

POLICY NAME:	OVERSEAS VISITORS POLICY
POLICY REFERENCE:	TW13-046
VERSION NUMBER :	2
APPROVING COMMITTEE:	Finance Committee
DATE THIS VERSION APPROVED:	November 2015
RATIFYING COMMITTEE:	PARC (Policy Approval and Ratification Committee)
DATE THIS VERSION RATIFIED:	December 2015
AUTHOR(S) (JOB TITLE)	Local Anti-Fraud Specialist
DIVISION/DIRECTORATE:	Finance
TRUST WIDE POLICY (YES/NO)	Yes
Links to other Strategies, Policies, SOP's, etc.	Overseas Visitor Procedure

Date(s) previous version(s) approved: (if known)	Version: 1	Date : Oct 2013
DATE OF NEXT REVIEW:	December 2018 extended to April 2019, extended to November 2019, extended to April 2020, rolled over to Oct 2020	
Manager responsible for review: <i>N.B. This should be the Author's line manager</i>	Director of Finance	

**AT ALL TIMES, STAFF MUST TREAT PATIENTS WITH RESPECT
AND UPHOLD THEIR RIGHT TO PRIVACY AND DIGNITY.**

1. INTRODUCTION

- 1.1 This policy is concerned with the management of access by individuals who do not normally live in the UK (overseas visitors) when they seek treatment from the Wrightington Wigan and Leigh NHS Foundation Trust (hereafter known as the Trust).
- 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 2011 and Guidance on Implementing the Overseas Visitors Hospital Charging Regulations 2015.
- 1.3 The National Health Service (NHS) provides healthcare free of charge to people, who are ordinarily resident in the United Kingdom (UK). People who do not usually live 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.
- 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 normally resident 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.
- 1.5 Failure to comply with this policy could result in disciplinary action.

2. PURPOSE

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

3. DEFINITIONS

- 3.1 **Overseas Visitor** – someone who is not ordinarily resident in the UK.
- 3.2 **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 **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.
- 3.3 **E112/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.

- 3.4 **S1 forms** UK State Pensioners who have activated their S1 in another member state with the Department of Work and Pensions will be entitled to all NHS hospital care without charges in the UK within the revised rules. There will no longer be the distinction between care required during a visit to the UK as an emergency or things that they seek during a visit that is elective / planned in nature – all care will be free of charge as long as they demonstrate the active S1 for residence overseas.

4. POLICY STATEMENT

- 4.1 Wrightington, Wigan and Leigh NHS Foundation Trust recognises that the National Health Service is primarily for the benefit of people living in the United Kingdom and is therefore committed to implementing the hospital charging regulations fully across sites and specialties, raising awareness amongst staff and providing information and training on how to interpret and apply the regulations and ensure that the baseline question is asked every time a patient begins a new course of treatment at the hospital and is entered onto the relevant in-patient or out-patient care computer in order to comply with the Charging Regulations.
- 4.2 With systems in place to support the identification and charging regulations the Trust can ensure that, as far as possible, NHS resources are being used to meet the health care needs of people who are normally resident in the UK.

5 SCOPE

This policy applies to:

- 5.1 All Trust employees, who must clearly identify overseas visitors on Trust premises as early as practicable in the course of treatment. The key staff groups are:
- 5.1.1 All Trust Consultants, who must decide whether a charge-liable overseas visitor is in need of urgent treatment and immediate necessary treatment.
 - 5.1.2 All staff registering or checking patient details, who must confirm patients currently residing in the UK
 - 5.1.3 The Overseas Visitor Office must interview patients and review relevant documentation to establish patients.

6 PRINCIPLES OF OVERSEAS VISITORS

The Trust has a legal obligation to:

- 6.1 Ensure that patients who are not ordinarily resident in the United Kingdom are identified and assess liability for charges in accordance with the Charging Regulations.
- 6.2 Certain services are free regardless of the status of the patient. These are described in the TW13-046 SOP 1 Overseas Visitors Procedure at Appendix 3.
- 6.3 All staff including Consultants, should identify to the Trust Overseas Visitor Office, patients who are chargeable as early as possible in their dealings with the hospital in order to:
- 6.3.1 Reduce the incidence of failure to pay and to protect resources.
 - 6.3.2 To enable the Trust to fully inform the patient of their liability to pay charges.
- 6.4 The Overseas Visitor Office should be contacted on 01942 264800 (Ext 4800)

if any member of staff identifies any potential overseas visitor. Outside office hours a message should be left to include the patient's hospital number or alternatively email overseasvisitorsenquiries@wwl.nhs.uk A member of the Overseas Visitor Office will duly respond.

