

Document Title	Recognition Payments Policy			
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Lead Officer	James Duncan Deputy Chief Operating Officer and Executive Director of Finance			
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1 Introduction

- 1.1 Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW or the Trust) recognises and values the contribution of Service Users and Carers. The (Service User and Carer) Involvement Recognition Payments Policy underpins the Trust's Together: Service User and Carer Involvement Strategy and its commitment to effective and meaningful involvement.
- 1.2 Involvement payments are a discretionary payment that the Trust offers to Service Users and Carers in recognition of giving their time and contribution.
- 1.3 An involvement payment should only be offered to people who are invited to participate in time-limited, specified activities within the Trust in improving, planning, delivering, monitoring, and/or evaluating services. This would include contributing to meetings, committees, training, recruitment, quality improvement and service development.
- 1.4 Payments may be subject to tax and national insurance, so Service Users and Carers should be advised to check if their benefits will be affected. Payments can only be made through a nominated bank account and a national insurance number must be held.
- 1.5 An offer of an involvement payment and travel expenses will be made where:
 - the Contributor is a registered member of the Involvement Bank,
 - the **Trust has issued an invitation to people to attend a specific activity**,
 - the involvement has been confirmed by the Involvement Service as coming under the recognition payments policy.
- 1.6 An involvement payment **will not be paid where people choose to attend** information sharing or supportive events, such as: public consultations, service user or carer forums (Reference Group).
- 1.7 A Service User or Carer may choose to **not** make a claim for payment under this recognition payments policy.
- 1.8 Involvement payments are **not** made to our mainstream registered Volunteers. All voluntary roles aim to compliment the work of our paid staff and the process for the recruitment, support and reimbursement of expenses incurred is different to those of the Trust's Patient and Carer Involvement Bank. Information on mainstream volunteering can be found in the booklet 'Volunteering in CNTW'.
- 1.9 Involvement payments are **not** made to members of the Trusts' Council of Governors. The voluntary role of the Governor includes specific statutory duties in line with the primary legislation and regulatory guidance and, as such, it is important that they maintain a level of independence within the Trust.

- 1.10 Exceptional circumstances will be considered by the Head of Patient and Carer Involvement who has discretion to give consideration to involvement activity outside of this criteria.

2 Purpose

- 2.1 The purpose of this document is to clarify the Trust's payment structure in respect of a person who uses, or has used, Trust services (excluding those in current Trust employment), or their Carer, when they take an active role in an involvement activity. Service Users and Carers can participate in Trust involvement activities in different ways, as described in the Involvement Activities provided at Appendix 1.
- 2.2 The objective of this policy is to acknowledge meaningful involvement of Service Users and Carers in Trust involvement activities. All involvement should be meaningful and of value, not just to the Trust, but also to the person undertaking the activity.
- 2.3 The policy acknowledges that co-production is not always possible, however, an intention to involve Service Users or Carers in service design and development, should consider how best to ensure meaningful involvement and, where possible, co-production.

3 Duties, Accountability and Responsibilities

3.1 Chief Executive and Trust Board

The Chief Executive and Trust Board jointly have overall responsibility for the strategic and operational management of the Trust, including ensuring that Trust policies comply with all legal, statutory and good practice requirements.

3.2 Deputy Chief Executive & Executive Director of Finance

The Executive Director of Finance will be responsible for ensuring the correct implementation of this policy, the review of its effectiveness, and that it is kept up to date by the relevant author(s) and approved at the appropriate committee.

3.3 Head of Patient and Carer Involvement

The Head of Patient and Carer Involvement will ensure that requests for Service User and Carers activities are appropriately managed and will provide accurate details of any payments made to an individual if asked to do so by the Benefits Agency or Inland Revenue.

3.4 Patient and Carer Involvement Team

The Patient and Carer Involvement Team has the lead responsibility within the Trust to help facilitate Service User and Carer involvement and provide other practical support wherever possible:

- To ensure Service Users and Carers are provided with appropriate training, role descriptions, clear terms of reference and verification that they have had appropriate experience with the service that the activity relates to.
- To be explicit about the areas of activity for which payment and expenses are made, including the nature, extent of and duration of this activity.
- To provide support so that any Service User or Carer who wishes to be involved in Trust involvement activities can do so regardless of their age, race, ability to speak English, religion, gender, disability, sexual orientation or culture.
- To provide support to Service Users and Carers who require help in submitting claims for recognition payments and expenses.
- To advise Service Users and Carers that claiming payment for involvement activities may affect their tax and benefits status.
- To provide Service Users and Carers with the details of relevant advice agencies that they may approach with regard to the impact that any claim for recognition payments may have on their benefits.

