

Performing COVID-19 Vaccinations for the public

Interim COVID-19 arrangements

Background-

A request has been made to support the Covid 19 mass vaccination programme by the National Health Service, this will be managed and delivered by St John Ambulance

This document will give the relevant guidance on maintaining personal safety whilst assisting with and/or performing vaccinations.

Individuals must ensure that WMFS priorities continue to take precedence and this activity should not be undertaken at the expense of training, assessments or any other planned opportunities to maintain and evidence competence.

This is a voluntary service and as such if a volunteer should no longer wish to provide this service, they should inform the organising team as soon as possible.

Delivery Model

The delivery model adheres to the WMFS risk assessment for this activity, the COVID safe risk assessment for the vaccination venues and the Department of Health and Social Care Clinical Standard Operating Procedure.

- Each volunteer will receive an induction for each individual vaccination centre that they attend.
- As part of WMFS normal health surveillance, volunteers that are carrying out Voluntary Vaccine Support will be encouraged to have twice weekly Lateral Flow Tests (LFT) in accordance with Covid-19 Guidance. This will be carried out at one of the WMFS LFT hubs. Appointments will be made by the volunteers via the COVID-19 site'
- Each volunteer will be offered and encouraged to undertake a Lateral Flow Test (LFT) as part of normal health surveillance. This service will be continued to be offered for a minimum of ten days after the volunteer returns to their normal workplace.
- Personnel should only attend for a voluntary shift if they can satisfy the eligibility criteria. These are that those who have no COVID symptoms, do not have a current positive test for the virus and have not been asked to self-isolate by NHS track and trace, a medical professional, line manager or WMFS officer.
- Personnel should carry with them the St John Ambulance Learning passport that was received during initial training.

Please see Appendix 3 for generic site layout and process information.

Pre-Activity Considerations and Control Measures

In order to adequately manage the risk associated with performing COVID-19 vaccinations:

- All volunteers should be familiar with the selection criteria and ensure that they meet the relevant roles criteria prior to completing the learning.
- You may be asked to perform any task in which you meet the relevant criteria.
- You **must** complete the digital learning package required **and** attend the face-to-face confirmation training prior to attending a vaccination centre.
- You must complete an enhanced DBS prior to attending a vaccination centre. This can be found on the vaccination volunteers team's page
- You must complete and submit the [health declaration form](#) prior to attending a vaccination centre.
- Read and understand this guidance and the accompanying Risk Assessment.
- All WMFS volunteers to be aware of and compliant with [WMFS Health and Safety Framework](#) and Attendance Management Policy.
- Personal hygiene of all volunteers is of paramount importance. All volunteers must ensure they have showered / washed prior to starting their shift, and at the end of their shift.
 - Fingernails are to be clean and kept short. Nail varnish is not to be worn
 - Hair is to be tied back
 - Any open wound must be covered and/or must be under PPE / gloves
 - All personnel must be bare below the elbows – irrespective of their role
 - Strict handwashing procedures are to be adhered to and avoid hand to face contact whilst hands are 'dirty'.

Pre-Activity Briefing

- Volunteers will be allocated a "Vaccination Volunteer Lead" who will maintain contact with the volunteers, aiding where needed.
- All Volunteers will be provided with a T-Shirt by St John Ambulance, which they will need to wear as their uniform.
- PPE (Appendix 1) will be issued in line with current guidance from Public Health England (PHE) and WMFS policy.

Driving WMFS Vehicles to or from Vaccination Centres

If you are using a WMFS vehicle to drive to or from a Vaccination Centre, please refer to Appendix 4

Contact with the Public

When dealing with members of the public:

- Where possible 2m [social distancing](#) must be adhered to.
- Appropriate PPE should be worn at all times when in contact with the public.
- Personnel are advised that they will not lone work during these activities.

Members of the public can be volatile, aggressive and/or unpredictable, this can lead to:

- Psychological Distress
- Verbal abuse
- Physical assault
- Violence and intimidation

If you receive any of the above during a voluntary activity you should immediately withdraw to a staff only areas which can be secured as a place of safety, contact 999 if required and [Record it as an act of violence](#) at work/known hazard.

