

Involvement & Engagement Handbook

A guide, drafted with the help of a group of service users and carers, to help you if you would like to become involved with Tees, Esk and Wear Valleys NHS Foundation Trust.

Equality Statement

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

**Race – Disability – Gender - Sexual Orientation - Religion or Belief –
Age - Gender Reassignment - Marriage or Civil Partnership -
Pregnancy and Maternity**

making a

difference

together

Revision History

Version	Reason for amendment	Date of amendment
Version 2.0	<ul style="list-style-type: none">• Inclusion of guidance for the payment of young people• Inclusion of Under 16 Years Involvement Payment Claim Form• Inclusion of Easy Read Involvement Payment Form	15.12.16
Version 3.0	<ul style="list-style-type: none">• Update to telephone numbers• Inclusion of Data Protection Statement and Privacy Notice• Amendment to registration form	26.6.18
Version 4.0	<ul style="list-style-type: none">• Update to contact details for staff• Inclusion of ladder of involvement• Update around tax and benefits• Inclusion of DBS information• New involvement registration form	01.07.20
Version 5.0	<ul style="list-style-type: none">• Update to Involvement Payments information• Updated Involvement Payment Claim Form	15.10.20

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1. Introduction to Involvement

It is important to us that we involve service users, their carers and the wider community in the Trust's work so that local people have the opportunity to share their views and influence how we work.

Any service users and carers who have experienced the Trust's services within the last 2 years, and would like to be involved, are encouraged to register with the Trust's Involvement and Engagement (I&E) Team.

If you haven't completed one already, please complete a registration form (see Appendix 1).

This handbook will provide you with key information to assist you on your involvement journey and a sheet of frequently asked questions and answers has been provided in Appendix 2.

2. Meet the Team

The team comprises of:

- Kathryn Ord - Deputy Trust Secretary / Involvement and Engagement Lead
- Gillian Taylor – I&E Administrator
- Angela Grant – Senior Administrator

Involvement and Engagement (I&E) Officers

- Gemma Gray - Teesside (Hartlepool, Stockton, Middlesbrough, Redcar & Cleveland)
- Heather Simpson – North Yorkshire & York
- Linda Sloan - Durham & Darlington

More information, including photographs and contact details can be found in Appendix 3.

3. What Support is available to me?

Support will be provided by the I&E Team to enable you to meet your aspirations for involvement and engagement with the Trust.

This will include access to courses and one to one support and coaching. You will also get support from the staff member leading any involvement activity you engage in.

Each I&E officer has a lead geographic area, so if you have any questions please contact them for further information and support. Their contact details can be found above. If you have any specialist needs for support, then please discuss this with your lead I&E Officer. You will find that you also get a lot of informal support from other service users and carers.

In some areas of involvement, confidentiality agreements or consents for certain activities are in place. These arrangements 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. Values and Behaviours

Everyone, including staff, service users and carers, should do whatever they can to ensure that involvement is a positive and rewarding experience.

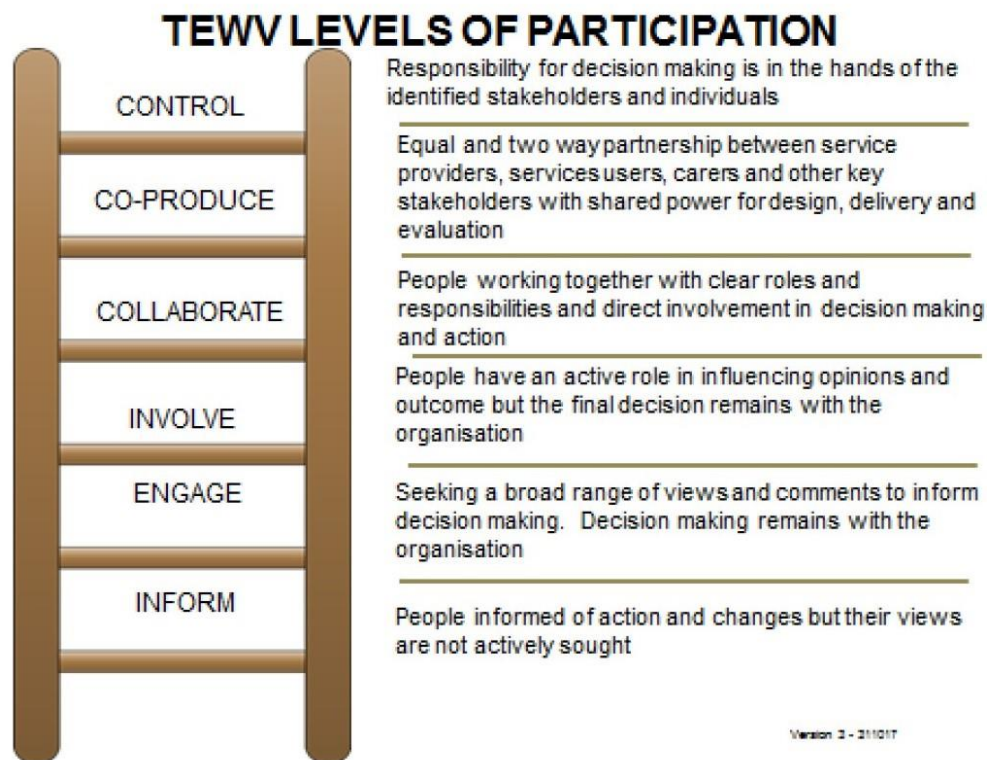
The involvement process supports the Trust's values of commitment to quality, respect, involvement, confidentiality, wellbeing and teamwork.

