



Working with our Patient and Public Voice Partners Reimbursing out of pocket expenses and involvement payments

NHS England INFORMATION READER BOX

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Patients and Information Commissioning Strategy

Publications Gateway R	eference: 02991
Document Purpose	Policy
Document Name	Working with our patient and public voice partners: reimbursing out of pocket expenses and involvment payments
Author	NHS England
Publication Date	09 February 2015
Target Audience	All NHS England Employees
Additional Circulation List	Voluntary Sector Organisations, Patients and Public
Description	This policy has been developed to support patients and public who support our work. It covers reimbursing out of pocket expenses as well as circumstances that NHS England might make involvement payments to patients who have a significant input to our work.
Cross Reference	n/a
Superseded Docs (if applicable)	na
Action Required	The policy should be applied when inviting patients and the public to work with NHS england
Timing / Deadlines (if applicable)	na
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Document Title: Working with our patient and public voice partners; reimbursing out of pocket expenses and involvement payments

Version number: 1

First published: February 2015

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1 Introduction

NHS England considers working in partnership with patients and the public to be central to the way that we work. We are committed to ensuring that public and patient voices are at the heart of shaping our healthcare services. By using the term "patients and public voice (PPV) partners" we include service users, carers and relatives of patients, and the general public. Public and patient voices should be embedded into our commissioning processes in a range of ways, including gathering insight and feedback to shape services, embedding voices in the governance frameworks of our programmes, working with patients and the public to jointly design and develop services. We sincerely value the significant contribution that patients and the public make towards improving our NHS.

NHS England aims to ensure that patients and the public are not financially out of pocket when they support our work. This policy sets out when and what financial support is available to patients and the public who are involved in our work. Patients and the public have supported the development of this policy.

Promoting equality and addressing health inequalities are at the heart of NHS England's values. Throughout the development of the policies and processes cited in this document, we have:

- Given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it; and
- Given regard to the need to reduce inequalities between patients in access to, and outcomes from healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities.

2 Scope and application

This policy is written for NHS England staff to implement, setting out some guiding principles and practice around working with patient and public voice partners, the reimbursement of out of pocket expenses and any involvement payments made to PPV partners. The policy applies to individual patients/carers and members of the public who help NHS England with our work (not to paid staff of other organisations) and covers patients and the public who are resident in England.

NHS England actively seeks patient and public input to inform and improve our work. We will do this through a wide range of approaches, including asking people to work in partnership with us to develop our policies and programmes of work and be part of our governance and assurance processes.

Where people are working in partnership with us, we will recognise their contribution. There are many ways to do this; being thanked, receiving an acknowledgement in

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writing, support to develop skills and experience, or seeing/hearing about the improvements made as a result of PPV input. In valuing the contribution of patient and public volunteers, we recognise that we need to remove the financial barriers that can prevent participation. PPV partners should not be out of pocket as a result of their involvement with NHS England so reasonable expenses will be reimbursed. On some occasions NHS England may also make an involvement payment to people to recognise a significant level of input of skills, expertise and accountability that they bring to our work.

"I am a carer for my child who has a serious long term condition. I passionately believe in working together with the NHS to bring about improvements to the services that my son receives. However sometimes you've made a massive effort to make arrangements at home so you can get to an NHS meeting and you look around you and realise that everyone else around you is paid to be there, earning high wages and you don't even know if you are going to get the bus fare home." Quote from a patient leader.

This document seeks to ensure that all NHS England employees are aware of PPV expenses and payments that can be made to support involvement in our work. It includes guidance on:

• Covering out of pocket expenses

By 'covering expenses' we mean reimbursing the costs that are incurred by a PPV partner whilst being involved in activities for NHS England. Out of pocket expenses should be covered, this includes (but not limited to) travel, accommodation and carer support where necessary. Further guidance can be found in section 4.2 and Appendix 1. Covering expenses is not the same as an involvement payment offered to PPV partners.

The PPV Expert Adviser role - Payments for involvement
 By 'payments for involvement' we mean a payment made to PPV partners for
 their significant input of time, skills and expertise into our work. Where
 payments are made these will be in line with the PPV Expert Adviser role (see
 section 4.3 and Appendix 2 below).

