

# Patient Travel Policy

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FIPOL007

## NHS Shetland Document Development Coversheet\*

<b>Name of document</b>	Patient Travel Policy		
<b>Registration Reference Number</b>	FIPOL007	<b>New or Review?</b>	<b>New</b>
<b>Author</b>	Patient Travel Manager		
<b>Executive Lead</b>	Director of Finance		

<b>Proposed groups to present document to:</b>		
Shetland Public Engagement Network	Area Medical Committee	Acute and Specialist Services Management Team
Area Clinical Forum	Executive Management Team	Area Partnership Forum
Clinical Care & Professional Governance Committee		

<b>Date</b>	<b>Version</b>	<b>Group</b>	<b>Reason</b>	<b>Outcome</b>
18/11/2019	V1.0	Shetland Public Engagement Network	(C/S)	Follow up questions for clarification including whether an allowance for stay with friends and family has been considered in line with NHS Orkney. Responded
02/12/2019	V1.0	Third Sector Forum	(C/S)	No comments received
17/12/2019	V1.0	Acute & Specialist Services Management Team	(C/S)	Request to add appendix containing useful information e.g. Neonatal Expenses Fund (NEF)
09/01/2020	V1.0	Executive Management Team	(C/S)	Request to add timescale for response to letter requesting reason for cancelled appointment following travel
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11/02/2020	V1.1	Clinical Care & Professional Governance Committee	(F/A)	

Examples of <b>reasons</b> for presenting to the group	Examples of <b>outcomes</b> following meeting
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**\*To be attached to the document under development/review and presented to the relevant group**

Please record details of any changes made to the document in the table below

Date	Record of changes made to document
November 2019	Formulating current operating procedures in to a policy document
January 2020	Additions requested added to policy document
August 2021	Amendments to appendix 1 and responsibilities for escort authorisation. Saved as version 1.2

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## 1. Purpose

The purpose of this policy is to set out how NHS Shetland will apply national policy in respect of Patient Travel as outlined in the Government guidance set out in [MEL\(1996\)70](#) Patients' Travelling Expenses Schemes are applied to:

1. Highland and Island Travel Scheme;
2. Patient's Travelling Expenses Schemes;
3. Other Patients Included in the Patients' Travelling Expenses Schemes
4. War Disablement Pensioners - Special Arrangements

The purpose of these schemes are to reimburse patients reasonable travelling expenses in respect of **direct travel** to and returning from a clinical appointment for treatment deemed to be clinically necessary and booked in-line with NHS Shetland Patient Access to Treatment policies, at a hospital or similar setting. In respect of similar settings this could include attend anywhere video conference appointment in a community setting if the relevant travel reimbursement eligibility is met.

Please note though that travel to attend appointments for treatment that normally occur in a community setting such as a General Practitioner (GP), Optician, Pharmacy or Dental Service are not eligible for reimbursement under this policy.

## 2. Introduction

The aim of NHS Shetland is to provide care and services wherever possible in Shetland and, as close to people homes as is practicable possible. The normal expectation is that where NHS Shetland for any given condition or treatment can safely and effectively provide these services for their population, they should do so. Despite the wide and expanding range of quality services available in the Shetland, many specialist assessments, diagnostic treatments and care interventions will require travel to another health board.

This policy sets out NHS Shetlands' objectives and responsibilities in relation to patient/escort travel, clarifying constraints and limits in relation to subsidy. The Highlands and Island Travel Scheme only applies to residents of the Scottish Highlands and Islands.

The increasing specialisation in medicine and continuing advances in sophisticated equipment and technology have resulted in some services only being available in major centers on the mainland, hence a need to travel to major population centers in Scotland and sometimes beyond to access these services.

## 3. Stakeholders

NHS Shetland is committed to ensuring that patients travel to and from hospital by the most appropriate and cost effective mode of transport and that any potential inconvenience and disruption is minimised. This policy covers patients and escorts, as defined below:

### 3.1. Patient

An individual referred and/or admitted as a non-emergency to a hospital or clinic by a responsible clinician.

### **3.2. Escort**

A person accompanying a patient to a hospital or clinic, and who is regarded as being appropriate, necessary and responsible for supporting the patient's physical and mental wellbeing during the period of transport and/or accommodation, and/or during treatment.