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 and will receive support, guidance and honest answers about how decisions are made.

If you think that the Trust has not got involvement right, or are concerned that anyone is not acting within the Trust's values and behaviours, you should raise this as soon as possible with any member of staff or the I&E Team.

You can also contact Complaints or PALS - Freephone number 0800 052 0219.

Please see Appendix 4 for the full statement of values and behaviours.



TEWV have developed a ladder of participation which shows that there are many different ways in which people including service users, carers, public and stakeholder may participate in health service design and delivery. The ladder of participation is widely recognised nationally for understanding different forms and degrees of involvement and engagement. It is important to recognise that providing a voice and opportunity for participation at every level is valuable and important. The level of participation, and the degree to which the organisation shares power with others, increases with each step.

5. **Guidance for employees undertaking Involvement Activities**

In conjunction with Human Resources the following guidance is in place for those members of staff who do participate in involvement opportunities within the Trust. It is the responsibility of the staff member undertaking involvement to raise any potential conflicts of interest.

Any involvement work will be undertaken in your own time, outside of your paid hours of employment.

It is inappropriate to undertake involvement work that directly relates to your paid employment.

It may not always be clear if there is any conflict with your paid employment and involvement work, this can be assessed on a case by case basis.

We advise that individuals consider their involvement work and if you have any questions, discuss these with your manager or the lead for the group you are involved in. If you have any doubt please raise your concerns.

Please be reminded of tax implications and how your benefits may be affected when undertaking involvement work.

6. How will you use my information?

Your information 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 (GDPR 2016).

This information will not be shared with anyone outside of the Trust and will only be shared with Trust staff for the purpose of any involvement activity that you may undertake.

As you participate in involvement activities this information will be added to 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 I&E 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 records.

Our Privacy Notice can be found at Appendix 10.

7. What information will I receive?

Involvement opportunities are sent out generally every two weeks by email or post, depending on your preference. Some are for specific geographical localities or services so will just be sent to people matching that criteria on the register. Where possible, involvement opportunities are circulated with at least 4 weeks' notice and contain the following information:

- Details about the opportunity and who to contact
- Any specific knowledge and skills required for you to be involved
- The time commitment required

- Details of any training that may be required for the activity for example, Patient Led Assessments of the Care Environment (PLACE) hospital inspection visits
- Details as to whether an involvement payment is being offered for an activity (see section 11 on involvement payments)
- Details as to whether travel expenses are being offered (for most opportunities, bar personal attendance at conferences or training, public consultations)

8. 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 I&E 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 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 any statutory obligation or with the consent of the patient, carer or staff member concerned.

9. 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.

Involvement members must adhere to any safety recommendations from staff in the area in which they participate. In some circumstances a Disclosure and Barring Service (DBS) check may be necessary to participate in involvement activities due to having direct contact with vulnerable people but this would be discussed with you prior to any involvement activity.

10. Payment through Payroll

The only way the Trust can make involvement payments is through its payroll system, therefore we need you to complete an 'A Form' (a sample completed form is shown in Appendix 5), with your personal bank details and national insurance number.

Your details will be included on the Trusts' payroll account (although you will not be an employee) and you will receive a unique payroll assignment number.

This will be sent out to you on a handy card and should be kept safe as it needs to be included on all claim forms.

If any of your bank account or address details change please inform us as soon as possible to avoid delays in payment.

11. Involvement Payments

Involvement payments are a discretionary payment the Trust offers to service users and carers as a thank you for giving their time and effort. They are subject to tax and national insurance so you should check whether any benefits will be affected before making a claim by contacting the Benefits Office. Help and information on making decisions about benefits and payments can also be found on the following website <https://www.rethink.org/aboutus/what-we-do/advice-and-information-service/>

You need to fully complete an involvement payment claim form (see sample at Appendix 6) in order to receive a payment. Payments are only made via the Trust's payroll process on the last working day of the month and you will receive a pay slip which details what payments have been made.

If your bank account details change please inform us as soon as possible to avoid delays in payment. If you do not have your own bank or building society account we are unable to make involvement payments.

