and Limitations (Max 3 points)		Governance Site Visit		Internal Site Visit (ISV)	
Evidence of staff		Site Visit Assessment	Comments	Auditor	
SV	SV				
SV	SV				
SV	SV				
SV	SV				

Validation that staff driving licences are checked with no disqualifications in the last 5 years		Governance Site Visit		Internal Site Visit (ISV)	
Evidence of staff		Site Visit Assessment	Comments	Auditor	
SV	SV	Last checked 17/03/18			
SV	SV	Last checked 20/04/18			
SV	SV	Last checked 20/04/18			
SV	SV	Last checked 20/04/18			
SV	SV	Last checked 10/05/18			

Reference:

Environmental & Waste Management

Interning Under article 32		
Selection Questionnaire	Community	Activities

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References

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Internal Use only		
Selection Questionnaire	Comments	Referee

What this means:

What this means:

Equality is not about treating everyone the same, it is about ensuring that access to opportunities are available to all by taking account of differing needs and capabilities of individuals. Diversity is about recognising and valuing difference. Including means involving and engaging with people concerned in, or affected by our services, to help improve access and participation, to better meet the needs of patients, and to fulfil our statutory obligations.

The aims provide a checklist service that respect the needs of each individual and exclude no-one. We are committed to eliminating discrimination on the basis of the Equality Act 2010, which identifies the following nine protected characteristics:

We recognise that discrimination can be direct or indirect and takes place within organisations and at a personal level. Such discrimination is unacceptable and unlawful. We have a zero tolerance approach towards behaviour that amounts to harassment or the exclusion of any individual.

		Issued on 06 July 2018		
Verify all policies relating to equality and diversity to include the state protected characteristics.	Governance Inspection Vot	New Work Document	Comments	Auditor
Equality and Diversity Policy, Verifies and last reviewed date?	x			
Anti-Bullying				
Anti-Discrimination				
Access to Facilities				
Alcoholics and Civilised Behaviour				
Control of Staff				
Discipline and Sanctions				
Emergency and Evacuation				

Selection Questionnaire - Diversity	Governance Inspection Visit	Site Visit Assessment	Comments	Finalist
<p>SD 9.1 The Trust is concerned that all people working in sensitive areas must be acceptable to the post holder, hence consideration is made of suppliers that all firms wishing to be considered as approved suppliers are able to demonstrate that all reasonable steps are being taken to ensure equal access and equal treatment in employment for all employees.</p>			<p>Regiment 10, [redacted] GS 04/02/2018 due February 2019</p>	

Selection Questionnaire - Modern Slavery Act	Governance Inspection Vult	UK Work Assurance	Comments	Author
<p>Since 1 October 2015, commercial organisations that carry on a business or activities in the UK, supply goods or services, and have an annual turnover of £36 million or more ("relevant commercial organisations") have been required under Section 54 of the Act to prepare a slavery and human trafficking statement as defined by section 54 of the Act. Is this company within the £36m turnover category?</p>				
<p>50.9.2 If you have answered yes to question 10.5 are you compliant with the annual reporting requirements contained within Section 54 of the Act 2015? Please provide the relevant link, if any.</p>				

Verify company monitoring. Key areas to review in relation to all of the above include:	Governance Inspection Visit	Site Visit Assurance	Case work	And/or
Recruitment of staff				
Contracts and dignity at work				
Equal opportunities				
Principles of GLO in training sessions.				

Licences & Registration

Internal Use only SQ		
Selection Questionnaire	Comments	Auditor

Information provided at SQ 10	Governance the Visa	Internal use only (BY)		
		Site visit description	Comments	Auditor
Registration with the Information Commissioners Office (ICO) for data protection purposes				
Access control for long lines				
Disclosure of any going concerns relating to the provider, regulatory and information authorities, e.g. 483, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000				
Disclosure of any past or criminal actions likely to affect business registration or performance				

CQC Registered		Site Visit Assurance	Comments	Auditor
CQC Number				
Unit inspection Date				
Any Actions				
Any Restriction or condition				
Action Plan				
Unit inspection report				

CQC Statement of Purpose & Registered Business Addresses	Transport Services, Advice and medical advice provided remotely	Treatment of Disease, Disorder or Injury	Site Visit Assessment	Complaints	Auditor

HSE/MSD 001-010-010		
Additional Specifications	Comments	Auditor

Health and Safety Policy	Governance Inspection Visit		Inspection for only 0001	
			Site Visit Assessment	Auditor
Provide a copy of your Health & Safety Policy, version and date last reviewed?				
Provide a copy of your current Risk Register and date last reviewed?				
Provide your Fire Safety Policy, version and date last reviewed?				

Incident / Near Miss Reporting	Governance Inspection Visit		Site Visit Assessment	Comments	Auditor
Policy on reporting Near Miss incidents, version and last date reviewed?					
Q2.9.7.3 Based on your current experience and processes can you confirm your procedure for reporting incidents and near miss incidents and Serious Incidents (SI) to your client's organisation? Make 500 words					
Q2.9.7.2 Bidders are asked to provide the number of serious incidents SI, taking patient confidentiality into account, any serious harm, in the last two Financial Years?					
Q2.9.7.3 Bidders are asked to provide the number of RIDDOR submissions to HSE, and any mitigating circumstances or serious harm, in the last two Financial Years?					

Near Miss Records & Mitigation	Governance Inspection Visit		Site Visit Assessment	Comments	Auditor
Review the Database/records of near misses / incidents and follow up actions.					

Health and Safety Notices	Governance Inspection Visit		Site Visit Assessment	Comments	Auditor
Verify how and evidence that Health and Safety Notices are shared with Care					

Health and Safety Inspections	Governance Inspection Visit		Site Visit Assessment	Comments	Auditor
Record 1					
Record 2					
Record 3					
Record 4					

Auditor Checks for actions	Governance Inspection Visit		Site Visit Assessment	Comments	Auditor
Record 1					
Record 2					
Record 3					
Record 4					

Risk Management	Governance Inspection Visit		Site Visit Assessment	Comments	Auditor
The named person responsible for risk within the company.					
Risk Register					
Severity Score					
Control Measures					
Review 5 completed risk assessments, are they - In date, comprehensive, risk rated					
Risk 1					
Risk 2					
Risk 3					
Risk 4					
Risk 5					

Safe Systems of Work documentation	Governance Inspection Visit		Site Visit Assessment	Comments	Auditor
Linked to the controls set out in the risk assessments					

COVID (Health and Safety)	Governance Inspection Visit		Site Visit Assessment	Comments	Auditor
COVID policy in place, version control and date last reviewed					
Related Procedures					
Risk Assessments					
Personal Safety Data Sheets available					

Reference: Health & Social Care Act 2008 (Regulated Activities) Regulations 2010

Insurance Certificates

Interest rate lock: The insurance for a unit's double long-term rate and will be increased each year at a minimum.

Where a contract is awarded, copies of insurance for a unit will be reported.

Financial Statement No.		
Substantive Procedures	Tests of Details	Assertions

Where the information provided at <https://www.auditofthefinancialstatements.gov.au> is not available, the Auditor-General has provided a response.

[illegible][illegible]

Medical Equipment, Devices and Consumables

DRAFT

Instructions to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be expanded on during the 2nd stage of ITT call off. NOT for Evaluation but as specific agreement as appropriate for each call off contract.

Medical Equipment & Devices	Governance Site Visit			
Moving, Handling and Immobilisation Equipment	Yes/No	Make and Model of Equipment	Use Visit Assurance	Comments
Ambulance Cot				
Cotrol Chair				
Scoop stretcher With 5 point restraint straps/straps				
Long Board complete with Head Blocks and quick release straps				
Subsidiary child systems for all weights/ages ranges				
Adult and Paediatric extraction tables				
Full selection of box fracture splines and Selection of Vacuum Splints				
Traction splint				
Incense transfer board				
Slide sheet				
Pinch Splint				
Extraction Device - TICO/ED				
Mangle TB (or alternative) with fitting cushion and compression				
Body Bag				
Patient Monitoring Equipment			Use Visit Assurance	Comments
Sphygmomanometer				
Stethoscope & Thermometer & Pulse Oximeter				
Blood glucose monitoring equipment				
Oxygen saturations monitoring equipment with paediatric probes				
Resuscitation & Airway Management Equipment			Use Visit Assurance	Comments
Manual Inflation monitoring with MAP, SPO2, A & B 12 used capabilities, and waveform capnography				
Supply of Monitoring consumables including pressure rolls, open packs, tubes, canisters and breathing				
Bag valve mask set - Adult, Child and Infant				
Full set of Adult CP Airways (size 30 - size 4)				
Full set of Nasopharyngeal Airways (30mm - 35mm)				
1-Gel cases (Paediatric and Adult) or equivalent				
Mechanical suction unit (able to maintain a maximum of 300mm Mercury vacuum)				
Supply of mechanical suction unit lines				
Supply of disposable hand held suction unit canisters				
Supply of suction catheters (various sizes)				
Advanced Airway			Use Visit Assurance	Comments
Laryngoscope Cordis Macintosh 4				
Laryngoscope Cordis Miller 2				
Selection of cuffed ET Tubes (30mm - 35mm)				
Boogie				
Magill Forceps (Adult and Paediatric)				
ET Tube Holders				
Heat Cahn Mask or equivalent				
Medical Gases and Accessories			Use Visit Assurance	Comments
H2 Oxygen cylinder				
O2 Oxygen cylinder				
CO2 Nitrogen cylinder				
Supply of nitroxide mouth-pieces and vent filters				
Supply of paediatric non-rebreathing oxygen masks				
Supply of adult non-rebreathing oxygen masks				
Tracheostomy mask				
Nasal Cannula				
Respiratory Filter & Mouthpiece				
Miscellaneous Disposable & Single Patient Use Items			Use Visit Assurance	Comments
Supply of non-sterile disposable gloves (nitrile L, M, XL)				
Supply of fresh, clean drinking water				
Supply of fresh bedding to include sheets & blankets				

Reference: Health & Social Care Act 2008 (Regulated Activities) Regulations 2009

Medical Use only SR		
Selection Quantities	Comments	Author

Medical Consumables	Governance Site Visit	
General Consumables including Wound Care	Yes/No	Suppliers Product
Selection of adhesive wound dressings		
Selection of non-adhesive wound dressing packs		
Selection of wound pads		
Selection of ambulance dressings		
Selection of conformer bandages		
Selection of wound dressings		
Eye Irrigation Solution		
Emergency Burns Kits to include burns dressings		
Full Bleednet		
Tubular dressings		
Push Flow meter & disposable mouthpieces		
Major Trauma Control Pack		
Microstream Capnograph Plus O2 nasal cannula - Capnography consumable		
Fibreoptic Airway Adapter set - Capnography		
Cleaning Infection Prevention & Control & Clinical Waste		
Lubricating jelly		
Maternity packs		
Incubators		
Clinical & Solid Waste disposal sacks which are compliant with EN13155:2004 for Waste, whose collection and disposal is subject to special requirements in order to prevent infection.		Beis is standard just a different case lot of colour
Sharps Bin		
Sanitising and disinfectant wipes		
Spill kit		
Cleaning equipment to include detergent and disinfectant		
Bag-in/Bag-out for use with cleaning		
Alcohol gel		
Personal Protective equipment including aprons, coveralls, eye protection, surgical masks and filtered face PFF3 masks		
Drugs and Associated Consumables		
Emergency Drugs as detailed in Section...		
Selection of syringes 1-20ml		
Selection of needles 21g-27g (Safety Needles)		
Selection of Cannulae (Safety cannulae)		
Intravenous access device (Adult and Paediatric)		
In Closing net		
In Closing		
Aerosol nebulising products masks		
Pre Injection Swabs		
Manual Irrigation Device		
Tourniquets - Single Use		
Miscellaneous Items		
Wound bowls		
Urinal bottles		
Venipuncture		
First aid kit in compliance with HSE Code of practice ACDP 1997		
Patient Request Forms		
Patient Medication bags		
Spine Roll kit		
Emergency access shears		
Big Five Triage/alter		
Map books		
Blotting Paper		

* Life Pack 12 - Paramedic: End Tidal CO2

Clinical & Solid Waste Disposal Sacks, which are compliant with EN13155:2004 for Waste, whose collection and disposal is subject to special requirements in order to prevent infection.

However questions were raised at SQ stage around the governance of Medicines

However questions were raised at SQ stage around the governance of Medicines

Internal Use only SQ		
Selection Questions	Comments	Auditor

Question number	MCQ ID	MCQ ID & B2	Governance Issue			Relevant ISO 9001	Correct	Author
Medicines Governance			Yes/No	Links	Site Visit	Comments		
As Trainee we have an obligation for patients to receive the same standard of care from the contracted private provider as from their Trust directors – therefore the medicines used in each Trust must be matched by the private provider, and the private providers must use the Trust Patient Group Direction (PGD) and the protocols.								
6.1.2.1	With this directive at the firm can you confirm you currently this requirement and have all medicines your requirement current status check?							
6.1.2.2	With this reference to your current contracts can you confirm you have in place PGD for all relevant medicines available to your region and that you only fill medicines in line with the presentation demonstrated in the PGD?							Using Medication from H&M?
6.1.2.3	With this reference to your current contracts and staff/governance can you self-attest that all PGD are signed by all registered practitioners to declare their competency to administer the medicines?							
6.1.2.4	With this reference to your current operations can you confirm that you follow the medicine guidance, and do NOT provide any medicinal care currently not authorized by your current Allergy Alerts?							
6.1.2.5	Where have you announced H&M to any of the above paragraphs, 6.1.2.1 - 6.1.2.4 are you prepared to add the above problems when you return to be interviewed in being needed any self call contract under the PGD?							