Volunteer Roles and Eligibility Criteria

Vaccination Care Volunteer

Vaccination Care Volunteers will be supporting patients all the way through from arrival to discharge. They will help patients get to the right place to receive their vaccination and be on hand to provide first aid if anyone has a medical emergency.

What is involved?

- Recognise and respond as needed to any medical emergency. This may include helping a patient with their breathing if they have an allergic reaction to the vaccine.
- Meeting and greeting patients, ensuring they are comfortable, reassuring them pre and post vaccine, helping them navigate the vaccination centre, as well as signposting them to relevant external resources as needed.
- Working collaboratively with small diverse teams including our NHS doctors, nurses, and other trained staff.
- Completion of documentation associated with the administration of the vaccine, ensuring compliance with regulated requirements.
- Work with other St John and NHS colleagues to deliver a vaccination service including escalating problems outside your scope of training to an appropriate person.
- Maintain an awareness of the wellbeing of yourself and fellow volunteers so that support can be made available to everybody.

Eligibility

- Must not be in any of the groups at higher risk from COVID-19. This includes people aged 70 or over, people with a lung condition, diabetes, heart condition, or those who are very obese (a BMI of 40 or higher). Find out more about at-risk groups on the NHS website.
- Be confident, calm, and reassuring to all patients prior to and after receipt of the vaccine.
- Good interpersonal skills, and ability to be respectful and empathetic of individuals and their concerns which may include an ability to deal with conflict.

- Have sufficient physical fitness and mental concentration for the role (this includes standing and walking potentially for the entire shift and having the capacity to kneel to care for a collapsed patient and press hard and fast on their chest – known as CPR).
- Have experience of a paid or voluntary role caring for people, providing customer service or providing signposting and advice.
- Be able to follow instructions as given by clinical professionals as well as act on your own initiative within your scope of training.
- Aware that you may see needles and potentially deal with blood and bodily fluids.
- Be able to pass all the required mandatory training associated with this role.
- Able to drive or use public transport to get to the training venue and vaccination site as needed.
- Able to wear the associated personal protective equipment (PPE) for long periods of time.
- Be able to use IT and access the Internet.
- Must be able to commit to attending the training programme which includes online and face-to-face elements. Willing to complete an Enhanced DBS application.

Training

Training will be provided, which incorporates NHS England and SJA online training modules and assessments. There will be an in-person training session with St John Ambulance, which will cover the practical aspects of the role. All in person training will be in a COVID secure location with appropriate social distancing and PPE measures in place.

Volunteer Patient Advocate

Volunteer Patient Advocates will focus on the welfare of patients throughout their experience. You will look after individuals and small groups in the vaccination centres. If anyone has a medical emergency, then a Volunteer Patient Advocate will be able to recognise it and get help quickly.

What is involved?

- Meeting and greeting patients, ensuring they are comfortable, reassuring them pre and post vaccine, helping them navigate the vaccination centre, as well as signposting them to relevant external resources as needed.
- Recognise and respond to patients' needs. This may include supporting people with impairments. Working collaboratively with small diverse teams including our NHS doctors, nurses, and other trained staff.
- Completion of documentation associated with the administration of the vaccine, ensuring compliance with regulated requirements.

- Work with other St John partners to deliver a vaccination service including escalating problems outside your scope of training to an appropriate person.
- Maintain an awareness of the wellbeing of yourself and fellow volunteers so that support can be made available to everybody.

Eligibility

- Must not be in any of the groups at higher risk from COVID-19. This includes people aged 70 or over, people with a lung condition, diabetes, heart condition, or those who are very obese (a BMI of 40 or higher). Find out more about at-risk groups on the NHS website.
- Good interpersonal skills, and ability to be respectful and empathetic of individuals and their concerns which may include an ability to deal with conflict.
- Be confident, calm, and reassuring to all patients prior to and after receipt of the vaccine.
- Have sufficient physical fitness and mental concentration for the role (this includes standing and walking potentially for the entire shift).
- Have experience of a paid or voluntary role caring for people, providing customer service, or providing signposting and advice.
- Be able to follow instructions as given by clinical professionals as well as act on your own initiative within your scope of training.
- Aware that you may see needles and potentially deal with blood and bodily fluids.
- Be able to pass all the required mandatory training associated with this role.
- Able to drive or use public transport to get to the training venue and vaccination site as needed.
- Able to wear the associated personal protective equipment (PPE) for long periods of time.
- Be able to use IT and access the Internet.
- Must be able to commit to attending the training programme which includes online and face-to-face elements.
- Willing to complete an Enhanced DBS application.