3.5 Staff

Staff leading on an involvement activity (Lead Officer) must ensure that the Service User and/or Carer are fully supported in their role and that they receive any relevant paperwork prior to the activity taking place. Staff must consider access to Trust patients in any involvement activity and discuss any issues that have been identified relating to the Service User or Carer with the Patient and Carer Involvement Facilitator.

3.6 Trustwide Patient and Carer Involvement and Experience Group

The Chair of the Trustwide Patient and Carer Involvement and Experience Group will ensure the committee agree the approval of the final draft of this policy.

4 Definition of Terms and Abbreviations

Abbreviation	Definition
DBS	Disclosure and Barring Service
HR	Human Resources
MOT	Ministry of Transport
CNTW	Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

5 Involvement Procedure

5.1 Involvement Bank of Service Users and Carers

Any Service User or Carer who has recent experience of the Trust's services (within the last 4 years) who would like to be 'involved' are encouraged to express their interest with the Trust's Involvement Bank by contacting the Patient and Carer Involvement Team at:

- St. George's Park, Morpeth NE61 2NU
- Email: involvement@cntw.nhs.uk

An Involvement Facilitator will then work with the individual to find out how they wish to be involved, identify any training needs and signpost, if required, to the most appropriate teams, before registering the Service User or Carer as a Contributor on the Involvement Bank.

Basic information about each person, such as contact details, areas of interest, and skills held, enable the Trust to identify involvement opportunities, to the right person. Contributor data is stored confidentially.

5.2 Who can be Involved

In most cases any Service User or Carer can become involved with the Trust. However, there may be times where we, as staff, have a duty to ensure the safety of Service Users (Patients) and our own staff during activities. Generally, those registered on the Involvement Bank do not undergo Disclosure and Barring Service (DBS) checks and therefore any criminal conviction or restrictions of contact may not be known.

- Those persons with a criminal conviction which may have an effect on who they are allowed to come into contact with should not generally participate unless a risk assessment by the Lead Officer has been undertaken.
- For Contributors within the Forensic service all activities need to be approved by a Forensic staff member.

5.3 Activities for which the Trust will make a recognition payment

Recognition payments will be offered to people who participate in specified involvement activities within the Trust. Examples of involvement activities include (this is not an exhaustive list):

- Assisting with training of staff.
- Recruitment and selection of staff.
- Quality improvements and service developments.
- Assistance with hospital inspections and hospital visits.
- Attendance on committees or reference groups.
- Delivering a personal journey presentation.

For further examples see the Involvement Activities at Appendix 1.

Reasonable time spent travelling to and from the person's base (usually home) to carry out an involvement activity (or activities) listed in this section will be accepted as part of the session.

5.4 **Activities where a recognition payment would not usually be paid**

Examples of activities where an involvement payment **would not** usually be paid include:

- Information sharing events, such as: public consultations, Reference Group.
- Undertaking a training course for own personal benefit.
- Attending conferences for own knowledge.
- A direct, unsolicited offer to present own story.
- Reading and meeting preparation time.

Note: Where documents to support a meeting are particularly complicated, numerous or detailed (such as for interview panels), then with the prior agreement of the Head of Patient and Carer Involvement, additional time can be claimed to cover the preparatory reading involved.

5.5 **Recognitions Payment Structure**

A recognition payment of £40 is made for up to 4 hours of involvement and for every 4 hours or part thereof after.

This is paid monthly through the Trust's payroll, directly into a Contributor's (Service User or Carers) bank account. Claims should be made by the completion of a recognition payments claim form, Appendix 3. Those claiming should be made aware that any payment may impact on benefits that they may be in receipt of, and **if in doubt they should contact their benefit providers.**

Contributors may choose to donate their involvement payment to charity, however the payment must still be made to the individual in the first instance and this would still be treated as earnings in terms of benefits.

5.6 **Payment of Young People**

Young people (those aged under 16 without a national insurance number) are eligible to claim a recognition payment under the process identified at paragraph 5.5, or where they do not hold a personal bank account, they may request payment in the form of high street shopping vouchers.

Claim forms need to be signed by the young person and either their parent or guardian OR the staff member leading the activity. It is the responsibility of the staff working with the young person to determine through their work with the young person if parental/guardian consent is required.