[illegible]

Reference:

Health & Social
Care Act 2008
(Regulated
Activities)
Regulations
2010

Outcome 9
(Regulation
11):
Management
of Medicines
Prompts 9a,
9b, 9c, 9d, 9e,
9f

NHS Employment Check Standards		
Site Visit Assessor	Comments	Auditor

NHS Employment Checks						Governance Site Visit		
Evidence of Employment Checks for each and every appointment including employees, contractors, volunteers (from self-declaration only) Documentary evidence to support the above mandatory check requirements on each and every person of the						NHS Employment Check Standards		
6.5. The NHS employment check standards are outlined below. The bidders should confirm they comply with these mandatory checks when recruiting staff?						NHS Employment Check Standards		
Member of staff	Grade	Verification of identity checks	Right to work checks	Professional registration and professional status	Employment history and references checks	Site Visit Assessor	Comments	Auditor
1	PADA	Y	Y	Y	Y		DL & RPORT VERIFICATION	
2	ICA	Y	Y	Y	Y		DL & RPORT VERIFICATION	
3	ICA	Y	Y	Y	Y		DL & RPORT VERIFICATION	
4	ICA	Y	Y	Y	Y		DL & RPORT VERIFICATION	
5	DMT	Y	Y	Y	Y		DL & RPORT VERIFICATION	

Evidence of staff identification including:						NHS Employment Check Standards		
Member of staff	Grade	Individual ID card	Agency status	ID card database	Contact number for confirmation	Site Visit Assessor	Comments	Auditor
1	PADA	Employment history and reference checks	18/05/2020	Employment history and reference checks	Yes	Yes		
2	ICA	Employment history and reference checks	12/05/2020	Employment history and reference checks	Yes	Yes		
3	ICA	Employment history and reference checks	23/05/2019	Employment history and reference checks	Yes	Yes		
4	ICA	Employment history and reference checks	20/05/2019	Employment history and reference checks	Yes	Yes		
5	DMT	Employment history and reference checks	17/05/2019	Employment history and reference checks	Yes	Yes		

Reference:

(NHS Employment Check Standards)

Internal Site Visit		
Interview	Observation	Audit

Occupational Health Policy		Governance Site Visit		Internal Site Visit	
Provide a copy of your Occupational Health Policy, Version, Date last reviewed			Site Visit Observation	Comments	Audit
Provide details of Occupational Health provider and UK			Governance Site Visit	Site Visit Observation	Audit
Review and agree terms, Provide and share for review?					
Discussion			Governance Site Visit	Site Visit Observation	Audit
6.6.1 For Health and Social Care Act mentions that staff have to have access to vaccination and that their employer must offer this. Policies are subject to review they are aligned with the relevant Act and have provisions in place to offer their staff and to ensure staff vaccination. How often do you check their staff to have the following vaccination?					
6.6.2 Policies to confirm where their staff "opted out" they have the option of not to give their staff any protection to both their staff and the patient.					
6.6.3 Policies are in place to ensure there have to be a plan in place to give prior to delivering any service to an outpatients a confirmed management and protection the patient for vaccination annually and other vaccinations such as influenza flu.					
6.6.4 With reference to your last flu vaccination update for one provide confirm the number & % of staff take up for the annual flu vaccination?					

Provide evidence that all patient facing employees are HPA covered.		Governance Site Visit		Internal Site Visit	
Support these Procedures HPA are those procedures where the patient's blood may be in contact with the instrument, needle tip or sharp broken tip, bore or needle inside a patient's upper body cavity or vessel where the hands or finger tips may not be completely visible or at times, it may occur in a healthcare worker's clothing, as HPA may result in the patient being contaminated with the blood of the healthcare worker. The healthcare worker must be free from infection with a blood borne virus.					
Member of staff	Grade	Working hours (days and nights)	Healthcare worker (HPA) status	HPA status (HPA) status	HPA status (HPA) status
1	HPA				
2	HPA				
3	HPA				
4	HPA				

Provide evidence that all patient facing employees are HPA covered.		Governance Site Visit		Internal Site Visit	
They following are routine vaccinations that should be checked pre employment.					
Member of staff	Grade	Health	Health	Health	Health
1	HPA				
2	HPA				
3	HPA				
4	HPA				

Provide evidence that all patient facing employees are HPA covered.		Governance Site Visit		Internal Site Visit	
They following are routine vaccinations that should be checked pre employment.					
Member of staff	Grade	Health	Health	Health	Health
1	HPA				
2	HPA				
3	HPA				
4	HPA				

Provide evidence that the provider staff meet Group 2 HPA standard standards for all staff working under emergency conditions and patient facing services (see page 10)		Governance Site Visit		Internal Site Visit	
Member of staff	Grade	Health	Health	Health	Health
1	HPA				
2	HPA				
3	HPA				
4	HPA				

Provide evidence that staff are aware of the procedure following needle stick injury and the requirement to report such an incident and document an observational evidence of documentation recommended to staff.		Governance Site Visit		Internal Site Visit	
6.6.1 Policy is in place, staff are aware of the procedure.					
Member of staff	Grade	Health	Health	Health	Health
1	HPA				
2	HPA				
3	HPA				
4	HPA				

Reference:

Health & Social Care Act 2012 (Regulated Activities) Regulations 2010

Operational Policies

Instructions To Bidders: The Authority(s) will confirm at Call off which policies the suppliers must adhere to the Authorities policy and where the Authority is accepting the Suppliers policies?

Where the supplier does not have their own policy; the Authority(s) would expect and welcome the supplier to use their policy.

During Governance Inspections; clarity and expectations need to be documented to give assurances as to which policy is taking presedent during operational service.

Internal Use only SQ		
Selection Questionnaire	Comments	Auditor

SQ Section 6.13		Governance Site Visit				Internal Use only (GIV)		
	Confirm you have the following company policies relating to:	Yes/No	Your Policy Title	Version	Date Last Reviewed	Site Visit Assurance	Comments	Auditor
1	Absconding Patients Procedure							
2	Airway Management Policy							
3	Business Continuity Planning Policy							
4	Capacity to Consent Policy							
5	Clinical Handover Procedure							
6	Clinical Record Keeping Policy							
7	Complaints (including Concerns Raised Through PALS) Policy							
8	Confidentiality Code of Conduct							
9	Coroners Policy							
10	Diagnosis of Death Procedure							
11	Domestic Violence & Abuse Policy							
12	Drug Management Policy							
13	Duty of Candour Policy (formerly Being Open Policy)							
14	End of Life Care Policy							
15	Environmental & Sustainability Policy							
16	Equality & Diversity Policy							
17	Freedom to Speak up - Raising Concerns (Whistleblowing) Policy							
18	Health & Safety Policy							
19	Infection Prevention and Control Operational Procedures							
20	Infection Prevention and Control Policy							
21	Management of Cardiac Chest Pain Procedure							
22	Management of Obstetric Emergencies Procedures							
23	Manual Handling							
24	Medical Equipment Maintenance							
25	Obstetric and Maternity Care Policy							
26	On Scene Conveyance and Referral Procedure							
27	Paediatric Care Policy							
28	Pre/Post Shift Activities (Vehicle & Equipment Checks)							
29	Regional Mental Health Conveyance Policy							
30	Reporting and Investigation of Serious Incidents and High Level Incidents Procedure							
31	Resuscitation Policy							
32	Risk Assessment Policy							
33	Safe Holding Policy							
34	Safeguarding Adults Policy							
35	Safeguarding Children and Young People Policy							
36	Staff Training & Development Policy							
37	Stroke Care Procedure							
38	Uniform & PPE Policy							
39	Untoward Incident Reporting Policy							
40	Vehicle Maintenance Policy							

Qualifications Clinical

Instruction to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call-off contract in this section. This is set up as an example and will be expanded on during the 2nd stage ITT Call off

Where necessary equivalent qualifications will be reviewed and confirmed where they can meet the standards and quality of care the Ambulance Sector wish to maintain.