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Volunteer Vaccinator

Volunteer Vaccinators will administer vital vaccines with care and compassion.

What is involved?

- Administer the COVID-19 vaccine to patients
- Recognise and respond as needed to any medical emergency. This may include helping a patient with their breathing if they have an allergic reaction to the vaccine.
- Meeting and greeting patients, ensuring they are comfortable, reassuring them pre and post vaccine, helping them navigate the vaccination centre, as well as signposting them to relevant external resources as needed.
- Working collaboratively with small diverse teams including our NHS doctors, nurses, and other trained staff.
- Completion of documentation associated with the administration of the vaccine, ensuring compliance with regulated requirements.
- Work with other St John and NHS colleagues to deliver a vaccination service including escalating problems outside your scope of training to an appropriate health care professional.
- Maintain an awareness of the wellbeing of yourself and fellow volunteers so that support can be made available to everybody.

Eligibility

- Must not be in any of the groups at higher risk from COVID-19. This includes people aged 70 or over, people with a lung condition, diabetes, heart condition, or those who are very obese (a BMI of 40 or higher). Find out more about at-risk groups on the NHS website.
- Under legal and NHS England guidance, to be trained to safely give an injection of this type, someone needs to have achieved at least two A Levels or the equivalent during their education. For those people who do not have two A-Levels, the equivalent, or higher qualifications, then the Vaccination Care Volunteer and Volunteer Patient Advocate roles are still open.
- Have experience of a paid or voluntary role caring for people, providing customer service or providing signposting and advice.
- Aware that you will need to handle needles and potentially deal with blood and other bodily fluids.
- Be able to follow instructions as given by clinical professionals as well as act on your own initiative within your scope of training.
- Good interpersonal skills, and ability to be respectful and empathetic of individuals and their concerns which may include an ability to deal with conflict.
- Be confident, calm, and reassuring to all patients prior to and after receipt of the vaccine.
- Have sufficient physical fitness and mental concentration for the role (this includes standing and walking potentially for the entire shift and having the capacity to kneel to care for a collapsed patient and press hard and fast on their chest – known as CPR).

- Be able to pass all the required mandatory training associated with this role
- Able to drive or use public transport to get to the training venue and vaccination site as needed
- Able to wear the associated personal protective equipment (PPE) for long periods of time.
- Be able to use IT and access the Internet.
- Must be able to commit to attending the training programme which includes online and face-to-face elements.
- Willing to complete an Enhanced DBS application.

Training

Training will be provided, which incorporates NHS and SJA online training modules and assessments. There will be an in-person training session with St John Ambulance, which will cover the practical aspects of the role. All in person training will be in a COVID secure location with appropriate social distancing and PPE measures in place.

Post Vaccination Environment Management

All surfaces which have been contaminated or potentially contaminated should be wiped down with an appropriate disinfectant between each vaccination given. This includes pens or any electronic devices used.

The vaccinating operative should remove their gloves and apron, wash their hands using good hand hygiene methods, and replace with fresh apron and gloves for each new vaccination to be performed. The correct doffing procedure should be followed. See Appendix 1 for details.

The cleaning consumables and PPE used should be disposed of as clinical waste in the clinical waste bin provided. At no point should a hand or other body part enter a clinical waste facility or sharps bin.

Workspaces must be cleaned at the start of the volunteer shift, following each patient vaccination and again at the end of the shift.

All personnel must adhere to St John infection prevention control guidance when volunteering at a St John Vaccination Centre.

At the end of each day, the vaccination site leads / coordinators should conduct a hot debrief at their site. Formal debriefs will be held after sites have closed, or as required throughout the deployment.