2.1 Engaging Patient and Public Voice partners to support NHS

England's work

NHS England aims to offer a wide range of participation opportunities for our PPV partners to get involved in our work. Where involvement opportunities are likely to attract interest from many people, or are in relation to senior governance positions or where PPV partners receive involvement payments (the PPV Expert Adviser role), PPV partners should be identified through a transparent process. NHS England's programme and policy teams are responsible for engaging PPV representatives in their programmes of work. Further information on engaging PPV partners into

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governance roles can be found on NHS England's intranet <u>click here</u> and the Patient and Public Voice team can offer advice on different approaches to seek and select PPV representatives. Contact us at <u>england.nhs.participation@nhs.net</u>

3 Principles

- i. During our development process for this policy, patients and the public told us that the most important elements of recognising their input and contribution are:
 - Enabling patient and public volunteers to take part, and not assuming that one size fits all – this means creating space and time to enable patients and the public to effectively participate. For example, not everyone can travel and make face to face meetings, online options are useful but don't suit everyone; weekday and day time meetings are often not suitable for people to join. We should therefore offer a variety of participation approaches.
 - Treating patient and public voice input respectfully this means really listening to individual perspectives. Engaging with patients and the public should never be a "tick-box" exercise. Together we can create better services, develop creative solutions and understand what matters to patients and the public.
 - Saying thank you it's simple and courteous, and often overlooked! A letter or email from the lead professionals is well received, and acknowledges the contributions that people have made.
 - Feeding back on actions patients and the public have told us that they often feel that their input goes into a "black hole". It is good practice to ensure that we feedback what happened as a result of people's participation. Where things can't be changed, it is important to communicate this too.
- ii. As a general rule, opportunities to get involved should be open to all. Where lots of people are likely to be interested in particular roles or opportunities e.g. where there are limited spaces on a governance group, a transparent recruitment/selection process should take place. However, there are some circumstances where NHS England might need to hear from individuals or communities who have specific experience, e.g in relation to a specific condition or healthcare experience; we would then work proactively to hear from these voices.
- iii. NHS England is committed to removing barriers to participation; we will reimburse out of pocket expenses in line with details in Appendix 1.
- iv. In some circumstances we will make involvement payments, this will fall under a PPV Expert Adviser role, as outlined in Section 4.3 below and Appendix 2.

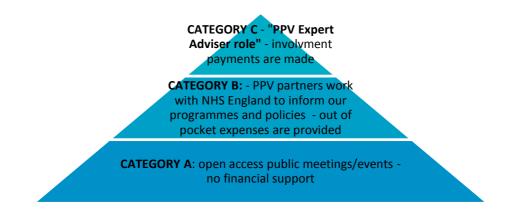
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- v. A wide range of PPV partners should be sought. People bring different perspectives, experience and expertise. Their insight and input should be actively encouraged and is very much welcomed.
- vi. Each event or project will have a named NHS England contact for patient and public partners to liaise with. Anyone experiencing specific barriers or with particular support needs should contact the lead person for the project or event and we will do our best to resolve any issues.
- vii. We will actively seek a diversity of PPV partners and recognise that patients and carers often have complex conditions or circumstances and this may mean making bespoke arrangements to support people's involvement. These will be agreed in advance with the NHS England event lead.
- viii. Many of our PPV partners will also be service users and will by definition likely to have ill health, disabilities, or be carers. We recognise that timely reimbursement is good practice. We also understand that it is essential for many people who are reliant on prompt payments, and failure to do this can seriously jeopardise their financial circumstances.
- ix. Many people choose to become involved with NHS England's work for the opportunity to learn new skills, make a contribution, and meet new people and groups. Consideration should be given to other forms of support and recognition to enhance the experience for individuals who get involved. This might include, for example, training and learning, attending conferences, confidence building, help with ongoing learning, CV development and future employment. We also recognise that some PPV partners would like to further develop their participation and involvement skills. NHS England is currently working with a wide range of patients and the public to develop a "Participation Academy", a programme where PPV partners and staff will be able to take part in learning opportunities, develop new skills and share good practice.
- x. NHS England programme leads should ensure that sufficient provision is made within the programme budget to support patient and public participation. PPV partner expenses should be coded to the programme cost centre and should be processed with urgency.

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4 Categories of financial support for patient and public voice partners

NHS England has the following approach of financial support for PPV involvement (the pyramid sections below reflects likely proportions of people involved).



4.1 Category A – public meetings

This applies to open access public meetings or surveys/questionnaires where participants choose to attend in line with their personal interest areas. Examples of this type of engagement would include NHS England's Annual General Meeting, a public meeting, or where NHS England staff seek to engage with people in public spaces e.g. libraries, shopping centres asking people if they would like to contribute views or input. No financial reimbursements are offered.

4.2 Category B – reimbursing out of pocket expenses

This is NHS England's usual arrangement for PPV partners input into NHS England's work providing patient and service user voice, feedback and perspectives. It applies when NHS England is inviting input into specific programmes of work. Examples of this would include PPV members being participants/delegates at discussion forums, events, workshops, being part of a wide range of committees and reference groups (e.g. Patient Safety Expert groups, Clinical Reference Groups).

Full details of what out of pocket expenses can be claimed and how to make a claim can be found at Appendix 1.