Internal Use only SQ		
Selection Questionnaire	Comments	Auditor

Assessment Period as of 06/04		Development Date: 06/04	
Emergency Care (EC) covering skills, procedures from level 01 to under level 02 (over 02)		REVIEW THE SKILL SETS	
Physical/Health status must be the following criteria of education and training:		YES	NO
Member of Staff		Y	N
	A full course of EC equivalent to 160 hours	Y	N
	Must have completed a clinical practice 160 hours in training	Y	N
	Assessment of resuscitation (EC 01 and 02)	Y	N
	Assessment of resuscitation (EC 03 and 04)	Y	N
	Assessment of resuscitation (EC 05 and 06)	Y	N
	Assessment of resuscitation (EC 07 and 08)	Y	N
	Assessment of resuscitation (EC 09 and 10)	Y	N
	Assessment of resuscitation (EC 11 and 12)	Y	N
	Assessment of resuscitation (EC 13 and 14)	Y	N
	Assessment of resuscitation (EC 15 and 16)	Y	N
	Assessment of resuscitation (EC 17 and 18)	Y	N
	Assessment of resuscitation (EC 19 and 20)	Y	N
	Assessment of resuscitation (EC 21 and 22)	Y	N
	Assessment of resuscitation (EC 23 and 24)	Y	N
	Assessment of resuscitation (EC 25 and 26)	Y	N
	Assessment of resuscitation (EC 27 and 28)	Y	N
	Assessment of resuscitation (EC 29 and 30)	Y	N
	Assessment of resuscitation (EC 31 and 32)	Y	N
	Assessment of resuscitation (EC 33 and 34)	Y	N
	Assessment of resuscitation (EC 35 and 36)	Y	N
	Assessment of resuscitation (EC 37 and 38)	Y	N
	Assessment of resuscitation (EC 39 and 40)	Y	N
	Assessment of resuscitation (EC 41 and 42)	Y	N
	Assessment of resuscitation (EC 43 and 44)	Y	N
	Assessment of resuscitation (EC 45 and 46)	Y	N
	Assessment of resuscitation (EC 47 and 48)	Y	N
	Assessment of resuscitation (EC 49 and 50)	Y	N
	Assessment of resuscitation (EC 51 and 52)	Y	N
	Assessment of resuscitation (EC 53 and 54)	Y	N
	Assessment of resuscitation (EC 55 and 56)	Y	N
	Assessment of resuscitation (EC 57 and 58)	Y	N
	Assessment of resuscitation (EC 59 and 60)	Y	N
	Assessment of resuscitation (EC 61 and 62)	Y	N
	Assessment of resuscitation (EC 63 and 64)	Y	N
	Assessment of resuscitation (EC 65 and 66)	Y	N
	Assessment of resuscitation (EC 67 and 68)	Y	N
	Assessment of resuscitation (EC 69 and 70)	Y	N
	Assessment of resuscitation (EC 71 and 72)	Y	N
	Assessment of resuscitation (EC 73 and 74)	Y	N
	Assessment of resuscitation (EC 75 and 76)	Y	N
	Assessment of resuscitation (EC 77 and 78)	Y	N
	Assessment of resuscitation (EC 79 and 80)	Y	N
	Assessment of resuscitation (EC 81 and 82)	Y	N
	Assessment of resuscitation (EC 83 and 84)	Y	N
	Assessment of resuscitation (EC 85 and 86)	Y	N
	Assessment of resuscitation (EC 87 and 88)	Y	N
	Assessment of resuscitation (EC 89 and 90)	Y	N
	Assessment of resuscitation (EC 91 and 92)	Y	N
	Assessment of resuscitation (EC 93 and 94)	Y	N
	Assessment of resuscitation (EC 95 and 96)	Y	N
	Assessment of resuscitation (EC 97 and 98)	Y	N
	Assessment of resuscitation (EC 99 and 100)	Y	N
	Assessment of resuscitation (EC 101 and 102)	Y	N
	Assessment of resuscitation (EC 103 and 104)	Y	N
	Assessment of resuscitation (EC 105 and 106)	Y	N
	Assessment of resuscitation (EC 107 and 108)	Y	N
	Assessment of resuscitation (EC 109 and 110)	Y	N
	Assessment of resuscitation (EC 111 and 112)	Y	N
	Assessment of resuscitation (EC 113 and 114)	Y	N
	Assessment of resuscitation (EC 115 and 116)	Y	N
	Assessment of resuscitation (EC 117 and 118)	Y	N
	Assessment of resuscitation (EC 119 and 120)	Y	N
	Assessment of resuscitation (EC 121 and 122)	Y	N
	Assessment of resuscitation (EC 123 and 124)	Y	N
	Assessment of resuscitation (EC 125 and 126)	Y	N
	Assessment of resuscitation (EC 127 and 128)	Y	N
	Assessment of resuscitation (EC 129 and 130)	Y	N
	Assessment of resuscitation (EC 131 and 132)	Y	N
	Assessment of resuscitation (EC 133 and 134)	Y	N
	Assessment of resuscitation (EC 135 and 136)	Y	N
	Assessment of resuscitation (EC 137 and 138)	Y	N
	Assessment of resuscitation (EC 139 and 140)	Y	N
	Assessment of resuscitation (EC 141 and 142)	Y	N
	Assessment of resuscitation (EC 143 and 144)	Y	N
	Assessment of resuscitation (EC 145 and 146)	Y	N
	Assessment of resuscitation (EC 147 and 148)	Y	N
	Assessment of resuscitation (EC 149 and 150)	Y	N
	Assessment of resuscitation (EC 151 and 152)	Y	N
	Assessment of resuscitation (EC 153 and 154)	Y	N
	Assessment of resuscitation (EC 155 and 156)	Y	N
	Assessment of resuscitation (EC 157 and 158)	Y	N
	Assessment of resuscitation (EC 159 and 160)	Y	N
	Assessment of resuscitation (EC 161 and 162)	Y	N
	Assessment of resuscitation (EC 163 and 164)	Y	N
	Assessment of resuscitation (EC 165 and 166)	Y	N
	Assessment of resuscitation (EC 167 and 168)	Y	N
	Assessment of resuscitation (EC 169 and 170)	Y	N
	Assessment of resuscitation (EC 171 and 172)	Y	N
	Assessment of resuscitation (EC 173 and 174)	Y	N
	Assessment of resuscitation (EC 175 and 176)	Y	N
	Assessment of resuscitation (EC 177 and 178)	Y	N
	Assessment of resuscitation (EC 179 and 180)	Y	N
	Assessment of resuscitation (EC 181 and 182)	Y	N
	Assessment of resuscitation (EC 183 and 184)	Y	N
	Assessment of resuscitation (EC 185 and 186)	Y	N
	Assessment of resuscitation (EC 187 and 188)	Y	N
	Assessment of resuscitation (EC 189 and 190)	Y	N
	Assessment of resuscitation (EC 191 and 192)	Y	N
	Assessment of resuscitation (EC 193 and 194)	Y	N
	Assessment of resuscitation (EC 195 and 196)	Y	N
	Assessment of resuscitation (EC 197 and 198)	Y	N
	Assessment of resuscitation (EC 199 and 200)	Y	N
	Assessment of resuscitation (EC 201 and 202)	Y	N
	Assessment of resuscitation (EC 203 and 204)	Y	N
	Assessment of resuscitation (EC 205 and 206)	Y	N
	Assessment of resuscitation (EC 207 and 208)	Y	N
	Assessment of resuscitation (EC 209 and 210)	Y	N
	Assessment of resuscitation (EC 211 and 212)	Y	N
	Assessment of resuscitation (EC 213 and 214)	Y	N
	Assessment of resuscitation (EC 215 and 216)	Y	N
	Assessment of resuscitation (EC 217 and 218)	Y	N
	Assessment of resuscitation (EC 219 and 220)	Y	N
	Assessment of resuscitation (EC 221 and 222)	Y	N
	Assessment of resuscitation (EC 223 and 224)	Y	N
	Assessment of resuscitation (EC 225 and 226)	Y	N
	Assessment of resuscitation (EC 227 and 228)	Y	N
	Assessment of resuscitation (EC 229 and 230)	Y	N
	Assessment of resuscitation (EC 231 and 232)	Y	N
	Assessment of resuscitation (EC 233 and 234)	Y	N
	Assessment of resuscitation (EC 235 and 236)	Y	N
	Assessment of resuscitation (EC 237 and 238)	Y	N
	Assessment of resuscitation (EC 239 and 240)	Y	N
	Assessment of resuscitation (EC 241 and 242)	Y	N
	Assessment of resuscitation (EC 243 and 244)	Y	N
	Assessment of resuscitation (EC 245 and 246)	Y	N
	Assessment of resuscitation (EC 247 and 248)	Y	N
	Assessment of resuscitation (EC 249 and 250)	Y	N
	Assessment of resuscitation (EC 251 and 252)	Y	N
	Assessment of resuscitation (EC 253 and 254)	Y	N
	Assessment of resuscitation (EC 255 and 256)	Y	N
	Assessment of resuscitation (EC 257 and 258)	Y	N
	Assessment of resuscitation (EC 259 and 260)	Y	N
	Assessment of resuscitation (EC 261 and 262)	Y	N
	Assessment of resuscitation (EC 263 and 264)	Y	N
	Assessment of resuscitation (EC 265 and 266)	Y	N
	Assessment of resuscitation (EC 267 and 268)	Y	N
	Assessment of resuscitation (EC 269 and 270)	Y	N
	Assessment of resuscitation (EC 271 and 272)	Y	N
	Assessment of resuscitation (EC 273 and 274)	Y	N
	Assessment of resuscitation (EC 275 and 276)	Y	N
	Assessment of resuscitation (EC 277 and 278)	Y	N
	Assessment of resuscitation (EC 279 and 280)	Y	N
	Assessment of resuscitation (EC 281 and 282)	Y	N
	Assessment of resuscitation (EC 283 and 284)	Y	N
	Assessment of resuscitation (EC 285 and 286)	Y	N
	Assessment of resuscitation (EC 287 and 288)	Y	N
	Assessment of resuscitation (EC 289 and 290)	Y	N
	Assessment of resuscitation (EC 291 and 292)	Y	N
	Assessment of resuscitation (EC 293 and 294)	Y	N
	Assessment of resuscitation (EC 295 and 296)	Y	N
	Assessment of resuscitation (EC 297 and 298)	Y	N
	Assessment of resuscitation (EC 299 and 300)	Y	N
	Assessment of resuscitation (EC 301 and 302)	Y	N
	Assessment of resuscitation (EC 303 and 304)	Y	N
	Assessment of resuscitation (EC 305 and 306)	Y	N
	Assessment of resuscitation (EC 307 and 308)	Y	N
	Assessment of resuscitation (EC 309 and 310)	Y	N
	Assessment of resuscitation (EC 311 and 312)	Y	N
	Assessment of resuscitation (EC 313 and 314)	Y	N
	Assessment of resuscitation (EC 315 and 316)	Y	N
	Assessment of resuscitation (EC 317 and 318)	Y	N
	Assessment of resuscitation (EC 319 and 320)	Y	N
	Assessment of resuscitation (EC 321 and 322)	Y	N
	Assessment of resuscitation (EC 323 and 324)	Y	N
	Assessment of resuscitation (EC 325 and 326)	Y	N
	Assessment of resuscitation (EC 327 and 328)	Y	N
	Assessment of resuscitation (EC 329 and 330)	Y	N
	Assessment of resuscitation (EC 331 and 332)	Y	N
	Assessment of resuscitation (EC 333 and 334)	Y	N
	Assessment of resuscitation (EC 335 and 336)	Y	N
	Assessment of resuscitation (EC 337 and 338)	Y	N
	Assessment of resuscitation (EC 339 and 340)	Y	N
	Assessment of resuscitation (EC 341 and 342)	Y	N
	Assessment of resuscitation (EC 343 and 344)	Y	N
	Assessment of resuscitation (EC 345 and 346)	Y	N
	Assessment of resuscitation (EC 347 and 348)	Y	N
	Assessment of resuscitation (EC 349 and 350)	Y	N
	Assessment of resuscitation (EC 351 and 352)	Y	N
	Assessment of resuscitation (EC 353 and 354)	Y	N
	Assessment of resuscitation (EC 355 and 356)	Y	N
	Assessment of resuscitation (EC 357 and 358)	Y	N
	Assessment of resuscitation (EC 359 and 360)	Y	N
	Assessment of resuscitation (EC 361 and 362)	Y	N
	Assessment of resuscitation (EC 363 and 364)	Y	N
	Assessment of resuscitation (EC 365 and 366)	Y	N
	Assessment of resuscitation (EC 367 and 368)	Y	N
	Assessment of resuscitation (EC 369 and 370)	Y	N
	Assessment of resuscitation (EC 371 and 372)	Y	N
	Assessment of resuscitation (EC 373 and 374)	Y	N
	Assessment of resuscitation (EC 375 and 376)	Y	N
	Assessment of resuscitation (EC 377 and 378)	Y	N
	Assessment of resuscitation (EC 379 and 380)	Y	N
	Assessment of resuscitation (EC 381 and 382)	Y	N
	Assessment of resuscitation (EC 383 and 384)	Y	N
	Assessment of resuscitation (EC 385 and 386)	Y	N
	Assessment of resuscitation (EC 387 and 388)	Y	N
	Assessment of resuscitation (EC 389 and 390)	Y	N
	Assessment of resuscitation (EC 391 and 392)	Y	N
	Assessment of resuscitation (EC 393 and 394)	Y	N
	Assessment of resuscitation (EC 395 and 396)	Y	N
	Assessment of resuscitation (EC 397 and 398)	Y	N
	Assessment of resuscitation (EC 399 and 400)	Y	N
	Assessment of resuscitation (EC 401 and 402)	Y	N
	Assessment of resuscitation (EC 403 and 404)	Y	N
	Assessment of resuscitation (EC 405 and 406)	Y	N
	Assessment of resuscitation (EC 407 and 408)	Y	N
	Assessment of resuscitation (EC 409 and 410)	Y	N
	Assessment of resuscitation (EC 411 and 412)	Y	N
	Assessment of resuscitation (EC 413 and 414)	Y	N
	Assessment of resuscitation (EC 415 and 416)	Y	N
	Assessment of resuscitation (EC 417 and 418)	Y	N
	Assessment of resuscitation (EC 419 and 420)	Y	N
	Assessment of resuscitation (EC 421 and 422)	Y	N
	Assessment of resuscitation (EC 423 and 424)	Y	N
	Assessment of resuscitation (EC 425 and 426)	Y	N
	Assessment of resuscitation (EC 427 and 428)	Y	N
	Assessment of resuscitation (EC 429 and 430)	Y	N
	Assessment of resuscitation (EC 431 and 432)	Y	N
	Assessment of resuscitation (EC 433 and 434)	Y	N
	Assessment of resuscitation (EC 435 and 436)	Y	N
	Assessment of resuscitation (EC 437 and 438)	Y	N
	Assessment of resuscitation (EC 439 and 440)	Y	N
	Assessment of resuscitation (EC 441 and 442)	Y	N
	Assessment of resuscitation (EC 443 and 444)	Y	N
	Assessment of resuscitation (EC 445 and 446)	Y	N
	Assessment of resuscitation (EC 447 and 448)	Y	N
	Assessment of resuscitation (EC 449 and 450)	Y	N
	Assessment of resuscitation (EC 451 and 452)	Y	N
	Assessment of resuscitation (EC 453 and 454)	Y	N
	Assessment of resuscitation (EC 455 and 456)	Y	N
	Assessment of resuscitation (EC 457 and 458)	Y	N
	Assessment of resuscitation (EC 459 and 460)	Y	N
	Assessment of resuscitation (EC 461 and 462)	Y	N
	Assessment of resuscitation (EC 463 and 464)	Y	N
	Assessment of resuscitation (EC 465 and 466)	Y	N
	Assessment of resuscitation (EC 467 and 468)	Y	N
	Assessment of resuscitation (EC 469 and 470)	Y	N
	Assessment of resuscitation (EC 471 and 472)	Y	N
	Assessment of resuscitation (EC 473 and 474)	Y	N
	Assessment of resuscitation (EC 475 and 476)	Y	N
	Assessment of resuscitation (EC 477 and 478)	Y	N
	Assessment of resuscitation (EC 479 and 480)	Y	N
	Assessment of resuscitation (EC 481 and 482)	Y	N
	Assessment of resuscitation (EC 483 and 484)	Y	N
	Assessment of resuscitation (EC 485 and 486)	Y	N
	Assessment of resuscitation (EC 487 and 488)	Y	N
	Assessment of resuscitation (EC 489 and 490)	Y	N
	Assessment of resuscitation (EC 491 and 492)	Y	N
	Assessment of resuscitation (EC 493 and 494)	Y	N
	Assessment of resuscitation (EC 495 and 496)	Y	N
	Assessment of resuscitation (EC 497 and 498)	Y	N
	Assessment of resuscitation (EC 499 and 500)	Y	N
	Assessment of resuscitation (EC 501 and 502)	Y	N
	Assessment of resuscitation (EC 503 and 504)	Y	N
	Assessment of resuscitation (EC 505 and 506)	Y	N
	Assessment of resuscitation (EC 507 and 508)	Y	N
	Assessment of resuscitation (EC 509 and 510)	Y	N
	Assessment of resuscitation (EC 511 and 512)	Y	N
	Assessment of resuscitation (EC 513 and 514)	Y	N
	Assessment of resuscitation (EC 515 and 516)	Y	N
	Assessment of resuscitation (EC 517 and 518)	Y	N
	Assessment of resuscitation (EC 519 and 520)	Y	N
	Assessment of resuscitation (EC 521 and 522)	Y	N
	Assessment of resuscitation (EC 523 and 524)	Y	N
	Assessment of resuscitation (EC 525 and 526)	Y	N
	Assessment of resuscitation (EC 527 and 528)	Y	N
	Assessment of resuscitation (EC 529 and 530)	Y	N
	Assessment of resuscitation (EC 531 and 532)	Y	N
	Assessment of resuscitation (EC 533 and 534)	Y	N
	Assessment of resuscitation (EC 535 and 536)	Y	N
	Assessment of resuscitation (EC 537 and 538)	Y	N
	Assessment of resuscitation (EC 539 and 540)	Y	N
	Assessment of resuscitation (EC 541 and 542)	Y	N
	Assessment of resuscitation (EC 543 and 544)	Y	N
	Assessment of resuscitation (EC 545 and 546)	Y	N
	Assessment of resuscitation (EC 547 and 548)	Y	N
	Assessment of resuscitation (EC 549 and 550)	Y	N
	Assessment of resuscitation (EC 551 and 552)	Y	N
	Assessment of resuscitation (EC 553 and 554)	Y	N
	Assessment of resuscitation (EC 555 and 556)	Y	N
	Assessment of resuscitation (EC 557 and 558)	Y	N
	Assessment of resuscitation (EC 559 and 560)	Y	N
	Assessment of resuscitation (EC 561 and 562)	Y	N
	Assessment of resuscitation (EC 563 and 564)	Y	N
	Assessment of resuscitation (EC 565 and 566)	Y	N
	Assessment of resuscitation (EC 567 and 568)	Y	N
	Assessment of resuscitation (EC 569 and 570)	Y	N
	Assessment of resuscitation (EC 571 and 572)	Y	N
	Assessment of resuscitation (EC 573 and 574)	Y	N
	Assessment of resuscitation (EC 575 and 576)	Y	N
	Assessment of resuscitation (EC 577 and 578)	Y	N
	Assessment of resuscitation (EC 579 and 580)	Y	N
	Assessment of resuscitation (EC 581 and 582)	Y	N
	Assessment of resuscitation (EC 583 and 584)	Y	N
	Assessment of resuscitation (EC 585 and 586)	Y	N
	Assessment of resuscitation (EC 587 and 588)	Y	N
	Assessment of resuscitation (EC 589 and 590)	Y	N
	Assessment of resuscitation (EC 591 and 592)	Y	N
	Assessment of resuscitation (EC 593 and 594)	Y	N
	Assessment of resuscitation (EC 595 and 596)	Y	N
	Assessment of resuscitation (EC 597 and 598)	Y	

[illegible][illegible]

		Internal control only		
		Size/ Risk Assessment	Comments	Author
Is training appropriate to size of company's staff numbers.	Yes			
Confirm content and level of training meets Trust requirements and record.	Yes		Revised scenarios. All in line with RITC Level 4 scenarios FY2021	
Malware Trust Requirements	Yes			
View scenarios for evidence of learner outcomes and measure plan randomly selected against TNA (annexure 2 areas)				
Where a failing is delivered impact premises and equipment for sublease.				

