

## Oversight Panel: Patient Charging

**Updated draft for the 2<sup>nd</sup> Panel meeting: 23 March 2020**

**Subject to approval at the 2<sup>nd</sup> meeting of the Panel**

### Terms of Reference: v.4

## The review of the Trust's arrangements for charging those patients not eligible for NHS treatment

### 1. Background

- 1.1. In Autumn 2019, there was controversy about the Trust's implementation of statutory requirements that related to charging patients not eligible for NHS services. In response, the Trust accepted that the arrangements current at that time needed to change. It established this Panel with a wide membership, reflecting diverse perspectives, and with an independent chair, to consider what new arrangements were needed.
- 1.2. The Trust values are:

We take **responsibility** for our actions

We work as a team to **improve quality**

We **learn**, develop and share knowledge

We **work together** for patients and colleagues

We treat everyone with **respect** and **compassion**

*Source: Our road map January 2019 to April 2021, Lewisham and Greenwich NHS Trust 2019*

- 1.3. The NHS requires Trusts to charge those patients who are not eligible for free care. Different Trusts have implemented this legal duty in a variety of ways.
- 1.4. The Panel will make sure that its work and resulting recommendations reflect and promote the Trust's values within the legal framework.
- 1.5. The overall aim of the Panel is to make recommendations to the Trust Board that:
  - Achieve national best practice in this area of work and identify what is 'good' in terms of what is clinically safest, and patient focused, while meeting statutory requirements

- Have learned from the Trust's own experience and the experience of other Trusts
- Arise from an open, candid and inclusive process built on hearing a wide range of perspectives and views, leading to honest conclusions
- Lead to arrangements that fulfil the Trust's obligations, are compassionate and have duty of care to patients and staff at their centre, achieving clarity for patients and the wider community.

## **2. Purpose**

### **2.1. The Panel will seek to:**

- Identify other Trusts whose experience may be relevant or helpful to LGT in becoming an example of best practice in this area of work
- Agree with the Trust Executive a work programme that will explore and investigate the issues that gave rise to the Panel; while most of the work programme will be undertaken by the Trust itself, there may be elements where members of the Panel can be directly involved or consulted
- Take testimony from patients, staff and relevant people from outside the Trust, so that the Panel's considerations can include this information and help to develop its recommendations
- Consider the appropriateness of arrangements to identify individuals that may be required to pay for healthcare treatment, including an evaluation of the ongoing risks and benefits associated with the contract in place with Experian
- Obtain assurance on the effectiveness of billing, debt collection arrangements at the Trust for those patients who are not entitled to free care and that these arrangements reflect the Trust's value of treating everyone with compassion and respect
- Obtain assurance on the adequacy of the arrangements in place to adapt existing systems should the definition of those patients required to fund their own treatment be widened in the event of EU exit
- Review the adequacy of the Trust's response to concerns recently raised by the 'Save Lewisham Hospital Campaign' in relation to the health impact on the whole community of the Trust's arrangements for implementing the overseas visitors charging policies and invoicing overseas patients, and the adequacy of the Trust's response to these
- Identify whether there are steps that should be taken to make the Trust's approach more sensitive when communicating with potentially vulnerable individuals, leading to the Trust demonstrating best practice in this area of work
- Prepare a cost-effectiveness analysis on the cost of current arrangements in relation to income
- Report to the Trust Board its view on the adequacy of arrangements, and make recommendations identified for improvements to existing arrangements that lead to the Trust demonstrating best practice for both patients and staff
- Provide the Trust Board with a clear line of sight to implementation of this policy.

### **2.2. The Panel will take account throughout its work of the Equalities Act 2010 and the Health and Social Care Act 2012, the impact of current and proposed arrangements on groups with protected characteristics, and the Trust's Public Sector Equality Duty.**

- 2.3. It will be open to the Panel to recommend to the Trust that it commissions research on the health impact on the Lewisham and Greenwich community of the migrant charging policy in deterring people from seeking care, in particular the impact on marginalised people, including people who are poor or destitute, vulnerable people, such as children and those with mental health problems, as well as people who come under protected characteristics, in particular pregnant women.
- 2.4. The Panel will consider the impact of the migrant charging policies on staff, including how the policies impact on their perceived ability to carry out their duties according to their code of professional values.
- 2.5. The Panel will operate within the current legal framework impacting on the Trust and its values but will not be involved in work to change existing law; Panel members who wish to do so can use other channels outside the Panel for that purpose.