4.3 Category C – the Patient and Public Voice Expert Adviser role

NHS England greatly values in depth partnership working with Patient and Public Voice partners in leadership roles. In depth and strategic partnership working involves a significant contribution from our patient and public partners. This work would be carried out by patients and public partners acting in an "Expert Adviser PPV role". Expert Adviser PPV partners can receive an involvement payment from NHS England of £150 per day or £75 per half day. PPV partners can choose to refuse the payment or accept a reduced amount should they so wish.

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This role is defined as requiring enhanced skills, specific expertise, strategic and public accountability or involvement in decision making and/or direct delivery. It is a more active and accountable leadership role than the examples given above for Category A and B.

Examples of this would include:

- Membership of senior governance committees where there is a high level of strategic involvement or public accountability,
- In depth support to the co-design and co-delivery of large events and conferences
- In depth support around the co-production of NHS England policy and programmes, (both of these in-depth roles are characterised by patient and public representatives playing a strong leadership role and actively leading/delivering part of the work programme)
- We might also use involvement payments to seek specific perspectives and expertise from members of communities where we believe that we have gaps in our knowledge/understanding of patient experience.

Details to consider in respect of the PPV Expert Adviser role and involvement payments are given at Appendix 2.

5 Supporting people in receipt of state benefits

NHS England actively seeks a diverse and inclusive approach to involvement. We recognise that many of our PPV partners have on-going health conditions and may often be in receipt of state benefits. NHS England seeks to ensure that being in receipt of benefits does not constitute a barrier to involvement.

In general, PPV partners who are claiming out of pocket expenses only can do so without an adverse impact on their benefit entitlements.

However, people who receive anything that might be deemed to be earnings or income by Her Majesty's Custom and Revenue service (HMRC) may put their benefit entitlement in jeopardy. It must be noted that income can include any payments made, or vouchers or financial gifts given. It is extremely important that NHS England works transparently and sensitively. PPV partners receiving any payments or anything that can be classed as income should be made aware that this may impact on their entitlement to benefits. Breach of benefit conditions can result in an individual's benefits being stopped.

Any payment made by NHS England to PPV partners has implications for the individual's personal financial circumstances. People in receipt of benefits must keep to the conditions of those benefits on what they can do and the amount they can be paid. If a person, even inadvertently, breaches their benefits conditions in some way while offering their help through involvement, this could have serious consequences for the individual. It is the responsibility of the individual and not NHS England to comply with the conditions of their benefits.

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Rules and regulations around receiving income while in receipt of benefits vary significantly according to individual circumstances, because of this we do not intend to provide detailed information on the different conditions for individual benefits in this guide. Individuals will have a responsibility to ensure that they have checked with the relevant agencies. A person should also speak to their benefits advisor or Jobcentre Plus to discuss their individual circumstances.

NHS England has also arranged for a helpline to be available to patients and staff who have queries about being involved with NHS England's work. Bedford Citizens Advice Bureau provides a telephone helpline service to help resolve any benefit concerns that arise from payment of fees and expenses for public involvement. The service should be contacted via email <u>involve@bedfordcab.org.uk</u> with a brief summary of the query, or by calling 01234 330604.

One of the biggest difficulties for people on benefits because of ill health or disability is that Jobcentre Plus offices can interpret involvement as readiness for work whether or not payment is being offered. NHS England has developed a standard letter which explains clearly that involvement opportunities with NHS England are not an indication of readiness to work, or employment.

NHS England is currently developing additional support material for use by staff and PPV partners. This material will ensure PPV partners in receipt of benefits can get involved in our work, and have right information to share with their benefit providers. This support material will cover out of pocket expenses (which is normally disregarded), and involvement payments (which are allowable in certain circumstances).

For further information please contact the PPV team england.nhs.participation@nhs.net

6 Working in partnership with other organisations

NHS England usually looks to cover expenses for PPV partners who are working with us as individuals. Paid workers from voluntary organisations who attend workshops, advisory groups and consultation events are expected to seek support from their own organisations. However, representatives from small, user-led organisations may be supported with out of pocket expenses where they are not able to access any other public funds. Where these organisations that find meeting the costs of participation is likely to cause difficulty, they should contact the meeting organiser.

PPV partners may also be involved in working with a number of organisations, for example with NHS England, or a local authority, voluntary sector organisations and or Clinical Commissioning Groups. If the PPV partner is claiming expenses from one organisation for involvement in a specific piece of work, they may not claim expenses from other organisations for the same piece of work. For example, if PPV partner attends a workshop that is jointly delivered by a CCG and NHS England, the PPV partner can only claim their expenses from one organisation.

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Choose an item.

When NHS England is working jointly with other organisations (for example the Department of Health, Local Authorities, CCGs, Public Health England), it should be made clear to PPV partners in advance which organisation is responsible for PPV expenses. The expenses policy implemented in these circumstances will be that of the lead organisation that is responsible for paying PPV expenses.