Reference:

Reference:

Qualifications - Tutors

Clinical	PTLS/JNET, PGCE, Cert Ed, IMCD Tutor Award or a recognised equivalent as a minimum standard expected		
Driving:	C1 Licence Category	Qualified IMCD Driving Instructor and Driving Standards Agency (DSA) Approved Driving Instructor (ADI)	
		[A2] Level 2 Award Driving or Future Skills L3 Certificate in Emergency Response Ambulance Driving (SOSRAM)	
		L4 Certificate in Education & Training Cat HL, PGCE or equivalent	[A Certificate in Accessing Vocational Achievement (CAVA, A1, D12/22 etc.)

Internal Use only (SI)		
Selection Questions/Topics	Comments	Author

Where the information provided in this table is not accurate at the time of the visit, the bidder may have the privilege of this point.

Information Provided at SQE 2		Governance Site Visit		Internal Use only (SI)		
List of staff involved in staff training including subject areas		Qualification	Review the suitability of tutor qualifications against Trust requirements/subject matters	Site Visit Assessment	Comments	Author
	Names	Subject				
1		Clinical	L3 RET & CAVA			
2		Clinical	L3 RET & CAVA			
3		Clinical	Upstream L4 CBT			
4		Clinical	DMED Lead of RCA			
5		Clinical	IMCD Driving Instructor			
6						
7						
8						
9						
10						

Reference: Health & Social Care Act 2008 (Regulated Activities) Regulations 2010
Outcome 2.2 (Regulation 21): Requirements relating to Workers Prompts
11B, 11C
Outcome 3.3 (Regulation 22): Staffing
Outcome 3.4 (Regulation 23): Supporting Workers
11B, 11C, 11D, 11E, 11F, 11G, 11H, 11I, 11J, 11K, 11L, 11M, 11N, 11O, 11P, 11Q, 11R, 11S, 11T, 11U, 11V, 11W, 11X, 11Y, 11Z, 12A, 12B, 12C, 12D, 12E, 12F, 12G, 12H, 12I, 12J, 12K, 12L, 12M, 12N, 12O, 12P, 12Q, 12R, 12S, 12T, 12U, 12V, 12W, 12X, 12Y, 12Z, 13A, 13B, 13C, 13D, 13E, 13F, 13G, 13H, 13I, 13J, 13K, 13L, 13M, 13N, 13O, 13P, 13Q, 13R, 13S, 13T, 13U, 13V, 13W, 13X, 13Y, 13Z, 14A, 14B, 14C, 14D, 14E, 14F, 14G, 14H, 14I, 14J, 14K, 14L, 14M, 14N, 14O, 14P, 14Q, 14R, 14S, 14T, 14U, 14V, 14W, 14X, 14Y, 14Z, 15A, 15B, 15C, 15D, 15E, 15F, 15G, 15H, 15I, 15J, 15K, 15L, 15M, 15N, 15O, 15P, 15Q, 15R, 15S, 15T, 15U, 15V, 15W, 15X, 15Y, 15Z, 16A, 16B, 16C, 16D, 16E, 16F, 16G, 16H, 16I, 16J, 16K, 16L, 16M, 16N, 16O, 16P, 16Q, 16R, 16S, 16T, 16U, 16V, 16W, 16X, 16Y, 16Z, 17A, 17B, 17C, 17D, 17E, 17F, 17G, 17H, 17I, 17J, 17K, 17L, 17M, 17N, 17O, 17P, 17Q, 17R, 17S, 17T, 17U, 17V, 17W, 17X, 17Y, 17Z, 18A, 18B, 18C, 18D, 18E, 18F, 18G, 18H, 18I, 18J, 18K, 18L, 18M, 18N, 18O, 18P, 18Q, 18R, 18S, 18T, 18U, 18V, 18W, 18X, 18Y, 18Z, 19A, 19B, 19C, 19D, 19E, 19F, 19G, 19H, 19I, 19J, 19K, 19L, 19M, 19N, 19O, 19P, 19Q, 19R, 19S, 19T, 19U, 19V, 19W, 19X, 19Y, 19Z, 20A, 20B, 20C, 20D, 20E, 20F, 20G, 20H, 20I, 20J, 20K, 20L, 20M, 20N, 20O, 20P, 20Q, 20R, 20S, 20T, 20U, 20V, 20W, 20X, 20Y, 20Z, 21A, 21B, 21C, 21D, 21E, 21F, 21G, 21H, 21I, 21J, 21K, 21L, 21M, 21N, 21O, 21P, 21Q, 21R, 21S, 21T, 21U, 21V, 21W, 21X, 21Y, 21Z, 22A, 22B, 22C, 22D, 22E, 22F, 22G, 22H, 22I, 22J, 22K, 22L, 22M, 22N, 22O, 22P, 22Q, 22R, 22S, 22T, 22U, 22V, 22W, 22X, 22Y, 22Z, 23A, 23B, 23C, 23D, 23E, 23F, 23G, 23H, 23I, 23J, 23K, 23L, 23M, 23N, 23O, 23P, 23Q, 23R, 23S, 23T, 23U, 23V, 23W, 23X, 23Y, 23Z, 24A, 24B, 24C, 24D, 24E, 24F, 24G, 24H, 24I, 24J, 24K, 24L, 24M, 24N, 24O, 24P, 24Q, 24R, 24S, 24T, 24U, 24V, 24W, 24X, 24Y, 24Z, 25A, 25B, 25C, 25D, 25E, 25F, 25G, 25H, 25I, 25J, 25K, 25L, 25M, 25N, 25O, 25P, 25Q, 25R, 25S, 25T, 25U, 25V, 25W, 25X, 25Y, 25Z, 26A, 26B, 26C, 26D, 26E, 26F, 26G, 26H, 26I, 26J, 26K, 26L, 26M, 26N, 26O, 26P, 26Q, 26R, 26S, 26T, 26U, 26V, 26W, 26X, 26Y, 26Z, 27A, 27B, 27C, 27D, 27E, 27F, 27G, 27H, 27I, 27J, 27K, 27L, 27M, 27N, 27O, 27P, 27Q, 27R, 27S, 27T, 27U, 27V, 27W, 27X, 27Y, 27Z, 28A, 28B, 28C, 28D, 28E, 28F, 28G, 28H, 28I, 28J, 28K, 28L, 28M, 28N, 28O, 28P, 28Q, 28R, 28S, 28T, 28U, 28V, 28W, 28X, 28Y, 28Z, 29A, 29B, 29C, 29D, 29E, 29F, 29G, 29H, 29I, 29J, 29K, 29L, 29M, 29N, 29O, 29P, 29Q, 29R, 29S, 29T, 29U, 29V, 29W, 29X, 29Y, 29Z, 30A, 30B, 30C, 30D, 30E, 30F, 30G, 30H, 30I, 30J, 30K, 30L, 30M, 30N, 30O, 30P, 30Q, 30R, 30S, 30T, 30U, 30V, 30W, 30X, 30Y, 30Z, 31A, 31B, 31C, 31D, 31E, 31F, 31G, 31H, 31I, 31J, 31K, 31L, 31M, 31N, 31O, 31P, 31Q, 31R, 31S, 31T, 31U, 31V, 31W, 31X, 31Y, 31Z, 32A, 32B, 32C, 32D, 32E, 32F, 32G, 32H, 32I, 32J, 32K, 32L, 32M, 32N, 32O, 32P, 32Q, 32R, 32S, 32T, 32U, 32V, 32W, 32X, 32Y, 32Z, 33A, 33B, 33C, 33D, 33E, 33F, 33G, 33H, 33I, 33J, 33K, 33L, 33M, 33N, 33O, 33P, 33Q, 33R, 33S, 33T, 33U, 33V, 33W, 33X, 33Y, 33Z, 34A, 34B, 34C, 34D, 34E, 34F, 34G, 34H, 34I, 34J, 34K, 34L, 34M, 34N, 34O, 34P, 34Q, 34R, 34S, 34T, 34U, 34V, 34W, 34X, 34Y, 34Z, 35A, 35B, 35C, 35D, 35E, 35F, 35G, 35H, 35I, 35J, 35K, 35L, 35M, 35N, 35O, 35P, 35Q, 35R, 35S, 35T, 35U, 35V, 35W, 35X, 35Y, 35Z, 36A, 36B, 36C, 36D, 36E, 36F, 36G, 36H, 36I, 36J, 36K, 36L, 36M, 36N, 36O, 36P, 36Q, 36R, 36S, 36T, 36U, 36V, 36W, 36X, 36Y, 36Z, 37A, 37B, 37C, 37D, 37E, 37F, 37G, 37H, 37I, 37J, 37K, 37L, 37M, 37N, 37O, 37P, 37Q, 37R, 37S, 37T, 37U, 37V, 37W, 37X, 37Y, 37Z, 38A, 38B, 38C, 38D, 38E, 38F, 38G, 38H, 38I, 38J, 38K, 38L, 38M, 38N, 38O, 38P, 38Q, 38R, 38S, 38T, 38U, 38V, 38W, 38X, 38Y, 38Z, 39A, 39B, 39C, 39D, 39E, 39F, 39G, 39H, 39I, 39J, 39K, 39L, 39M, 39N, 39O, 39P, 39Q, 39R, 39S, 39T, 39U, 39V, 39W, 39X, 39Y, 39Z, 40A, 40B, 40C, 40D, 40E, 40F, 40G, 40H, 40I, 40J, 40K, 40L, 40M, 40N, 40O, 40P, 40Q, 40R, 40S, 40T, 40U, 40V, 40W, 40X, 40Y, 40Z, 41A, 41B, 41C, 41D, 41E, 41F, 41G, 41H, 41I, 41J, 41K, 41L, 41M, 41N, 41O, 41P, 41Q, 41R, 41S, 41T, 41U, 41V, 41W, 41X, 41Y, 41Z, 42A, 42B, 42C, 42D, 42E, 42F, 42G, 42H, 42I, 42J, 42K, 42L, 42M, 42N, 42O, 42P, 42Q, 42R, 42S, 42T, 42U, 42V, 42W, 42X, 42Y, 42Z, 43A, 43B, 43C, 43D, 43E, 43F, 43G, 43H, 43I, 43J, 43K, 43L, 43M, 43N, 43O, 43P, 43Q, 43R, 43S, 43T, 43U, 43V, 43W, 43X, 43Y, 43Z, 44A, 44B, 44C, 44D, 44E, 44F, 44G, 44H, 44I, 44J, 44K, 44L, 44M, 44N, 44O, 44P, 44Q, 44R, 44S, 44T, 44U, 44V, 44W, 44X, 44Y, 44Z, 45A, 45B, 45C, 45D, 45E, 45F, 45G, 45H, 45I, 45J, 45K, 45L, 45M, 45N, 45O, 45P, 45Q, 45R, 45S, 45T, 45U, 45V, 45W, 45X, 45Y, 45Z, 46A, 46B, 46C, 46D, 46E, 46F, 46G, 46H, 46I, 46J, 46K, 46L, 46M, 46N, 46O, 46P, 46Q, 46R, 46S, 46T, 46U, 46V, 46W, 46X, 46Y, 46Z, 47A, 47B, 47C, 47D, 47E, 47F, 47G, 47H, 47I, 47J, 47K, 47L, 47M, 47N, 47O, 47P, 47Q, 47R, 47S, 47T, 47U, 47V, 47W, 47X, 47Y, 47Z, 48A, 48B, 48C, 48D, 48E, 48F, 48G, 48H, 48I, 48J, 48K, 48L, 48M, 48N, 48O, 48P, 48Q, 48R, 48S, 48T, 48U, 48V, 48W, 48X, 48Y, 48Z, 49A, 49B, 49C, 49D, 49E, 49F, 49G, 49H, 49I, 49J, 49K, 49L, 49M, 49N, 49O, 49P, 49Q, 49R, 49S, 49T, 49U, 49V, 49W, 49X, 49Y, 49Z, 50A, 50B, 50C, 50D, 50E, 50F, 50G, 50H, 50I, 50J, 50K, 50L, 50M, 50N, 50O, 50P, 50Q, 50R, 50S, 50T, 50U, 50V, 50W, 50X, 50Y, 50Z, 51A, 51B, 51C, 51D, 51E, 51F, 51G, 51H, 51I, 51J, 51K, 51L, 51M, 51N, 51O, 51P, 51Q, 51R, 51S, 51T, 51U, 51V, 51W, 51X, 51Y, 51Z, 52A, 52B, 52C, 52D, 52E, 52F, 52G, 52H, 52I, 52J, 52K, 52L, 52M, 52N, 52O, 52P, 52Q, 52R, 52S, 52T, 52U, 52V, 52W, 52X, 52Y, 52Z, 53A, 53B, 53C, 53D, 53E, 53F, 53G, 53H, 53I, 53J, 53K, 53L, 53M, 53N, 53O, 53P, 53Q, 53R, 53S, 53T, 53U, 53V, 53W, 53X, 53Y, 53Z, 54A, 54B, 54C, 54D, 54E, 54F, 54G, 54H, 54I, 54J, 54K, 54L, 54M, 54N, 54O, 54P, 54Q, 54R, 54S, 54T, 54U, 54V, 54W, 54X, 54Y, 54Z, 55A, 55B, 55C, 55D, 55E, 55F, 55G, 55H, 55I, 55J, 55K, 55L, 55M, 55N, 55O, 55P, 55Q, 55R, 55S, 55T, 55U, 55V, 55W, 55X, 55Y, 55Z, 56A, 56B, 56C, 56D, 56E, 56F, 56G, 56H, 56I, 56J, 56K, 56L, 56M, 56N, 56O, 56P, 56Q, 56R, 56S, 56T, 56U, 56V, 56W, 56X, 56Y, 56Z, 57A, 57B, 57C, 57D, 57E, 57F, 57G, 57H, 57I, 57J, 57K, 57L, 57M, 57N, 57O, 57P, 57Q, 57R, 57S, 57T, 57U, 57V, 57W, 57X, 57Y, 57Z, 58A, 58B, 58C, 58D, 58E, 58F, 58G, 58H, 58I, 58J, 58K, 58L, 58M, 58N, 58O, 58P, 58Q, 58R, 58S, 58T, 58U, 58V, 58W, 58X, 58Y, 58Z, 59A, 59B, 59C, 59D, 59E, 59F, 59G, 59H, 59I, 59J, 59K, 59L, 59M, 59N, 59O, 59P, 59Q, 59R, 59S, 59T, 59U, 59V, 59W, 59X, 59Y, 59Z, 60A, 60B, 60C, 60D, 60E, 60F, 60G, 60H, 60I, 60J, 60K, 60L, 60M, 60N, 60O, 60P, 60Q, 60R, 60S, 60T, 60U, 60V, 60W, 60X, 60Y, 60Z, 61A, 61B, 61C, 61D, 61E, 61F, 61G, 61H, 61I, 61J, 61K, 61L, 61M, 61N, 61O, 61P, 61Q, 61R, 61S, 61T, 61U, 61V, 61W, 61X, 61Y, 61Z, 62A, 62B, 62C, 62D, 62E, 62F, 62G, 62H, 62I, 62J, 62K, 62L, 62M, 62N, 62O, 62P, 62Q, 62R, 62S, 62T, 62U, 62V, 62W, 62X, 62Y, 62Z, 63A, 63B, 63C, 63D, 63E, 63F, 63G, 63H, 63I, 63J, 63K, 63L, 63M, 63N, 63O, 63P, 63Q, 63R, 63S, 63T, 63U, 63V, 63W, 63X, 63Y, 63Z, 64A, 64B, 64C, 64D, 64E, 64F, 64G, 64H, 64I, 64J, 64K, 64L, 64M, 64N, 64O, 64P, 64Q, 64R, 64S, 64T, 64U, 64V, 64W, 64X, 64Y, 64Z, 65A, 65B, 65C, 65D, 65E, 65F, 65G, 65H, 65I, 65J, 65K, 65L, 65M, 65N, 65O, 65P, 65Q, 65R, 65S, 65T, 65U, 65V, 65W, 65X, 65Y, 65Z, 66A, 66B, 66C, 66D, 66E, 66F, 66G, 66H, 66I, 66J, 66K, 66L, 66M, 66N, 66O, 66P, 66Q, 66R, 66S, 66T, 66U, 66V, 66W, 66X, 66Y, 66Z, 67A, 67B, 67C, 67D, 67E, 67F, 67G, 67H, 67I, 67J, 67K, 67L, 67M, 67N, 67O, 67P, 67Q, 67R, 67S, 67T, 67U, 67V, 67W, 67X, 67Y, 67Z, 68A, 68B, 68C, 68D, 68E, 68F, 68G, 68H, 68I, 68J, 68K, 68L, 68M, 68N, 68O, 68P, 68Q, 68R, 68S, 68T, 68U, 68V, 68W, 68X, 68Y, 68Z, 69A, 69B, 69C, 69D, 69E, 69F, 69G, 69H, 69I, 69J, 69K, 69L, 69M, 69N, 69O, 69P, 69Q, 69R, 69S, 69T, 69U, 69V, 69W, 69X, 69Y, 69Z, 70A, 70B, 70C, 70D, 70E, 70F, 70G, 70H, 70I, 70J, 70K, 70L, 70M, 70N, 70O, 70P, 70Q, 70R, 70S, 70T, 70U, 70V, 70W, 70X, 70Y, 70Z, 71A, 71B, 71C, 71D, 71E, 71F, 71G, 71H, 71I, 71J, 71K, 71L, 71M, 71N, 71O, 71P, 71Q, 71R, 71S, 71T, 71U, 71V, 71W, 71X, 71Y, 71Z, 72A, 72B, 72C, 72D, 72E, 72F, 72G, 72H, 72I, 72J, 72K, 72L, 72M, 72N, 72O, 72P, 72Q, 72R, 72S, 72T, 72U, 72V, 72W, 72X, 72Y, 72Z, 73A, 73B, 73C, 73D, 73E, 73F, 73G, 73H, 73I, 73J, 73K, 73L, 73M, 73N, 73O, 73P, 73Q, 73R, 73S, 73T, 73U, 73V, 73W, 73X, 73Y, 73Z, 74A, 74B, 74C, 74D, 74E, 74F, 74G, 74H, 74I, 74J, 74K, 74L, 74M, 74N, 74O, 74P, 74Q, 74R, 74S, 74T, 74U, 74V, 74W, 74X, 74Y, 74Z, 75A, 75B, 75C, 75D, 75E, 75F, 75G, 75H, 75I, 75J, 75K, 75L, 75M, 75N, 75O, 75P, 75Q, 75R, 75S, 75T, 75U, 75V, 75W, 75X, 75Y, 75Z, 76A, 76B, 76C, 76D, 76E, 76F, 76G, 76H, 76I, 76J, 76K, 76L, 76M, 76N, 76O, 76P, 76Q, 76R, 76S, 76T, 76U, 76V, 76W, 76X, 76Y, 76Z, 77A, 77B, 77C, 77D, 77E, 77F, 77G, 77H, 77I, 77J, 77K, 77L, 77M, 77N, 77O, 77P, 77Q, 77R, 77S, 77T, 77U, 77V, 77W, 77X, 77Y, 77Z, 78A, 78B, 78C, 78D, 78E, 78F, 78G, 78H, 78I, 78J, 78K, 78L, 78M, 78N, 78O, 78P, 78Q, 78R, 78S, 78T, 78U, 78V, 78W, 78X, 78Y, 78Z, 79A, 79B, 79C, 79D, 79E, 79F, 79G, 79H, 79I, 79J, 79K, 79L, 79M, 79N, 79O, 79P, 79Q, 79R, 79S, 79T, 79U, 79V, 79W, 79X, 79Y, 79Z, 80A, 80B, 80C, 80D, 80E, 80F, 80G, 80H, 80I, 80J, 80K, 80L, 80M, 80N, 80O, 80P, 80Q, 80R, 80S, 80T, 80U, 80V, 80W, 80X, 80Y, 80Z, 81A, 81B, 81C, 81D, 81E, 81F, 81G, 81H, 81I, 81J, 81K, 81L, 81M, 81N, 81O, 81P, 81Q, 81R, 81S, 81T, 81U, 81V, 81W, 81X, 81Y, 81Z, 82A, 82B, 82C, 82D, 82E, 82F, 82G, 82H, 82I, 82J, 82K, 82L, 82M, 82N, 82O, 82P, 82Q, 82R, 82S, 82T, 82U, 82V, 82W, 82X, 82Y, 82Z, 83A, 83B, 83C, 83D, 83E, 83F, 83G, 83H, 83I, 83J, 83K, 83L, 83M, 83N, 83O, 83P, 83Q, 83R, 83S, 83T, 83U, 83V, 83W, 83X, 83Y, 83Z, 84A, 84B, 84C, 84D, 84E, 84F, 84G, 84H, 84I, 84J, 84K, 84L, 84M, 84N, 84O, 84P, 84Q, 84R, 84S, 84T, 84U, 84V, 84W, 84X, 84Y, 84Z, 85A, 85B, 85C, 85D, 85E, 85F, 85G, 85H, 85I, 85J, 85K, 85L, 85M, 85N, 85O, 85P, 85Q, 85R, 85S, 85T, 85U, 85V, 85W, 85X, 85Y, 85Z, 86A, 86B, 86C, 86D, 86E, 86F, 86G, 86H, 86I, 86J, 86K, 86L, 86M, 86N, 86O, 86P, 86Q, 86R, 86S, 86T, 86U, 86V, 86W, 86X, 86Y, 86Z, 87A, 87B, 87C, 87D, 87E, 87F, 87G, 87H, 87I, 87J, 87K, 87L, 87M, 87N, 87O, 87P, 87Q, 87R, 87S, 87T, 87U, 87V, 87W, 87X, 87Y, 87Z, 88A, 88B, 88C, 88D, 88E, 88F, 88G, 88H, 88I, 88J, 88K, 88L, 88M, 88N, 88O, 88P, 88Q, 88R, 88S, 88T, 88U, 88V, 88W, 88X, 88Y, 88Z, 89A, 89B, 89C, 89D, 89E, 89F, 89G, 89H, 89I, 89J, 89K, 89L, 89M, 89N, 89O, 89P, 89Q, 89R, 89S, 89T, 89U, 89V, 89W, 89X, 89Y, 89Z, 90A, 90B, 90C, 90D, 90E, 90F, 90G, 90H, 90I, 90J, 90K, 90L, 90M, 90N, 90O, 90P, 90Q, 90R, 90S, 90T, 90U, 90V, 90W, 90X, 90Y, 90Z, 91A, 91B, 91C, 91D, 91E, 91F, 91G, 91H, 91I, 91J, 91K, 91L, 91M, 91N, 91O, 91P, 91Q, 91R, 91S, 91T, 91U, 91V, 91W, 91X, 91Y, 91Z, 92A, 92B, 92C, 92D, 92E, 92F, 92G, 92H, 92I, 92J, 92K, 92L, 92M, 92N, 92O, 92P, 92Q, 92R, 92S, 92T, 92U, 92V, 92W, 92X, 92Y, 92Z, 93A, 93B, 93C, 93D, 93E, 93F, 93G, 93H, 93I, 93J, 93K, 93L, 93M, 93N, 93O, 93P, 93Q, 93R, 93S, 93T, 93U, 93V, 93W, 93X, 93Y, 93Z, 94A, 94B, 94C, 94D, 94E, 94F, 94G, 94H, 94I, 94J, 94K, 94L, 94M, 94N, 94O, 94P, 94Q, 94R, 94S, 94T, 94U, 94V, 94W, 94X, 94Y, 94Z, 95A, 95B, 95C, 95D, 95E, 95F, 95G, 95H, 95I, 95J, 95K, 95L, 95M, 95N, 95O, 95P, 95Q, 95R, 95S, 95T, 95U, 95V, 95W, 95X, 95Y, 95Z, 96A, 96B, 96C, 96D, 96E, 96F, 96G, 96H

