Blackp	Dool Teaching H	ospitals NHS
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Blackpool Teaching Hospitals NHS Foundation Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that they are not placed at a disadvantage over others. The Equality Impact Assessment Tool is designed to help you consider the needs and assess the impact of your policy in the final Appendix.		

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1 PURPOSE

1.1 This policy has been produced to provide clear guidelines to staff for the management of access by overseas visitors to Trust services.

2 TARGET AUDIENCE

Trust Wide.

3 POLICY

3.1 Introduction

- 3.1.1 This policy is concerned with the management of charges to individuals who do not normally live in the UK (overseas visitors) when they seek treatment from the Blackpool Teaching Hospital NHS Foundation Trust (hereafter known as the Trust).
- 3.1.2 National guidance on the charging of overseas visitors for NHS treatment is in accordance with Section 175 of the NHS Act 2006, National Health Service (Charges to Overseas Visitors) Regulations Guidance on Implementing the Overseas Visitors Hospital Charging Regulations 2015 and related documents published alongside the Guidance.
- 3.1.3 The National Health Service (NHS) provides healthcare free of charge to people, who are ordinarily resident (OR) in the United Kingdom (UK). People who are not OR in the UK are not automatically entitled to use the NHS free of charge. Residency is therefore the main qualifying criterion, applicable regardless of nationality, ethnicity or whether the person holds a British passport, or has lived and paid taxes or National Insurance contributions in the UK in the past.
- 3.1.4 The charging regulations place a legal obligation on NHS Trusts in England to establish if people to whom they are providing NHS hospital services are not OR in the UK. If they are found not to be ordinarily resident in the UK then charges may be applicable for the NHS services provided. In these cases the Trust must charge the person liable (usually the patient) for the cost of NHS services.
- 3.1.5 **Failure to comply with this policy could result in disciplinary action** (refer to Section 7).

3.2 Definitions

- 3.2.1 **Overseas Visitor** someone who is not ordinarily resident in the UK.
- 3.2.2 **Ordinarily Resident** A person who is **NOT** ordinarily resident in the UK simply because they have British nationality, hold a British passport, are registered with a GP, have an NHS number, own a property in the UK or have paid (or are currently paying) national insurance contributions and taxes in the UK. **OR** is defined; living in the United Kingdom voluntarily and for settled purposes as part of the regular

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order of their life for the time being. There must be identifiable purpose for their residence here, there can be one purpose or several, and it may be for a limited period. The purpose of living in the UK must have a sufficient degree of continuity to be properly described as "settled".

- 3.2.3 **European Economic Area** (**EEA**) **Visitors** visitors who are nationals of or ordinarily resident in a European Economic Area (EEA) country. Due to EEA Regulations the charging regulations are different for EEA visitors and those visitors who are nationals or residents of Non-EEA countries.
- 3.2.4 **European Health Insurance Card** (**EHIC**) The European Health Insurance Card entitles European visitors who are insured through their own State healthcare system to access emergency NHS treatment without charge. The card details must be provided to gain this entitlement.
- 3.2.5 **S2** The S2 (formerly E112) route entitles visitors to state-funded elective treatment in another EEA country or Switzerland. This applies to visitors from the EEA or Switzerland who wish to have planned treatment in the UK.

Non-EEA Visitors- A non-EEA national without Indefinite Leave to Remain can only pass the **OR** test if they are not subject to immigration control e.g. they are a diplomat posted to the UK, or have a right of residence here by virtue of their relationship with an EEA national who is resident here.

- 3.2.6 **Payment By Results Tariff (PBR)** The national tariff schedule that the NHS uses for charging for treatment.
- 3.2.7 **Market Forces Factor (MFF)** The centrally calculated and nationally published percentage that is added to the NHS tariff to reflect the individual cost pressures of each NHS Trust.

3.3 Duties and Responsibilities of Staff

- 3.3.1 The Overseas Visitors Manager is responsible for ensuring that Trust policy is in line with statutory duties and national guidance and that charges are made where applicable.
- 3.3.2 It is the responsibility of all staff to ensure that this policy is adhered to and that the Overseas Visitors Office are informed about any patient who may not be eligible to access free NHS care.

3.3.1.1 General Guidance

- Enquiries regarding overseas visitors should be made to the Overseas Visitors Office. If the issue is still unclear, advice will be sought from the Department of Health or the Trust's Legal Advisors.
- An individual department or person cannot intervene in individual cases. The decision about whether an individual patient is liable for charges rests with the Overseas Visitors Manager.