NHS COVID-19 Track and Trace APP

NHS staff and other essential / emergency workers currently 'pause' the Bluetooth 'contact tracing' function on their NHS COVID-19 Test & Trace app whilst on shift. The temporary 'pausing' of the apps Bluetooth function whilst on shift means you are not inappropriately asked to self-isolate for a period by the app even though you have been wearing appropriate medical personal protective equipment (PPE).

It is suggested that volunteers follow this process also, but only during within the following criteria:

- Only during periods when individuals are on shift at vaccination centres
- The Bluetooth function must be turned back on at the end of shift once you have left the site
- You must be wearing a fluid resistant surgical face mask (Type II) – a cloth face mask is not considered sufficient

Adverse incidents

Sharp's risk and injuries

All needles are to be considered contaminated and should be disposed of safely within a sharp's container. Sharps pose a risk when the edge is exposed, they can cause severe injury and used sharps have a high risk of cross contamination. All sharps' injuries must be reported to WMFS and St John Ambulance as they are RIDDOR (1995) reportable. The procedure for treating a sharps injury can be found on appendix 2.

Emergency Medical Situations

- Volunteers may be required to render assistance with medical emergencies.
- 999 should be called and an ambulance requested (if not already done so) and other resources should be requested as appropriate.

Cardiac Arrests

AEROSOL GENERATING PROCEDURES

Aerosol generating procedures (AGP) results in tiny droplets of fluid that become suspended in the air and may contain coronavirus which could then be breathed in. There are procedures that are practiced during resuscitation that are considered AGP's and therefore only those wearing appropriate respiratory protection should be in the immediate vicinity of the patient, whilst AGPs are being performed.

A cloth covering should be placed over the patients face whilst performing compression only CPR. Do not perform mouth-to-mouth. Whilst resuscitation is being performed those not wearing appropriate respiratory protection should be a minimum of two metres from the patient / procedure area.

Action on finding someone collapsed: consideration should be given to minimising the number of people in the vicinity of a resuscitation. Use bystanders to help control this.

Alert St John/health care professionals on site of the emergency.

Dispatch a colleague to the entrance of site to help guide 999 Ambulance staff to the scene.

- Assess casualty for signs of breathing
 - DO NOT place your face near the casualty.
 - Breathing assessment should be carried out by looking and feeling the chest and/or abdomen for movement.
 - Carotid pulse (pulse in the neck) can be assessed if trained to do so.
- Ensure that the casualties mask is covering the mouth and nose.
- If casualty is not breathing or not breathing normally, expose the chest and attach AED pads and follow the voice prompts.
- Deliver a shock if advised.
 - Noting the time that the shock is delivered.
- Carry out chest compression only CPR
- **Do Not** perform ventilations continue CPR and follow AED prompts.
- Continue chest compression only CPR until further help arrives.
- Volunteers will be donned in appropriate PPE to carry out **compression only** CPR. When the on-site Health Care Professionals take over the resuscitation, they may utilise advanced airway interventions, such as the use of a bag-valve-mask to ventilate the casualty and suctioning of the airway. If these procedures are taking place, volunteers should stay at least two meters away from the resuscitation area. At this point, volunteers should ensure that no-one else that is not in appropriate levels of PPE enters the area.
- Further training will be provided by the Pre-Hospital Care team for CPR and AED use if required.
- When operational staff are carrying out a voluntary shift, they are doing so in a non-operational capacity. The guidance that was provided in RCRN 040_2020 – Enhanced Respiratory Protection, gave provision for operational staff while responding to an operational incident. The agreed guidance for non-operational staff, as detailed in [RCRN 121 2020](#), will align closely to the procedure that should be adopted by all volunteers while carrying out a voluntary shift.
- On arrival of ambulance staff, complete a full handover to the ambulance crew if on site health care professionals are not in attendance.

Post Incident

Following the resuscitation, the steps below should be taken:

- A clinical waste bag should be utilised to dispose of the items used during the cardiac arrest.
- Outer pair of blue gloves should be removed and placed in the clinical waste bag.
- Apron should be removed and placed in the clinical waste bag.
- Eye protection should be removed and placed in the clinical waste bag.
- FFP3 mask should be **carefully** removed and placed in the clinical waste bag.
- Second pair of gloves should be removed and placed in the clinical waste bag.