The involvement recognition payments claim form must be sent to the Patient and Carer Involvement Team for processing and if vouchers have been requested, they will be sent out direct to the young person at the address provided on the form.

Once a young person turns 16 and has received their national insurance number, then they must register to receive any further payments by the Trust's payroll system.

5.7 Involvement Payment Process

The claimant needs to fully complete the appropriate recognition payments claim form (Appendix 3) ensuring it is signed by themselves and the Staff Lead Officer.

When a recognition payment is claimed for the first time (for those over 16 years of age) there is a requirement to complete a new starter form (see Appendix 2) which enables the Finance Department to set up their bank details for payments to be made directly into their bank account. This form only needs to be completed once.

The claimant must be advised that recognition payments will be taxed before being paid direct into their bank account and to check any benefits they receive are not affected.

If a new starter form has been completed this should be returned to the Patient and Carer Involvement Team, St. George's Park, at the end of the activity to prevent any delay in payment.

If a recognition payment claim form has been completed by the claimant, this should be checked in terms of the time and amount before being signed by the Staff Lead Officer to verify that this is a genuine claim. This should then be sent to the Patient and Carer Involvement Team.

It is important that recognition payment claims are not delayed in terms of being returned to the Involvement Team as this can result in a delay in payment for a Contributor. Payments are processed no later than the 11th working day of each month and payment is made on the 28th day of that month.

Please note that incomplete forms can result in delays in the claimant receiving their involvement recognition payments.

6 How to involve Service Users or Carers

6.1 The member of Trust staff taking responsibility for involving Service Users or Carers is referred to as the Staff Lead Officer.

6.2 The Staff Lead Officer should contact the Involvement Team allowing, wherever possible, 4 weeks' notice of an involvement opportunity. The Involvement Bank Staff Guide provides details on the process to follow. A copy of the Involvement request form is provided at Appendix 4.

6.3 Examples of an involvement activity is provided at Appendix 1, Involvement Activities.

- 6.4 Details of involvement opportunities will be sent out by the Involvement Team to Contributors by post or email, depending on personal choice.
- 6.5 Involvement Facilitators will be responsible for ensuring that the allocation of opportunities is a fair process.
- 6.6 There are times when an involvement opportunity is not circulated, based on the criteria required. Involvement Facilitators may consult with their Bank of Contributors directly to identify a suitable candidate for the activity in such circumstances.

7 Payment of Expenses

- 7.1 The Trust will reimburse reasonable travel and subsistence expense which Contributors have incurred in relation to agreed involvement activity.

Reimbursements can be claimed on:

Public transport costs: Actual cost reimbursed with a receipt (if the receipt is required for a return journey, this needs to be noted on the claim form and signed as receipt seen by the Staff Lead Officer).

Car mileage: At the current rate per mile for the most direct or quickest route. When travelling by personal vehicle, the vehicle must have valid insurance, tax and an MOT certificate.

Parking: Actual cost reimbursed with a receipt.

Use of taxis: Where possible and appropriate, people are encouraged to use public transport to minimise costs. Taxis can be used on an exceptional basis with prior agreement by the Involvement Team by phoning (01670) 501816 or by emailing RecognitionPayments@cntw.nhs.uk.

Subsistence: Meals that have to be paid for whilst on business or bought due to having to be in a certain place at a certain time, to a maximum of Trust limits, by prior agreement with the Head of Patient and Carer Involvement and supported by a receipt.

Other expenses: Relevant stationery, postage and telephone costs supported by a receipt.

- 7.2 The Staff Lead Officer should check, verify and sign the Contributor claim form.

7.3 Forms will be processed by the Involvement Team and submitted to Finance; and monies will be paid to the Contributor directly into their bank account.

8 The National Minimum Wage and Employment Law

8.1 Involvement activity **does not equate to paid employment** that is covered by a contract of employment between an employer and employee.

9 Identification of Stakeholders

9.1 This is a new policy and has been presented to the Executive Board and the Business Delivery Group, therefore it is being circulated to those listed below for consultation for a period of **two** weeks.