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- All staff must refrain from giving advice on an individual's eligibility for free treatment unless the Overseas Visitors Office has advised them accordingly.
- In order for the Trust to recover all income in respect of the treatment of overseas visitors, all activity must be notified to the Overseas Visitors Office and recorded on the Overseas Visitors Portal by the OSV Team.
- The Overseas Visitors Office shall work closely with administration staff, bookings staff, ward staff and departmental clinical staff as required in order to ensure that effective communication takes place in respect of overseas visitor activity.
- The Overseas Visitors Office will liaise with external bodies such as the Department of Health, Home Office, Department for Work and Pensions (DWP), Colleges, University and Local Counter Fraud Service as required.

3.4 Identification

Identify, without discrimination, all patients who may be liable to charges.

3.4.1 Emergency Department (ED) Attenders

- There is no exemption from charge for 'emergency' treatment (other than that given within the 4 walls of the ED) the Trust will always provide immediately necessary treatment if it is to save the patient's life. In this instance treatment must not be delayed whilst the patient's chargeable status is determined. Failure to do so is in direct breach of the Human Rights Act 1998. Charges still apply for immediately necessary treatment if the overseas visitor is not themselves exempt from charge.
- Although no charges can be made to a patient for treatment carried out in ED, if the patient has a European Health Insurance Card (EHIC) the cost of treatment can be recovered centrally from the European Economic Area (EEA) member state by the Overseas Visitors Office back into the NHS. The Trust then receives 25% of all successful EHIC claims, including ED, Outpatient and Inpatient episodes.
- All patients attending ED must be asked where they have been lawfully resident for the last 12 months. Anyone whose answers indicate that they have not been resident in the UK for the last 12 months must be asked to complete a Pre-Registration Form (Appendix 1).
- ED staff will ask the patient to complete the Pre-registration form and their details will be logged as per the local arrangements in the department and collected by the OSV Team.

3.4.2 Ward Admissions

If ward staff identify, after admission, that a patient may not be resident in the UK then they will ask the patient to complete a Pre-Registration Form (Appendix 1) and contact the OSV Team to ask them to attend and interview the patient (Monday – Friday 9am – 4pm). Outside of these times the ward staff must email a copy of the completed form to the dedicated OSV email address <u>Overseas@bfwhospitals.nhs.uk</u> along with any copies of documents the patients has provided (copy of EHIC,

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insurance, visa documents etc.). The OSV Team will then check the patient's availability and attend to interview them if they are still an inpatient.

3.4.3 Outpatient Appointments

• All patients attending the Outpatient Department (OPD) must be asked where they have been lawfully resident for the last 12 months. Anyone whose answers indicate that they have not been resident in the UK for the last 12 months must be asked to complete a Pre-Registration Form (Appendix 1).

OPD staff will ask the patient to complete the Pre-registration form and there details will be logged and collected / emailed to the OSV Team.

If the referral is a two week rule or urgent, the appointment should be made immediately.

3.4.4 General Practitioner (GP) Referrals

• In cases where the GP referral letter indicates that the patient has recently arrived in the UK or is a resident abroad then the booking team will either contact Overseas Visitors Office or send them a copy of the letter as per secton 3.10.6. If in the opinion of the medical staff the appointment is not classed a two week rule or urgent referral, treatment eligibility must be established before any appointments are made or any treatment is given.

3.4.5 Elective Admissions that clinicians consider non-urgent

• Where the patient is chargeable, the Trust should **NOT** initiate any treatment process, e.g. by putting the patient on a waiting list, until a deposit equivalent to the estimated full cost of treatment is obtained. If no deposit is obtained then the Trust must **NOT** perform the procedure.

3.5 Assessment of Eligibility

- 3.5.1 All patients who provide information that suggests they may not be eligible to access free NHS treatment will be asked to complete a Pre-Registration Form (Appendix 1). These will then be sent to the Overseas Visitors Office electronically to <u>Overseas@bfwhospitals.nhs.uk</u> for assessment.
- 3.5.2 The Overseas Visitors Office will conduct a patient interview with any patient where further information is required to establish their potential overseas status after completing a Pre-Registration Form (Appendix 1). Following the interview the Overseas Visitors Office will amend the OSV portal and notify staff as appropriate.
- 3.5.3 In accordance with Department of Health Regulations and Guidance, it is the responsibility of the patient to prove their entitlement to access NHS care. Failure

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to provide sufficient evidence to prove eligibility will usually result in an overseas visitor being recorded as NHS Chargeable and charges will be incurred.

- 3.5.4 If a patient has indicated that they are a visitor to the UK or that they are on holiday, the overseas address must be entered onto the Hospital Information Support System (HISS) system as the permanent address and the UK address as the temporary address.
- 3.5.5 Once the status of the patient has been established the Overseas Visitors Office will get a signed Overseas Agreement to Pay Form from the patient (Appendix 2).
- 3.5.6 Patients deemed to be chargeable must show insurance details and acquire authorisation or provide payment equal to the value of the expected total cost of treatment to be received before treatment is commenced, unless urgent or needed immediately. If that is not possible, for example, due to their admission taking place at a weekend then payment or authorisation must be provided on the next working day or as soon as possible but should be prior to discharge.

