



**Yorkshire and the Humber**  
Clinical Senate

Free and full independent and impartial clinical advice

**YORKSHIRE AND THE HUMBER CLINICAL SENATE**

# **Patient and Public Involvement Policy**

(including expenses policy and claim form)

**April 2019**

**Version 4.0**

NHS England and NHS Improvement – North East and Yorkshire



## Version Control

Document Version	Date	Comments	Drafted by
Draft version 0.1	April 2014		Joanne Poole
Draft version 0.2	June 2014	Amended following May Council discussion	Joanne Poole
Draft version 0.3	June 2014	Amended following opportunity for comments from the Council by email	Joanne Poole
Version 1.0	July 2014	Ratified by the Council in July subject to minor amendments	Joanne Poole
Version 2.0	April 2015	Amended following Council agreement in March 2015 to alter our Council meeting structure	Joanne Poole
Version 3.0	April 2017	Refreshed and updated	Joanne Poole
Version 4.0	April 2019	Refreshed and updated to take account of new guidance	Joanne Poole

## 1. Key Principles

The Senate's approach to patient and public involvement is based on two key principles:

- a) that any interested party would have opportunity to contribute to developing Senate recommendations
- b) that, because of this contribution, our recommendations have a greater focus and relevance for the people most directly affected

Our approach reflects policy initiatives to involve patients, service users, carers and the public across the NHS and social care. These initiatives include:

- Health and Social Care Act (Department of Health, 2012)
- NHS Constitution (Department of Health, 2012)
- Putting people at the heart of care (Department of Health, 2009)
- Essential Standards of Quality and Safety (Care Quality Commission 2010b)

## 2. Introduction

The Senate provides free and full independent and impartial clinical advice on any proposal for service change in health care that has significant implications for the workforce, patients and the public.

The Clinical Senate is comprised of 2 bodies - a wider Senate Assembly and a smaller Senate Council.

**Senate Council** - A core multi-disciplinary 'steering' group of between 20 - 30 members form the Senate Council. It is comprised of a range of clinicians from across health and social care and 2 - 3 patient and public members. This group is responsible for the formulation and provision of our advice. The Council oversees all Senate business. Members are appointed for a mix of tenures of between two and three years, to a maximum of 5 years, enabling the Council to manage continuity of its work at times of membership change.

The Senate Council receives objective data and information, and also views and opinions from a broad range of experts and others invited to give evidence to the Senate as the need arises.

**The Assembly** - The Assembly is a database of clinical and patient and public members who wish to help the Senate provide their advice. It gives the Council access to a broad range of experts who are co-opted onto expert panels to respond to commissioner requests for advice. Each panel will contain patient and the public representatives from the Assembly or the Council. There is no minimum or maximum number of members on the Assembly as this is subject to variation. Currently in Yorkshire and the Humber we have over 100 members.

Involving patients, service users, carers and the public in all of our reviews adds value to the discussions and ensures that we remain focused on ensuring that the development of services meets the needs of patients and the public.

This policy:

- Sets out the Senate commitment and approaches to patient and public involvement
- Outlines the underlying principles of the Senate's approach to involving lay people
- Explains the support available to lay people involved with the work of the Senate

### **3. How Can Patients and the Public Get Involved in the Senate?**

There are two main ways in which lay people, and the organisations that represent them, have the opportunity to be involved in the Senate's work:

- a) Patients, service users, carers and the public can be involved directly in producing recommendations as formal members of the Senate Council. We have 3 patient and public members who are recruited for this role for a tenure of 2 years. Their tenure can be extended to a maximum of 5 years.
- b) We also welcome patient and public members onto the Senate Assembly. Once a commissioner or provider approaches the Senate to request our advice, the Council works with that organisation to develop an agreed approach to responding to that advice. That approach is likely to require the Council to develop a bespoke expert panel comprised of clinical members and lay members from our Assembly, chaired by a member of our Council. The Senate may also contact charities and the voluntary sector to ensure that they have the opportunity to be involved in the Senate discussion. Our website <http://yhsenate.nhs.uk> has a page where patients and the public can register their interest in the work of the Senate.