Payments are offered for most involvement and engagement activities, for example:

- Assisting with training of staff
- Recruitment and selection of staff
- Quality improvement and service development
- Assistance with hospital inspections

- Participation on committees or reference groups
- Delivering presentations or conference speaking

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

- Information sharing events, e.g. public consultation and information events
- Undertaking training courses for your own personal benefit
- Attending conferences for your own knowledge

Forms should be submitted for payment as soon as possible after the involvement event to ensure timely payment. Generally payments are made within the month of the claim form being received. If submission of the form occurs after the 14th of the month, payment is made the month after. In exceptional circumstances, we can process payments up to six months after the event. An example would be where someone does not have a bank account and needs time to establish one or to cover a period of illness which results in a delay in the submission of the form. Payments submitted six months after the activity will not be paid. Those submitted after three months, without reasonable excuse, may also not be paid.

It is in your best interests not to delay submission of a claim form to ensure payment.

The current involvement payment is £20 for up to 3 hours of involvement and for every 3 hours or part thereafter.

If you are claiming benefits, accepting involvement payments may impact on these so you should take advice from the Benefits Office beforehand.

If you choose to donate your involvement payment to charity, the payment must still be claimed by and paid to you direct. It is then your choice if you choose to donate this. This would still be treated as earnings in terms of benefits.

Involvement Payments for Young People

Young people (those under 16) are not eligible to receive involvement payments from the Trust in the form of cash. We are able to reimburse young people for their involvement by payment in high street vouchers (Love2Shop vouchers). In order for a young person to claim an involvement

fee a young person's claim form must be completed (see Appendix 9).

The rate of payment is £5 per hour for the involvement activity. Once a young person turns 16, and has received their national insurance number, they must register to receive any further payments by the Trust's payroll system. Payments will be made to a nominated bank account and will be NI and Tax deductible which can be claimed back by the individual. Please refer to section 11 for the process to claim any involvement payment for a person aged 16 or over.

If a person does not have a bank account then unfortunately payments are unable to be made. Vouchers cannot be issued in lieu of this.

12. Travelling Expenses

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.

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

You must fully complete a yellow travel claim form (see sample form in Appendix 7), including your payroll assignment number if you have one, to avoid payment delays. You must attach receipts for public transport and car parking.

If you have a return 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. Rail travel can be pre-booked by the I&E team if you give us sufficient notice (at least 5 working days)
- Car mileage – currently 45p per mile
- Passenger mileage – currently 5p per mile, for taking someone to the same meeting
- Cycling – currently 20p per mile
- Parking – reimbursement with a receipt

If you think you need assistance with travel, you must contact your involvement and engagement officer first to discuss your requirements. If we agree that using a volunteer driver, or booking a taxi, is the right thing to do to

enable you to take part in involvement we will arrange this for you. Taxis can only be used with prior agreement by the I&E Officer. A volunteer driver will be pre-booked for you or, where this is not possible, we will pre-book a taxi for you with the relevant local company the Trust has an account with.

If there is an open cash office on site your travel expenses can be reimbursed in cash on the day. All other payments will be by cheque or, if you have completed an 'A Form' (see sample completed form in Appendix 5), paid directly into your bank account.

Payments by cheque are usually paid within two weeks and payments via payroll will be made on the last day of the month and you will receive a pay slip.

REGISTRATION FORM FOR INVOLVEMENT ACTIVITIES WITHIN THE TRUST

Personal Information					
Title <i>(please tick box)</i>	Mr	Mrs	Miss	Ms	Other <i>(please state)</i>
Name <i>(please print)</i>					
Date of Birth					
Address <i>(please print)</i>					
Postcode					
Telephone	Home				
	Mobile				
Email <i>(please print)</i>					
Preferred Method of Contact	Email		Post		
	Telephone		Text		
Criteria for Involvement					
Are you a service user <i>(please tick)</i>	currently receiving services from TEWV		received services from TEWV in the last two years		
Are you a Carer <i>(please tick)</i>	caring for someone who is currently receiving services from TEWV		caring for someone who has received services from TEWV in the last two years		
Involvement Interests					
Which involvement activities do you wish to register for <i>(please tick)</i>	Full involvement across the Trust		Involvement Peer		
	Recovery Expert by Experience		Medical Education and Development		
	Inspections Fundamental Standards		Inspections PLACE		
	Research and Development		Organisational Development		
	Child & Adolescent Mental Health (under 18)		Learning Disability Services		