## **4. Responsibilities**

This section describes the responsibilities of the various parties involved in patient travel.

### **4.1. Patients and Escorts**

Patients and escorts are responsible for their own expenses incurred during their travel and need to be aware of limitations to entitlements. Patients will not receive payments for any expenses outside of this policy. **Patients must familiarise themselves with the policy and eligible expenses.**

For all non-emergency transfers patients and escorts are reminded to take sufficient means of payment for the planned journey and the unforeseen delays that might occur. Patients must inform NHS Shetland of any mobility problems as soon as possible to ensure that the appropriate assistance can be arranged. Patients are also advised to take some form of photo identification.

Patients should pay their own accommodation at the time of the stay, then reclaim (if permissible under this policy) from NHS Shetland. Under exceptional circumstances NHS Shetland may agree to pay accommodation directly.

### **4.2. Chief Executive / Director of Finance**

Executive Director level responsibility. It is reasonable to expect that this policy will not cover all eventualities and the Chief Executive / Director of Finance will consider individual circumstances not explicit within the policy.

### **4.3. Patient Travel Manager**

Has responsibility for provision of patient travel service and procurement of travel services. They will deal with escalation of non-clinical queries and complaints.

### **4.4. Patient Travel Team**

Operational responsibility for patient travel, staff and patient communications, authorisation of some escorts within the criteria delegated to them and raising awareness.

### **4.5. Escort Review Group**

Authorises escorts out with the criteria delegated to patient travel and ensures compliance with eligibility

### **4.6. All staff**

Promote awareness of policy to patients and escorts and refer any queries to the Patient Travel Team.



## 5. Scope of Policy

### 5.1. Patients

This policy covers attendance for elective (i.e. planned) hospital appointments or in-patient stays, both within Shetland and on the mainland. It does not apply to:

1. Patients for whom NHS Ambulance Service transport is arranged, please refer to Section 10 of this policy for more information;
2. patients being transferred between treatment centres, private patients, psychiatric patients making visits outside the hospital, or patients visiting their GP (or other primary care provider);
3. travel arrangements for students who are resident in a mainland address at the time of hospital appointment (emergency or non-emergency) to an appointment in Shetland;
4. patients requiring care and/or treatment whilst on holiday

### 5.2. Visitors

Assistance for visitors to patients in hospital is not available under this patient travel policy. Visitors may be eligible for a Hospital Visitors Fare available from Loganair (See Appendix 4). Those in receipt of income-based support visiting someone in hospital may be able to obtain some help with visiting costs, and should enquire at their local Department for Works and Pensions office.

## 6. Policy Statement

This policy statement applies solely to NHS Shetland. It is intended for use by all those who may be involved in authorising, administering and/or undertaking patient travel, including patients, their carers/escorts, general practitioners, specialists and the staff of NHS Shetland.

Due to the nature of patient travel there may be unforeseen unique circumstances not covered directly by this policy. In such cases the escalation pathway will be followed, set out in Appendix 5, where decisions will be made by applying the spirit of this policy. It should be noted that patients and their carers should NOT make representation to Executive or Non-Executive Directors of the Health Board other than those mentioned within this Patient Travel Policy. In the event of any query in relation to an individual's travel this should first be addressed to the Patient Travel Manager who, if necessary, will escalate the query according to the Escalation Chart (see Appendix 5). Should the patient not be satisfied with any decision made they should make their complaint in writing in accordance with the NHS Complaints Procedure.

The principles referred to in [MEL\(1996\)70](#) must be applied, that: "While clinical need remains paramount, there is a need for all staff, including clinicians, to seek to achieve value for money particularly with regard to the need to incur expenses for patient escorts".

At all times the Scottish Government Health and Social Care Directorates (SGHSCD) guidance shall take precedence, and this policy reflects current guidance. At the time of writing this is [MEL \(1996\)70](#) and subsequent letters.

No travel can be authorised outside of SGHSCD guidance and NHS Shetland Code of Corporate Governance including the Standing Financial Instructions.

This document supersedes any previous policy or guidance. For assistance in arranging a journey please refer to the Patient Travel Department or to the patient guidance notes.