### **4. The Senate's Commitment to Patient, Service User, Carer and Public Involvement**

The Senate will:

- Produce recommendations, guidance and advice for commissioners and providers that maintains a focus on the needs of the patient, service user and carer
- Ensure that all of the Senate expert panels have representation from lay members
- Ensure that the Senate Council has at least 2 lay members as part of its core membership
- Offer support and training to lay people who contribute to the Senate work as members of the Assembly and the Council
- Arrange regular meetings of our lay members from both the Council and the Assembly to provide opportunity to reflect on the role, share concerns and best practice and try to improve our ways of working
- Pay travel expenses to lay members of the Senate Council and Assembly
- Review the processes and methods to involve lay people in its work

## 5. Support for Patient, Service User, Carer and Public Involvement

The Senate recognises the need to support patient, carer and public involvement. The Senate Manager provides support to the lay members of our Council and our Assembly, providing:

- A clear description of the role
- An induction programme and training and development to support the role as required
- A commitment to use jargon free language and provide information such as meeting papers in good time and as paper copies if preferred
- Opportunities for patient and carer members on the Council and the Assembly to network through arranging regular meetings
- Ongoing support and advice for individual topics
- Reimbursement of out of pocket expenses

## 6. Payment for Lay Involvement

All lay members of the Senate Council and Assembly working groups are offered travel and subsistence expenses. The policy is contained in Appendix A.

## 7. Evaluation and Development

The Senate recognises that patient, service user, carer and public involvement can always be improved. We aim to develop new, expanded and improved opportunities, processes and methods for involving patients, service users, carers and the public in the following ways:

- To ensure that all the Senate work has the opportunity for lay involvement and lay people's views and experiences to be expressed
- To take account of the views of diverse populations by reflecting their needs and points of view in the development of our recommendations
- To strengthen the relationship with voluntary, charitable and third sector organisations
- To share lessons learnt from involving patients, service users, carers and the public across different Senate work programmes
- To review the format, content and communication of our written information so it better meets the needs of patients, service users, carers and the public
- To maintain our web presence so that it is accessible for patients, service users, carers and members of the public
- To consider how to engage with groups of people that cannot take part directly in our Assembly working groups, such as people with communication difficulties
- To continue to develop processes and methods to evaluate the successes and limitations of patient, service user, carer and public involvement work at the Senate

## Appendix A

**YORKSHIRE AND THE HUMBER CLINICAL SENATE**

Patient & Public Involvement

# **Expenses Policy**

**&**

# **Claim Form**

Version 3.0

April 2019

## Expenses Policy

This policy is drawn from the NHS England and NHS Improvement policy “Working with our Patient and Public Voice (PPV) partners – Reimbursing Expenses and Paying Involvement Payments” (v2).

The work of the Clinical Networks & Senate involves a number of people outside the core team, including patients and public members. It has been agreed where people outside the core team undertake work on behalf of the Clinical Network & Senate, they are entitled to claim for the reimbursement of their travel costs and, in exceptional circumstances only, accommodation costs.

### Rail Travel

Rail travel will usually be booked and purchased by the Senate Administrator on behalf of patient and public partners, however we recognise that on some occasions this will not be possible. If travellers require a standard underground travel card, this can also be purchased via the Administrator.

### Bus Travel

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

### Taxi

Taxis may only be used where there is a justification on the grounds that 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

Rates of reimbursement are in line with Her Majesty's Customs and Revenue Service (HMRC) recommendations, correct at HMRC website April 2017. When travelling by personal vehicle, the vehicle must have valid insurance, tax and an MOT certificate.

Patient and public 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.

Patient and public partners are personally liable for any excess parking penalties, charges or fines issued to them and NHS England and NHS Improvement will provide no refunds for these charges.

Similarly, excess fare charges on any means of public transport are normally the responsibility of the lay member and not NHS England and NHS Improvement, unless it can be demonstrated that this was an unavoidable circumstance beyond their control.

HMRC approved mileage rates		
	First 10,000 business miles in the tax year	Each business mile over 10,000 miles in the tax year
Cars and vans	45p	25p
Motorcycles	24p	24p
Bicycles	20p	20p

### 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 April 2017).

### **Air Travel**

All travel by aircraft will be at standard economy rate. Air travel can be booked through NHS England and NHS Improvement's travel system via the Senate Administrator. Any car parking and transfer costs will be taken into account.

### **Accommodation**

Accommodation requirements will usually be booked and purchased through NHS England and NHS Improvement's travel system via the Senate Administrator, although it is recognised that on some occasions this will not be possible.

