

NORTHERN IRELAND AMBULANCE SERVICE

VOLUNTARY CAR SERVICE



**NORTHERN IRELAND
AMBULANCE
SERVICE**

**APPLICATION TO JOIN THE REGISTER OF
VOLUNTARY CAR DRIVERS**

NORTHERN IRELAND AMBULANCE SERVICE

APPLICATION TO JOIN THE VOLUNTARY CAR SERVICE REGISTER

Please complete this form in **BLOCK LETTERS** and in **BLACK INK**.

NAME:

ADDRESS:

TELEPHONE NO:

DATE OF BIRTH: N.I NUMBER

MAIDEN NAME

DRIVING LICENCE DETAILS

1. How many years have you held a full driving licence?.....
(i.e. Since passing your driving test)

2. Please state your driving licence number

3. For what period is it valid? From To

4. Have you ever been convicted of any driving offences

If yes please give details of convictions

5. Have you ever had your licence endorsed? (Please Circle) YES NO

If yes please give details of endorsements

DETAILS OF YOUR CAR

1. Make of car:

2. Model of Car:

3. CC (Engine Size):

4. How many doors does your car have?

5. Type: Hatchback/Saloon etc.

INSURANCE DETAILS

1. What type of insurance do you have? E.g. Comprehensive/3rd Party Fire & Theft

.....

2. Name(s) of person(s) insured to drive your car?

.....

3. * Renewal date of insurance

DECLARATION

*** NOTE:** If your application is successful you will be required to produce your insurance certificate for examination by the Ambulance Control Centre or to another officer of the Trust prior to commencing your first journey and at any other time requested to do so.

I declare that the information given on this form is true to the best of my knowledge and belief and hereby apply to join the Register of Voluntary Car Drivers.

Signature Date

Name in **BLOCK LETTERS**

CONSENT

VOLOUNTARY CAR SERVICE

FAILURE TO COMPLETE WILL RESULT IN YOUR APPLICATION BEING REJECTED

Volunteer's Name:

As you are seeking to join the register of voluntary car drivers which may involve the transportation of children, young people or mentally handicapped people, the trust will undertake whatever investigations it considers necessary to determine the suitability of volunteers. These investigations could involve a check with the police as to the existence and content of criminal record. However, a check will not be carried out without your consent.

I do give my consent for a police check to be carried out

I do not give my consent for a police check to be carried out
(Please tick appropriate box)

Signature of Volunteer

Date

Please list any prosecutions, bind-over orders and cautions including any road traffic or motoring offences

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

Please state previous addresses for the last 5 years

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NORTHERN IRELAND AMBULANCE SERVICE

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**TERMS OF REGISTRATION AND INFORMATION
FOR VOLUNTEER DRIVERS**

INTRODUCTION

The Voluntary Car Service is a purely voluntary scheme which operates under the auspices of the Northern Ireland Ambulance Health & Social Services Trust who maintain a register of the volunteer drivers. The service is provided by volunteers who, using their own private vehicles, transport patients from their own home address to and from Health Service facilities.

BASIC REQUIREMENTS

Before an application can be considered, there are several basic requirements which must be met:-

1. Age

Volunteers should have at least 4 years driving experience and have a current unrestricted and unendorsed driving licence. Volunteer drivers are required to leave the Voluntary Car Service on their seventieth birthday.

2. Vehicle Type

The volunteer must own the vehicle, which is to be used whilst operating the Voluntary Car Service. All vehicles must be of a 4/5 door design, preferably a saloon car, to allow free and easy access, to and from the rear seats. All vehicles must be kept clean and roadworthy at all times.

3. Be a Telephone Subscriber

Volunteer drivers must have a telephone installed in their own homes. It is not acceptable to quote a neighbour, friend or relative's telephone number.

4. Physical Fitness

All Voluntary Car Service drivers must be physically fit and may be required to undergo a medical examination.

5. Availability

Volunteers will be asked to nominate at least one fixed day per week (Monday – Friday) when they will be available for Voluntary Car Service duties. The hours assigned per day vary, however they will generally fall between 8am and 6pm.

6. Road Fund Licence (Motor Tax) and Insurance

All vehicles must be taxed and insured with comprehensive cover or at least 3rd party class A, which includes “business use” and “social, domestic and pleasure” cover. It is the volunteer driver's responsibility to ensure that they are fully covered by insurance in respect of claims arising as a result of accident or injury to passengers whom they are asked to convey or third parties.

All voluntary drivers must ensure that the Northern Ireland Ambulance Service is fully indemnified by their (i.e. Voluntary driver's) motor insurance in respect of all claims arising whilst in the course of this voluntary service. Drivers must inform their insurance company of this requirement and satisfy themselves and the Trust by providing written

evidence that they are fully covered. They must provide to their Control Manager:

1. Sight of their Certificate of Insurance
2. Details of the Insurance Company
3. Policy Number
4. Renewal date in respect of the vehicle used

7. Driving Assessment

Before being accepted into the Register by the Northern Ireland Ambulance Service, volunteers will be required to undergo a driving assessment with a qualified driving instructor from the Service.

8. Declaration of Convictions

All convictions regardless of age, must be declared at the time of applying and subsequently as a Voluntary Car Service driver.

STANDARDS OF DRIVING

The Trust relies upon the co-operation of Voluntary Car Service drivers to ensure that clients are conveyed to and from Health Service facilities as effectively and as comfortably as possible. Voluntary drivers are expected to maintain a high standard of mechanical efficiency in all cars registered with the Voluntary Car Service. Clients, probably already apprehensive concerning their condition, are liable to considerable mental and physical discomfort from inconsiderate driving, hard braking, excess speed etc. Safe driving standards are vital at all times and inspire confidence.