3.6 Exempt Services

- 3.6.1 Treatment is chargeable to Overseas Visitors with the exception of:
 - Treatment in Accident and Emergency.
 - Family Planning Services.
 - Diseases deemed exempt for Public Health reasons (Appendix 3).
 - Sexually transmitted diseases, including human immunodeficiency virus (HIV).
 - Treatment given to people detained, or liable to be detained, or subject to a community treatment order under the provisions of the Mental Health Act 1983, or other legislation authorising detention in a hospital because of mental disorder.
 - Treatment (other than that covered by the Mental health Act 1983 exemption above) which is imposed by, or included in, an order of the Court.
 - Services provided other than in a hospital or by a person who is employed to work for, or on behalf of, a hospital. This means that services provided in the community will be chargeable only where the staff providing them are employed by or on behalf of an NHS hospital.
 - People who have paid the health surcharge (or were exempt from paying it) whose visa is more than 6 months length remain valid.
 - Refugees and asylum seekers, including failed asylum seekers supported by the Home Office under section 4 (2), of the Immigration and Asylum Act 1999 or s21 of the National Assistance Act 1948 (Failed asylum seekers not supported by the Home Office / Local Authorities (LA) are chargeable from the date their appeal is rejected but courses of treatment under way will remain free).
 - Those supported under section 95 of the IAA 1999.
 - Children in the care of the Local Authority.

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- Victims and suspected victims of human trafficking and their family members.
- Treatment required for a physical or mental condition caused by:

Torture; Female genital mutilation; domestic violence or sexual violence except where the visitor has travelled to the UK for the purpose of seeking that treatment.

- Exceptional humanitarian reasons as approved by the Secretary of State for Health.
- North Atlantic Treaty Organization (NATO) personnel and attached civilians and their family members.
- People who receive UK war pensions and their family members.
- Members of HM UK forces and their family members.
- People working abroad as crown servants, or for the UK Government, or for the British Council or the Commonwealth War Graves Commission who were ordinarily resident in the UK prior to being posted overseas and their family members.
- Prisoners and detainees.
- People working on ships registered in the UK.
- Any UK state pensioner resident in another EEA member state or Switzerland who has registered an S1 document in that state. The person's spouse / civil partner and children under 18 are also exempt when lawfully visiting the UK with them, unless they are entitled to hold a non-UK EHIC.

3.7 EEA Visitors

- 3.7.1 Arrangements for European Union Overseas Visitors are governed by the European Union (EU) Social Security Regulations (Regulations (EC) 883/2004 and 987/2009 for EU member states, and Regulations (EEC) 1408/71 and 574/72 for Iceland, Liechtenstein, Norway and Switzerland).
- 3.7.2 In practice this applies to residents of other EEA states and Switzerland, including third country nationals, who are entitled to hold a European Health Insurance Card (EHIC) issued by their country of residence or, in some cases, the country which is the 'competent authority' for them.
- 3.7.3 For the purposes of the Overseas Visitors Charging Regulations, the EEA comprises all the EU member states (Austria, Belgium, Bulgaria, Croatia, Republic of Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden and the UK), plus Iceland, Liechtenstein, Norway and Switzerland.
- 3.7.4 The EHIC provides for free NHS treatment that is medically necessary during their visit. Visitors from Switzerland or the EEA (except Ireland) that do not provide an EHIC / Provisional Replacement Certificate (PRC) must be charged for their NHS

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hospital treatment (except for treatment within the Accident and Emergency Department), unless a different exemption applies to them under the Charging Regulations. In order for the UK to make a claim to the relevant EEA state or Switzerland for treating their residents, it is imperative that the data from a valid EHIC / PRC (for unplanned treatment) or S2 / or Maltese quota number (for planned treatment) is recorded and reported to the Overseas Healthcare team at the DWP.

3.7.5 Visitors from the Ireland do not need to provide an EHIC but simply must provide evidence that they are resident in the Ireland in order to receive free NHS treatment that is medically necessary during their visit.

3.8 Reciprocal Agreements

3.8.1 Within the reciprocal agreements there are a number of variations in the level of free treatment afforded to visitors travelling to the UK. Generally, only immediate medical treatment is to be provided free of charge, to allow the overseas visitor to return home for other needs. Also, the agreements do not usually apply when the person has travelled to the UK for the purpose of obtaining healthcare. However, this is not always the case.