- 6.5 Patients charged under the Regulations are NHS Overseas Charged Patients and as such are liable to pay for their treatment even where an undertaking to pay has not been obtained. They are not private patients, Consultants may not charge for their professional services to Overseas Visitors, as these are included in the overall cost to the Trust of the treatment.
- 6.6 Where the patient does not speak or understand English then the patient's spoken language must be established. The use of the Trust interpreter service must be invoked to support the patient's ability to understand and answer the questions appropriately. The use of a family member or staff to interprets information to and from the patient is not appropriate.

7. RESPONSIBILITIES

7.1 Chief Executive

The Chief Executive is accountable for ensuring the policy exists for Overseas Patients whilst under the care of the hospital.

7.2 Director of Finance

The Director of Finance is responsible for the Overseas Patient function.

7.3 Trust Executive Group / Finance Committee

Responsible for approving the Overseas Visitors Policy

7.4 Trust Managers/ Training and Development Team

Responsible for ensuring the Overseas Visitors Policy and procedures are adhered to by All Staff

7.5 Overseas Visitor Office

The Overseas Visitor Office role is to see that:

- 7.5.1 The Charging Regulations are applied in practice, so that overseas visitors who are lawfully entitled to free treatment receive it without charge, and that those not exempt are charged.
- 7.5.2 Determine if they are exempt from charges, or not, under the Charging Regulations.
- 7.5.3 Where the patient is identified as chargeable and claims they cannot pay it is ultimately the clinician decision to assess if the patient can reasonably be expected to return home and inform the Overseas Visitor Office of this, so that the clinician can then consider if and what treatment can wait,

7.6 Admin Staff

Admin staff with patient contact (i.e. Ward Clerks, A&E and General Reception Staff) are responsible for asking the base line question at each patient contact

7.7 All Staff

Must adhere to the Overseas Visitors Policy and Procedures where applicable.

8 HUMAN RIGHTS ACT

Implications of the Human Rights Act have been taken into account in the formulation of this policy and they have, where appropriate, been fully reflected in its wording.

9. EQUALITY AND DIVERSITY

The Policy has been assessed against the Equality Impact Assessment Form from the Trust's Equality Impact Assessment Guidance and, as far as we are aware, there is no impact on any Equality Target Group.

10. AUDIT / MONITORING COMPLIANCE

10.1 Audit

The effective implementation of this policy and compliance with both statutory requirements and mandatory guidelines will be subject to an independent audit. An annual audit shall be carried out by Finance to assess the Trust's compliance with this policy, relevant statutory requirements and the relevant mandatory guidelines

10.2 Monitoring

The audit report will be presented to the Finance Committee. The Finance Committee will be responsible for addressing any issues / or developing action plan(s) to correct any deficiencies.

10.3 Review

This policy will be reviewed in 3 years or as and when changes which affect the process are introduced.

11 ACCESSIBILITY STATEMENT

This document can be made available in a range of alternative formats e.g. large print, Braille and audiocd.

For more details, please contact the HR Department on 01942 77(3766) or email equalityanddiversity@wwl.nhs.uk

APPENDIX 2

EQUALITY IMPACT ASSESSMENT FORM – STAGE 1
INITIAL ASSESSMENT (PART 1)

FOR USE WITH POLICY'S AND SOP'S

Division:	FINANCE				
Title of Person(s) Completing Form	LOCAL ANTI-FRAUD SPECIALIST				
Title of Policy being assessed:	OVERSEAS VISITOR POLICY				
What is the main purpose (aims / objectives) of this policy?	A policy describing the principles under which the Trust provides the facilities for the treatment of and how the Trust will identify and charge and identify EEA and Non/EEA Overseas Visitors				
Will patients, carers, the public or staff be affected by this policy? Please delete as appropriate.	Patients			ALL	
	Carers				
	Public				
	Staff				
	If staff, how many individuals / Which Groups of Staff are likely to be affected? All Trust staff will be affected				
Have patients, carers, the public or staff been involved in the development of this policy? Please delete as appropriate.	Patients				
	Carers				
	Public				
	Staff	X			
	If yes, who have you involved and how have they been involved: Overseas Visitor Trust working group established since 2010 in the compiling of the Policy inc Estates and Facilities, Private Patients Officer, General Office Cashier, Director of Finance, Data Governance Officer, Clinical Management				
What consultation method(s) did you use?	Meeting groups (Minutes taken) on regular basis.				
How are any changes / amendments to the policy communicated?	Email or face to face consultations meetings				