NHS England may also seek to commission additional engagement activities through work with partner organisations, for example voluntary sector organisations who work with seldom heard communities.

7 Arrangements for regional and sub regional teams

NHS England will adopt a consistent approach within regional and sub regional teams; namely

- A three category approach with regard to financial support for PPV, as detailed above
- Out of pocket expenses reimbursement will be the usual participation arrangement but involvement payments in respect of a PPV Expert Adviser role can be made where significant level of input is required (as defined by requiring a leadership role of enhanced skills, expertise, time commitment and involvement in decision making and/or delivery)
- Teams may wish to develop a pool of PPV Expert Advisers, or may wish to implement bespoke recruitments for opportunities that involve involvement payments, (material to support recruitment activities is available from the PPV team). These arrangements will want to align with local needs and opportunities.

8 Distribution and implementation

This document will be made available to all staff:

- Via the NHS England intranet site.
- A global notice will be sent to all employees notifying them of the release of this document.
- A link to this document will be provided from the Patient and public voice team intranet page.
- A programme of staff sessions will be offered for 12 months following the introduction of the policy. This will serve to offer support with queries and implementation and will also to support monitoring of the policy.
- The document should be shared with partners on request.
- All PPV partners should receive Appendix 1, and where people are receiving involvement payments, they should also receive Appendix 2

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9 Monitoring

The Patient and Public Voice team will work with SBS to monitor implementation of this policy together with an independent review by Internal Audit on a periodic basis.

This policy will be reviewed on an annual basis. HMRC dispensation arrangements will be maintained to ensure compliance with HMRC requirements.

10 Equality and Health Inequalities Statement

This document forms part of NHS England's commitment to create a positive culture of respect for all employees and service users. The intention is to identify, remove or minimise discriminatory practice in relation to the protected characteristics (race, disability, gender, sexual orientation, age, religious or other belief, marriage and civil partnership, gender reassignment and pregnancy and maternity), as well as to promote positive practice and value the diversity of all individuals and communities.

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Appendix 1 Covering out of pocket expenses

NHS England will reimburse all reasonable expenses incurred by PPV partners supporting us as long as they do not exceed agreed rates (see below). Receipts are required for all expenses, except where travel and accommodation has been booked directly by NHS England.

There may be instances where the costs of participation are a barrier to involvement. NHS England will encourage PPV partners to discuss their participation needs so that we can explore solutions together. Assessment of such situations will be on a case-by-case basis.

Where PPV partners are invited to attend events that are offered at a number of locations across England, out of pocket expenses will be offered in respect of travel to the nearest event location, unless this event is fully booked.

1. Travel

NHS England has a central travel booking facility for rail travel and accommodation. We aim to reduce the burden of costs for PPV partners. This policy applies to PPV partners resident in England. NHS England will pay for train travel and accommodation in advance so that PPV partners don't have to. The meeting organiser will explain how to request travel booking and will explore any accommodation needs. The start point will usually be expected to be from the PPV partner's home to the meeting venue, this will the nearest meeting venue where there are multiple venue options. PPV partners should use public transport for travel purposes (where it is practical, safe and reasonable) to support the NHS in reducing its Carbon Footprint.

Rail travel

NHS England project teams should undertake to book this on behalf of PPV partners. The meeting organiser will need to liaise with PPV partners in order to understand their requirements. An example of the travel booking form template can be found on NHS England's intranet <u>click here</u>. NHS England staff making the booking should use the cost code for the programme of work that the PPV partner is taking part in. Booking arrangements will need to be made in good time to ensure that cost effective travel options can be utilised and any tickets can be posted or collected by the traveller. While NHS England will usually book and purchase rail travel on behalf of PPV partners, we recognise that on some occasions this will not be possible.

The "lowest logical fare" should be booked for rail journeys, making the best use of off peak and advance fares. If travellers require a standard underground travel card, these can be bought via the rail booking system.

Should a meeting change, the ticket date and time should be changed through the agreed booking system.

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First class travel by rail is not permitted unless there is a medical or disability need. Evidence (e.g. a medical note) may be required to support the request. These requirements must be discussed and agreed in advance.

Individuals are reminded that, regardless of the standard of travel and means of transport they use, they should adhere to the confidentiality and security processes put in place to protect the equipment and documents they may have with them. Information Governance standards should be followed at all times and consideration given to conversations held in public.

Bus travel

Travel on buses and trams will be reimbursed, when accompanied by receipts or tickets quoting the price paid for travel.

Taxis

Taxis may only be used where there is a justification on the grounds of multiple people travelling to the same place and it works out cheaper than other forms of transport, personal safety, disability or efficiency e.g. meetings in different parts of a city during the day or travelling with heavy items of luggage or late at night or where this is the only feasible mode of transport. Claims should be evidenced through receipts.