Internal Use only (U)		
Selection Questionnaire	Comments	Referee

Governance Site Visit

Random sample of five members of staff for each grade. Review their individual training records to confirm basic training and refresher training details

[illegible]

Site Visit		Internal site only (2012)	Audit
	Yes	Site Visit Observed	Comments
Is training appropriate to size of company's staff numbers.	Yes		
View sessions for evidence of learner outcomes and lesson plans randomly selected against TNA (minimum 2 areas)	Yes		Appropriate
Where training is delivered impact premises and equipment for suitability.	Batchelor Training firm		Good facilities. Appropriate for company & size

Evidence that training is identified through a training needs analysis (TNA) for each role	Emergency Care Assistant (ECA)	Emergency Medical Technician (EMT)	Paramedic	Interest (by role)		
				St/1st Assistant	Comments	Author
Frequency of update	12 months	12 months	12 months			
Assessment of update	Online & Practical	Online & Practical	Online & Practical			
Maintenance of update	Continuous	Continuous	Continuous			
Management of compliance	Done through Training Manager. Reviewed monthly					

References: Health & Social Care Act 2008 (Regulated Activities)

Health & Social Care Act 2008 (Regulated Activities)
Regulations, 2010

Outcome 12 (Regulation 21) Requirements relating to
Widows
Paragraphs
128, 129

Outcome 13 (Regulation 22) Staffing
Outcome 14 (Regulation 23)
Supporting Widows
Paragraphs 148, 149, 150, 151, 152, 153

Safeguarding

Safeguarding		
Document/Requirement	Document	Date

Safeguarding		Safeguarding		
Safeguarding		Document	Document	Date

Safeguarding		Safeguarding		
Safeguarding		Document	Document	Date

Safeguarding		Safeguarding		
Safeguarding		Document	Document	Date

Safeguarding		Safeguarding		
Safeguarding		Document	Document	Date

Safeguarding		Safeguarding		
Safeguarding		Document	Document	Date

Safeguarding		Safeguarding		
Safeguarding		Document	Document	Date

Safeguarding		Safeguarding		
Safeguarding		Document	Document	Date

Signature

Signature

Inspector (Use only if)		
Additional Inspectors	Comments	Author

where the information provided at this site was entered at the site visit, this folder may serve that purpose at this point

Governance Site Visit							
Check that vehicles are roadworthy in accordance with servicing schedules (minimum manufacturer's recommendations) and valid MOT certificates							
					Internal Use only (2021)		
Vehicles Inspected	Registration Number	Last Service Date & Mileage	MOT Certificate	Next service date & mileage	Site Visit Insurance	Comments	Auditor
Registration vehicle 1.							
Registration vehicle 2.							
Registration vehicle 3.							
Registration vehicle 4.							
Registration vehicle 5.							
Vehicles Inspected - Check the vehicles are service and safe	Registration Number	Lighting, Emergency lights and horns	Check for a regular planned maintenance programme, with individual vehicle records showing their regular history	Evidence of maintenance programme for additional equipment eg Sat. Nav, Stereo, etc.	Site Visit Insurance	Comments	Auditor
Registration vehicle 1.							
Registration vehicle 2.							
Registration vehicle 3.							
Registration vehicle 4.							
Registration vehicle 5.							
Vehicles Inspected (Must be accompanied)	Registration Number	Global Works Book / change log	Check for evidence that a daily vehicle inspection is completed	Car forms to be completed	Site Visit Insurance	Comments	Auditor
Registration vehicle 1.							
Registration vehicle 2.							
Registration vehicle 3.							
Registration vehicle 4.							
Registration vehicle 5.							
Vehicles Inspected	Registration Number	General condition of vehicle	Interior & Exterior Markings	Inspection of public facilities, movement and flow, barriers, equipment, etc. for all signs of potential hazards and dangers.	Site Visit Insurance	Comments	Auditor
Registration vehicle 1.							
Registration vehicle 2.							
Registration vehicle 3.							
Registration vehicle 4.							
Registration vehicle 5.							
Vehicles Inspected	Registration Number				Site Visit Insurance	Comments	Auditor
Registration vehicle 1.							
Registration vehicle 2.							
Registration vehicle 3.							
Registration vehicle 4.							
Registration vehicle 5.							
Vehicles Inspected	Registration Number				Site Visit Insurance	Comments	Auditor
Registration vehicle 1.							
Registration vehicle 2.							
Registration vehicle 3.							
Registration vehicle 4.							
Registration vehicle 5.							