### **3. Membership**

#### 3.1. The membership of the Panel shall be:

- Ms. Joy Beishon - Chief Executive, Healthwatch Greenwich
- Mr. Tom Brown - Executive Director, Community Services, London Borough of Lewisham
- Ms. Yolanda Dennehy - Deputy Director for Adult Social Care, London Borough of Bexley
- Ms. Sophie Gayle - Assistant Director, Patient Experience LGT
- Mr. Peter Gluckman - Panel independent chair
- Dr Louise Irvine - Save Lewisham Hospital Campaign
- Ms. Sukhvinder Kaur-Stubbs - Board Vice Chair LGT
- Ms. Jane Keogh - Save Lewisham Hospital Campaign
- Ms. Helen Knowler - Divisional Director of Nursing, Midwifery and Governance LGT
- Ms. Sarah McClinton - Director of Health and Adult Services, Royal Borough of Greenwich
- Professor Neena Modi – Professor of Neonatal Medicine at Imperial college and President of the Royal College of Paediatrics and Child Health
- Ms. Olivia O’Sullivan - Save Lewisham Hospital Campaign
- Dr. Tony O’Sullivan - Save Lewisham Hospital Campaign
- Dr. Mehool Patel - Deputy Medical Director LGT
- Mr. Spencer Prosser - Chief Financial Officer LGT
- Ms. Alessandra Sciarra - Lewisham Refugee and Migrant Network
- Ms. Folake Segun- Chief Executive, Healthwatch Lewisham

#### 3.2. The Panel will also be attended by:

- Mr. Peter Cook - Senior Project Manager, Oversea Visitor Improvement Team, NHS Improvement/NHS England
- Ms. Kate Anderson - LGT Director of Corporate Affairs
- Mr. Jim Lusby - LGT Director of Strategy and Integrated Care
- Ms. Karen Smith - PA Strategy, Minutes taker LGT
- Trust Executive - by invite.

#### **4. Chair**

4.1 The Panel will be chaired by an appointed individual who is independent of the Trust Board.

#### **5. Authority**

5.1 A quorum for the Panel shall be the Panel Chair and three other Panel members.

5.2 The Panel is accountable to the Trust Board through the LGT Director of Strategy and Integrated Care.

#### **6. Frequency of Meetings / Duration of the panel**

6.1 It is proposed that the panel meets roughly bi-monthly for the next six months. Meetings would be attended by those listed above and any further individuals that the panel considers relevant to explore those areas that are being considered.

6.2 The four initially scheduled meetings will take place at Lewisham University Hospital:

- 14:00 to 16:00 Monday 27 January 2020
- 14:00 to 16:00 Monday 23 March 2020
- 14:00 to 16:00 Thursday 14 May 2020
- 14:00 to 16:00 Thursday 11 June 2020

**6.3 If required, a fifth meeting may be arranged in early July 2020.**

#### **7. Conduct of Meetings**

7.1 It is recognised by the Trust that Panel members are deliberately drawn from a wide variety of organisations and perspectives. There will be different but legitimate standpoints.

7.2 All members need to listen with courtesy and respect to other Panel members and advisors, many of whom will have very different views.

7.3 Members will be asked to attend the entire meeting. If they need to leave the meeting early for another appointment, they are requested to consult the Chair.

#### **8. Note of Meetings and circulation of papers**

8.1 The Executive Assistant to the Director of Strategy and Integrated Care shall note the key points of discussions at meetings and, once agreed by the Chair, will circulate these to all members as soon as possible after the Panel has met.

8.2 The agenda and papers for the subsequent Panel meeting will be circulated a week before it is due to take place.

## **9. Reporting Responsibilities**

- 9.1 Following each Panel meeting, the Independent Chair of the Panel will report to the Director of Strategy and Integrated Care on the activities of the Panel, and any matters that the Panel determine require escalation to the Trust Management Executive.
- 9.2 The Chair and Director of Strategy and Integrated Care will monitor the work programme between meetings.
- 9.3 In June/July 2020 the Panel will provide a full report on the activities of the panel and any recommendations to the Trust Board. This report will be presented at the Trust's part one (Public Board meeting).

## **10. The Trust's role and standing among patients and local communities and their elected representatives**

- 10.1 An outcome of the Panel's work will be that no one is scared to walk through the door.
- 10.2 Lewisham and Greenwich NHS Trust is a core element in the range of public services in Bexley, Greenwich and Lewisham. Its reputation is one of being community-based. There is great support for the Trust among local populations. The Panel will work to make sure that its recommendations strengthen those links between the Trust, its patients, their carers, local community organisations and advocacy groups, the local authorities, and the populations it serves.
- 10.3 The Panel expects that its work will be considered by and relevant to the Trust in its development of a new strategy, positioning the Trust very much as a community-based provider, with close links to local advocacy, community and voluntary organisations.