

# **Patient and Carer**Guide to Involvement



### Equality statement

We value diversity and welcome people who identify with different protected groups getting involved. Your experiences help us to ensure that our services are fair, inclusive and meet your needs.

religion or belief disability gender sexual-orientation gender reassignment race age pregnancy and maternity marriage or civil partnership



### Employment Law

Involvement activity is not paid employment. It is not covered by a contract of employment between an employer and employee. However, service users and carers who are paid back travel expenses for their involvement should contact their benefit office if they have any questions.

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### 1 Introduction to Involvement

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust values the involvement of service users, their carers and the wider community. The Trust is looking for people with experience of its services to share their views and influence how we work.

Involvement comes under patient and public engagement which is different to mainstream volunteering. The Patient and Carer Involvement Team co-ordinate and facilitate service user and carer involvement, in specific short-term activities and projects like service design, planning and evaluation. We have set up an involvement bank to help us do this work.

This Guide to Involvement and the Involvement Bank registration form are available online at:



www.cntw.nhs.uk/services/patient-and-carer-involvement

This Guide identifies ways to involve service users and carers in shaping future healthcare services. How much you get involved is up to you. There are three types of involvement:

#### Individual

In assessment, formulation, care planning and goals, in self-management, in individual issues. This happens when you are in services.

### Development of services

Groups, wards and community meetings, food, Points of You (experience feedback tool), recruitment and selection, training, research and evaluation.

### In service change and improvement

More 'formal' consultation, involvement commissioning, change projects and initiatives.

This guide provides you with key information to help you on your involvement journey.

Service users and carers who have experienced the Trust's services within the last four years and would like to be involved as a 'contributor', are encouraged to register with the Trust's Involvement Team.

If you want to get involved, please complete a registration form.

(See appendix 2).

You are encouraged to share ideas and respect the needs and views of others. You will be given clear information, recognising and respecting confidential and sensitive content. You will receive support, guidance and honest answers about how decisions are made.

#### If you think that

- The Trust has not got involvement right
- Are concerned that anyone is not acting within the Trust's value and behaviours

Talk to any member of staff or the Involvement Team.

# 2 The Involvement Team

Involving patients, carers and their families in making decisions about their care can lead to better outcomes and a better overall experience. We are looking at new ways to involve service users and carers in shaping future healthcare services.

We recognise and value the views of patients and carers. This is underpinned by our 'Together: Service User and Carer Strategy' and its commitment to offer effective and meaningful involvement. We firmly believe that a collaborative relationship with patients, third sector (non government such as voluntary organisations) and communities is key to service design.

#### Main Office:

Patient and Carer Involvement Team St. George's Park Morpeth Northumberland NE61 2NU

Tel: 01670 501 816

Email: involvement@cntw.nhs.uk



Complaints: 0191 245 6672

Patient Advice and

Liaison Service : 0800 328 4397 Safeguarding: 0191 245 6698



## 3 What Support is Available?

Support will be provided by the Involvement Team to enable you to meet your goals for involvement with the Trust. This will include training and appropriate support from the staff member leading the involvement activity you engage in.

Individual Patient and Carer Involvement Facilitators lead on each of the localities within the Trust; North (Northumberland and North Tyneside), Central (Newcastle and Gateshead), South (Sunderland and South Tyneside) and North Cumbria. If you have any questions please contact them via our main office for further guidance, information and support.

If you have any specialist needs for support, then please discuss this with your Patient and Carer Involvement Facilitator. You will also find that informal support is available from other service users and carers involved in the project.

In some areas of involvement confidentiality agreements or consent for certain activities will be used. These agreements will be explained and agreed with all those involved either prior to the involvement or on the day. There are also codes of conduct and terms of reference negotiated and agreed during meetings and activities.

## 4 How will you use my Information? (Privacy Notice)

The information you share in the registration form will only be used for the purpose of involvement activities within the Trust. It will be held in accordance with the Data Protection Act 2018 (General Data Protection Regulation GDPR 2016).