## **7. Equality and Diversity**

Fair care is assured to all without any discrimination between persons on grounds of sex, marital status, race, disability, age, sexual orientation, language, social origin, other personal attributes, including beliefs or opinions, such as religious beliefs or political opinions.

## **8. Patient Focus Public Involvement**

NHS Shetland is working with patients and members of the public to improve the quality of health service provided.

A patient-focused NHS will:

- Maintain good communications, including listening and talking to patients, public and communities
- Know about those using the service and understand their needs
- Keep users of the service informed and involved
- Have clear, explicit standards of service
- Maintain politeness and mutual respect
- Have the ability to respond flexibly to an individual's specific needs
- Ensure effective action is taken to improve services
- Talk with users, the wider public and communities
- Effective public involvement can:
  - Act as a catalyst for change
  - Help achieve a major improvement in the health of the public
  - Help strengthen public confidence in the NHS

## **9. Eligibility**

### **9.1. Patients**

Patients must be permanently resident in Shetland for patient travel subsidy to be offered in non-emergency cases. Please refer to section 4.1 for more detail on emergency hospital admissions.

### **9.2. Escorts**

Where a medical intervention may be needed, NHS staff may be allocated to act as escort. NHS Shetland staff will only provide an escort where the patient has an identified health need which may require specialist and regular attention during transfer, but does not necessitate an ambulance transfer. Staff escorts are a rare occurrence for planned appointments. The Scottish Ambulance Service has a medical team available with their vehicles and aircraft where this mode of transport is considered necessary

If a conventional escort (not staff) is assessed as required, then a family member or friend may travel with the patient. The escort must be an able-bodied adult. Escorts will have their expenses refunded based on the eligibility of the patient. Guidance on eligibility for escorts is provided at Appendix 1.

### **9.3. Partial Subsidy – patient not on income-based support**

Partial subsidy is available if the distance travelled from the patient's home (or place of residence) to the hospital is 30 miles or more, or involves a journey by sea of more than 5 miles.

For patients eligible for partial subsidy NHS Shetland will fund reasonable travel expenses less the current patient contribution sum, which the patient has to pay (see Appendix 2). Should the journey cost less than the current patient contribution sum then no subsidy will be payable.

Patients holding an HC3 Exemption Certificate may be entitled to pay a lower patient contribution sum.

### **9.4. Full Subsidy – patient on income-based support**

NHS Shetland applies government guidance in determining eligibility for full travel subsidy. At the time of writing, patients in receipt of the following are entitled to a 100% subsidy, **irrespective of the 30 mile rule:**

1. Universal Credit
2. Income Support;
3. Income-related Employment and Support Allowance;
4. Income-based Jobseeker's Allowance;
5. Pension Credit Guarantee Credit;
6. NHS Tax Credit Exemption Certificate;

Full Subsidy is also available to patients with an HC2 Certificate

This is not an exhaustive list and will be subject to any changes made by National Government.

### **9.5. Full Subsidy – children and young people**

The following are entitled to Full Subsidy if their parent or guardian meets the eligibility criteria shown at above in section 9.4:

1. Children under 16;
2. Young people aged 16-18 in full-time education;
3. Young people aged 16-18 and classed as a dependant of someone who meets the eligibility criteria.

### **9.6. Proof of entitlement**

In all cases where Full Subsidy is claimed, patients (or their parents / guardians) will be asked to produce proof of entitlement before their expenses are reimbursed. Proof will be required on each occasion, as an individual's eligibility may change. NHS Shetland reserves the right to contact the Department for Work and Pensions to confirm eligibility.

NHS Shetland will deduct the patient travel contribution (see Appendix 2) from expense reimbursements in instances where the patient cannot prove that they are eligible for the 100% subsidy.

In cases where it appears that a patient has deliberately applied for a subsidy to which they are not entitled the matter may be referred to Counter Fraud Services for further investigation.

## **9.7. Patient's Responsibility**

It is the patient's / patient's representative's responsibility to clarify their rights and entitlement **directly** with the Patient Travel Office, before incurring expense.

Other NHS staff, including those based outside Shetland, may offer patients advice on travel arrangements, which may not be an accurate reflection of the NHS Shetland's travel system, entitlement and policy. Therefore any advice received out with the NHS Shetland Patient Travel Office, should be confirmed directly with the Patient Travel Office before patients undertake travel.