It is a condition of registration as a Voluntary Car Service driver that any disability which affects driving ability as a consequence may subject a patient to risk whilst in the driver's car should immediately be reported to the Trust in writing.

CONVEYANCE OF CLIENTS

Journeys are arranged so far as may be reasonably convenient for clients and drivers to convey more than one client per car to save unnecessary duplication of mileage and expense. Escorts may only be conveyed where specially authorised. No other passengers should travel as any spare seating may be required for additional clients on return journeys.

Animals and pets (with the exception of guide dogs) must not be carried.

CARE OF PATIENTS CONVEYED BY VOLUNTARY CAR SERVICE

The Voluntary Car Service is for patients who are unable, for medical reasons to travel by public transport and have to attend a Health Service facility for treatment. Drivers must be considerate to patients at all times. They must help them to enter and alight from cars and see them safely into the Health Service facility and comfortably settled into their own home upon return.

Seat belts must be used by all passengers.

IDENTIFICATION OF AND DRIVERS

Identity cards will be issued to all drivers and must be carried at all times whilst on Voluntary Car Service business and shown to a patient or other person who may reasonably request to see evidence of a Voluntary Driver's identity.

SMOKING

Voluntary drivers must bear in mind that some patients find tobacco smoke objectionable and are therefore asked to refrain from smoking whilst conveying patients. Whether or not patients are permitted to smoke is a matter for the driver's discretion. Patients must not be permitted to smoke when there are other patients in the car.

WASTED JOURNEYS

When a patient whom a driver has been asked to convey fails to travel the Volunteer Driver must telephone a brief report to the Ambulance Control Centre at the earliest opportunity.

REIMBURSEMENT

Drivers offer their services on a voluntary basis but will be paid a mileage allowance per mile to cover expenses. Subsistence allowances are paid when the driver is absent from their home for a continuous period of five hours.

Drivers also receive reimbursement for telephone expenses incurred while contacting Ambulance Control Centre on matters relating to any changes in planned arrangements e.g. where a patient is unable to travel.

DAILY MILEAGE

On return home, the Voluntary Car Driver must ring the Area Control Centre and inform the Planning Officer or in her/his absence, the Duty Superintendent, of his/her total daily mileage. This is in addition to recording it on the sheet provided for payment purposes.

CLAIMS FOR VOLUNTARY CAR SERVICE DRIVERS

Forms to claim subsistence are obtainable from Ambulance Control. All forms must be completed fully, giving details of patients' names, addresses, journeys etc, and returned to the Senior Control Officer by the 20th of each month. All claims forms will be checked and then forwarded to the Finance Department for payment.

TERMINATION OF SERVICE

Membership of the Voluntary Car Service is entirely voluntary and therefore either the driver or Trust may terminate the arrangement, without the need to give a period of notice.

AMBULANCE CONTROL CENTRE

The Area Ambulance Control Centre will plan and co-ordinate all Voluntary Car Service journeys. A day's journeys are normally planned on the day preceding the journey and it is therefore desirable that those days are kept completely clear of all other commitments if at all possible. At times of sickness or holiday etc as much notice as possible would be appreciated.

Requests for journeys are passed to drivers from the Ambulance Control Centre (usually the day preceding the journey), however, on occasions drivers can be asked to assist at short notice. If the request is accepted on your behalf by another person eg, a member of your family, you must phone to Ambulance Control to confirm your availability to carry out the request.

Requests **must not** be accepted from any source other than Ambulance Control.

VISITS TO AMBULANCE CONTROL

An invitation will be extended to all newly registered Voluntary Car Service Drivers to visit the Ambulance Control Centre to observe how the Voluntary Car Service is co-ordinated in relation to overall ambulance service operations.

HEALTH SERVICE EMPLOYEES

Serving Health Service Employees are not eligible for registration with the Voluntary Car Service.

STATUS OF VOLUNTEER DRIVERS

Volunteers are **NOT** employees of the Trust and will not receive remuneration though expenses will be paid.

EXEMPTION CERTIFICATES

Department of the Environment (Northern Ireland) Exemption Certificates pertain to Voluntary Car work only and do not extend to any other use.

CHANGE OF PERSONAL DETAILS

If a Voluntary Car Service driver should change their car registration details, their insurance or address they must inform the Senior Control Officer at Ambulance Control.

CERTIFICATE OF ACCEPTANCE

I have read and understand the above terms upon which the Voluntary Car Service is provided and agree to be bound by them. I have been provided with a copy of this document and wish to be registered as a Volunteer Car Driver.

SIGNED: _____

DATE: _____

NORTHERN IRELAND AMBULANCE SERVICE

INFORMATION FOR VOLUNTEER DRIVERS

It is essential that you read and understand each of the documents enclosed in the registration pack. Read each document carefully and then fully and precisely complete the application form.

The pack should contain:

1. Terms of Registration and Information for Volunteer Drivers.
2. Application to join the Register of Volunteer Drivers.
3. Police Vetting Consent Form.

If any of these documents are missing, contact Human Resources Department on 028 90400999 without delay.

Please ensure that you complete and return the following:

1. Certificate of Acceptance Slip
2. Application to join the Register of Volunteer Drivers
3. Police Vetting Consent Form

To:

Northern Ireland Ambulance Service
Trust Headquarters
Employee Resourcing Section
Site 30
Knockbracken Healthcare Park
Saintfield Road
Belfast
BT8 8SG