Personal vehicles

PPV partners can use their own vehicles when necessary and will receive reimbursement for the miles travelled. Travel by public transport would usually be expected unless there is a specific need to travel by personal vehicle. If a PPV Partner finds they need to use their own vehicle for travel they should indicate this need to the meeting organiser.

Rates of reimbursement are in line with Her Majesty's Customs and Revenue Service (HMRC) recommendations, correct at HMRC website August 2014. When travelling by personal vehicle, the vehicle must have valid insurance tax and an MOT certificate.

Approved mileage rates		
From 2011-12	First 10,000 business miles in the tax year	Each business mile over 10,000 in the tax year
Cars and vans	45p	25р
Motor cycles	24p	24p
Bicycles	20р	20p

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PPV Partners, who necessarily incur charges in the performance of their duties, for example, tolls and congestion charges, will be refunded these expenses on production of receipts.

PPV Partners are personally liable for any excess parking penalties, charges or fines issued to them and NHS England will provide no refunds for these charges. Similarly, excess fare charges on any means of public transport are normally the responsibility of the PPV Partner and not NHS England, unless it can be demonstrated that this was an unavoidable circumstance beyond their control.

Carrying passengers on the same journey

If a passenger is carried (by car or van) to the same meeting, an additional 5p per mile can be claimed. This is in line with HMRC policy (correct at August 2014).

Air travel

Air travel will be extremely rare. Flights within England may be booked if they are significantly cheaper than the rail alternative (and/or avoid additional accommodation costs), or if there is a compelling logistical reason for incurring the higher cost, for example where PPV partners have a medical condition that prevents them from travelling too far in one day (a medical note may be required). Any car parking and transfer costs will be taken into account. All travel by aircraft will be at standard economy rate. Air travel can be booked through NHS England's travel system. Business class air travel is not permitted except in very exceptional circumstances, such as where there are no suitable economy class facilities to accommodate disabled or other special needs requirements. In all cases written approval must be gained from the relevant Regional or National Director's office. A record of the approval should be retained as this may be subject to public scrutiny

2. Accommodation

Although it will not be usual to cover the cost of accommodation, there may be some activities that start at a time when an overnight stay prior to the event would be beneficial. Examples of this may include:

- Without an overnight stay the PPV partner would need to leave home before 6am to arrive at the event
- Where PPV partners may have conditions or disabilities that make travelling for too long in one day difficult.
- The cost of travel, overnight accommodation and subsistence is cheaper than rail travel on the day of the event (taking into account advance travel booking options).

Accommodation requirements must be discussed and agreed in advance with the meeting organiser. NHS England will usually book and purchase accommodation on behalf of PPV partners.

The meeting organiser will need to liaise with PPV partners in order to understand their requirements. There is a booking form template that can be accessed on NHS

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England's intranet <u>click here</u>. NHS England staff making the booking should use the cost code for the programme of work that the PPV partner is taking part in. Booking arrangements will need to be made in good time to ensure that cost effective options can be utilised and accommodation can be sought to meet accessibility requirements. While NHS England will usually book and purchase accommodation on behalf of PPV partners, we recognise that on some occasions this will not be possible.

The cost of accommodation cannot exceed £100 per night for hotels booked outside of London and £150 for hotels booked in London. Both limits are inclusive of VAT and any other charges without exception.

Assistance animals

PPV partners who require the support of a guide/assistance animal will be booked into user friendly accommodation and any additional cost for their assistance animal will be covered by NHS England.

3. Subsistence/Meals

If PPV partners are involved in NHS England activity away from home for a considerable period of time, reimbursement may be claimed as detailed below. Receipts must be retained and submitted for the claim. The following rates may be claimed:

Breakfast (where leaving the house before 7am)	Up to £5
Lunch	Up to £5
Evening meal	Up to £15
NB: Maximum claim per 24 hour period	Up to £20

These rates include the cost of food and drinks, but in line with NHS policy the purchase of any alcoholic drinks will not be reimbursed. Where refreshments and food are provided at meetings/NHS activities, subsistence allowances will not be paid.

Please note tips (for example in restaurants or taxis) will never be reimbursed and remain solely at the individuals' discretion.

4. Carers and support workers

NHS England recognises that in some circumstances PPV partners will need to arrange for carers/support workers to accompany them to a meeting, or to take over caring responsibilities while they are at a meeting (including child care, care of family members with disabilities). NHS England will meet the reasonable expenses/costs of carer/support workers, we will cover the travel/accommodation/subsistence requirements of the carer/support worker who accompanies the PPV partner in line with the guidelines above. We will also cover the hourly costs of the carer/support worker where these costs are not normally covered elsewhere (for example via service user support payments from other public funds e.g. social services). Where

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reimbursement is needed for carers/support workers, this is looked at on a case by case basis and should be agreed in advance with the meeting organiser.