Please complete ALL sections below

<p>Foundation trust membership</p>	<p>Are you are interested in becoming a member of our trust? <i>(please tick relevant box)</i></p> <p><input type="checkbox"/> YES - I would like to become a member of Tees, Esk and Wear Valleys NHS Foundation Trust</p> <p><input type="checkbox"/> NO – I do not wish to become a member of Tees, Esk and Wear Valleys NHS Foundation Trust</p> <p><input type="checkbox"/> I am already a member of Tees, Esk and Wear Valleys NHS Foundation Trust</p>					
<p>Ethnicity <i>(please tick relevant box)</i></p>	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	
<p>I will be claiming involvement payments <i>(Please tick)</i> (We strongly recommend that you seek advice on whether payment will impact on any benefits you may be claiming)</p>	Yes		No			
<p>I may need assistance with travel requirements (this will be discussed with you by a member of staff)</p>	Yes	Please give a brief description				
<p>I may need adjustments, help or support to help me get involved (this will be discussed with you by a member of staff)</p>	Yes	Please give a brief description				
<p>Declaration <i>I understand that my details will be kept on a register for the purpose of involvement activities. Your information will be held in accordance with the Data Protection Act 2018 (GDPR).</i></p> <p><i>You can ask for your details to be removed from the register at any time by contacting the Involvement and Engagement Team on 01642 516468 / 01325 552068.</i></p>						

PRINT NAME	
Signature	
Name and Signature of parent / guardian	<i>(if you are under 18 years)</i>
Name and Signature of appropriate person	<i>(if someone has completed this form on your behalf)</i>
Date	
<p>Please return this form (no stamp necessary) to:</p> <p style="text-align: center;"> FREEPOST TEWV or email to tewv.ftmembership@nhs.net </p>	

Will I be employed by the Trust?

No. The Trust does not employ you when you register for involvement activities with us.

What information will I receive?

When you first register for involvement we will send you a welcome pack which will provide you with key information about:

- what involvement is
- how to claim expenses, and an involvement fee
- examples of forms you may be asked to complete so that when you claim any monies from the Trust, we can send them to you as quickly as possible

What support is there?

All of our service users and carers, who are registered with the Involvement and Engagement team, will have a dedicated Involvement and Engagement officer. Each Involvement and Engagement officer holds a lead responsibility for a geographical area of the Trust and also works on a number of strategic projects within the Trust. Your Involvement and Engagement officer will be dependent on where you live and what type of involvement you undertake.

Involvement and Engagement officers support our service users and carers in a number of different ways. After you send in your registration form someone will make contact with you to find out a little bit more about your skills and experiences, what you want to get involved in and how you can be supported in your involvement journey. Based on the discussion held, they may recommend some training or shadowing.

Can I claim expenses or an involvement fee?

The Trust will repay all reasonable travel expenses. Ideally travel should be by public transport or your own car and we will reimburse you when you provide receipts. If you need to travel by train we can purchase the tickets for you, so you don't have to pay these costs yourself.

If you use your own vehicle to travel to involvement activities we reimburse mileage at 45p per mile and we pay 5p per mile if you are giving someone a lift to an involvement activity.

We will pay 20p per mile if you use your bicycle to travel to involvement activities.

For certain activities, we will offer an involvement payment (currently £20 for every 3 hours). When the involvement activity is advertised it will state whether the payment will be offered.

Please note that this payment will be subject to tax and can only be paid directly into your bank account. If you are claiming benefits you should check with your benefits office whether the payments will affect your benefits.

How do I claim expenses and involvement payments?

We will give you claim forms for both travel expenses and involvement payments at the end of each involvement activity you are part of. Service users and carers should not hold their own supply of forms.

Travel expenses

If you would like to claim for travel expenses you should complete a yellow form giving the exact return mileage, or receipted amount that you are claiming. You must sign the form and a member of staff who is there on the day will authorise it.

If you are on a main inpatient hospital site where there are cash office facilities open then you can take your authorised yellow claim form and receive immediate cash reimbursement.

Where there is no cash office available, you need to hand in your form to a member of staff who will send this on to the Trust's finance department for processing.

Volunteer Drivers and Taxis

If you think you need assistance with travel, you must contact your involvement and engagement officer first to discuss your requirements. If we agree that using a volunteer driver or taxi is the right thing to do, to enable you to take part in involvement, we will arrange this for you.

Payments

If our finance department receive your form before the 14th day of the month, you will receive your payment by the end of the month into your bank account. If you receive payment by cheque this will usually be within 2 weeks.

Involvement Payment

If you are claiming an involvement payment of £20 or more then the form for involvement payments must be completed. If this is your first claim you also need to complete a payroll registration form (Form A) to ensure that we can make the payment to you.

A staff member should have supplies of both forms and when you have completed your details, the staff member should take the form(s) from you for processing.

Payments are made at the end of the month (if processed by the 14th day of the month) into your designated bank/building society account. Where processing does not take place by the 14th day of the month the payment will be made the following month.

We can only make involvement payments into a personal bank or building society account and they are subject to tax and national insurance.

Can I claim passenger mileage?

If you are attending an involvement activity and you wish to give a lift to someone else who is attending then you can claim passenger mileage of an additional 5p per mile for the duration that you are transporting the passenger. This is in addition to the extra miles that you may incur which can also be claimed at 45p per mile.