This information will not be shared with anyone outside of the Trust and will be held securely by Involvement staff for the purpose of any involvement activity that you may undertake. When you register with the Involvement Team, you will be added to the Trust's electronic system and assigned a unique Involvement number. Your unique number ensures that travel payments claimed are paid to you. It is important that you include this number on any forms so there are no payment delays.

As you do involvement activities this information will be added to your record on the register. We will also add any training you undertake, so we can help you get involved in the right activities.

If at any time you wish to be removed from the register please contact the Involvement Team who will arrange to have your details deleted.

If any of your information changes please let us know as soon as possible so we can update your record.



## 5 what Information will I Receive?

Opportunities to get involved are sent out by email or post, depending on your preference. Some involvement is for specific geographical areas, or services, so will just be sent to those people matching that criteria on the register. Where possible, involvement opportunities are circulated with at least four weeks' notice and contain the following information:

- 1 Details about the involvement opportunity and the contact person
- 2 Any specific knowledge and skills required in order for you to be involved
- 3 The time commitment required
- Details of any training that may be required for the activity
- Details on travel expenses being offered (for most opportunities, other than personal attendance at conferences or training, public consultations)

## 6 Confidentiality

We all have a personal responsibility to protect and maintain confidentiality of both Trust and patient information. This continues after the involvement activity unless information comes into the public domain. By registering with the Involvement Team you agree that:

'You will not, during or after your involvement with the Trust (except so far as is necessary and proper in the course of your involvement) disclose, use, divulge or communicate to any person, form, company or organisation, any confidential information acquired or discovered by you relating to the private or medical affairs of any patient, carer or staff member of the Trust.'

Unless you are disclosing information to comply with a court order or statutory obligation or with the consent of the patient, carer or staff member concerned.



# 7 Health and Safety

The Trust attaches the greatest importance to the safety of service users, carers and staff.

We all have to work together positively to achieve a situation, compatible with the provision of proper services to patients, where personal injuries and hazards to the health of everyone can be reduced to a minimum.

## 8 Safeguarding

All staff, service users and carers who are involved in the Trust's activities have a duty to safeguard and promote the welfare of adults and children at risk.

This duty will take precedence over the duty of confidentiality where there is a risk of significant harm or where a criminal offence has occurred or is likely to occur. Any concerns you have about Service Users, Staff or Visitors should be raised immediately with the Involvement Team, senior staff on duty or the Trust's Safeguarding Team (see contact details).

## 9 Travel Expenses

We will reimburse reasonable travel expenses and a random selection of claims will be checked with AA route finder or equivalent.

Travel expenses are set in line with Her Majesty's Customs and Revenue Service (HMRC) recommendations. When claiming mileage your vehicle must have valid insurance, tax and an MOT certificate.

You must complete a service user and carer Involvement Expenses claim form, which will be provided by the Involvement Team when needed. You must attach receipts for public transport and car parking within 12 weeks of travel.

If you have a return rail or parking ticket a member of staff will sign to say it has been seen in order that you can keep the ticket for your return journey.

#### Reimbursements can be claimed for:

- Receipted Public Transport
- Car mileage at current rate per mile
  - Parking reimbursement with a receipt

Taxis can be used on an exception basis, with prior agreement by the Patient and Carer Involvement Team. Once agreed, a taxi will be pre-booked for you with the relevant local company the Trust has an account with.

Payments will usually be made directly into your bank account. If there is an open cash office on site your travel expenses may be reimbursed in cash on the day.





### Patient & Carer Code of Conduct

### Appendix 1

We greatly value the contribution of service users and carers in involvement activity, who support staff to deliver the highest standards of care to our service users. We recognise the responsibility that comes with this and are committed to supporting you in your role. To help you and promote best practice we have developed a set of core standards of behaviour in this Code of Conduct. The standards outlined are not exhaustive and act as guiding principles to help us promote safety, care and compassion to our service users and to enable you to become involved effectively.

The code should be read as part of a wider package of Trust policies and procedures that apply to staff, volunteers and members of the involvement bank. It is intended to prevent, where possible, situations which could cause problems for you, our service users and carers, to our staff and for the reputation of the Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW Trust).