## **10. Claims**

### **10.1. What may be claimed**

Any suspicion of inappropriate (or falsification of) claims will be referred to NHS Counter Fraud Services.

The following costs will be reimbursed under this policy:

#### **10.1.1. Overnight Stays**

Patients and approved escorts will be entitled to have their overnight stay costs refunded where the following criteria are met:

- The stay must be unavoidable due to the time of the appointment;
- Escorts who are only authorised to travel to hospital with the patient must return home at the earliest opportunity, or stay at their own expense;
- Escorts who are only authorised to travel from hospital with the patient must (where possible) undertake the journey in one day;
- Escorts who are required to accompany a patient both to and from hospital may either return home and travel back to the hospital on the patient's discharge, or remain near the hospital to which the patient has been admitted (provided the total cost of accommodation does not exceed the second return airfare which would otherwise have been required).
- The accommodation used must be the cheapest reasonably available. NHS Shetland will not pay more than the rate defined in Appendix 2, unless agreed in advance.
- Escorts accompanying children under 16 will normally be provided with hospital accommodation free of charge. If for any reason this is not available, accommodation will be funded in accordance with the rates defined in Appendix 2, unless agreed in advance.
- Patients or escorts who have been discharged and find their return journey unexpectedly delayed due to air travel delays, ferry disruptions or road closures will have their accommodation costs met up to usual limits, as described in Appendix 2.

Patients who are travelling by air may be accommodated at the expense of the airline (they may also provide meal vouchers), typically if the delay is due to technical reasons. Patients are expected to accept any offers of accommodation in these circumstances.

### **10.1.2. Transport costs**

- Patients and their escorts are expected to use the most cost-effective means of transport suitable to their needs, taking into account the overall cost of the trip. Generally patients are free to choose between sea or air.
- Final judgment as to the most reasonable means rests with NHS Shetland. Should there be any doubt it is the patient's responsibility to check with NHS Shetland in advance.
- In exceptional circumstances (and only with the approval of the responsible clinician), a patient may receive treatment at a hospital or facility other than first preference of the Health Board. If this has resulted from a patient preference, then travel will only be refunded up to the cost of travelling to the normal hospital. Accommodation will not be refunded. Travel in relation to private treatments is not refunded.
- It is the Scottish Ambulance Service's decision as to whether or not to offer a place on the air ambulance to a key relative/carer. Places may be offered if there is space, it does not affect the aircraft efficiency and does not impede clinical care.
- Patients transported to hospital by air ambulance will be entitled to have their return journey funded. Transport will be arranged by the NHS. Relatives who accompany the patient on the air ambulance, and who do not meet the definition of an escort, will be responsible for their own accommodation and return journey expenses. Travelling on the air ambulance does NOT make an individual an escort.
- For patients in receipt of long term treatment on the mainland, who are able to be discharged from hospital (e.g. radiotherapy), return visits each weekend are permissible.
- Only mileage where a patient is in a vehicle is refundable. Return legs of journeys where a relative or friend has dropped a patient off are not claimable.
- The Health Board will reimburse taxi costs only where they have been authorised prior to travel. Examples of patients who may have taxi costs authorised are:
  - Patients with restricted mobility as confirmed by the responsible clinician;
  - Where public transport is restricted;
  - Where time restraints prevent the use of public transport.

### **10.2. What may not be claimed**

The following costs will not be reimbursed under this policy:

1. Loss of earnings;
2. Meals;
3. Return travel costs of patients who require medical attention whilst on holiday;
4. Parking or other motoring fines.

### **10.3. Booking of travel and accommodation**

All flights and ferries will normally be booked by NHS Shetland. However if a patient chooses to book their own ticket and reclaim it they can do so as long as the ticket is not purchased using the Air Discount Scheme (ADS). Any ticket bought using ADS cannot be reimbursed NHS Shetland. Travel dates must be within certain timescales from the appointment date. These timescales are shown on Appendix 3. Accommodation and other travel expenses should be paid for by the patient or escort and the costs reclaimed.