- Clinical waste Bag should then be secured by placing an overhand knot in the neck of the bag.
- Clinical waste can be disposed of in Clinical Waste bins. The correct procedure can be found here - RN [147/2019](#) Or given to the ambulance crew for disposal of at the hospital.
- Casualty carer should wash all exposed areas of skin, thoroughly as soon as possible. **Guidance on correct hand washing procedure can be found [here](#).**
- Incidents of this type are distressing, a PID/CID should be sought if necessary. [1607 Post Incident Defusing & Critical Incident Debrief](#)
- Surrounding area and all surfaces should be cleaned/disinfected before allowing personnel to return. [1603 – Infection Control Prevention](#)

Becoming unwell whilst volunteering

The most common symptoms of coronavirus (COVID-19) are recent onset of:

- New continuous cough,
- A high temperature
- Loss of taste or smell
- Any volunteer who begins experiencing these symptoms whilst on duty should immediately inform the St John Site Lead or a member of the NHS leadership team (whilst keeping a minimum of 2 metres distance) and be removed from their activity.
- If the person can get themselves directly home and feels well enough to do so:
 - They should always maintain a social distance of 2m if possible
 - They must still follow procedures for cleaning personal items and handwashing before leaving the site
 - They should travel directly home and advise any others they reside with that they are now self-isolating
 - Following the NHS advice around self-isolation
- If the person is unable to get themselves directly home (for example if via public transport or over a considerable distance) or they do not feel well enough to do so:
 - They should always maintain social distance of 2m.
 - A room within the site should be identified where the person can isolate, ideally behind a closed door.
 - If they need to go to the bathroom whilst isolating, they should use a separate bathroom if possible and this bathroom should be cleaned and disinfected before use by anyone else.
 - A suitable means of transport to get the person home should be identified by the Site Lead / NHS Leadership Team, such as collection by a member of their own household.
 - They must still follow procedures for cleaning personal items and handwashing before leaving the site.

- Any volunteer who has these symptoms whilst off duty or not volunteering at a centre should refer to both the [NHS guidance](#) and [WMFS guidance](#) for further advice.
- They are advised to self-isolate and must not attend any further shifts during this period.
- You should advise your line manager and relevant St John contact and inform them that you are feeling unwell and won't be able to attend any current shifts you have booked

Post Activity Considerations

Following the performance of a vaccination, WMFS personnel should be aware of the following points.

- The signs and symptoms of [COVID-19](#)
- Personal and workplace hygiene - e.g., provision of hand sanitiser, workplace hygiene rules etc.
- Following the cessation of any voluntary activity, an employee will be encouraged to take an LFT. This provision is part of [WMFS Health Surveillance Protocols](#) and will be available for no less than 10 days following the activity.
- All FRS volunteers must be afforded the same health surveillance (testing) arrangements as the partner agency employees/volunteers they are working with in respect of the activity undertaken. If not provided, then activity should not be undertaken. In respect of Community Vaccination Support this is 2 Lateral Flow Tests per week (Health Surveillance Comparator -Health Care professional, Patient Advocate, Care Volunteer, Vaccinator DHSC). Volunteers should be tested twice weekly to fit with shift patterns and leave requirements.
- Volunteers to be instructed during this activity that those who have had close contact ([as defined in official guidance](#)) with a confirmed COVID-19 patient should:
 - Follow WMFS official [COVID-19 guidance](#).
 - Seek medical advice - NHS 111 or 999 if medical emergency.
 - Contact GP
 - Inform line manager.
- [Occupational health](#) can provide volunteers with the following support:
 - Access to professional counselling services.
 - [Employee Assistance programme](#)
- Any injuries sustained by WMFS personnel during this activity must be reported as per [S/O 1901 - Health and Safety Framework](#)
- Should any volunteer encounter any volatile, aggressive behaviour or assault this should be [Recorded as an act of violence](#) at work and reported to both an on-site Senior St Johns Representative and West Midlands Fire Service.