### **Assistance Animals**

Patient and public 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 and NHS Improvement.

### **Subsistence/Meals**

If patient and public partners are involved in NHS England and NHS Improvement 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 £25

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.*

## **Carers and Support Workers**

NHS England and NHS Improvement recognises that in some circumstances patient and public 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 and NHS Improvement 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 lay member 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 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 and NHS Improvement 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 patient and public partner and not by NHS England and NHS Improvement. NHS England and NHS Improvement 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.

## **Office Supplies**

NHS England and NHS Improvement recognises that many patient and public 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 patient and public 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 patient and public partners are engaged to support NHS England and NHS Improvement 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 patient and public partners volunteer to support NHS England and NHS Improvement 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 paper and home office sundries. We have taken this approach to reduce the administrative burden for lay members 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.

## **Involvement Payment**

If you participate in a clinical panel which requires a site visit or a meeting with your clinical panel members, you will be offered out of pocket expenses and an involvement payment of £150 per day (more than 4 hours) and £75 per half day (4 hours or less). Patient and public

partners can refuse the payment or accept a reduced amount should they so wish. This involvement payment will always be agreed by the Senate Manager in advance.

The rates above are fixed and cannot be adjusted or divided up – there is no ‘hourly rate’ payment for patient and public partners.

Where a meeting or event is cancelled at short notice (48 hours or less) patient and public partners should receive a half day rate where they have already undertaken preparatory work and meeting/event papers and/or documentation has been issued. Any expenses already incurred will also be reimbursed.

Patient and public volunteers must be aware that accepting an involvement payment can affect individual’s entitlement to state benefits and/or health insurance benefits. You are advised to contact the relevant organisation prior to accepting the involvement payment.

To claim this involvement payment, you need to state ‘involvement payment’ under the details section of the expenses form and put the relevant amount (£75 or £150) in the other expenses category.

### **Process for Reimbursement of Expenses**

Patient and public partners seeking reimbursement of expenses must provide evidence of expenditure in the form of a receipt or ticket and can only reclaim their own expenses and not for expenses incurred by other colleagues.

Patient and public 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 lay member should discuss this with the meeting organiser.

Payments can only be made by cheque and claimants must include their name and the address to which they would like the cheque issuing. The rate of re-imburement is defined by NHS England and NHS Improvement.

For the reimbursement of travel costs, claimants need to complete the following “Patient and Public Voice Participant Expenses Claim Form.

## Patient and public voice (PPV) participant Expenses Claim Form

Name	
Address	
Postcode	
Tel No.	
email	

Date	Event Title and Location, details of expenses claimed	Mileage claimed (mileage rates on page 2)			Travel fares	Other expenses
		Full mileage rate	Passenger miles	Passenger name	£	£
					Please attach receipts	
	<b>Total</b>			<b>Total</b>		

### Attendee Declarations (please tick to confirm your agreement):

1. I confirm that the above expenses have been incurred as a result of working in partnership with NHS England and NHS Improvement and they comply with NHS England and NHS Improvement's PPV expenses guidance.
2. The motor vehicle for which I have claimed a mileage allowance above is insured. The vehicle is maintained at all times in road-worthy condition and complies with the requirements of the Road Traffic Acts. I hold a valid driving licence.
3. If you have received an involvement payment for any work done, please tick to confirm that you understand that you are responsible for declaring this income to HMRC or other income providers (e.g. Jobcentre Plus, or insurance companies who may provide income to individuals).

Signed (PPV participant): ..... Date: .....

Authorised for payment by (please print and sign): .....

Date: .....

Please email your claim form to [stephaniebeal@nhs.net](mailto:stephaniebeal@nhs.net) or post to Clinical Senate, NHS England and NHS Improvement, Oak House, Moorhead Way, Brampton, Rotherham S66 1YY, marked for the attention of Stephanie Beal.

Please note that you will be paid by cheque to the address that you have listed on your form within 14 days of receiving your claim form.

**Approved mileage rates:**

Rates of reimbursement are in line with Her Majesty's Customs and Revenue Service (HMRC) recommendations, correct at HMRC website April 2017. When travelling by personal vehicle, the vehicle must have valid insurance, tax and an MOT certificate. **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 April 2017).

From HMRC website	First 10,000 business miles in the tax year	Each business mile over 10,000 in the tax year
Cars and vans	45p	25p
Motor cycles	24p	24p
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