



medrescue

Safeguarding Standard Operating Procedure

Version 2
MRGP3.2

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Summary

The purpose of this SOP is to give all crew a step-by-step approach to Safeguarding procedures within the different trusts Medrescue Group services.

Scope

This policy applies to all crew, staff, and senior leadership team members. Including associates, contractors, and consultants.

Document Control

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Document Security	Internal
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Lead Contact	Safeguarding Lead
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Date of Next Review	Thursday, 24 March 2022
Date of First Publication	Wednesday, 24 March 2021
Revision Frequency	1 Year

Equality Impact Assessment

Name of Policy being Assessed	Safeguarding Standard Operating Procedure
Purpose of Policy	To outline how MRG handle safeguarding concerns that are raised by crew
What consultation has been carried out in relation to this policy	Consultation has been with the clinical operations Team. On completion of policy, it will be reviewed by Policy Group with a recommendation to put out to end user consultation
Who is affected by this policy	Staff, Visitors, contractors using services and premises of Med Rescue Group.
What arrangements are in place to monitor the effect of this policy	The company will seek feedback from both staff and service end users to identify good practice, or areas where this policy needs to be amended.

Revision History

Version Number	Description	Authored	Approved By	Approved Date
0.1	Safeguarding Standard Operation	Safeguarding Lead		



	Procedure Draft			
1	Safeguarding Standard Operation Procedure	Safeguarding Lead	Policy Group	24/03/2021
1	Update of NWS contact number and referral process.	Governance Co-ordinator	Policy Group	29/07/2021
2	Update of YAS / SCAS process.	Governance Co-ordinator	Policy Group	16/11/2021



Common Language

This list below contains frequently used terms throughout the MedRescue Group policy library and helps form a cohesive bond between all documents created by the group. This list is not exhaustive.

Term	Descriptor
Crew	Individuals engaged by the group, whether that be as PAYE, Self-Employed, or operating via a Limited Company, who work on ambulances.
Staff	All individuals who are employed by the group, who operate in a non-clinical role e.g.: resource coordinators, compliance officers, receptionist.
Senior Leadership Team	All staff who are employed by the group and who operate at a Tactical or Strategic level within the group of companies.
MRG	MedRescue Group. This includes all the companies under the umbrella of the group.
Ambulance	Any vehicle owned and operated, or leased, by the group for the purposes of conveying crew to patients, or for conveying patients to hospital.
Base	An asset of the group which operates ambulances for the purpose of conducting MRG business.



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Related Policies

Policy Reference	Policy
MRGP3.1	Safeguarding GuidancePolicy
MRGP3	Safeguarding StrategyPolicy

Associated documents

Document Reference	Document
MRG3.a	MRG Safeguarding Referral Form

Equality Statement

MRG is committed to promoting positive measures that eliminate all forms of unlawful or unfair discrimination on the grounds of age, marriage and civil partnership, disability, race, gender, religion/belief, sexual orientation, gender reassignment and pregnancy/maternity or any other basis not justified by law or relevant to the requirements of the post.

MRG is committed to promoting equality and diversity best practice both within the workforce and in any other area where it has influence. MRG will therefore take every possible step to ensure that this procedure is applied fairly to all staff regardless of the afore mentioned protected characteristics.

Where there are barriers to understanding; for example, a staff member has difficulty in reading or writing, or where English is not their first language, additional support will be put in place wherever necessary to ensure that the process to be followed is understood. This is to ensure that the staff member is not disadvantaged at any stage in the procedure.

Specific safeguarding procedures

Whilst MRG have their own safeguarding policy statement and guidance procedures (Ref. MRGP3 / MRGP3.1), it is a contractual requirement that all MRG staff adhere to the policies and procedures of the trust they are working for on behalf of MRG.

It is a Care Quality Commission (CQC) (Regulation 13 & 18) requirement and MRG's compliance with these regulations and corporate responsibility to ensure that we protect our patients from harm. Detection of any concerns MUST be referred appropriately and as soon as practicably possible using the relevant process in accordance with this guidance.

As all Trusts have a different methodology for reporting safeguarding concerns, this Standard Operating Procedure (SOP) outlines the referral process and methodology for ease of reference.



Although you will have been given guidance on the processes during your induction, it is the crews responsibility to familiarise themselves with this SOP, together with the specific Trusts process for referring all safeguarding concerns.

Below are the procedures that crews follow for each trust and MRG.