- **North Locality Care Group**
- **North Cumbria Group**
- **Central Locality Care Group**
- **South Locality Care Group**
- **Corporate Decision Team**
- **Business Delivery Group**
- **Safer Care Group**
- **Communications, Finance, IM&T**
- **Commissioning and Quality Assurance**
- **Workforce and Organisational Development**
- **NTW Solutions**
- **Local Negotiating Committee**
- **Medical Directorate**
- **Staff Side**
- **Internal Audit**
- **Health Safety Security and Resilience**

10 Training

10.1 Sections of Corporate Induction such as Confidentiality, Equality and Diversity will be covered in an Involvement Bank local induction programme including an introduction to the team and local environment: fire safety procedures and the expectations and limitations of the role.

10.2 Service Users and Carers who participate on interview panels must receive appropriate Recruitment and Selection training prior to sitting on a panel.

11 Implementation

11.1 This is a newly introduced Policy which will require promotion and delivery review. The Policy has been widely circulated to Directors and Managers, Service Users and Carers. It will be implemented from August 2021 and should be fully embedded across the Trust by March 2022.

- 11.2 The Trustwide Patient and Carer Involvement and Experience Group will regularly review involvement recognition payments and highlight areas of concern for relevant action within the Directorates/Groups.

12 Equality and Diversity

- 12.1 In conjunction with the Trust's Equality and Diversity Officer this policy has undergone an Equality and Diversity Impact Assessment which has taken into account all human rights in relation to disability, ethnicity, age and gender. The Trust undertakes to improve the working experience of staff and to ensure everyone is treated in a fair and consistent manner. (See Appendix A)

13 Fair Blame

- 13.1 The Trust is committed to developing an open learning culture. It has endorsed the view that, wherever possible, disciplinary action will not be taken against members of staff who report near misses and adverse incidents, although there may be clearly defined occasions where disciplinary action will be taken.

14 Patient Information Leaflets

- 14.1 Any information given to patients needs to be in an accessible format, accurate and 'branded' correctly. Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (the Trust) follows the process around production of this information as outlined in the Trust's, CNTW(O)03 – Accessible Information for Patients, Carers and Public Policy.
- 14.2 Patient Information leaflets will be reviewed every 3 years with the exception of those documents which are reviewed on an annual basis. However, should there be any changes in legislation or practice; all documents will be reviewed immediately irrespective of review date.

15 Fraud, Bribery and Corruption

- 15.1 In accordance with the Trust's CNTW(O)23 – Fraud, Bribery and Corruption Policy, all suspected cases of fraud and corruption should be reported immediately to the Trust's Local Counter Fraud Specialist or to the Executive Director of Finance.

16 Monitoring

- 16.1 There will be ongoing monitoring of this Policy to ensure compliance via the reporting to the Trustwide Patient and Carer Involvement and Experience Group: refer to Appendix C.

17 Associated documents

- CNTW Service User and Carer Involvement Strategy: Together
- CNTW(O)01 – Development and Management of Procedural Documents
- Patient and Carer Guide to Involvement
- Involvement Bank Staff Guide

18 References

NHS England: Working with our Patient and Public Voice (PPV) Partners – Reimbursing expenses and paying involvement payments (First published: July 2017)

Appendix A

Equality Analysis Screening Toolkit			
Names of Individuals involved in Review	Date of Initial Screening	Review Date	Service Area / Locality
Christopher Rowlands	April 21	May 23	Trustwide
Policy to be analysed		Is this policy new or existing?	
NTW(O)85 – Recognition Payments Policy		New	
What are the intended outcomes of this work? Include outline of objectives and function aims			
Financial acknowledgement of the services users and carers involvement in Trust activities.			
Who will be affected? e.g. staff, service users, carers, wider public etc			
Staff, Service Users, Carers			
Protected Characteristics under the Equality Act 2010. The following characteristics have protection under the Act and therefore require further analysis of the potential impact that the policy may have upon them			
Disability	Reasonable adjustments may be required for disabled people.		
Sex	Policy equally applies.		
Race	Policy equally applies however reasonable adjustments may be required for language barriers.		
Age	Policy applies consistently across all age groups.		
Gender reassignment (including transgender)	Policy has a neutral impact with regard to gender reassignment.		
Sexual orientation.	Policy has a neutral impact with regard to sexual orientation.		
Religion or belief	Policy has a neutral impact.		
Marriage and Civil Partnership	Policy has a neutral impact.		
Pregnancy and maternity	Policy has a neutral impact.		
Carers	Policy has a neutral impact.		
Other identified groups	None identified.		