Reference:

Health & Social Care Act 2008 (Regulated Activities) Regulations 2010
Outcome 32 (Regulation 15): Safety and Suitability of Premises
Paragraph 32D

Governance Inspection Visits (GIV)

Instructions To Suppliers

National Clinical Performance Indicators (CPI)

DRAFT

In light of changing clinical demands and services, national clinical performance indicators for ambulance services were developed to provide a focus on clinical indicators as an alternative to indicators based primarily on response times. The NCPI programme has been running since 2007 and as a Trust we submit data so that a national report on the progress on the national clinical performance indicators can be produced.

Internal Use only (ITT Call Off)		
Selection Questionnaire	Comments	Auditor

CPI / AQI monitoring	Governance Inspection Visit (GIV)	Internal Use only (GIV)		
		Site Visit Assurance	Comments	Auditor
Provide your Policy / procedure related to CPI / AQI				

Selection Questionnaire	Governance Inspection Visit (GIV)	Internal Use only (GIV)		
SQ 6.1.5 Using your most recent and relevant contracts please provide details of the quality assurance measures that are in place to ensure clinical performance monitoring and auditing were provided. In the response Bidders must explain any technical measures in place to monitor and/or address:				
Clinical Training (of staff)				
Monitoring of patient care and outcomes				
Acknowledging patient complaints and reviewing practice accordingly				
Training and familiarisation of staff in line with local clinical pathways				

Learning Lessons	Governance Inspection Visit (GIV)	Site Visit Assurance	Comments	Auditor
Evidence staff awareness of requirements				
Audit process and feedback procedure in place				
Evidence of AQI/CPI or incident data being used to inform practice and develop care				

Leadership, monitoring and oversight	Governance Inspection Visit (GIV)	Site Visit Assurance	Comments	Auditor
Evidence of good Clinical Governance				

Reference:

Availability and Resource Management (SR)

DRAFT

Internal Use only (ITT Call Off)		
Award Evaluation	Comments	Auditor

Instruction to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be expanded on during the 2nd stage ITT Call off

Call Off Questions	Bidders Response (max 300 words)	Internal Use only (GIV)		
		Site Visit Assurance	Comments	Auditor
Please provide details of how you intend to meet our requirements and deliver the right resources, on time and at the right place to ensure clinical targets are successfully met.				
Please provide your process and timeline for not being able to honour a committed shift?				

In 2004, the United Kingdom enacted the Civil Contingencies Act 2004, a statute that instructs all emergency services and local authorities to actively prepare and plan for emergencies. Local authorities also have the legal obligation under this act to actively lead promotion of business continuity practices in their respective geographical areas.

Instruction to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be dependent on during the 2nd stage TTT Call off.

Internal Use only TTT Call Off		
Second Evaluation	Comments	Author

Clinical Improvement Strategy		Governance Inspection Visits (GIV)			Internal Use only (SR)	
		Site Visit Assurance	Comments	Auditor		
Provide a copy of your Clinical Improvement Strategy, version and date last reviewed?						
Evidence of Recent Review						
Call Off Questions (Example)		Bidders Response (max 200 on each question)		Site Visit Assurance	Comments	Auditor
Please provide details of the quality assurance measures that are in place to ensure clinical performance monitoring and auditing were provided in the response Bidders must as a minimum, detail and evidence areas such as: Clinical Governance, Medicines Management, Complaints, Safeguarding, Patient Confidentiality, Risk Management						
Call Off Questions (Example)		Bidders Response (max 200 on each question)		Site Visit Assurance	Comments	Auditor
Please provide details of your organisation wide clinical supervision process						

Reference:

Instruction to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be expanded on during the 2nd stage ITT Call off

Internal Use only (ITT Call Off)		
Award Evaluation	Comments	Auditor

Call Off Questions			Internal Use only (GIV)		
Management Information Reports Required		Bidders Response (YES/NO)	Site Visit Assurance	Comments	Auditor

The Authority(s) will determine in their respective Specific Requirements (SR) the Schedule of Contract Management Checks they require from their supplier(s) during the life of their call off contract

Ref	Area	Initial Check	6 months	Annual	Site Visits Planned TBA	Quarterly by 3rd of: July, October, January, April	Monthly	Directorate Input Req'd
1	Company Details							Procurement - Details to be sent to Procurement
2	Equipment							Ops / Fleet
3	Major Incident Support							Ops
4	Operational Policies							Ops & Clinical
5	Medical Devices Management							Clinical
6	Infection Prevention and Control							Clinical
7	Vehicles and Equipment							Ops / Fleet
8	H&S							Clinical
9	Training							OO / HR
10	Patient Experience							Clinical
11	Training Mandatory							OO / HR
12	Training Records							OO / HR
13	Training							OO / HR
14	Staff handbook							OO / HR
15	Equality and Diversity							Governance
16	WTD							OO / HR
17	Driving Licence							OO / HR
18	DBS							OO / HR
19	Insurance							Procurement - Details to be sent to Procurement
20	Business Continuity							Ops - To be sent to Procurement
21	General Disclosure							Procurement - Details to be sent to Procurement
22	Occupational Health							OO / HR
23	Safeguarding							Clinical
24	Medicines Management							Ops / Fleet
25	Work wear PPE							Ops
26	NHS Employee Checks Standards							Procurement - Details to be sent to Procurement
27	Data Protection							Ops / IT
28	Bariatric							Ops & Clinical
29	Clinical and Quality							Ops & Clinical
30	Evidence of corporate and local induction for staff working on EMAS contract							To PAS email address for assurance and checking by Leads
31	Evidence of Appraisal							To PAS email address for assurance and checking by Leads
32	Maintenance and Cleaning schedules in place for vehicles and equipment							To PAS email address for assurance and checking by Leads
33	Deep clean compliance - including emergency deep cleans							To PAS email address for assurance and checking by Leads
34	Incident reporting							To PAS email address for assurance and checking by Leads
35	Inoculation injury management							To PAS email address for assurance and checking by Leads
36	IPC Audit Data							To PAS email address for assurance and checking by Leads
37	Audit results							To PAS email address for assurance and checking by Leads
38	Report to QGC							Ops Lead with input from Clinical Lead
39	Operational KPI's							Ops Lead with input from Clinical Lead
40	Clinical Quality Indicators (As per national audit plan)							Clinical Lead and Clinical Audit Team
41	Review meetings							Ops and Clinical Lead with input from others as required
42	Verbal contact as and when required but minimum of once per month							Ops and Clinical Lead with input from others as required

Contract Management: Key Performance Indicators (KPI)

DRAFT

Introduction to Bidder: The Authority will determine their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be expanded on during the 2nd stage (ITT call off)

Contract ID: 001 (ITT Call Off)		
Award Evaluation	Comments	Author

Contract ID: 001 (ITT Call Off)		
Award Evaluation	Comments	Author

Ref	Key Performance Indicator (KPI)	Criteria	Performance Measurement	Method	Frequency	Consequence	Target Threshold	Bidders Response (Yes/No)	Comment	Internal Use only (BID)		
										Site Visit Assurance	Comments	Author
	Technical Ability	Is the supplier meeting all the objectives in the SR & Contract Terms?	Number and or occasions when the SR & Contract Terms has not been maintained	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust	Non compliance may lead to removal of Provider from the Trust's Suppliers' Framework	100%					
	Customer Services	Reliability and competence Consistency of performance, dependability, accuracy of work, available skills and knowledge of all personnel involved in service provision	Number and/or seriousness of occasions when work has to be amended/ corrected	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust							
	Customer Services	Access, Approachability, ease of contact	Convenience of facilities. Prompt access to staff during normal office hours and, in case of emergency, at other times	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust							
	Customer Services	Courtesy, Politeness, respect, consideration of others, including all personnel in contact with the Force and the public.	Number of justified complaints received about the service	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust							
	Customer Services	Communication: Listening, keeping clients informed at appropriate times and in plain language, including response to complaints.	Failure in communicating: complaints recorded and acknowledged/resolved within five working days of receipt	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust							
	Service Level	Responsiveness: Timeliness, speed of response times, willingness, readiness to respond.	Vehicle Response times met: All communications answered promptly	Management Information Reports on activities	At annually or as when required by the Trust							
	Service Level	Security: Freedom from risk or doubt (physical, mental or financial), confidentiality	Loss of property, failure to maintain confidentiality	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust							
	Vehicle & Equipment Quality	Responsiveness of vehicles and equipment, maintained and available at all times in line with SLA	Ensuring vehicles and equipment are maintained and available removing elements of VOR	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust							
	Quality and Technical	Reliability/Trustworthiness, believability, honesty, integrity	Confidence in advice given. Number of indications from departments or third parties of dissatisfaction.	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust							
	Quality and Technical	Attention to needs, making effort to understand those and adaptability to the Trusts requirements	Number of occasions when the Trusts needs not clearly understood	CV/ Staff & Patient & Acute Feedback, MI Reports	At annually or as when required by the Trust							
	Reputation	Reception of public and political implications or Trusts values, Reputation & Trustable	Occasions of public concern and adverse media comment. V Positive Customer feedback and great user review	Complaints, Adverse Media / Press & Positive Media	At annually or as when required by the Trust							
	Service Level	Provision of services	All shifts booked and confirmed must be provided.	At monthly or as when required by the Trust	At annually or as when required by the Trust	If Provider fails to provide a total of 9% of the shifts over a period of 2 months, the contract would be reviewed with a view of removing the Provider from the Trust's Suppliers' Framework	100%					
	Service Level	Incomplete shifts	Booked and confirmed shifts must be completed including late shift starts	On receipt of invoice	At annually or as when required by the Trust	100% credit value for the lost shift hours will be credited by the Provider	0%					
	Service Level	Late shift cancellation with 24 hours	All shifts booked and confirmed must be provided.	On notification of cancellation	At annually or as when required by the Trust	100% credit of value of the shift will be charged to Provider for cancelling a shift within 24 hours.	0%					
	Service Level	Response Times	R1, R2 and G2 responses must be made within the national standard set time.	Quarterly or as when required by the Trust	At annually or as when required by the Trust	Non compliance may lead to the contract being reviewed with the view of the Provider being removed from the Trust's Suppliers' Framework	as per R1, R2 & G2 National %					
	Service Level	Non-compliance	All non-compliant patients must be registered with IBS desk (exclude exceptions i.e. cage type and non-consent)	At monthly or as when required by the Trust	At annually or as when required by the Trust	Non-compliance may lead to the contract being reviewed with the view of the Provider being removed from the Trust's Suppliers' Framework	100%					
	Service Level	Hospital handover	Hospital handover process must be completed within the national targets	At monthly or as when required by the Trust	At annually or as when required by the Trust	Provider to bear all penalties imposed on Trust for non-hospital handover compliance	100%					
	Service Level	Availability of Response/Resource	Provider must be back clear within 5 minutes of completion an incident	At monthly or as when required by the Trust	At annually or as when required by the Trust	100% credit value for the lost shift hours will be credited by the Provider	98%					

Cost Savings Initiatives

DRAFT

Instruction to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be expanded on during the 2nd stage ITT Call off

Internal Use only (ITT Call Off)		
Award Evaluation	Comments	Auditor

		Internal Use only (GIV)		
Cost Savings Initiatives	Bidders Response (Max 400 words)	Site Visit Assurance	Comments	Auditor
Indicate where you can see potential cost saving initiatives?				
Provide your project plans and detail how you would implement the cost saving initiatives?				

Instructions to Bidder: The Authority(s) will determine its/their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be expanded on during the 2nd stage of ITT Call off.

Infection Prevention & Control (IPC)		
Assess Evaluation	Comments	Author

Infection prevention & control policy		Governance Inspection Visit		
		Site Visit Assurance	Comments	Author
Provide a copy of your Infection Prevention & Control Policy, version and last reviewed date. It includes Uniform and workwear and bare below the elbows.				
Evidence of IPC Good Practice		Site Visit Assurance	Comments	Author
Staff training and lesson plans, training is compliant with Skills for Health level 2 and 3.				
Evidence of deep cleaning schedules including frequency and standards of cleaning.				
Evidence of hand hygiene audits including bare below the elbow and appropriate use of gloves.				
Audit forms available				
Evidence the vehicles meet the cleanliness requirements of the NHSA criteria		Site Visit Assurance	Comments	Author
Registration vehicle 1:				
Registration vehicle 2:				
Registration vehicle 3:				
Registration vehicle 4:				
Registration vehicle 5:				

Reference: Health and Social Care Act 2008, Code of practice for the prevention and control of infections and related guidance (updated July 2015)
Health & Social Care Act 2008 (Regulated Activities) Regulations 2010
Regulation 31: Safe Care and Treatment
Health & Social Care Act 2008 (Regulated Activities) Regulations 2010
Regulation 35: Safety and Suitability of Premises
Paragraph 106

Instructions to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call-off contract in this section. This is set up as an example and will be expanded on during the final stage of COT Call off.