Where NHS England is reimbursing the cost of care or support workers to support participants to attend, this should be delivered by a registered worker. For the avoidance of doubt, the carer or support worker is engaged by the PPV partner and not by NHS England. NHS England will reimburse actual expenditure based on receipts submitted with expense claims. The receipt should provide details of the carer's registration and/or professional organisation providing the care.

5. Interpreting, British Sign Language and other communication support

In general communication support should be arranged as part of the meeting / event and should look to include interpreters or other forms of communication support in line with audience requirements. Where individuals have specific / complex needs, and prefer to arrange their own support, provision should be made to reimburse these costs and should be agreed in advance.

6. Office supplies

NHS England recognises that many PPV partners will make use of home office supplies as part of their involvement with us. These might include joining remote meetings via phone or internet meetings, or it might also include printing out papers at home that have been sent through via email. While PPV partners can always request that hard copies of papers be posted to them at home, we understand that this is not always possible within the meeting timescales.

Where PPV partners are engaged to support NHS England at meetings, events or workshops, we would expect paperwork to be posted out in advance or available on the day with time allocated for reading or working with this material.

However where PPV partners volunteer to support NHS England by participating in meetings remotely from their home we will offer a standing allowance of £5 per meeting to cover the cost of telephone calls, paper, printing ink and and paper and home office sundries. We have taken this approach to reduce the administrative burden for PPV partners in for example, estimating proportionality of broadband usage, producing copies of monthly telephone bills, estimating ink used etc. Where this amount is being claimed, it must be agreed in advance with the meeting lead.

7. Process for reimbursement of expenses

Responsibility of NHS England

NHS England believes that the process for reclaiming expenses should be as straightforward as possible for PPV partners. Paperwork needs to be in plain English and easy to understand and complete.

It is good practice for NHS England staff to make sure that PPV partners have access to the expense claim process and paperwork in advance of any engagement activity or event. The meeting organiser will provide the expenses claim information in advance of meetings/events so that PPV partners can be clear about our processes. The meeting organiser will bring copies of forms to events/meetings and

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will also make these available via email. The meeting organiser can provide support and guidance to any PPV partner who needs help or further information to complete the expenses forms. If PPV partners have alternative information needs they should contact the meeting organiser. The expenses claim form and guidance to complete this can be found on NHS England's intranet <u>click here</u>.

Reimbursement needs to happen quickly so that PPV partners are not put into financial hardship. We aim to reimburse PPV partners within 2 weeks of receiving the claim form. If expenses are not dealt with in a timely way, volunteers can feel much devalued and become disillusioned (quite rightly, as they are out of pocket and not being treated respectfully). Where this happens our strongest and most valued supporters often vote with their feet and voices; becoming very cynical about their experience with us. Dealing with expenses in a timely way is not just respectful; it also avoids a potential risk to our reputation.

The meeting organiser will need to ensure that they prioritise PPV claims to ensure timely reimbursements are made. This means that if we have any queries we will contact PPV partners urgently and seek clarification. We will then input the claim into the finance system for rapid processing. We will keep a record of where this is up to. We endeavour to reimburse out of pocket expenses within two weeks of receiving claims.

NHS England follows good practice and has a duty to provide accurate information about payments made when asked to do so by the Benefits Agency and HM Revenue & Customs. Records of payments made will be made available to NHS England Finance Department as required for monitoring and audit purposes. Any personal information will be held in accordance with the Data Protection Act 1998. No personal information will be passed on to third parties for commercial purposes.

Responsibility of PPV partners

PPV members seeking reimbursement of expenses must provide evidence of expenditure in the form of a receipt or ticket and can only reclaim only their own expenses and not for expenses incurred by other colleagues. A template of the expenses claim form can be found on NHS England's intranet <u>click here</u>.

PPV partners should submit claims in a timely manner, not more than three months after the event/activity that their claim refers to.

Where receipts are difficult to obtain (for example the use of Oyster cards or calls made on mobile phones) copies of bills or computer printouts with the relevant section highlighted can be accepted.

If receipts are lost, the PPV partner should discuss this with the meeting organiser.

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Processing Claims

Expense claims are managed by the relevant programme team who are working with PPV partners.

The programme team is responsible for:

- Ensuring that PPV partners have sight of the expenses policy and claim documents in advance of the event/meeting
- Receiving the claims returned following the event
- Ensuring that the claims are appropriate and in line with NHS England requirements,
- Maintaining an audit log of claims made and associated receipts. This is essential for robust financial governance procedures and centrally maintained internal audit evidence.
- Uploading the claims for payment via the Oracle system
- Approving payment of the claims (via Oracle) against the programme cost codes

Once claims are received, reimbursement can happen rapidly. If the claim form is checked and entered into our financial system in good time, the authorising officer for cost centres can approve on a weekly cycle, raising payments on a weekly basis.