QUESTIONS YOU MUST CONSIDER when completing the following Equality Impact Assessment Table:

- Are there any barriers which could impact on how different groups might benefit from this policy?
- Does this policy promote the same choices for different groups as everybody else?
- Could any of the following group's experience of this policy be different?

- Does this policy address the needs and potential barriers of these groups?

EQUALITY IMPACT ASSESSMENT TABLE – POLICIES (PART 2)

Equality Group	Positive Impact High Low None	Negative Impact High Low None	Reason/Comments for Positive Impact <u>(Why it could benefit any / all of the Equality Groups)</u>	Reason/Comments for Negative Impact <u>(Why it could disadvantage any / all of the Equality Groups)</u>	Resource Implication Yes / No
Men	n				
Women	n				
Younger People (17-25) and Children	n				
Older People (60+)	n				
Race or Ethnicity	n				
Learning Difficulties	n				
Hearing Impairment	n				
Visual Impairment	n				
Physical Disability	n				
Mental Health Need	n				
Gay/Lesbian/Bisexual	n				
Transgender	n				
Faith Groups (specify)	n				
Marriage & Civil Partnership	n				
Pregnancy & Maternity	n				
Carers	n				
Other Group (specify)					
Applies to ALL Groups	n				

High: There is significant evidence of a negative impact or potential for a negative impact.
Low: Likely to have a minimal impact / There is little evidence to suggest a negative impact.
None: A Policy with neither a positive nor a negative impact on any group or groups of people, compared to others.

INITIAL ASSESSMENT (PART 3)

- (a) In relation to each group, are there any areas where you are unsure about the impact and more information is needed?

no

- (b) How are you going to gather this information?

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- (c) Following completion of the Stage 1 Assessment, is Stage 2 (a Full Assessment) necessary?

Have you identified any issues that you consider could have an adverse (negative) impact on people from the following Equality Groups?

(Please **delete YES/NO** as appropriate)

Age (Younger People (17-25) and Children / Older People (60+))	no	
Gender (Men / Women)	no	
Race	no	
Disability (Learning Difficulties / Hearing Impairment / Visual Impairment / Physical Disability / Mental Illness)	no	
Religion / Belief	no	
Sexual Orientation (Gay / Lesbian / Bisexual)	no	
Gender Re-assignment	no	
Marriage & Civil Partnership	no	
Pregnancy & Maternity	no	
Carer	no	
Other	n/a	

Any other comments

N/A

Assessment completed by (Job Title) : Local Anti-Fraud Specialist

Date Completed : November 2015

If 'NO IMPACT' is identified Action: No further documentation is required.

If 'YES IMPACT' is identified Action: Full Equality Impact Assessment Stage 2 form must be completed. Refer to link below:

http://intranet/Departments/Equality_Diversity/Equality_Impact_Assessment_Guidance.asp

PLEASE RETURN A COPY OF THE COMPLETED ASSESSMENT FORM (STAGES 1, 2 & 3) VIA E-MAIL TO:

DEBBIE JONES, EQUALITY AND DIVERSITY PROJECT LEAD (for Service related policies)

debbie.jones@wwl.nhs.uk

EMMA WOOD, EQUALITY AND DIVERSITY PROJECT LEAD (for HR / Staffing related policies)

emma.wood@wwl.nhs.uk

POLICY MONITORING AND REVIEW ARRANGEMENTS

NAME OF POLICY/SOP or CLINICAL GUIDELINE:

Para	Audit / Monitoring requirement	Method of Audit / Monitoring	Responsible person	Frequency of Audit	Monitoring committee	Type of Evidence	Location where evidence is held
	Internal monitoring will be carried out by the Overseas Visitor Office and Internal Audit	Authorised persons- MIAA	AP's – Trust Internal Auditors	As issued	Audit Committee	Audit Report	Finance Department