North East Ambulance Service (NEAS)

Crews ring the Logistics Officer who is based in Emergency Operations Control (EOC) 0300 011 1132

Information is passed verbally to the call taker who inputs it directly into the system. A referral number will be given to the crew, this must be documented on the Patient Report Form and Safeguarding Referral Form.

Both routine and immediate referrals are processed in this way and must be done on the same day during the crews shift.

Crews must advise EOC at the earliest opportunity that a safeguarding referral needs to be completed.

Crews must complete the MRG Safeguarding Referral Form (Ref. MRG3.a) ensuring all fields on the form are completed. (see link below)

<https://forms.zohopublic.eu/medrescuegroup1/form/SafeguardingFormv20/formperma/1PpQoVT7iK6FLD8tDCY0eSHmH9aRYX3XBtOYAN2Efil>

North West Ambulance Service (NWAS)

Crews ring 0345 155 0334, if this is not answered they ring 01228403000

Information is then passed verbally to the call taker who inputs it directly into the system. The NWAS safeguarding team will only use the incident number as the referral number in this case, this should be detailed on the Patient Report Form and Safeguarding Referral Form.

Both routine and immediate referrals are passed in this way and must be done on the same day, during the crews shift

Crews must advise EOC at the earliest opportunity that a safeguarding referral needs to be completed.

Crews must complete the MRG Safeguarding Referral Form (Ref. MRG3.a). Ensuring all fields on the form are completed. This will be completed via zoho forms to complete (see link below)

<https://forms.zohopublic.eu/medrescuegroup1/form/SafeguardingFormv20/formperma/1PpQoVT7iK6FLD8tDCY0eSHmH9aRYX3XBtOYAN2Efil>



Yorkshire Ambulance Service (YAS)

Crews ring the YAS Safeguarding reporting line, 0300 330 0274 option 2.

Information is passed verbally to the call taker who inputs it directly into the system. A referral number will be given to the crew, this must be documented on the Patient Report Form and ZOHO Safeguarding Referral Form.

Both routine and immediate referrals are processed in this way.

This must be done on the same day during the crews shift.

Crews must advise EOC at the earliest opportunity that a safeguarding referral needs to be completed.

Crews must also complete ZOHO Safeguarding Referral Form ensuring all fields on the form are completed.

<https://forms.zohopublic.eu/medrescuegroup1/form/SafeguardingFormv20/formperma/1PpQoVT7iK6FLD8tDCY0eSHmH9aRYX3XBtOYAN2Efil>

South Central Ambulance Service (SCAS) Frontline

Crews fill out Safeguarding referral form on the EPCR on Scribe

Referrals are automatically processed from Scribe by SCAS

Both routine and immediate referrals are processed in this way

This must be done immediately when the patient has been handed over to the receiving facility or discharged from crew care

A ZOHO Safeguarding referral number is not required when working within SCAS frontline service

South Central Ambulance Service (SCAS) PTS

Crews ring SCAS PTS Control, 0300 013 4721

Information is taken verbally by the controller who inputs the information directly.

Crews must also complete ZOHO Safeguarding Referral Form ensuring all fields on the form are completed

A referral number will be given by the controller, this must be documented on ZOHO Safeguarding Referral Form.

<https://forms.zohopublic.eu/medrescuegroup1/form/SafeguardingFormv20/formperma/1PpQoVT7iK6FLD8tDCY0eSHmH9aRYX3XBtOYAN2Efil>



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This process should be used when not operating under one of the above contracts such as on an event or private client.

Complete Document Safeguarding Referral Form which is automatically sent to the safeguarding central email address to be monitored by the Governance Co-Ordinator.

All referrals should be made this way and must be done on the same day during or immediately after the shift has finished

The Safeguarding Referral will then be passed to the Local Authority

Follow up

All referrals received are to be collated onto a secure document (Safeguarding Data) stored in Shared drive that can only be accessed by the Safeguarding Lead and the Governance Co-ordinator.

All adult referrals received are to be followed up 30 days from the date of referral unless referral is a risk to life which would then be followed up within 24 hours once received. If the referral has not been received, the Governance Co-Ordinator will contact the individual ambulance contract provider to confirm and will pass details to the Local Authority or ask the provider to resend the referral. This excludes SCAS who provide monthly updates of referrals received.

All children referrals received are to be followed up 24 hours from the date of referral. If the referral has not been received, the Governance Co-Ordinator will contact the individual ambulance contract provider to confirm and will pass details to the Local Authority or ask for the provider to resend the referral. This excludes SCAS who provide monthly updates of referrals received.

Any concerns or questions relating to any of these processes, safeguarding referrals or safeguarding queries should be escalated to the Safeguarding Lead.