If you are claiming additional miles or passenger miles, this must be clearly noted on your travel expense claim form.

Why do I have an assignment / involvement number?

If you have registered to receive involvement payments, then you have been added to the Trust's electronic payment system (payroll) system. Your number is your unique reference number to ensure payments claimed are paid to you, so it is important that you include this on any forms so there are no payment delays.

Will payments affect my benefits?

If you are claiming involvement payments, the Trust strongly recommends that you contact your benefit office to check there is no adverse effect on your benefits. The Trust cannot advise as to whether claiming would affect you or not.

Help and information on making decisions about benefits and payments can also be found on the following website

<https://www.rethink.org/aboutus/what-we-do/advice-and-information-service/>

Reimbursement of travel expenses should not affect any benefits.

If you require a letter from the Trust to support your time spent engaging with involvement activities, for the purposes of benefit claims, these can be provided.

What if I don't have a bank or building society account?

You can still claim your travel expenses, but we will only make involvement payments to a designated bank or building society account as these are processed through the Trust's payroll system and are tax and national insurance deductible. You may be able to claim your tax and national insurance back dependent on your personal circumstances.

If you are under 16 years of age and do not have a national insurance number, please speak to an Involvement and Engagement officer.

When can I not claim an involvement payment?

You can't claim involvement payments if you are attending a public consultation, a conference or any training that the Trust may offer as part of your personal development.

How do I contact the Involvement and Engagement team?

You can contact any member of the team. Full details are contained within Appendix 3.


Meet the Involvement and Engagement Team


Appendix 3


Team contact email address: tewv.ftmembership@nhs.net


Postal contact: **FREEPOST TEWV**

Telephone enquiries: **01642 516468 / 01325 552068**


Name	Personal Information
Kathryn Ord – Deputy Trust Secretary / Engagement lead	
	<p>Area of Responsibility: Council of Governors and associated management of Public and Staff Membership, Supporting the Trust Secretary in the Governance of the Trust, Strategic lead for public, service user and carer engagement and involvement.</p> <p>Contact details: Telephone: 01325 552307 Email: Kathryn.ord@nhs.net</p>

Name	Personal Information
Gillian Taylor – Involvement and Engagement Administrator	
	<p>Area of responsibility: General enquiries from service users and carers, maintaining the PPI register, circulating involvement opportunities, processing expenses, booking transport, general office duties.</p> <p>Contact details Telephone: 01642 516468 Email: Gillian.taylor19@nhs.net</p>

Name	Personal Information
Angela Grant – Senior Administrator	
	<p>Area of responsibility: General enquiries from service users and carers regarding involvement and engagement within the Trust. Management of the involvement register and governance requirements.</p> <p>Contact details Telephone: 01325 552068 Email: angela.grant6@nhs.net</p>

Name	Personal Information
Gemma Gray – Involvement and Engagement Officer	
	<p>Area of responsibility: Service User and Carer Involvement in Teesside area of the Trust</p> <p>Lead Areas: Trust lead on Involvement for the following areas of work within the Trust: Forensic services, PLACE, Restrictive practice, Nurse student induction, Medical Development/Education and Recruitment, Research & Development, NVQ training, Organisational development</p> <p>Contact details: Mobile: 0776 017 1149 Email: gemma.gray3@nhs.net</p>

Name	Personal Information
Linda Sloan Involvement and Engagement Officer	
	<p>Area of responsibility / Lead Areas Service User and Carer Involvement within Durham & Darlington area of the Trust</p> <p>Lead Areas: Trust lead on Involvement for the following areas of work within the Trust: Service Improvement, Regulation Compliance, Patient Experience including carers, Fundamental Standards, Learning Disabilities, Volunteers, Arch Recovery College Durham, Spirituality, Communications</p> <p>Contact details Telephone: 07900 406306 Email: lindasloan@nhs.net</p>

Name	Personal Information
Heather Simpson – Involvement and Engagement Officer	
	<p>Area of responsibility: Service User and Carer Involvement within the York and Selby area of the Trust</p> <p>Lead Areas: Trust lead on Involvement for the following areas of work within the Trust: All activity within York and Selby in relation to involvement and engagement.</p> <p>Contact details: Telephone: 01904 556920 or Email: heathersimpson1@nhs.net 0782 695 2263</p>

Commitment to quality

We demonstrate excellence in all of our activities to improve outcomes and experiences for users of our services, their carers and families and staff.

Behaviours:

- Put service users first.
- Seek and act on feedback from service users, carers and staff about their experiences.
- Clarify people's needs and expectations and strive to ensure they are exceeded.
- Improve standards through training, experience, audit and evidence based practice.
- Learn from mistakes when things go wrong and build upon successes.
- Produce and share information that meets the needs of all individuals and their circumstances.
- Do what you / we say we are going to do.
- Strive to eliminate waste and minimise non-value adding activities.