Safeguarding Concerns

If whilst volunteering, staff have concerns regarding a Safeguarding situation, the following guidance should be followed.

- Utilise WMFS safeguarding reporting process immediately if an issue is identified. Details of the WMFS Safeguarding policy can be found [here](#).
- Consider withdrawal of WMFS staff and postponement of the training
- Report the incident to the Police if person is in immediate danger.
- The on-site senior St John Representative should also be informed so that they can complete their own safeguarding procedures.

If a distressing situation is encountered, staff are reminded of the [support](#) available to them.

Everyone has the responsibility to maintain patient safety. Should you have any concern around the organisation and delivery of the event, or should you have any concerns around patient care or safety, you have a duty to raise your concerns with the Site Lead immediately and subsequently record this on an St John Incident Form, in addition to informing WMFS.

Appendix 1: PPE to be worn during activity.

The following PPE **MUST** be worn when 2m social distancing cannot be maintained:

- Double layered blue nitrile gloves
- FFP3 Mask

Eye Protection (ie face shield/glasses)

- Disposable Apron

Information on the correct fitting of a FFP3 face mask can be found [here](#).

The correct donning and doffing procedure should for followed for PPE. Please follow the steps shown:

Pre-donning instructions:

- Ensure healthcare worker hydrated
- Tie hair back
- Remove jewellery
- Check PPE in the correct size is available

- 1** Perform hand hygiene before putting on PPE.



- 2** Put on apron and tie at waist.



- 3** Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.



- 4** With both hands, mould the metal strap over the bridge of your nose.



- 5** Don eye protection if required.



- 6** Put on gloves.



• PPE should be removed in an order that minimises the risk of self-contamination

• Gloves, aprons (and eye protection if used) should be taken off in the patient's room or cohort area

1 Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off.
Hold the removed glove in the remaining gloved hand.



Slide the fingers of the un-gloved hand under the remaining glove at the wrist.

Peel the remaining glove off over the first glove and discard.



2 Clean hands.



3 Apron.
Unfasten or break apron ties at the neck and let the apron fold down on itself.



Break ties at waist and fold apron in on itself – do not touch the outside – **this will be contaminated.** Discard.



4 Remove eye protection if worn.
Use both hands to handle the straps by pulling away from face and discard.



5 Clean hands.



6 Remove facemask once your clinical work is completed.
Untie or break bottom ties, followed by top ties or elastic, and remove by handling the ties only. Lean forward slightly. Discard. **DO NOT** reuse once removed.



7 Clean hands with soap and water.



Appendix 2: Sharps Injury Procedure

SHARPS INJURY AND BODY FLUID SPLASH PROCEDURE



An exposure incident involves:

- piercing of the skin by a needle or human bite
- blood or body fluids coming in to contact with an open wound, eyes or mouth



Encourage bleeding from the wound



Wash the area thoroughly:

- For splashes to the eyes and in the mouth, irrigate with copious amounts of water or saline solution



Cover the wound with a waterproof dressing



Attend the nearest emergency department as soon as possible



Inform the site lead and complete an incident report form. The incident will be escalated to the regional assurance manager. All reporting will occur in medical confidence