### **10.4. Financial difficulty**

Patients who are unable to pay for their initial costs for travel and/or accommodation should contact their local Patient Travel Office to request costs be met directly by NHS Shetland.

### **10.5. Validation of Claims**

#### **10.5.1. Evidence**

Evidence of a visit to a hospital or clinic should be obtained in every case, and without this NHS Shetland may withhold reimbursement. The travel claim form should be signed by a staff member at the place of treatment before being presented for payment.

#### **10.5.2. Retrospective and Historic Claims**

Claims must be submitted within 3 months of the treatment. Any eligibility for subsidy will be determined by the circumstances at the time of the journey.

#### **10.5.3. Missed appointments**

If a patient is unable for any reason to attend an appointment where travel has been arranged, they **must** contact the Patient Travel Office immediately. Where it appears that the appointment has been missed without good reason, NHS Shetland reserves the right to invoice the patient, escort or guardian for any costs incurred. Acceptable reasons for missing an appointment include:

1. Unavoidable travel delays, e.g. road closures or cancellation of transport. Patients **must** check in for flights if permitted to do so;
2. Ill health. The patient should notify the responsible clinician immediately.

#### **10.5.4. Cancelled appointments**

If a patient cancels an appointment after travelling NHS Shetland will write to the patient to seek an explanation for why they used the NHS funded ticket but did not attend their NHS appointment. Failure to provide a reasonable explanation within 14 days for the cancellation will result in an invoice being issued to the patient for the full cost incurred.

## **11. Emergency Travel**

### **11.1. Patients**

Travel and subsistence expenses in relation to emergency medical care are not covered by this policy or eligible for reimbursement under the Highlands & Islands Travel Scheme. In most emergency situations patients are transported by the Scottish Air Ambulance (S.A.S), arranged

directly between hospital clinical staff and S.A.S. When a patient has been flown away by S.A.S, they will be entitled to have their return journey funded and arranged by the Patient Travel Office, if the patient is well enough to travel by public transport (ferry / air).

## **11.2. Escorts**

- If a patient is transported by Scottish Air ambulance, the decision to have friends or relatives accompanying them falls to the Scottish Air Ambulance Crew and is not the responsibility of NHS staff. Travelling on the air ambulance does not make an individual an escort for the purpose of this policy and they will be responsible for their own accommodation and return journey expenses.
- In the event the patient returns home by public transport (ferry/air), and an escort is authorised by a responsible clinician to accompany the patient on their return journey; then the costs associated with the return travel for both patient and escort will be reimbursed.

## Appendix 1 – Guidance for authorisation of Escort Travel

When funding for an escort will be authorised:

1. Escorts are funded if this is required for medical reasons, for example:
  - where the patient has a significant physical or mental disability that necessitates the support of another person to travel safely;
  - where the patient is undergoing a procedure or therapy that results in them requiring assistance to travel home
  - where the patient is attending an appointment that involves self-management that a carer or relative will be undertaking on their return home.
  - where the patient lacks the mental capacity to take decisions or has a legal guardian;
2. Escorts are funded in other circumstances where:
  - the parent or guardian of a child under 16 years of age accompanies them to the hospital or clinic. Only the travel costs of one escort will be funded, unless a clinician determines a **medical** reason for the child to be accompanied by two adults. **There is no provision in this policy for siblings of the child patient to also travel with parent escort(s);**
  - the patient is aged between 16 and 18 and requests a parent or guardian to accompany them

Common cases where Escorts will not be funded:

Please note that social circumstances, provision of emotional support or anxiety related to travel is not considered reason for an escort to be authorised.

3. Escorts are not funded for pregnant women attending a hospital or clinic, unless there is a medical reason, e.g. multiple births, complications, or an inability to lift.
4. The air ambulance may permit people to accompany patients on the aircraft. Authority to permit an escort on the air ambulance lies with Scottish Air Ambulance. This does not mean that the criteria for a subsidised escort have been met, and those accompanying patients in such circumstances may have to fund their own return.

More information about escorts and the process for requesting an escort can be found here <https://www.shb.scot.nhs.uk/departments/patienttravel/patientescorts.asp>



## Appendix 2 – Charges and Fees Standard Tariff for Patients and Escorts

This part of the policy is subject to change and will be kept up to date by the Patient Travel Manager. A list of the current standard charges and fees will always be available from Patient Travel Offices.