Respect

We listen to and consider everyone's views and contributions, maintaining respect at all times and treating others as we would expect to be treated ourselves.

Behaviours:

- Be accessible, approachable and professional.
- Consider the needs and views of others.
- Be open and honest about how decisions are made.
- Observe the confidential nature of information and circumstances as appropriate.
- Be prepared to challenge discrimination and inappropriate behaviour.
- Ask for feedback about how well views are being respected.
- Consider the communication needs of others and provide a range of opportunities to access information.

Involvement

We engage with staff, users of our services, their carers and families, governors, members, GPs and partner organisations so that they can contribute to decision making.

Behaviours:

- Encourage people to share their ideas.
- Engage people through effective consultation and communication.
- Listen to what is said, be responsive and help people make choices.
- Provide clear information and support to improve understanding.
- Embrace involvement and the contribution that everyone can bring.
- Acknowledge and promote mutual interests and the contributions that we can all make at as early a stage as possible.
- Be clear about the rights and responsibilities of those involved.

Wellbeing

We promote and support the wellbeing of users of our services, their carers, families and staff.

Behaviours:

- Demonstrate responsibility for our own, as well as others, wellbeing.
- Demonstrate understanding of individual and collective needs.
- Respond to needs in a timely and sensitive manner or direct to those who can help.
- Be pro-active toward addressing wellbeing issues.

Teamwork

Team work is vital for us to meet the needs and exceed the expectations of people who use our services. This not only relates to teams within Tees, Esk and Wear Valleys NHS Foundation Trust, but also the way we work with GPs and partner organisations.

Behaviours:

- Be clear about what needs to be achieved and take appropriate ownership.
- Communicate well by being open, listening and sharing.
- Consider the needs and views of others.
- Be supportive to other members of the team.
- Be helpful.
- Fulfil one's own responsibilities.
- Always help the team and its members be successful.

Service Users / Carers and Associate Hospital Managers		New Starter	
346 TEES, ESK & WEAR VALLEYS N.H.S. Foundation Trust			
SECTION 1: PERSONAL DETAILS			
Name		Identification	
Last Name	Smith	NI Number	NZ 22 88 33 F
First Name	Anna	Date of Birth	14-Apr-1985
Home Address		Emergency Contact	
1 st Line	6	Contact	
2 nd Line	south street	Relationship	
3 rd Line		Contact Address	
Town / City	Scarborough	1 st Line	
County	North Yorks	2 nd Line	
Post Code	YO12 7HA	3 rd Line	
Telephone		Town / City	
Work		County	
Home	01740 662 662	Post Code	
Mobile		Telephone	
Gender	Female	Work	
Ethnic Origin	White British	Home	
		Mobile	
SECTION 2: ASSIGNMENT DETAILS (to be completed by Line Manager / Supervisor)			
Attendance Details		Car User Rate	Oracle Code
Job Title (tick one)	<input checked="" type="checkbox"/> Service User / Carer <input type="checkbox"/> Associate Hospital Manager	45p	
Start Date	01-Aug-2015	Cost Centre	
		Subjective	
		Sub Analysis	
RTI Employment Statement: <u>one</u> and only <u>one</u> of the three statements below must be ticked.			
A: <input type="checkbox"/> This is my first job since last 6 April and I have not been receiving taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit or a state or occupational pension.			
B: <input checked="" type="checkbox"/> This is now my only job, but since last 6 April I have had another job or have received taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit. I do not receive a state or occupational pension.			
C: <input type="checkbox"/> I have another job or receive a state or occupational pension.			
SECTION 3: BANK DETAILS (to be completed by Service User / Carer or Associate Hospital Manager)			
NB: If you do not wish to declare your Bank account details here you may elect to submit them using Form B3.			
Bank Details		Address	
Name	Nat West	1 st Line	
Branch	High Street, Scarborough	2 nd Line	
Sort Code	55 89 72	3 rd Line	
Account No	12345678	Town / City	
Building Society Ref		County	
		Post Code	
DECLARATION (to be completed by Service User / Carer or Associate Hospital Manager and Line Manager / Supervisor)			
Declarations			
The information provided by me is correct to the best of my knowledge. I authorise Tees, Esk & Wear Valleys N.H.S. Foundation Trust to deduct any monies owed by me to the Trust from my payments.			
Signature		Date	
Service User / Carer or Associate Hospital Manager	Anna Smith	Date	1.8.15
I certify that the above commenced duty in the above capacity on the date specified and that the information provided by me is correct to the best of my knowledge.			
Signature and AS number		Date	
Lead Officer or Mental Health Act Manager:		Date	
Print Name		Date	
ESR DATA INPUT (Sections 1 & 2 be Input by HR / Administrator / MSS) / (Section 3 Input by Payroll)			
Signature: Sections 1 & 2 Entered		Date	
HR / Admin / MSS		Date	
Signature: Section 3 Entered		Date	
Payroll		Date	