As a patient or carer representing the Involvement Team we expect you to:

#### Adhere to Trust Values

- Be caring, compassionate and considerate.
- Treat everyone with dignity and respect.
- Be approachable and helpful.
- Listen and put the Service User's needs and interests first.
- Respect people's right to privacy.

### Undertake your role as a effectively

- Meet the needs of service users and carers in your role as explained by the Patient and Carer Facilitator, and do not undertake tasks that exceed the boundaries of your contributor role. Under no circumstances should you undertake clinical duties.
- Recognise and respect the roles and expertise of staff, and work in partnership with them.
- Conduct your duties in line with relevant Trust policies and procedures, particularly Health and Safety, Confidentiality, Equality and Diversity and Smoke free.
- Ensure you role remains safe and effective by attending agreed training, support, and supervision sessions.
- Inform the Involvement Team staff when you are unable to attend your contributor role.
- Wear your ID badge whilst undertaking Involvement work only. Return the badge upon leaving the service and report any lost badges immediately.
- Help us to maintain a smoke free environment for all by not smoking on Trust premises (including the grounds) at any time.

#### Report Safeguarding Concerns

- Follow guidance relating to Safeguarding Adults (and Safeguarding Children if volunteering with under 18's).
- Listen to service users and do not disregard any concerns raised.
- In line with guidance ensure you report safeguarding concerns.

#### Promote Equality and Diversity

- Promote and support equality and diversity by treating everyone fairly irrespective of difference.
- Respect the beliefs, culture and views of others even when you do not share them.

### **Maintain Confidentiality**

- Ensure the needs of the service are met in an accountable and confidential framework.
- All personal information provided by a service user, carer or member of staff must remain confidential. Situations may occur however when a service user discloses information that has cause for concern e.g. their intent to cause harm to themselves or others. In this instance the information should be passed on to the Involvement Facilitator, member of Involvement Team, or a senior member of the ward or community staff. The service user should be informed that this information will be passed on and it should be explained that this is being done in the best interest of themselves and others.
- Members of the Involvement Bank should not access any written material, notes or data containing personal information about service users, carers, staff or other volunteers either by computer or from manual files or notes.
- If someone you know is being treated in an area which you are involved, please let the Team know as soon as possible.
- Details of service users, carers or Staff should not be discussed on social networking sites.
   Please discuss any issues or concerns with the Team.
- Do not take photographs or make videos of service users, carers, staff or other volunteers using cameras or mobile devices.

### Embrace A Culture of Health and Safety

- Do not put yourself or others at unnecessary risk.
- Comply with Health and Safety Policies and Procedures.
- Liaise with the Involvement Team staff to report any accidents or incidents.
- Bring to the attention of any staff any resource or operational difficulties that may impede the delivery of safe care.

- Seek assistance from your Patient and Carer Involvement Facilitator about any personal difficulties that may affect your ability to undertake your role competently or safely or if you feel inadequately prepared to carry out any aspect of your role.
- Do not attend your role if you believe that your health may impact on the safety of service users.

### Protect Service Users By Acting Responsibly

- Do not form personal relationships with service users or provide them with your personal address or telephone number.
- Please do not accept personal gifts or money from service users. Inform the Involvement Team if any gifts are offered to you.
- Avoid entering into any form of financial transaction with service users (neither lend nor borrow money).
- Do not swear, make offensive comments, bully, intimidate or use aggressive behaviour.
- Do not attend your Involvement role while under the influence or in possession of alcohol or illegal non-prescribed drugs.
- Do not offer service users any form of medication including legal highs (now referred to as Psychoactive Substances).

### Accept Recognition For Your Efforts

 Allow the Trust to offer our sincere thanks and appreciation to you for your valued contribution as a Member of the Involvement Bank.

This Code of Conduct is aimed to promote and encourage best practice and does not under any circumstances form a contract of employment or imply any contractual agreement. The list is not exhaustive and some projects may require further expectations specific to the role.