<b>Patient travel rates 2019/20</b>	
Patient Contribution	£10.00
Mileage Rate – island	15p per mile
Mileage Rate – mainland	15p per mile
Use of Taxis	Reimbursement of taxi costs are not normally reimbursed unless there is an exceptional circumstance. Please contact Patient Travel office to seek prior approval that the use of a taxi is permissible in your particular circumstances.
Overnight rate (maximum) – bed and breakfast	£50 per room per night

The patient contribution will be deducted from any claim form received where applicable.

The mileage rate reimbursed is in line with the HMRC Advisory Fuel Rates for petrol vehicles 1401cc to 2000cc.

Details of the latest rates can be found here

<https://www.gov.uk/government/publications/advisory-fuel-rates>

### Appendix 3 – Guidance on travel days

MEL(1996)70 Patients' Travelling Expenses Schemes purpose is to reimburse patients reasonable travelling expenses in respect of **direct** travel to and returning from a clinical appointment for treatment deemed to be clinically necessary. This would normally mean travel on the day of appointment or, where travel schedules do not permit same day travel, on the day before or after the appointment.

However NHS Shetland has discretion under the scheme to extend this period. The default extension is outlined below. Individuals who believe they have an exceptional case that requires an extension to this period should contact the patient travel office by letter or e-mail outlining the reason why their case should be considered an exception that requires extended travel time.

Please note however overnight accommodation reimbursement is only applicable for stays which are essential to complete your journey. Therefore if your return journey for appointment can be completed in a day but you choose to travel in advance or return later you will not be able to claim overnight accommodation expenses.

<b>NHS Funded Patient Travel: Guidance on what 48 Hour Travel rule means to you</b>		
<b>Earliest Day Before to Travel</b>	<b>Day of Scheduled Appointment</b>	<b>Latest Day for Return Travel</b>
<b>Friday</b>	<b>Monday</b>	<b>Wednesday</b>
<b>Saturday</b>	<b>Tuesday</b>	<b>Thursday</b>
<b>Monday</b>	<b>Wednesday</b>	<b>Friday</b>
<b>Tuesday</b>	<b>Thursday</b>	<b>Sunday</b>
<b>Wednesday</b>	<b>Friday</b>	<b>Monday</b>
<b>Thursday</b>	<b>Saturday or Sunday</b>	<b>Tuesday</b>

Please note when travelling in advance or returning after the day of your appointment that the use of a Taxi will not usually be reimbursed under the NHS travel reimbursement scheme. Prior authorisation should be sought either via e-mail to [shet-hb.patienttravel@nhs.net](mailto:shet-hb.patienttravel@nhs.net) or by letter to Patient Travel Office, Gilbert Bain Hospital.

## **Appendix 4 – Useful information**

### **Neonatal Expenses Fund**

There is additional financial assistance available for parents of neonatal babies under a separate government scheme. This scheme provides assistance for the parents or guardians of premature babies in a neonatal unit. You must claim within 3 months of your baby being discharged from hospital. More information on what can be claimed and how to make a claim can be found on the link shown below.

<https://www.mygov.scot/neonatal-expenses-fund/>

### **Help with healthcare expenses**

If you are on a low income you may qualify for help with healthcare costs not covered under the Highlands and Islands Travel Scheme. Further information is available on the link shown below.