A

SAMPLE



Tees, Esk and Wear Valleys
NHS Foundation Trust

SERVICE USER AND CARER INVOLVEMENT PAYMENT CLAIM FORM

NAME: (please print)	
ADDRESS inc. POSTCODE: (only complete if first ever activity or a change of address)	
TELEPHONE:	
PAYROLL (ASSIGNMENT NUMBER): (please include to ensure no delay in payment)	
Important information <ul style="list-style-type: none"> a) I understand payments will be paid net of tax and national insurance. b) I understand it is my responsibility to inform the benefits agency of any earnings which may affect my benefits. c) I understand all payments will be made directly into my nominated bank account. d) I understand claim forms must be returned to the Lead Officer on the day of the activity. 	
CLAIMANT SIGNATURE:	
DATE:	

For staff use only

Important information for Activity Lead Officer:

If this is the first time the service user/carer has attended an involvement activity please ensure they have completed an Involvement Registration Form and a payroll registration form ('A' Form) otherwise payments cannot be made.

Date and time of Activity:	
Type of Involvement Activity: eg. Meeting, interview panel, steering group, etc	
Venue:	
Duration of Involvement (hours):	
Amount claimed (£20 for up to 3 hours, and every 3 hours after)	
Staff Member Signature and Date:	

PLEASE RETURN THIS FORM TO:

Tewv.ftmembership@nhs.net or

post to Trust Secretary's Department West Park Hospital, Darlington DL2 2TS
(cut off date is normally on or before 14th of month)

Sample Completed Travel Claim Form

PLEASE PRINT ON YELLOW PAPER

Tees, Esk and Wear Valleys **NHS**
NHS Foundation Trust

TO BE COMPLETED BY THE CLAIMANT

Name of claimant: Anna Smith

Payroll (Assignment) Number:

1	2	3	4	5	6	7	8	-	
---	---	---	---	---	---	---	---	---	--

only required for multiple post holder

Home Address: 1, South Street, Scarborough

Post Code:

Y	O	1	2	6	H	G	
---	---	---	---	---	---	---	--

Telephone Number: 01708 682 682

Date of travel claimed: 1.6.16

Expenses					
Method of Travel	Journey start location	Journey end location	Total Miles Travelled (Ino return journey)	Rate	Amount Claimed
Car / Motorbike	home	west park	100	46p / mile	£ 72.00
Passenger Miles				6p / mile	£
Cycle				20p / mile	£
Rail (Std Class)					£
Bus Fare					£
Other (by prior agreement only)					£
Parking Costs					£

BELOW FOR USE BY CASHIER'S OFFICE ONLY

Involvement Activity Claim	Cash Paid	Signature and Date
433027 / 748800	£	

PLEASE PRINT ON YELLOW PAPER
Expense Claim Form - v9 - 27.04.16

Travel and Subsistence Claim Form

(TO BE COMPLETED IN BLOCK CAPITALS)

Vehicle Details

Have you previously made mileage claims for the above vehicle? YES NO

(If YES please move to certification - if NO then please complete vehicle details below)

Make: Model:

Engine Size: cc Fuel Type:

Registration No:

CERTIFICATION

I Declare That

- This is a true record of mileage, associated expenses and subsistence actually and necessarily incurred whilst engaged on the duty stated and that the claim is correct and valid
- The vehicle for which this claim relates is covered for full third party insurance, including cover against risk or injuries to, or death of, official passengers and damage to property with an insurance company and this policy has been maintained for the period of this claim
- The vehicle for which this claim relates is maintained in a roadworthy condition and where required has a current MOT (VOSA) certificate as required by the insurance company

Signature of Claimant: Anna Smith

FOR STAFF USE ONLY - AUTHORISATION

I Certify That

To the best of my knowledge and belief that the claimant was engaged on the duties stated and on the dates shown and that the amounts claimed are correct and valid.

Signature of Authorizing Officer:

Name of Authorizing Officer (BLOCK CAPITALS):


Date: AS REF No:

Monies can be obtained from a Trust cashier's office, if available. If cashier's office not available the completed form should be sent to Finance, Flatts Lane Centre, Middlesbrough by a member of staff

Easy Read Involvement Payment Claim Form




Tees, Esk and Wear Valleys
NHS Foundation Trust



Involvement Payment Form


My Name:




Last:

First:

Title:





Payroll / Assignment Number:



Date of Birth:


My Address:







Postcode:


My telephone number(s):




! Important! I understand...

- 


a) Payments will be paid after tax and national insurance.
- 

b) It is up to me to tell the benefits agency if my benefits may be affected.
- 


c) Payments will be put directly into my bank account.
- 

d) This form must be given to the lead officer on the day of the activity.