Expenses reimbursement happens via the following process:

THE CLAIM PROCESS STEP BY STEP

- i. The PPV partner submits their completed expense claim form and receipts to the meeting organiser (or their nominated representative) of the event/activity. If they are also claiming an involvement payment, this should be listed on the claim form. The claim can be sent in by email with scanned receipts attached. Not everyone uses email, so a paper form and original receipts can also be sent to a nominated postal address.
- ii. The meeting organiser should check the claim form and if required, raise any queries directly with the claimant. The meeting organiser will then maintain details of the claim in a log, ensuring that any associated paperwork (e.g. original or scanned receipts) is referenced, maintained and available for internal audit evidence
- iii. The meeting organiser forwards the checked approved expense claim to their team leader for approval,
- iv. Once approved the meeting organiser (or nominated person) inputs onto NHS England's financial system, Oracle, allocating the programme project cost code. This should be done within 3 working days of receiving the claim. A date log is created.

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- v. Payment is approved through the Oracle system, requiring authorisation by the budget holder for relevant cost code centre, by 4pm on Tuesdays, and within 5 working days of the claim being inputted to Oracle.
- vi. Shared Business Services make a payment by cheque to the claimant's address. The cheques are sent out each Wednesday by second class post. This means that if the authorising deadline is missed, the cheque will not be raised until the following Wednesday.

PPV partners who do not have bank accounts should liaise directly with the meeting organiser who can liaise with the Finance team to explore alternative arrangements.

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Appendix 2 The Expert PPV Advisor role – applying involvement payments

NHS England greatly values strategic partnership working with Patient and Public Voice partners in leadership roles. We have established a PPV Expert Adviser role that reflects this. This role is not an employed role but is designed to recognise the significant involvement input given by some of our PPV partners. The role is defined as requiring enhanced skills, expertise, time commitment, public accountability or involvement in decision making and/or delivery.

Expert Adviser PPV partners can receive an involvement payment from NHS England. Where an involvement payment is offered this will always be agreed in advance and will need to be approved by the Senior Responsible Officer for the relevant programme of work. Rates for PPV Expert Advisers will be £150 per day/meeting inclusive of any preparation work, or £75 per half day. PPV partners can choose to decline payments or request a smaller payment if they so wish. Although PPV partners are volunteers and not employees, any involvement payment offered must be at least equal to the hourly national minimum wage.

Making payments to patients and the public involved in NHS England's work is intended to support inclusion. Covering costs and paying for a significant level of involvement creates an incentive for active participation. It supports people to get involved whose financial circumstances mean that they might otherwise be unable to contribute.

Offering financial support is an important part of addressing barriers to participation. Many of the patient and public voice partners that we particularly wish to engage often have difficulty accessing more traditional routes of engagement. NHS England is committed to improve and be more creative in our approaches to work in partnership with patients and the public. We will actively seek ways to involve communities and individuals who experience the greatest health inequalities and who might find it difficult to participate without additional support.

PPV Expert adviser roles can be summarised as follows:

- 1. Membership of senior governance committees where there is a high level of strategic involvement or public accountability,
- 2. In depth support to the co-design and co-delivery of large events and conferences
- 3. In depth support around the co-production of NHS England policy and programmes, (both of these in-depth roles are characterised by patient and public representatives playing a strong leadership role and actively leading/delivering part of the work programme)
- 4. We might also use involvement payments to seek specific perspectives and expertise from members of communities where we believe that we have gaps in our knowledge/understanding of patient experience.

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Examples of these include:

- PPV Expert Adviser input to committees is usually anticipated to be at the level of Board or Oversight group sub-committees. This would require strategic PPV input, with a high level of skill, expertise and public accountability. Where PPV membership is sought, this would be subject to open and transparent recruitment. Examples include membership of the Clinical Priorities Advisory Group, Rare Diseases Advisory Group and the Quality and Clinical Risk Committee.
- Delivering training at an event, or co-chairing a conference;
- Participating in Rapid Response Review teams who commit to high levels of engagement over a very short time period;
- PPV partners from particular groups providing a particular expertise that not everyone has the skills, knowledge or experience to provide.
- Encouraging participation in activities that will have low take up because the topic covered is particularly difficult to deal with e.g. where patients or their condition is frequently stigmatised;

PPV partners receiving involvement payments should be offered written information detailing the involvement opportunity before they agree to get involved. A template letter is provided at Appendix 3. Offering written information prior to involvement allows people to make an informed decision about whether or not they would like to participate and work with us. This is particularly important where people are in receipt of benefits or health related insurance payments, their benefits may be at risk, if they do not agree the involvement opportunity with the relevant benefits team/organisation in advance of starting the involvement work.

PPV partners who receive payments for involvement should be made aware that these payments can be regarded by HMRC and the benefits agency as income. Individuals will need to ensure that they declare any payments received in relation to their personal circumstances.