Country	Level of cover provided (see key)	Further information	
Anguilla	1*	Applies to all residents of that country. Can also refer four patients to the UK for free NHS hospital treatment.	
Armenia	1	Applies only to citiz	ens resident in that country.
Australia	1*	Applies to all reside	ents of that country.
Azerbaijan	1	Applies only to citiz	ens resident in that country.
Barbados	1*	Applies to all residents of that country.	
Belarus	1	Applies only to citizens resident in that country.	
Bosnia and Herzegovina	3	Applies to all insured persons of that country.	
British Virgin Islands	1*	Applies to all residents of that country. Can also refer four patients to the UK for free NHS hospital treatment.	
Falkland Islands	4	Applies to all residents of that country. Can refer an unlimited number of patients to the UK for free elective treatment.	
Georgia	1	Applies only to citiz	ens resident in that country.
Gibraltar	3	Applies only to citizens resident in that country when that citizen is not expected to stay in the UK for more than 30 days. Can also refer an unlimited number of patients to the UK for free elective treatment.	
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3.8.2 Patients covered by a Reciprocal Agreement are as follows:

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Country	Level of cover provided (see key)	Further information
Isle of Man	2	Applies to all residents of the Isle of Man for a period of stay in the UK that has not exceeded, nor is expected to exceed, three months.
Jersey	2	Applies to all residents of Jersey for a period of stay in the UK that has not exceeded, nor is expected to exceed, three months.
Kazakhstan	1	Applies only to citizens resident in that country.
Kosovo	3	Applies to all insured persons of that country
Kyrgyzstan	1	Applies only to citizens resident in that country.
Macedonia	3	Applies to all insured persons of that country.
Moldova	1	Applies only to citizens resident in that country.
Montenegro	3	Applies to all insured persons of that country.
Montserrat	1*	Applies to all residents of that country. Can also refer four patients per year for free NHS hospital treatment.
New Zealand	2	Applies only to citizens resident in that country.
Russia	1	Applies only to citizens resident in that country.
Serbia	3	Applies to all insured persons of that country.
St Helena	1*	Applies to all residents of that country. Does not include Ascension Island or Tristan da Cunha. Can also refer four patients per year for free NHS hospital treatment.
Tajikistan	1	Applies only to citizens resident in that country.
Turkmenistan	1	Applies only to citizens resident in that country.
Turks and Caicos Islands	1*	Applies to all residents of that country. Can also refer four patients per year for free NHS hospital treatment.
Ukraine	1	Applies only to citizens resident in that country.
Uzbekistan	1	Applies only to citizens resident in that country.

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3.8.1 Key:

- 1) Immediate medical treatment only.
- 2) Only treatment required promptly for a condition which arose after arrival into the UK or became, or but for treatment would have become, acutely exacerbated after such arrival. Services such as the routine monitoring of chronic/pre-existing conditions are not included and free treatment should be limited to that which is urgent in that it cannot wait until the patient can reasonably return home.
- 3) All treatment on the same basis as for a person insured in the other country, including services such as routine monitoring of pre-existing conditions, but not including circumstances where a person has travelled to the other country for the purpose of obtaining healthcare.
- 4) All treatment free on the same terms as for an eligible UK resident (an ordinary resident), including elective treatment.
- For all levels of coverage, it will be for a doctor or dentist employed by the relevant NHS body to provide clinical input into whether required treatment meets a specific level of coverage.
- * For these countries, the agreement will also apply to those persons requiring treatment if they are a member of the crew, or a passenger, on any ship, vessel or aircraft travelling to, leaving from or diverted to the UK and the need for urgent treatment has arisen during the voyage or flight.
- Any patients coming to the UK from these countries for elective treatment need to be assessed by Overseas Visitors Office to ensure that the relevant authorisation is received from the reciprocal country.
- All other overseas visitors will be deemed to be NHS Chargeable.

3.9 Invoicing

- 3.9.1 Patients who are identified as potentially not fitting the criteria for free access to NHS care, i.e. not ordinarily resident in the UK, will be asked to complete the Pre-Registration Form (Appendix 1).
- 3.9.2 Any patient not eligible for free NHS care is deemed to be NHS Chargeable. The Overseas Visitors Office will ensure an invoice is raised from the information given on the Overseas Patient Agreement to Pay Form, (Appendix 2).
- 3.9.3 The invoice raised will be based on the methodology used in the National Health Service (Charges to Overseas Visitors) Regulations 2015, which is based on Payment by Results (PBR) Tariff plus the Trust Market Forces Factor (MFF) with a 50% mark up for patient's resident outside the EEA.