My signature:



Date:



2020 07 01 v3

SAMPLE

For Staff Use Only:

Important information for Activity Lead Officer:

If this is the first time the service user/carer has attended a involvement activity please ensure a payroll registration form ('A' Form) is completed otherwise payments cannot be made.

Type of involvement Activity: Eg meeting, interview panel, steering group, etc	
Venue:	
Date of Activity:	
What service / project is the activity for?	
Duration of involvement:	
Amount claimed: (£20 for up to 3 hours and every 3 hours after)	
Print name:	
Signature and Date:	

PLEASE RETURN THIS FORM TO:

**FREEPOST TEWV (external post)
Involvement and Engagement Team
Trust Secretary's Department, West Park Hospital, Darlington,
DL2 2TS (Internal post) or email to:**

tewv.ftmembership@nhs.net

within 1 working day of the activity

Under 16 Years Involvement Payment Claim Form**UNDER 16 YEARS INVOLVEMENT PAYMENT CLAIM FORM**

NAME: (please print)	
ADDRESS inc. POSTCODE: (so we can send your vouchers to you)	
TELEPHONE: (In case of any queries)	

<p>Important Information</p> <p>a) I understand all payments will be made in Love2Shop vouchers</p> <p>b) I understand claim forms must be returned to the Lead Officer on the day of the activity</p> <p>c) I understand that once I turn 16 I will need to complete an A-form (passport information form) in order to be reimbursed through my bank account</p> <p>d) If parent or carer signature not available the lead officer should sign as well as the young person to confirm that they are happy for the young person to receive vouchers and that parent/carer signature is not needed</p> <p>Please note we are unable to process forms submitted later than six months after the activity</p>

SIGNATURE OF YOUNG PERSON:	
SIGNATURE OF PARENT OR CARER OR SIGNATURE OF LEAD OFFICER	
DATE:	

For staff use only**Important information for Activity Lead Officer:**

Type of Involvement Activity: eg. Meeting, interview panel, steering group, etc	
Venue:	
Date of Activity:	
What service/project is the Activity for:	
Duration of Involvement:	
Amount claimed (£5 per hour of involvement)	
Print name of lead officer:	
Signature of lead officer and Date:	

PLEASE RETURN THIS FORM TO:

tewv.ftmembership@nhs.net or post to Trust Secretary's Dept, West Park Hospital, Darlington within 1 working day of the activity.

Privacy Notice for Involvement Members

<p>Who is the Controller of the information under the General Data Protection Regulation (Data Protection Act)?</p>	<p>Tees, Esk and Wear Valleys NHS Foundation Trust</p>
<p>Who is the Data Protection Officer?</p>	<p>Louise Eastham, Head of Information Governance, Information Governance Department, Tarncroft, Lanchester Road Hospital, Durham, DH1 5RD</p>
<p>What is the purpose of holding and processing information?</p>	<p>Your information is held on a register for the sole purpose of involvement work within Tees, Esk and Wear Valleys NHS Foundation Trust (the Trust).</p> <p>This is for the delivery of mental health, learning disability and eating disorder services within the areas of the Trust.</p>
<p>What is the legal basis for holding information?</p>	<p>As you have completed an application form to join our register you have consented to your information being held for the purposes of involvement.</p>
<p>What are your rights?</p>	<p>You have the right to know how we will use your personal information.</p> <p>You have the right to object to us making use of your information.</p> <p>You can ask us to change or restrict the way we use your information and we have to agree if possible.</p> <p>You have the right to ask for your information to be changed, blocked or erased if it is incorrect.</p>
<p>What information is held?</p>	<p>We hold personal information about you in terms of:</p> <ul style="list-style-type: none"> • Your name and contact details. • Date of Birth • Ethnicity • Interest areas • Skills and experiences • Training undertaken (not previously recorded) • Whether or not you need assistance with transport <p>We do not hold information on any clinical conditions and medical records.</p> <p>For some people who claim our involvement fees, the Trust (finance department) will also hold details about your bank/building society account and your national insurance number.</p>

Who will you share my information with?	<p>Your information will be available to the Trust Secretary's Department/ Involvement and Engagement Team.</p> <p>You contact information will be made available to other staff in the Trust for the purpose of any involvement activity you choose to undertake.</p>
How long will you hold my details for?	<p>Your details will be held by us until such a time you ask to be removed from our register or you no longer meet our criteria for involvement.</p>
How do you store my information?	<p>Your information is stored on an external electronic database managed under contract by the Trust. Our contractor complies with all Data Protection requirements within the Act and also set by us as a Trust.</p>
How will you protect my privacy and confidentiality?	<p>Your information will only be used for the purposes of involvement activity and will not be shared by us outside of the Trust.</p>
How will you meet my communication needs?	<p>We will communicate with you either by post or email based on the preference that you state when joining our register.</p> <p>This preference can be changed at any time.</p> <p>If you require information in an alternative format please speak with us and we can agree a suitable communication method.</p>