Medical (to only COT and SR)		
Point for bid	Comments	Author

Medical Equipment Management	Bidders Response (Use AEE words)	Medical (to only COT)		
		See SRB Assurance	Comments	Author
Provide your purchasing policy for the selection of medical equipment, version and date last reviewed. All medical equipment should be CE marked.				
Confirm your maintenance of medical equipment is managed on an appropriate schedule (Manual or Electronic)				
Confirm your Medical Equipment Manufacturer's instructions for all equipment are available for all staff				
Confirm procedures in place to receive and disseminate medical device related alerts, recalls, CTS and other				
Confirm there are protocols and Service Level Agreements in place for external medical device repairs, calibration and fit testing.				
Review Evidence	Governance Inspection Visit	See SRB Assurance	Comments	Author
Verify technical evaluation reports when commissioning new equipment?				
Verify medical equipment records of purchase and payments.				
Verify staff trained to use all the medical equipment used?				
Verify the use of single use items and training guidance to staff.				
Monitor procedures?				
Verify procedures are in place for cleaning and decontamination of medical devices in accordance with Manufacturer's instructions MIRA guidelines?				
Verify there is testing and maintenance of all equipment, parts maintenance logs?				
Verify procedures are in place to report damage or malfunction of medical devices?				
Verify procedures are in place to remove and label faulty equipment for repair?				

All equipment should be maintained & Clean		Governance Inspection Visit		Medical (to only)	
Medical Equipment & Devices	Notes	See SRB Assurance	Comments	Author	
Equipment 1					
Equipment 2					
Equipment 3					
Equipment 4					
Equipment 5					

Reference: NHS & Social Care NHS 2019 (England) Medical Regulations 2019
Schedule 12 Regulation 12: Safety and suitability of equipment
Paragraph 11A, 11B, 11C, 11D, 11E, 11F

Instruction to Bidder: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be expanded on during the 2nd stage of ITT Call off.

Internal Use only (ITT Call off)		
Award Evaluation	Comments	Author

Medicines Management Policy	Bidders Response (Max 400 words)		Internal Use only (ITT)		Auditor
			Site Visit Assurance	Comments	
Provide your Medicines Management Policy and state last revision					
Provide your Medicines Policy and Pharmacy SOPs in relation to Control of Drugs (CD)					

Pharmacy Suppliers (Names)	Bidders Response (Max 400 words)		Site Visit Assurance	Comments	Auditor
Colchester Hospital					
Colchester Pharmacy - Auxiliary					

Verify compliance with reporting medicines incidents with Medicines and Healthcare products Regulatory Agency (MHRA)	Governance Inspection Visit		Site Visit Assurance	Comments	Auditor
Policy in place					
Education of staff, update and follow up					
Staff 1					
Staff 2					
Staff 3					

Verify staff training and records are maintained in relation to Medicines Training	Governance Inspection Visit		Site Visit Assurance	Comments	Auditor
Member of staff	Name	Grade			
1	Mr. Smith				
2					
3					
4					

Inspect storage and security of medicines in premises and on vehicles - All in date and clear with no damage (Medicine acceptable to IPC)	Governance Inspection Visit		Site Visit Assurance	Comments	Auditor
Verify appropriate storage of drugs in line with range, storage, security, controls etc.					
Registration vehicle 1					
Registration vehicle 2					
Registration vehicle 3					
Registration vehicle 4					
Registration vehicle 5					
Building 1 - Reception				Control space for COT - not suitable drug bags	
Building 2					
Building 3					

Check company handbook for controlled drugs, in particular alterations, notes held by individual Paramedics	Governance Inspection Visit		Site Visit Assurance	Comments	Auditor
Register book, date and next registration date				1 day	
Last book Take Note of all Medicines held				25/12/2024	
Current book details for each drug are not too tight or too loose					

Reference:

Health & Social Care Act 2008 (Regulated Activities) Regulations 2010

Section 9 (Regulation 12) - Management of Medicines

Paragraphs 46, 48, 49, 50, 51, 52

Instructions to Bidders: The Authority(s) will determine to their respective Specific Requirements (SR) what they require from their suppliers during the life of their self-off contract in this section. This is set up as no margin and will be awarded on during the 2nd stage of ITT Call off.

Internal SR only (SR 100)		
SR#	Comments	Auditor

Internal SR only (SR1)				
Patient Satisfaction	Bidders Response (Max 400 words)	SR Text Requirement	Comments	Auditor
Provide a copy of your Patient Care & Complaint Handling Policy, process and self-assessment audit				
Patient Handbook Requirements				
Incidence of Patient satisfaction surveys and outcomes, any trends/ trends				
Complaints, Serious Incidents (SI) and concerns	Bidders Response (Max 400 words)	SR Text Requirement	Comments	Auditor
Confirm what arrangements are in place to receive, investigate and resolve complaints, before becoming SI, and concerns				
Provide how you will ensure that SI are reported to any complaints proceedings which will be led by a nominated Trust manager within agreed timeframe. Evidence will be provided to ensure no impact on patient waiting for external agencies, e.g. Police or NHS Care				
Governance Inspection Visit		SR Text Requirement	Comments	Auditor
Incidence of information provided to patients providing correct details for complaints/ concerns to be raised				
Incidence of appropriate investigation processes including gathering information, report production, monitoring of themes and trends and trends/ trends				
Investigation Review 1				
Investigation Review 2				
Investigation Review 3				

Reference:

Health & Social Care Act 2012 (Regulated Activities) Regulations 2013

Instruction to Editors: The Author(s) will determine if their respective Special Requirements (SR) that they require from their assignment during the life of their staff/off contract in this section. This is set up as an example and will be expanded on during the 2nd page of the call off.

Bariatric Policy	Bariatric Response (max 200 words)	SR SR SR	Comments	Author
Provide copy of your Bariatric Policy, version and last reviewed date.		SR SR SR		
Provide your process for accepting and assessing bariatric patient's posture.				
Evidence of multi-agency meetings (Understanding of the service capabilities)				
Evidence of CQUA assessments or appropriate equipment, Evidence of risk assessments and safe systems of work (where relevant)				

Bariatric Equipment Sourcing	Governance SR SR	SR SR SR	Comments	Author
Bariatric Equipment list		SR SR SR		
Bariatric Equipment service schedule				
Bariatric Equipment service maintenance records				

General	Governance SR SR	SR SR SR	Comments	Author
Completion chart (logbook/notes/journals or app provided to all staff and on ambulances)				
An understanding of multi-agency bariatric ventilation using airways, head holder, pillows and appropriate techniques.				
A basic understanding of the altered bariatric anatomy and physiology and how this may affect them.				
A comprehensive understanding of bariatric clinical management approaches to their clinical goals (bariatric specific respiratory assessment and management)				

Risk	Governance SR SR	SR SR SR	Comments	Author
Risk assessments specific to each piece of equipment				
Transporting bariatric patients in vehicle (logbook/notes/journals) in a vehicle				
Transporting bariatric patients in vehicles (citing (lift or in ambulance if not)				
Assessing bariatric patients with varying abilities to or from beds				
Assessing bariatric patients with varying abilities to or from chairs				
Handling bariatric patients (lying or sitting) within buildings (corridors, stairs, lifts, stairways etc.)				
Assessing bariatric patients to walk on the flat, on slopes and on stairs				
Handling bariatric patients (lying or sitting) in different beds within a building				
Transporting bariatric patients (lying or sitting) in a variety of exterior locations (gravel, kerbs, steps etc.)				
Managing the risks associated with the use of beds on stairs and barriers, i.e. maximum staff numbers allowed in the risk zone.				
Assessing a bariatric patient from the floor with a variety of clinical complaints.				
Removing a bariatric patient from awkward or restricted space				

Vehicle & Equipment Bariatric only	Governance SR SR	SR SR SR	Comments	Author
Secure methods of securing trolley/cots or wheelchairs in vehicles and through meet and conform to manufacturers recommendations				
Secure that provision of patient safety devices such as seat belts are made effectively long (1.8m / 2m length maximum belts)				
Bariatric capable trolley/cot (that manually raised)				
Tracked or power assisted carry chair suitable to meet				
Variety of threshold ramps or wedges suitable for a variety of vehicles				
Secure any loading mechanism (pump and wheel, or rail lift) has sufficient width and Safe Working Load (SWL)				
Selection of bariatric manual handling belts and aids (slide sheets, pad slides)				
Offing cushion (e.g. Mageri SLACare)				
Bariatric manual trolley based or manual trolley or manual stretcher (capable of 2000kg)				
Safe working load printed on each piece of equipment				
Threats specific to each piece of equipment				
Vehicle designed and loaded to ensure that side weights are not exceeded when transporting bariatric patient				
Not have any external vehicle markings mentioning bariatric to maintain patient dignity				
Have the ability to safely transport two attendants with the patient in the ambulance				

Bariatric Patient Care, Vehicles and Equipment	Author
Bariatric Patient Care, Vehicles and Equipment	Author

Instruction to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their suppliers. During the Staff of their self-off contract in this section. This is set up as an example and will be repeated on during the 2nd stage of RTT Call-off.

Recruitment Strategy	Bidders Response (max 200 words)	Internal Register (SR)	Comments	Auditor
Please provide a copy of your Recruitment Strategy				
Please provide a statement to clarify and support your Recruitment Strategy is sustainable				
Please provide evidence of how you manage staff performance				
Induction & Development	Bidders Response (max 200 words)	Internal Register	Comments	Auditor
Please provide your annual training and development plans in place for your staff	Database evident		CPD for clinical staff management training for management Clinical & Non clinical management training for SRHs	

Staff Handbook	Governance Site Visit					Internal Register (SR)	
Evidence of staff handbook, induction, guidance and operational instructions. In line with the current skills for health UK Core (SRH) Training Framework (2021)	1	2	3	4	5	Internal Register	Auditor
Handbook available	✓	✓	✓	✓			
Uniform (wearing and cleaning, including laundry facilities)	✓	✓	✓	✓			
PPE - cleaning, handwashing, bare below the elbows	✓	✓	✓	✓			
Scrubbing	✓	✓	✓	✓			
Adherence	✓	✓	✓	✓			
Access to water	✓	✓	✓	✓			
Sanitary, disinfection and management of soap	✓	✓	✓	✓			
Clinical waste (infectious and sharps)	✓	✓	✓	✓			
Laundry	✓	✓	✓	✓			
Confidentiality	✓	✓	✓	✓			
Children's privacy	✓	✓	✓	✓			
Incident response	✓	✓	✓	✓			
Self-reporting	✓	✓	✓	✓			
Screening	✓	✓	✓	✓			
Health, Safety and Human Rights	✓	✓	✓	✓			
Health, Safety and Welfare - including reporting incidents	✓	✓	✓	✓			
First Aid/First Aid Kits	✓	✓	✓	✓			
Fire Safety	✓	✓	✓	✓			
Medical waste handling operations/techniques	✓	✓	✓	✓			
Infection Prevention and Control	✓	✓	✓	✓			
Self-reporting incidents	✓	✓	✓	✓			
Self-reporting Children	✓	✓	✓	✓			
Reporting incidents	✓	✓	✓	✓			
Information Governance	✓	✓	✓	✓			
Have Staff received training in respect of medical legal obligations over the need to complete accurate and comprehensive notes?	✓	✓	✓	✓			

does not have access to the Portal to upload completed staff induction

Reference:

Health & Social Care Act 2008
Regulated Activities Regulations
SRH
Skills for health UK Core Skills
Training Framework version 1.1
Document 12 Regulation 12)
Regulations relating to Workers
Practising
SRH, UK
Document 13 Regulation 22)
Staffing
Document 14 Regulation 40)
Qualification, Skills etc.

Instruction to Bidders: The Authority(s) will determine in their respective Specific Requirements (SR) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be expanded on during the 2nd stage if ITT Call off

Internal Use only (TTT Call Off)		
Award Evaluation	Comments	Author

Uniform Policy and Dress Code		Governance Inspection Vids (25%)	Review (due only 20%)	
Does provide a copy of your Uniform, Dress Code and PPE policy, written control and last review date?			Use Visit Instance	Comments
				Author
Infection control / temperature washing of garments?		Governance Inspection Vids (25%)	Review (due only 20%)	
Confirm instructions for care are IPC Compliant			Use Visit Instance	Comments
ISO Approved				Author
Provide a list of your PPE provided to crews?		Governance Inspection Vids (25%)	Review (due only 20%)	
Equipment	Manufacturer		Use Visit Instance	Comments
				Author
Helmet				
Reflective Jacket				
Eye protection				
Boots (with appropriate protection)				
First Aid kit				
Apron, gloves, sleeve protection and coveralls				

Reference:

Health & Social Care Act 2008 (Regulated Activities)
Regulations 2010 (SNI671:1994) or 2010 The Name or
trademark
or other means of identifying
the manufacturer, or his
authorised representative.
2. The product type,
commercial name or code
must be indicated
e.g. Class 2 Warning
Clothing.
a. The CE mark
b. The CEN standard
c. EN671:1994
5. A pictogram indicating:
a. The Garment Class
b. The Class of
extraordinary material
c. Garment size

not written to Bidders. The Authority(s) will determine its their respective Specific Requirements (SRs) what they require from their supplier(s) during the life of their call off contract in this section. This is set up as an example and will be repeated on during the 2nd stage of ITT Call off. NOT for Evaluation but as specific agreement as appropriate for each call off contract.

Internal Site Visit (SRs)		
Award Evaluation	Comments	Auditor

Evidence of guidance to staff concerning the requirements of the WTD		Internal Site Visit (SRs)		
Bidders Response (max 200 words)		Site Visit Assurance	Comments	Auditor
Provide your Policy, version and date last reviewed. Evidence of providing annual leave in line with statutory minimum (28 days inclusive of Bank holidays). This should all be covered in a policy				
Monitoring procedures to ensure compliance with WTD		Governance Site Visit		
Evidence of any opt out Agreements that are reviewed on an bi-annual basis.		Site Visit Assurance	Comments	Auditor
Evidence of providing annual leave in line with statutory minimum (28 days inclusive of Bank holidays).				