Disregard for the Code of Conduct will be investigated fairly and may in some circumstances result in removal from involvement duties.



### Involvement Bank Registration Form

### Appendix 2

Title (please tick box)	Mr	Miss	Mrs	Ms	Other (please state)
Name (please print)				Date of Birth (dd/mm/yy)	
Address (please print)				Postcode	
Telephone	Home				
	Mobile				
Email (please print)					
Emergency Contact Name					
Emergency Contact Telephone					
Are you a (please tick)	Service User		C	Carer	
Which services have you recently experienced?	Adult Mental Health			ental Health for Older cople	
	Children and Young People		L	earning Disabilities	
(please tick)	Secure Services		N	eurological Services	
	Trust Promotion (may include presentations)			Governance Groups and Committee Membership	
Specialist areas of interest (please tick)	Consultation Groups		F	ecruitment of Staff	
	Personal Stori include preser		p	nspections (such as atient-led assessments of ne care environment)	
	Quality of Service Improvement Projects (i.e. clinical audits)		F	esearch Projects	
	Working Groups Task and Finish Groups		N	edical Education	
	Training		Д	I	

Preferred Locality (please tick where you are able to take part in involvement activities)	North Cumbria (Allerdale and Copeland, Carlisle and Eden)			North (Northumberland and North Tyneside)		
	Central (Newcastle and Gateshead)			South (Sunderland and South Tyneside)		
Any specific area(s) you would not like to be involved in						
Please tell us how you found out about this involvement opportunity (i.e. which organisation, website, etc).						
Foundation Trust  Membership (please tick relevant box)	Are you interested in becoming a member of the Trust?  YES - I would like to become a member of Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust  NO - I do not wish to become a member of Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust  I am already a member of Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust					
Ethnicity (some activities such as research studies may relate to a specific ethnicity, however please tick relevant box if you are happy to do so)	White British		Any other mixed background		Caribbean	
	White Irish		Indian		African	
	White Other		Pakistani		Any other Black background	
	White & Black Caribbean		Bangladeshi		Chinese	
	White & Black African		Any other Asian background		Any other	
	White & Asian		Black or Black British		Not stated	
Do you have any specific needs you would like us to consider when participating in involvement activities (i.e. health and wellbeing, literacy, etc.)						
Additional Comments						

Rehabilitation of Offenders Act 1974 (Amendments Order 2002)					
The Rehabilitation of 0	The Rehabilitation of Offenders Act 1974 (Amendments Order 2002)				
Due to potentially sensitive roles undertaken in Involvement and the possible contact with vulnerable people, you must declare any unspent convictions, cautions, reprimands or warnings.					
Being considered for Involvement will be subject to a Disclosure and Barring Service Check.  Do you have any unspent convictions, cautions reprimands or warnings?					
Yes	No (please tick as appropriate)				
If yes, please give det	ails				
Declaration					
I understand that my details will be kept on a register for the purpose of involvement activities.					
Your information is confidential and will not be shared with any other organisation. All information will be held in accordance with the Data Protection Act 2018 (GDPR 2016).					
You can ask for your details to be removed from the register at any time by contacting the Patient and Carer Involvement Team on 01670 501 816.					
I understand the expectations outlined above that have been explained to me by the Involvement team. I agree to adhere to the Involvement Code of Practice.					
Signature					
Date					

### Photography and Filming Consent Form

l:						
Give informed consent to be photographed or filmed for publicity materials.						
I understand the information may be used on the Trusts' (Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust) intranet and website (www.cntw.nhs.uk) and for any other promotional materials or events.						
I also understand that I have a right to withdraw my consent at any time and omit my likeness from any future promotional items produced by the Trust.						
Signed:		Date:				
Please return this form to:						
Patient and Carer Involvement Team						
St. George's Park Morpeth						
Northumberland NE61 2NU						
INLUT ZINU						
Email: involvement@cntw.nhs.uk						
Patient and Carer Involvement Team Administration use only:						
Date Received:						
Unique Involvement Reference:						
Date entered onto Involvement Bank:						