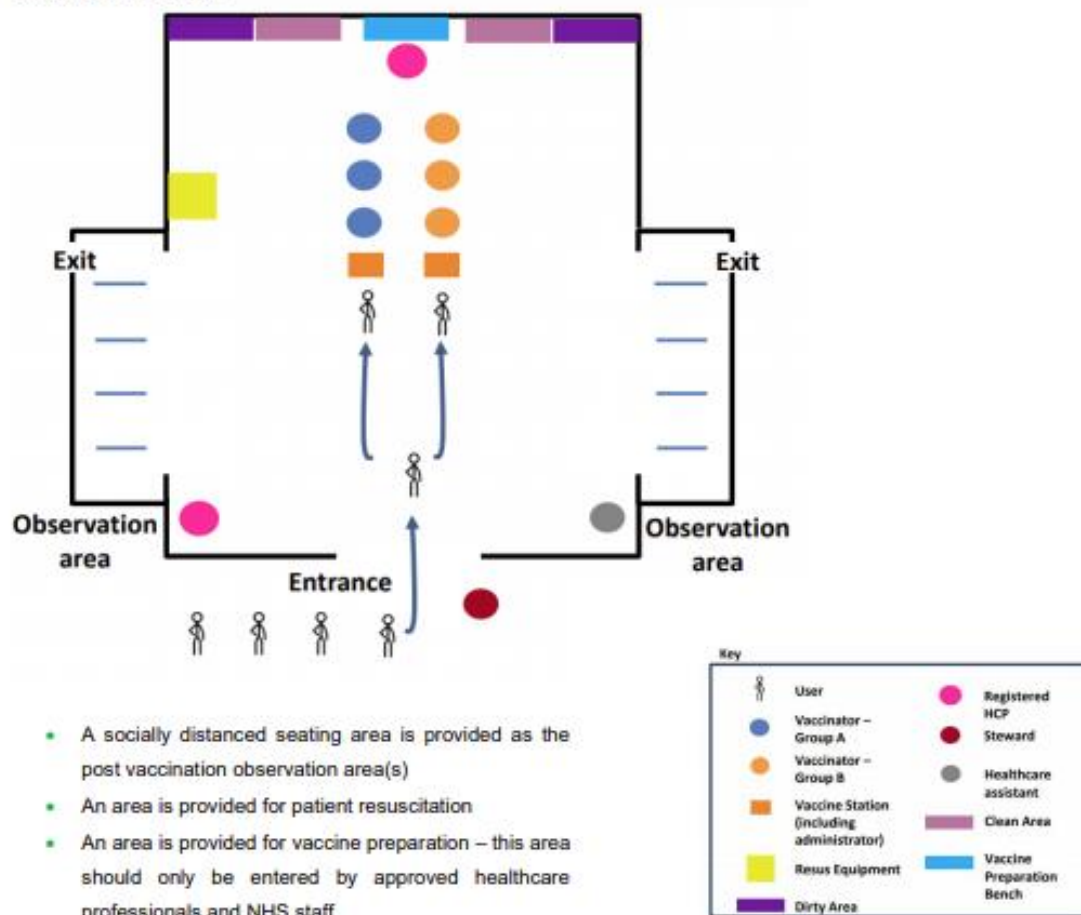
Appendix 3: Vaccination Centre Layout and Process

MASS VACCINATION SITES AND PODS

Each region will have a number of fixed mass vaccination sites to support high throughput of eligible citizens with the aim to best exploit the use of scale over an extended period.

- Each mass vaccination site will have a minimum of 1 vaccination pod at go-live (1 December 2020) but as vaccine availability increases (middle to late December) the number of pods will increase per site, scaling in size
- Each pod will have 2 vaccination flows each with a minimum of 1 vaccinator (total vaccinators per pod = 2, 4 or 6)
- Each vaccination flow will be supported by an administrator
- On arrival at the vaccination site, citizens will enter a registration area then move to health screening prior to entering the vaccination pod
- All citizens arriving at a vaccination centre must have pre-booked and have an allocated time slot
- Citizens will then move to a post vaccination monitoring area for 15 / 20 minutes before discharge

Vaccination Pod model:



Appendix 4: Driving of WMFS Vehicles

Driving of WMFS vehicles

Policy

- Driving of vehicles will always be in accordance with WMFS [MORR Framework](#)
- All driving to comply with legal and policy requirements for the vehicle type and road types.
- To help prevent any cross-contamination, all contact areas in the vehicle cockpit area should be wiped down before any checks or driving are carried out, and after anyone else has driven the vehicle

Pre-Driving Checks

- Ensure that pre drive daily checks are completed in line with WMFS policy, details can be found [here](#).
- Driver to complete a 'cockpit drill' to familiarise with controls and walk-round check of vehicle.

Driving

- All driving must comply with the WMFS [MORR Framework](#) and legal requirements for the vehicle and road type, and always with due consideration for the handling characteristics of the vehicle. The [Highway code](#) and principles of Roadcraft should be adhered to.