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- 3.9.4 For any non-urgent elective Overseas Visitors who are not covered by an S2 form, an invoice will be raised by the Overseas Visitors Office as detailed above and payment must be received in advance of the admission.
- 3.9.5 Overseas Visitors Office will make the appropriate arrangements for any planned treatment charges under an S2 to be made to the correct EEA member state.
- 3.9.6 The Overseas Visitors Office will be responsible for collecting payments in line with Trust guidelines. They will liaise with the Finance Office regarding any outstanding accounts.
- 3.9.7 The Overseas Visitors Office will follow due process to report any debts by non-EEA nationals that are over £1,000 and have been outstanding for 3 months to the Department of Health, in line with the Charging Guidelines 2015. This results in that person being normally refused entry to the UK and encourages payment of debt.

3.10 Terms of Business for NHS Chargeable Overseas Visitor

3.10.1 Introduction

Following completion of a Pre-registration form (Appendix 1) the patient has been deemed to be chargeable and the Trust is required under the provisions of section 175 of the National Health Service Act 2006 and other statutes and NHS regulations to make charges in respect of Overseas Visitors.

3.10.2 General Information

A written undertaking to pay the charges must be given before a patient can be treated as an Overseas Visitor. The hospital charges used are the nationally agreed NHS tariff (plus 50% for non-EEA patients).

3.10.3 Insured Patients

If the patient is insured they must indicate their insurance details on the Agreement to Pay Form (Appendix 2).

It should be noted that being insured does not mitigate the patient's liability as an individual to pay for any and all treatment given by the Trust should the insurer, for whatever reason, not agree to reimburse the Trust in respect of any and all charges levied by the Trust for care.

The patient should check with the insurer that the policy held covers the treatment. Some insurance companies will provide an authorisation number for each episode of treatment, which should be indicated on the Agreement to Pay Form (Appendix 2).

Where the patient is covered by an insurer, the Trust will expect that payment of any and all charges not covered by the policy and/or which the insurer refuses to pay for within 14 days of the date of the Trust's invoice.

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3.10.4 Non-insured Patients

If the patient has elected to pay for the treatment themselves, this must be indicated this on the Agreement to Pay Form.

3.10.5 Methods of Payment

- **Paying by cheque**: Cheques should be made payable to 'Blackpool Teaching Hospital NHS Foundation Trust' and crossed account payee only. You should send your cheque in the envelope with your Agreement to Pay Form.
- **Paying by debit / credit card**: Debit / credit card payments should be made to the cashiers office (Finance Department) by phone or through personal visit. Please telephone 01253 953732.
- **Paying by cash**: Cash payments should be made to the cashiers Office by personal visit within normal working hours of 9:00 am to 15:00 pm, Monday to Friday.

3.10.6 Queries

If you do have any queries please do not hesitate to contact the Overseas Visitors Team – contact details below:

- Email <u>Overseas@bfwhospitals.nhs.uk</u>
- Overseas Visitors Manager Janet Potter 01253 953613
- Overseas Visitors Officer Jayne Pownall 01253 951164 (answerphone service available).

3.11 Information

- 3.11.1 Records will be maintained by the Overseas Visitors Office including the following information in accordance with DPA requirements:
 - Patient's name, address and telephone number.
 - Completed Patient Pre-Registration Form.
 - Copies of any Passports / Visas.
 - Completed Agreement to Pay Form.
 - Health Insurance details for insured patients.
 - Details of all treatment received, admission and discharge dates.
 - Home Office Evidence and Enquiry responses.
 - Correspondence sent to and received from patient.
 - Invoices raised.

3.11.2 No copies of this information are to be kept in the patient notes.

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3.12 Claim Forms

3.12.1 Patients may submit insurance claim forms to the Overseas Visitors Office who will complete relevant sections and then ensure other relevant sections are completed by the Consultant.

3.13 Complaints

- 3.13.1 The Trust's Complaints Management Policy is aimed at all Trust staff and applies to complaints received at the Blackpool Teaching Hospitals NHS Foundation Trust.
- 3.13.2 The procedure covers the handling of any complaint made about the Trust's staff relating to care in the Trust. For further information contact the Complaints Department or see the full policy available on the Trust's intranet system.

3.14 Archiving Arrangements

The original of this policy will remain with the Overseas Visitors Manager. An electronic copy will be maintained on the Trust intranet.

3.15 Process for Monitoring Compliance With and Effectiveness of the Policy

3.15.1 In order to monitor compliance with this policy, the auditable standards will be monitored as follows:

No	Minimum Requirements	Evidenced by
1.	Systems and processes to be audited as part of the Trust Finance audit programme	Report produced by Internal Audit

3.15.1 Frequency

Audits will be undertaken as part of the annual Internal Audit programme to ensure that this policy has been adhered to and a formal report will be written and presented at the Trust Audit Committee.

3.15.2 Undertaken by

Internal Audit

3.15.3 Dissemination of Results

At the Audit Committee which is held monthly.