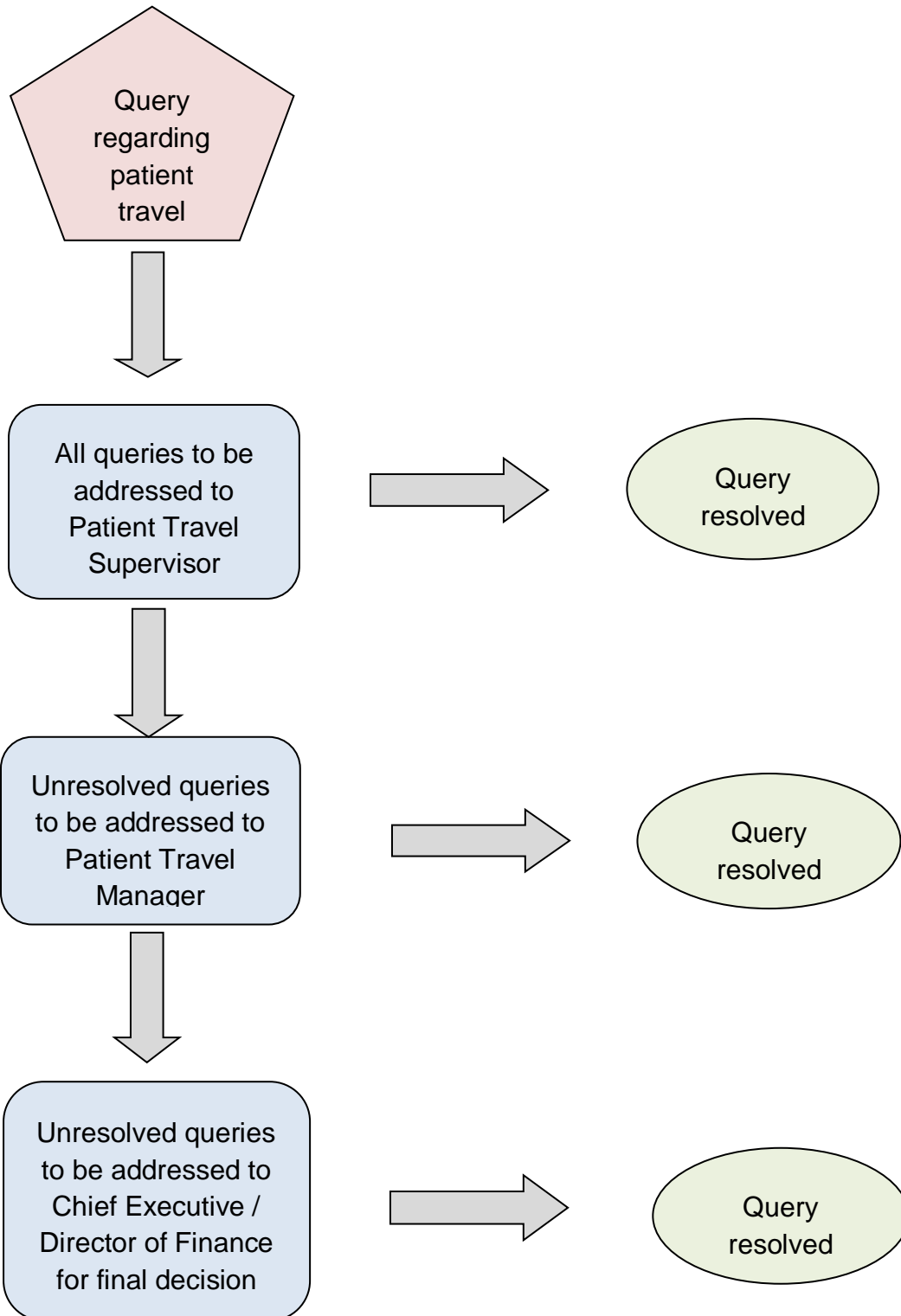
<https://www.gov.scot/publications/hcs-1-entitled-help-health-costs/>

### **Hospital Visitors Fares**

Loganair offers a reduced fare for visiting relatives in hospital. This fare is available for in-patients only. Out-patient appointments do not qualify. Hospital visitor's fare can be booked by contacting patient travel. More information can be found on the link shown below.

<https://www.shb.scot.nhs.uk/departments/patienttravel/hvfares.asp>

## Appendix 5 - Escalation Pathway for Queries



## Appendix 6 – Equality Impact Assessment Report

### Rapid Impact Checklist

An Equality and Diversity Impact Assessment Tool:

<p><b>Which groups of the population do you think will be affected by this proposal?</b></p> <p><b>Other groups:</b></p> <ul style="list-style-type: none"> <li>• Minority ethnic people (incl. Gypsy/travellers, refugees &amp; asylum seekers)</li> <li>• Women and men</li> <li>• People with mental health problems</li> <li>• People in religious/faith groups</li> <li>• Older people, children and young people</li> <li>• People of low income</li> <li>• Homeless people</li> <li>• Disabled people</li> <li>• People involved in criminal justice system</li> <li>• Staff</li> <li>• Lesbian, gay, bisexual and transgender</li> <li>• All of the above groups may be positively impacted by the Patient Travel Policy. The policy will ensure all groups are treated fairly and consistently in regards to patient travel.</li> </ul>	
<p>N.B The word proposal is used below as shorthand for any policy, procedure, strategy or proposal that might be assessed</p>	<p>What positive and negative impacts do you think there may be? Which groups will be affected by these impacts?</p>
<p><b>What impact will the proposal have on lifestyles?</b></p> <p>For example, will the changes affect:</p> <ul style="list-style-type: none"> <li>• Diet and nutrition</li> <li>• Exercise and physical activity</li> <li>• Substance use: tobacco, alcohol and drugs</li> <li>• Risk taking behaviour</li> <li>• Education and learning or skills</li> </ul>	<p><b>No obvious impact on lifestyle has been identified</b></p>
<p><b>Will the proposal have any impact on the social environment?</b></p> <p>Things that might be affected include:</p> <ul style="list-style-type: none"> <li>• Social status</li> <li>• Employment (paid or unpaid)</li> <li>• Social/Family support</li> <li>• Stress</li> <li>• Income</li> </ul>	<p><b>Clearer guidance to service users may positively impact the social environment in a number of ways. Clear and fair guidance may reduce stress and level out social status and income variations.</b></p>

<p><b>Will the proposal have any impact on the following?</b></p> <ul style="list-style-type: none"> <li>• Discrimination?</li> <li>• Equality of opportunity?</li> <li>• Relations between groups?</li> </ul>	<p><b>This fair and transparent policy may positively impact on discrimination, equality and opportunity and relations between groups.</b></p>
<p><b>Will the proposal have an impact on the physical environment?</b></p> <p>For example, will there be impacts on:</p> <ul style="list-style-type: none"> <li>• Living conditions?</li> <li>• Working conditions?</li> <li>• Pollution or climate change?</li> <li>• Accidental injuries or public safety?</li> <li>• Transmission of infectious disease?</li> </ul>	<p><b>Controls concerning patient and escort eligibility may reduce travel and expenditure. These factors may positively impact the physical environment.</b></p>
<p><b>Will the proposal affect access to and experience of services?</b></p> <p>For example,</p> <ul style="list-style-type: none"> <li>• Health care</li> <li>• Transport</li> <li>• Social services</li> <li>• Housing services</li> <li>• Education</li> </ul>	<p><b>This policy should facilitate fair and consistent access to services and improve user experience.</b></p>

## Summary Sheet

<b>Positive Impacts (Note the groups affected)</b> <ul style="list-style-type: none"><li>• Staff – this policy will provide clear guidance to staff and enable them to provide confident advice to service users.</li><li>• Patients and Escorts will be better informed of their entitlement in regards to patient travel.</li><li>• NHS Board will benefit from a fair and consistent policy which optimises quality, safety and cost.</li></ul>	<b>Negative Impacts (Note the groups affected)</b> <p>No negative impacts noted</p>
<b>Additional Information and Evidence Required</b> <p>None</p>	
<b>Recommendations</b> <p>None</p>	
<b>From the outcome of the RIC, have negative impacts been identified for race or other equality groups? Has a full EQIA process been recommended? If not, why not?</b> <p>No negative impacts have been identified for race or other equality groups therefore a full EQIA process is not required.</p>	

Signature(s) of Level One Impact Assessor(s)

**Karl Williamson**

Date .....26/11/2019

## **Appendix 7 Clinical Indications for Escorts for Maternity Patients**

In some cases midwives will authorise an escort for a maternity patient who has to travel off island for treatment/delivery. Examples of these are noted below:

- Post delivery date (40+weeks)
- Multiple pregnancy
- Unstable lie (air ambulance will be considered for those 37+ weeks)
- Abnormal screening results or ultrasound (counselling for couples in regards prognosis)
- Planned Caesarean Section
- Diabetic with unstable sugars
- Significant pregnancy induced hypertension
- Anxiety (where there is a clinical diagnosis)
- Pregnancy loss (at any gestation)

There may be other situations where the midwives will authorise an escort which will be dealt with on a case by case basis.