How have you engaged stakeholders in gathering evidence or testing the evidence available?	
Policy has been developed by careful examination and discussion of policies in other organisations, by using guidance produced by the Dept Health and other organisations, policy has been discussed extensively in varied Trustwide and Locality meetings during its design stage.	
How have you engaged stakeholders in testing the policy or programme proposals?	
Policy will go out to consultation, comments received will be incorporated in a final draft that will be submitted for approval by the Business Delivery Group.	
For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:	
Service Users and Carers via their Reference Group and individually. Locality Patient and Carer Involvement and Experience Groups Meetings to research experience of other Mental Healthcare organisations: TEWV and Cumbria. Department of Health Guidance.	
Summary of Analysis Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impact, if so state whether adverse or positive and for which groups. How you will mitigate any negative impacts. How you will include certain protected groups in services or expand their participation in public life.	
Research has shown evidence of a positive outcome for service improvement when involvement is embedded in a Trust. Service development benefits Service Users and Carers as well as Trust stakeholders.	
Now consider and detail below how the proposals impact on elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups. Where there is evidence, address each protected characteristic	
Eliminate discrimination, harassment and victimisation	No impact.
Advance equality of opportunity	No impact
Promote good relations between groups	Recognition of the value of working with Service Users and Carers and the involvement payments that the policy makes for this should help increase involvement activity.
What is the overall impact?	To be assessed after formal consultation. Improved service design
Addressing the impact on equalities	Equality analysis, to be outlined after the formal Policy consultation.
From the outcome of this Screening, have negative impacts been identified for any protected characteristics as defined by the Equality Act 2010?	
If yes, has a Full Impact Assessment been recommended? If not, why not?	
Manager's signature: Christopher Rowlands	Date: May 2021

Appendix B

Communication and Training Check list for policies

Key Questions for the accountable committees designing, reviewing or agreeing a new Trust policy

Is this a new policy with new training requirements or a change to an existing policy?	New Policy
If it is a change to an existing policy are there changes to the existing model of training delivery? If yes specify below.	N/A
<p>Are the awareness/training needs required to deliver the changes by law, national or local standards or best practice?</p> <p>Please give specific evidence that identifies the training need, e.g. National Guidance, CQC, NHS Resolutions etc.</p> <p>Please identify the risks if training does not occur.</p>	<p>Local induction training to take place for all new members of the Involvement Bank.</p> <p>Practical application of the Policy will identify issues and ensure a consistent and common approach.</p>
Please specify which staff groups need to undertake this awareness/training. Please be specific. It may well be the case that certain groups will require different levels e.g. staff group A requires awareness and staff group B requires training.	The Policy applies to all staff; awareness discussions available to Managers to enable them to understand their roles and responsibilities. Also to enable them to manage and implement the Policy effectively.
Is there a staff group that should be prioritised for this training / awareness?	Managers.
<p>Please outline how the training will be delivered. Include who will deliver it and by what method.</p> <p>The following may be useful to consider: Team brief/e bulletin of summary Management cascade Newsletter/leaflets/payslip attachment Focus groups for those concerned Local Induction Training Awareness sessions for those affected by the new policy Local demonstrations of techniques/equipment with reference documentation Staff Handbook Summary for easy reference Taught Session E Learning</p>	Policy will be available on the internet; and will be highlighted in the Chief Executives Bulletin.
Please identify a link person who will liaise with the training department to arrange details for the Trust Training Prospectus, Administration needs etc.	Head of Patient and Carer Involvement.

Appendix B – continued

Training Needs Analysis

Staff/Professional Group	Type of training	Duration of Training	Frequency of Training
All Contributors - all members of the Involvement Bank.	Attendance at: Induction Training	½ day	Once

Appendix C

Monitoring Tool

Statement

The Trust is working towards effective clinical governance and governance systems. To demonstrate effective care delivery and compliance, policy authors are required to include how monitoring of this policy is linked to auditable standards/key performance indicators will be undertaken using this framework.

CNTW(O)85 - Recognition Payments Policy - Monitoring Framework			
	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action plan will be reported to implemented and monitored; (this will usually be via the relevant Governance Group).
1.	Review of involvement activity levels and cost to Trust	<p>Bi-Annual Involvement activity reports: Patient and Carer Involvement Team.</p> <p>Annual Trustwide review of Involvement activity and payments made. Patient and Carer Involvement and Experience Group Chair, Head of Patient and Carer Involvement.</p>	<p>Locality and Trustwide Involvement and Experience Groups</p> <p>Quality and Performance Committee via Trustwide Service User and Carer Involvement and Experience Group, who will highlight areas of concern for relevant action within the Localities.</p>