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3.15.4 Recommendations / Action Plans

- Implementation of the recommendations and action plan will be monitored by the Trust Audit Committee, which meets monthly.
- Any barriers to implementation will be risk-assessed and added to the risk register
- Any changes in practice needed will be highlighted to Trust staff via the Governance Managers' cascade system.

4 ATTACHMENTS		
Appendix Number	Title	
Appendix 1	Pre-Registration Form	
Appendix 2	Agreement to Pay Form	
Appendix 3	Exempt Diseases	
Appendix 4	Communication Plan	
Appendix 5	Equality Impact Assessment Form	

5PROCEDURAL DOCUMENT STORAGE (HARD AND ELECTRONIC COPIES)Electronic Database for Procedural DocumentsHeld by Procedural Document and Leaflet Coordinator

6 LOCATIONS THIS DOCUMENT ISSUED TO		
Copy No Location Date Issued		
1	Intranet	28/10/2016
2	Wards, Departments and Service	28/10/2016

7 OTHER RELEVANT / ASSOCIATED DOCUMENTS		
Unique Identifier	Title and web links from the document library	
	Complaints Management	
CORP/POL/155	The Systematic Approach to Managing Incidents, Complaints and	
	Claims	
	http://fcsharepoint/trustdocuments/Documents/CORP-POL-	
	<u>155.docx</u>	
CORP/POL/525	Disciplinary Policy	
	http://fcsharepoint/trustdocuments/Documents/CORP-POL-	
	<u>525.docx</u>	
CORP/PROC/633	Complaints Management	
	http://fcsharepoint/trustdocuments/Documents/CORP-PROC-	
	<u>633.docx</u>	
CORP/PROC/636	Disciplinary and Appeal Procedure	
	http://fcsharepoint/trustdocuments/Documents/CORP-PROC-	
	<u>636.docx</u>	

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8 SUPPORTING REFERENCES / EVIDENCE BASED DOCUMENTS References In Full

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14/04/2016.

9 CONSULTATION / ACKNOWLEDGEMENTS WITH STAFF, PEERS, PATIENTS AND THE PUBLIC

Name	Designation	Date Response Received
Janet Potter	Private and Overseas Patient Manager	
Jayne Pownall	Overseas Visiting Officer	
John Marsden	Local Counter Fraud Specialist	
Robin Woods	Assistant Director of Contracts and	
	Commissioning	

10 DEFINITIONS / GLOSSARY OF TERMS		
DWP	Department of Work and Pensions	
ED	Emergency Department	
EEA	European Economic Area Visitors	

10 DEFINITIONS / GLOSSARY OF TERMS			
EHIC	European Health Insurance Card		
GP	General Practitioner		
HISS	Hospital Information Support System		
HIV	human immunodeficiency virus		
HUS	Haemolytic uraemic syndrome		
LA	Local Authorities		
MFF	Market Forces Factor		
NATO	North Atlantic Treaty Organization		
NHS	National Health Service		
OPD	the Outpatient Department		
OR	Ordinarily Resident		
OSV	Overseas Visitor		
PBR	Payment By Results Tariff		
PRC	Provisional Replacement Certificate		
SARS	Severe Acute Respiratory Syndrome		
the Trust	Blackpool Teaching Hospital NHS Foundation Trust (hereafter		
	known as		
UK	United Kingdom		

11 AUTHOR / DIVISIONAL / DIRECTORATE MANAGER APPROVAL			
Issued By Janet Potter Checked By Robin Woods			
Job Title	Private and	Job Title	Assistant Director of
	Overseas Patient		Contracts and
	Manager		Commissioning
Date	March 2016	Date	March 2016

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		Pre-Attenda	nce Form	
Why have I been aske	d to complete th	his form?		
free treatment. Please	complete this for	m to help us with	this duty. A parent/g	ablish if patients are entitled to guardian should complete the a the declaration below.
Please complete this	form in BLOCK	CAPITALS		
Family name/surname	e:			
First name/given nam			Date of bir	rth:
DECLARATION: TO B		BY ALL		
a future immigration a personal information DECLARATION: I have read and ur I agree to be conta Understand that t The information I f Understand that i	application to en may be passed acted by the trust he relevant officia have given on this f I knowingly give	sons I have been to confirm any de al bodies may be of form is correct to false information	the UK being denie ent of Health to the asked to complete t tails I have provided ontacted to verify a the best of my know then action may be	d. ny statement I have made.
Signed:			Date:	
Print name:			Relationship	
On behalf of:			to patient:	
1. ALL: PERSONAL D	ETAILS – Please	e answer all que	stions that apply to	you
Do you usually live in t	heUK? YES:	NO:	Nationality:	
Address in the UK:			Passportnumbe	er:
Address in the OK.			Country of issue	B1
Address in the OK.			Passport expiry	date:
				p.
Telephone number:			Dual Nationality	*
Telephone number: Mobile number: Email:			Dual Nationality Date of entry int	
Telephone number: Mobile number:	n YES:	NO: 🔲		
Telephone number: Mobile number: Email: Will you return to <u>live</u> i	TES.	NO: 🔲	Date of entry int If yes, when?	
Telephone number: Mobile number: Email: Will you return to <u>live</u> is your home country?	TES.	NO: 🔲	Date of entry int If yes, when?	to the UK:

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-				
	d Kingdom passport		opean Union passport	
_	EU passport with valid entry visa	Visa No.		
Student visa	Visit visa	Visa expiry date:	8 8 8 8	0 0
=	tration Card (ARC)	ARC No.		
Other - pleas	e state:	BRP No.		
3. ALL: YOUR STA	Y IN THE UK – You may be requ	ired to provide doc	umentation	
Please tell us about	t the purpose of your stay in the U	K (check all that appl	y):	
Holiday/visitf	riends or family 🔲 On busine	55	To live here per	manently
To work	To study		To seek asylum	
Other - pleas	e state:			
How many months	have you spent OUTSIDE the UK	in the last 12 months	?	
None None	Up to 3 months	3-6 months	Over 6	months
Please indicate the	reason for any absence from the	JK in the last 12 mon	ths (check all that app	ly)
I live in anoth	er country 🔲 A holiday	to visit friends	To work	
I frequently co	ommute (business/second home o	verseas)	To study	
Other-pleas	e state:			
	LS – If you are registered with a	CP in the UK		
	LS – IT you are registered with a			
GP/surgery name:		Address of GP surg	ery:	
GP telephone:				
NHS number:				
5. HEALTH OR TR	AVEL INSURANCE DETAILS – #	the UK is not your j	permanent place of r	esidenc y
			permanent place of re of insurance provider	
Do you have insura	ince? YES: NO:			
Do you have insura	ance? YES: NO: C			
Do you have insura Membership numb Insurance telephon	ance? YES: NO: C	Name and address	of insurance provider:	
Do you have insura Membership numbe Insurance telephor 6. EUROPEAN HE	ALTH IN SURANCE CARD (EHIC)	Name and address	of insurance provider ve in another EEA co	ountry
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APPENDIX 2: AGREEMENT TO PAY FORM

AGREEMENT TO PAY FORM

NHS Chargeable Overseas Visitor

To be completed by the Patient or their represe	entative, in block capitals:
Name of Patient:	.Date of Birth
UK Address:	
Home Address:	
Name of person giving undertaking:	
UK Address:	
Home Address:	
Relationship to Patient:	
I accept liability for payment of the charges determ NHS Foundation Trust for accommodation, treatme provided to me as a chargeable patient, including treatment and appliances carried out resulting from	ent, investigations and all other services all diagnostic tests, procedures,
I accept that the Trust reserves the right to require terms and conditions as enclosed.	payment of its charges in advance and
Signed:	.Date:
Witnessed:	.Status:
Do you have Private Health Insurance? If YES please fill in the details below:	Yes No
Policy No:	Authorisation Code:
Insurance Company:	
Address:	
	.Telephone:
In the event of non-payment or a payment shortfal medical insurance agreement, I undertake to settle	•
Once completed, please return to th <u>Overseas@bfwhosp</u>	

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APPENDIX 3: EXEMPT DISEASE

EXEMPT DISEASES

Certain diseases are exempt for Overseas Visitors where treatment is necessary to protect the wider public health. This exemption from charge will apply to the diagnosis even if the outcome is a negative result. It will also apply to the treatment necessary for the suspected disease up to the point that it is negatively diagnosed. It does not apply to any secondary illness that may be present even if treatment is necessary in order to successfully treat the exempted disease. These diseases are defined in the Department of Health Guidance on Implementing The National Health Service (Charges to Overseas Visitors) Regulations 2015).

The exempt diseases are:

- Acute encephalitis
- Acute poliomyelitis
- Anthrax
- Botulism
- Bruscellosis
- Cholera
- Diphtheria
- Enteric fever (typhoid and paratyphoid fever)
- Food poisoning
- Haemolytic uraemic syndrome (HUS)
- Human Immunodeficiency Virus (HIV)
- Infectious bloody diarrhoea
- Invasive group A streptococcal disease and scarlet fever
- Invasive meningococcal disease (meningococcal meningitis, meningococcal septicaemia and other forms of invasive disease)
- Legionnaires' Disease
- Leprosy
- Leptospirosis
- Malaria
- Measles
- Mumps
- Pandemic influenza (defined as the 'Pandemic Phase'), or influenza that might become pandemic (defined as the 'Alert Phase') in the World Health Organization's Pandemic Influenza Risk Management Interim Guidance

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APPENDIX 3: EXEMPT DISEASE

- Plague
- Rabies
- Rubella
- Sexually transmitted infections
- Severe Acute Respiratory Syndrome (SARS)
- Smallpox
- Tetanus
- Tuberculosis
- Typhus
- Viral haemorrhagic fever (which includes Ebola)
- Viral hepatitis
- Whooping cough
- Yellow fever

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APPENDIX 4: COMMUNICATION PLAN

Blackpool Teaching Hospital NHS Foundation Trust

COMMUNICATION PLAN

The following action plan will be enacted once the document has gone live.