Reference:

ITT Award Evaluation Score

5	Exceeds Requirements (5)
4	Pass: Meets Requirement: Gives Confidence (4)
3	Satisfactory with minor improvements required (3)
2	Fail: Does not meet requirements. Needs to make significant changes (2)
-1	Fail: Does not meet CQC: Grave concerns (-1)

* Where a bidder scores 2 or less on any section they will leave the process at that point.

Patient and crew safety is uppermost in our decision making process. Exacting standards are therefore required

The information below was gathered from a visit to SGS UKSAS on the 19th December 2018. The attempt is to ascertain assurance that the practices and processes regarding IP&C, and some other elements such as equipment management, are of an adequate standard to ensure safety for staff, patient and all groups associated with the line of care.

The information was gathered from the following people (names can be provided if required)

- Commercial Director
- Governance Director (appointed responsible for IP&C, but was only available for a short
- Interim Stores Manager
- Clinical Governance Supervisor.

Policy

I have reviewed the company's Infection control policy and the following are some of the

key actors I have found:

- The policy clearly outlines that the intention of the policy is to act as a reference guide for all staff in the aim to minimise infections. Also, that as a healthcare provider, the company staff must adhere to the procedures set out in the 'Health and Social Care Act 2008 Code of Practice for the Prevention and Control of Health Care Associated Infections'.
- The policy does outline the cause, transmission and effect of infection. It does not make reference to the 'Chain of Infection'. However, the basic principles can be determined in this context. This also highlights the importance elements such as hand hygiene, general hygiene, PPE, uniform care, waste/sharps management, single use items, risk assessment and communication. With regards to the use of single items, the policy states that if used the item is reused, then the clinician bears the responsibility. If the item is stated as single use by the manufacturer, then the item should be used once, this should be mandatory
- Hand washing is termed as most important and several pages are dedicated to it with
- In the sections regarding Hand Hygiene the standard moments of hand hygiene are
- Within the Hand Hygiene sections in states that no false nails or jewellery, etc should be worn which can be considered the bare below elbows policy, however, it is not referred
- Available PPE and uses are listed in the policy, which conform to the standard

- The separation of healthcare sharps and waste is outlined which also includes instruction for occupational exposure/needle stick incidents. This section differentiates and defines clinical waste and domestic. However, the section only refers to clinical waste as one type and refers to the use of yellow bags. The vehicles and station appear to be using orange bags and the yellow bags are available. Orange bags are acceptable to be used as infectious waste but are a lower grade than yellow bags. Orange bags can be alternatively treated whereas yellow must be incinerated. The use and disposal of orange bags may not be incorrect. but clarity and consistency from the policy to practice should be implemented.
- The NSPA colour coding regarding the use of mop buckets is outlined but does state buckets should be stored inverted and mentions that mop heads should be changed weekly
- The policy does state that kitchen sinks should not be used to fill mop buckets
- There is no mention of asepsis and/or ANTT.
- The policy briefly mentions vehicle cleaning and refers to a vehicle deep cleaning manual which I have acquired separately.

Uniform

- As mentioned, the policy does state that no rings, wrist jewellery, watches, nails, etc are permitted and that hair must be tied back if long.

The policy states that the uniform items should be washed in accordance with the manufacturer's instructions. The label of the uniform seen did state to wash at 60 degrees,

Training

- I have been informed that new staff are given a mandatory statutory initial induction module which consists of a Powerpoint presentation (which I have not reviewed), and also
- The staff are then required to complete skills for health online module which covers
- The certificates and co-signed papers for completion are stored in each employees files and I saw evidence of one of these.
- The online system gives notification of when an employee is due to complete an assessment and also provides feedback of low scoring areas that require further training. I did not see any figures as to how compliant the company is with the staff annual update

Deep cleans

- There is a six week deep cleaning schedule for all vehicles
- The general practice would also include a full deep clean if the vehicle has been away

- Compliance with the schedule is currently 68%. I have been sent a copy of the spreadsheet, which includes the deep clean data. I was shown previous data that showed they were at 91% compliance until recently due to the loss of vehicle cleaners and have now had the staff replaced. This should facilitate an increased compliance with the deep
- The deep cleaning process incorporates an initial fog misting system, followed by removal of equipment, a full wipe down with vehicle based wipes (which have a log reduction of 99.999%, according to the website). The vehicle is then misted with an anti-microbial shield. The process appears thorough. However, I cannot state the efficiency of the fog misting without further research into the product. Due to this being a deep clean, if the fog system is an effective decontaminant that kills all organisms, I would suggest that the use of wipes to clean always may be replaced with hot water, disposable cloths and an approved detergent. The reason for this is that the vehicle should be free of infectious pathogens due to in between patient cleans and/or the fogging process, so a more effective way to remove daily dirt, grease, grime and debris would be hot water and detergent which
- This vehicle cleaning guidance is based purely on the six week deep clean. There is no policy or guidance regarding the other types of vehicle cleaning. The policy/manual should include information and instruction regarding the other types of vehicle decontamination. This would include a statement of what elements must be decontaminated with disinfectant wipes in between patient conveyances. I did see a document which is attached to the crews' daily running sheet which requires parts of the vehicle to be checked off as cleaned.
- The Infection Control policy does refer to the use of sodium Dichloroisocyanurate or NaDCC for disinfection. I did not see this product available. The vehicle cleaning manual could include the process that is expected during instances of gross contamination of bodily fluids or due to the presence of potentially highly infectious organisms. There is not enough information available on station, or in the policies I was provided, to determine the effectiveness of the decontamination process. Clinell spill wipes were available on vehicles

Audits

Two types of Infection control audits were available. These audits have been implemented within the past two months. There have been several 'Clinical Governance Supervisors' employed recently and they are responsible for conducting these audits in between and during patient care episodes. The supervisor stated that he goes out at least 3 times per week to conduct the ride outs and audits but there is no set quantity of audit required as

Operational Handwashing Audit

- This audit is carried out by the supervisor and is to assess if the member of staff being audited decontaminates the hands prior to and post patient contact.
- The audit also assesses the technique to ensure the member of staff follows the seven
- The auditor also uses UV cream and a portable UV light to assess areas of ineffective
- The audit states that any point that has received a 'no' must be raised with the crew member and must be documented.

Operational Vehicle Cleanliness Audit

- This vehicle audit is carried out during the shift and is an audit of the crew's processes
- The first part of the audit asks whether a correct antibacterial wipe down of all equipment that has come into contact with the patient or other person has been completed
- The audit asks if the clinical and domestic waste has been separated correctly.
- The audit also asks if the vehicle is clean visibly. The company intends to use ATP (Adenosine Triphosphate) swabbing. They do have the machines in the stores but do not have the swabs, so this part of the audit cannot currently be conducted. The audit includes
- Any audit fails must be raised with the crew and documented.

Premises

The station has an external contract cleaner. The parts of the station viewed were the reception and offices, the medical consumables stores, the kitchen, toilets and the

Reception, offices and kitchen

- These areas appeared clean tidy and in serviceable order.

Toilets

- Were clean and had a hand hygiene sink, liquid soap and washing technique posters
- Foot operated bin was in the area also.

Running medical equipment stores

- The area is laid out with all consumables in washable plastic containers.
- The area is neat, tidy and adequately clean. Some items and boxes were stored on the floor instead of on the shelving.
- There is a system of putting a red label on equipment that is either out of service date or is faulty. Equipment that is faulty is being stored mixed in with working equipment and is grouped by equipment type. The serviceable equipment is not stored separately from the
- A bar code system has been implemented to book consumables or equipment in and
- A 'Make Ready' processes is used. A list of items is handed into the stores that have been used on a vehicle during a shift. Before the next crew takes the vehicle, the stores personnel will put the items together for the following crew. A tagged bag system is also
- All consumables and equipment that are required were available and I have further details of the equipment manufacturers if required.

- An external company is being used to repair and service the medical equipment. However, this is in the process of changing to another company that will be able to service all of the vehicle based equipment (trolley, scoop, etc) as well as the items such as
- An external PAT testing company is used. The first three items I inspected in the stores were out of date for PAT testing.

Garage and wash bay area

- The garage is clean.
- There is a screened off wash bay and vehicle cleaning area which has clinical and

Waste

- There is a clinical waste and sharps disposal area which has some signage on the wall regarding separation of waste.
- On inspection the large waste was 100% instead of being emptied at 75%.
- All sharps had been labelled and closed correctly.
- The clinical waste bags are not labelled with a station identity label in order to facilitate traceability from point of production to point of destruction.

Linen

- Linen is being disposed of in a plastic bin next to the dirty utility sink is also next to the washing, handling and storage of clean linen.
- None of the used linen had been put in plastic bags and was exposed.

Dirty utility

- There is a low level sink available to fill up mop buckets and the NSPA colour coding
- All required coloured mop buckets and handles were available.
- No signage was seen regarding the inverted storage of mop buckets.

Vehicle

- The vehicle inspection carried out found no out of date equipment or consumables. One item had an out of service sticker on it but on further inspection the item had an in date service stick also. This oversight was stated to be due to the change in companies that
- The vehicle was generally clean. Some debris was found in the cab but the patient treatment area and the exterior were of a visibly clean standard.

- All equipment, wipes and PPE were available
- The clinical waste bags do not have a way of fixing inside the vehicle properly. There is a lidded area to put the bags but nothing to hold them in place. The bags are being tied to the metal arm that holds the lid. This results in the bags being ripped and insecure.
- A domestic waste bin was not available.
- A secure labelled sharps box was available.

Summary of positive outcomes

- IP&C is a Governance agenda item and a policy is in place.
- General station cleanliness was found to be compliant
- Vehicle cleanliness was found to have high compliance.
- Hand hygiene is promoted. Sanitiser is available where required. Hand Hygiene audits are conducted, the process appears thorough and will train staff well if conducted correctly.
- The implementation of the Governance Supervisor to conduct vehicle and staff audits.
- The audits conducted are dealing with the crew's ability to perform hand hygiene correctly and clean the vehicle correctly. Non compliances are being discussed at the point
- Updates regarding equipment were available on the stores noticeboard.
- The uniform policy incorporates a 'Bare Below Elbows' policy. The company does adopt the BBE policy of the Trust they are working for.

Considerations and areas for improvement

- The infection control policy and cleaning manual do not contain information regarding all types of vehicle decontamination. Some of the products available are inconsistent with the products named in the policy. The processes are not clear for the policy.
- The store requires to be organised in such a way that faulty and out of service equipment are not stored mixed with serviceable equipment. The areas should be clearly
- The information was not readily available for staff. The staff asked did not know where to find the IP&C policy, the COSHH book or the vehicle cleaning manual. Posters displaying where this information is held can be used or shelving with all the hard copies of
- Information regarding the linen disposal processes was not available and the linen had been left exposed over the side of a black plastic bin. No plastic wash bags were used. Posters in the area with instruction a clear outlines in the policy are needed.

- The garage area and area for washing vehicles/equipment has no hand hygiene sink.
- Continuity of available waste bags and policy is missing from one part of the policy. This appears to be an oversight and the orange waste stream is used was disposed of correctly but the policy does refer to yellow bags and yellow bags were available in the store. This is to ensure that yellow and orange waste must not be mixed and that waste is
- The waste receptacle on the vehicle requires to be modified because the bags are not secure and are being tied to the lid arm. This is causing ripped bags and insecure waste. No domestic waste disposal was available on the vehicle.
- Areas of the garage are not separated such as the dirty utility sink and the clean and used linen areas are all in one place and would be able to be separated with the space
- The audit schedule and process is very new. The current policy is not being adhered to due to having no availability of ATP swabs available. The process can be broader with an implemented reporting schedule to collate the data that is collected and give overall compliance results which are not currently available. There are audits available and they

Further information desired

- The full vehicle decontamination process in cases of gross bodily fluid exposure or highly infectious pathogen presence. This should include the potential use of single use
- There is a policy for occupational exposure incidents, so the follow up procedure to the incidents needs to be verified.
- The primary induction training presentation for IP&C.
- The COSHH book.
- The company and process used for clinical waste collection from site.

STORES	<p>8-18 operating hours currently - Due to go to 16 hours</p> <p>Bar Coded system</p> <p>Tagged bag system, Make Ready Team. Expiry date of 1st item in front of bag</p> <p>VDI every morning - Go into Control Dept</p> <p>Forms for crew to fill in with usage. Into postbox at end of shift for stores to check & restock</p>
EBME	<p>Green label - good to go. Red label - needs servicing</p> <p>Pre-emptive maintenance database</p> <p>2 x spreadsheets currently</p> <p>EDME - Some equipment showing OOD Sept 17 not showing VOR - unable to show when</p>
MAKE READY	2 x days a week 8 - 16
DEEP CLEAN	<p>by ABDI. Gets a sheet detailing vehicles</p> <p>Deep clean every 6 weeks</p> <p>VDI sheets showing no AED. Does have an LP</p> <p>VO34 - Make Ready. Tagged cupboards containing earliest expiry date every 6-8 weeks</p>
Vehicle 028	<p>Mat Pack - No expiry date</p> <p>Consumables - No expiry dates</p> <p>Kit Bags - tagged with expiry dates</p>
Vehicle 161	<p>Ready to go</p> <p>Linen used</p> <p>Cupboard door off</p> <p>OOD consumables</p> <p>Irrigation pack sealed but no expiry date noted on green tag</p>
Vehicle 332	<p>Open maternity pack</p> <p>Crew back in - drugs & Kempston</p> <p>Folder into locked drawer (not locked)</p> <p>Collected by lower office</p> <p>Box goes to Basildon South every 7 days</p>
MAKE READY SYSTEM	Scan & replace
BAGS VISUAL INSPECTION	<p>Defect equipment in bays. Red trays - No indication of fault ? Service log</p> <p>Blocked Fire Exit</p> <p>Rubbish on equipment</p>
CLINICAL WASTE	<p>Loose bag in drawer - 332</p> <p>No bag, just lose in cupboard - 161</p>



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GOVERNANCE
INSPECTION VISIT



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