Where a PPV Expert Adviser is in receipt of state benefits it is their responsibility to declare all payments or vouchers given and to seek guidance from their Benefits Office if in doubt. A template letter outlining this information to PPV partners is provided at Appendix 3. PPV partners should be made aware that NHS England can provide template letters to present to the benefit agency outing and clarifying the nature of their involvement, please contact the PPV team.

It must be noted that vouchers are considered to be income and therefore must be declared in the same way as involvement payments. Any vouchers given should be in line with the involvement payment rates above. One exception would be the provision of vouchers for children under 16.

All PPV Expert Adviser roles need to be approved by the relevant programme Senior Responsible Officer (SRO).

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Where PPV Expert Advisers are being recruited to be representatives on committees, the PPV role should reflect the needs of the committee, the process should be open and transparent and adhere to equal opportunity principles.

PPV Expert Advisers partners are not employees. It must remain clear that PPV partners should work to an expected code of conduct but are not working under the control of NHS England nor are they subject to its employment policies and procedures. PPV partners must never form part of NHS England's staff establishment or organisational structure.

If the participation of a PPV partner expands over time, for example the nature of the involvement work increases, their expertise is required for multiple programme work, then advice should be taken on whether the status of their engagement requires reevaluation. Consideration may need to be given as to whether the role should constitute an NHS England job role.

If such extended work is necessary then the business need identified should be discussed with HR if the duties required equate to an employment opportunity (which might part time and/or fixed term) or discussed with Procurement to request approval for a separate contract for services to be created.

If there is any doubt regarding the duties, role or status of individual PPVs then this should be raised with the PPV team who will seek advice from HR and Finance and investigate and resolve the situation accordingly.

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Choose an item.

Appendix 3 Template: Initial letter to PPV partners interested in involvement opportunities

Note: this initial letter should be sent to PPV partners BEFORE they decide whether or not they would like to work with us. It is important to send this information is advance because:

- a) It is good practice that PPV partners are clear about what they are committing to and where they can seek more information if they have any initial queries about the role
- b) People who receive state benefits or insurance payments linked to their condition may need to liaise with their personal case managers with the details of the NHS England involvement commitment before agreeing to it. Taking part in involvement opportunities is usually supported by benefits and insurance agencies, especially where these are on an expenses only basis. However it is important that PPV participants are encouraged to agree this in advance to prevent any risks to benefit or insurance payments.

Dear [insert PPV partner name]

Re: Patient and Public Voice (PPV) participation with NHS England

Thank you for your interest in this NHS England involvement opportunity. NHS England is committed to work with patients and the public to improve and develop our work. This letter sets out some introductory information about the involvement opportunity and outlines further information available in our PPV welcome pack.

This involvement opportunity is for the role of [insert role title e.g. Patient Safety committee member]. The role will involve the following activity [insert e.g. join meetings/workshops/forums]. This will usually happen [insert frequency e.g. monthly], and may involve joining meetings by telephone or sometimes travelling to meetings. NHS England will cover your expenses in line with our Patient and Public Voice expenses policy. We would anticipate that this role would start on [insert date] and last until [insert date].

Please contact [insert name] from the [insert programme team] to discuss any queries or if you requires further information about this role.

NHS England values the participation of our PPV volunteers and recognises that involvement in our work is done on a voluntary basis, with the option to withdraw assistance at any time. All of our regular volunteers will receive a welcome pack with further details about working with us, including the support available.

If you would like to get involved in our work but you have additional or access needs please let us know and we will explore how we can support you with this.

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THE SECTION IN ITALICS BELOW IS ONLY TO BE INSERTED WHERE AN INVOLVEMENT PAYMENT TO THE PPV PARTNER IS TO BE OFFERED

An involvement payment is provided in respect of this PPV role in recognition of the extent of the support that you have offered to give us.

Please be advised that these payments are regarded by HMRC and other agencies (e.g. Jobcentre Plus) as income. PPV partners are responsible for declaration this income to HMRC or other agencies in line with your personal circumstances. Where people are in receipt of state benefits there may be restrictions on any payments that you can receive. We would recommend that you seek advice from the Citizen's Advice Bureau, Jobcentre Plus/relevant organisation before agreeing to accept involvement payments.

While NHS England cannot provide individual advice, we have a number of information leaflets as well as a dedicated helpline with the Citizen's Advice Bureau that you may find useful. Please contact england.nhs.participation@nhs.net for further information.

Please note also that if you are in receipt of health related insurance payments we would advise you to discuss any involvement payments with your insurance company before accepting any involvement opportunity.

Many thanks for your interest in working with us. Patient and public engagement is an important part of our work and we very much welcome your involvement.

Yours sincerely, [Insert name, team, contact details]

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