Staff groups that need to have knowledge of the strategy / policy	All staff
The key changes if a revised policy / strategy	Overseas Visitors are not private patients, they are NHS chargeable patients.
The key objectives	This policy has been produced to provide clear guidelines to staff for the management of access by overseas visitors to Trust services.
How new staff will be made aware of the policy and manager action	Cascade by email from manager, staff briefings, Training by request to OSV Team, Trust Induction (Counter Fraud Presentation), Workshops on a quarterly basis
Specific Issues to be raised with staff	Staff should be made aware of the policy. Particular attention should be drawn to the fact that patients who are not resident in the UK may not be entitled to NHS care.
Training available to staff	Support is available from the Overseas Visitors Team Ext 3613 or Ext 1164
Any other requirements	
Issues following Equality Impact Assessment (if any)	None
Location of hard / electronic copy of the document etc.	

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APPENDIX 5: EQUALITY IMPACT ASSESSMENT FORM Department Service or Policy Date Completed: **GROUPS TO BE CONSIDERED** Deprived communities, homeless, substance misusers, people who have a disability, learning disability, older people, children and families, young people, Lesbian Gay Bi-sexual or Transgender, minority ethnic communities, Gypsy/Roma/Travellers, women/men, parents, carers, staff, wider community, offenders. EQUALITY PROTECTED CHARACTERISTICS TO BE CONSIDERED Age, gender, disability, race, sexual orientation, gender identity (or reassignment), religion and belief, carers, Human Rights and social economic / deprivation. QUESTION RESPONSE IMPACT Action Issue Positive Negative What is the service, leaflet or policy See Purpose development? What are its aims, who are the target audience? Does the service, leaflet or policy/ Yes, people can be accessing free NHS The overseas team will This ensures NHS development impact on community safety care that they are not entitled to. report to the home office or Funds and local counter fraud office. resources are only Crime Community cohesion available to people who are entitled to it Is there any evidence that groups who Yes, when NHS Resources that are Ensure all patients are Yes, because there should benefit do not? i.e. equal identified who are overseas would be an chargeable, this increases pressure on opportunity monitoring of service users the delivery of NHS services trust wide visitors and where increased income and/or staff. If none/insufficient local or chargeable fee are collected. for the trust for national data available consider what chargeable information you need. overseas visitors Does the service, leaflet or development/ No policy have a negative impact on any geographical or sub group of the population? How does the service, leaflet or policy/ No development promote equality and diversity? Does the service, leaflet or policy/ Yes, as per trust procedures. development explicitly include a commitment to equality and diversity and meeting needs? How does it demonstrate its impact? Does the Organisation or service Yes workforce reflect the local population? Do we employ people from disadvantaged aroups Will the service, leaflet or policy/ Yes, because the trust will have an development increased income from chargeable Improve economic social conditions overseas visitors. i. in deprived areas Use brown field sites ii Improve public spaces including iii creation of green spaces? Does the service, leaflet or policy/ No development promote equity of lifelong learning? Does the service, leaflet or policy/ No development encourage healthy lifestyles and reduce risks to health? Does the service, leaflet or policy/ No development impact on transport? What are the implications of this? Does the service, leaflet or No policy/development impact on housing. housing needs, homelessness, or a person's ability to remain at home? Are there any groups for whom this No policy/ service/leaflet would have an impact? Is it an adverse/negative impact? Does it or could it (or is the perception that it could exclude disadvantaged or marginalised groups? Does the policy/development promote Yes, EEA patients who are ordinarily access to services and facilities for any resident will access services they may group in particular? have been unware of. Blackpool Teaching Hospitals NHS Foundation Trust ID No. CORP/POL/193

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APPENDIX 5: EQUALITY IMPACT ASSESSMENT FORM							
Does the service, leaflet or policy/development impact on the environment	No						
During development							
• At implementation?							
ACTION:							
Please identify if you are now required to carry out a Full Equality Analysis		Yes	No	o (Please delete as appropriate)			
Name of Author: Signature of Author:			Date Sig	ned:			
Name of Lead Person: Signature of Lead Person:			Date Sig	ned:			
Name of Manager: Signature of Manager			Date Sig	ned:			

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