



SOP 07 - Managing Participant Expenses

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IT IS THE RESPONSIBILITY OF ALL USERS OF THIS SOP TO ENSURE THAT THE CORRECT VERSION IS BEING USED

All staff should regularly check the Research & Development Webpage for information relating to the implementation of new or revised versions. Staff must ensure that they are adequately trained in the new procedure and must make sure that all copies of superseded version are promptly withdrawn from use unless notified otherwise by the SOP Controller.

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<http://www.gloshospitals.nhs.uk/en/About-Us/Research--Development/>

The Gloucestershire Hospitals NHS Foundation Trust wishes to acknowledge York Hospitals NHS Foundation Trust and University Hospitals Bristol NHS Foundation Trust who gave permission to use their templates in the development of these SOPs.

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Version History Log

This area will be updated with details of all changes made to the SOP whether due for full review or not.

Version	Details of Change	Date Implemented
1.0	Original SOP	09/01/2017
2.0	Rebranding to GHNHSFT	31/03/2018
3.0	Inclusion of delivery team processing patient expenses and electronic participant expenses process	xx / 08 /2021 Not implemented
4.0	Removal of reference to the paper application for payment form as no longer used Added information regarding to reimbursement system Added expenses form Removal of SOP categories and change of reference codes	30/10/2023

This SOP will be reviewed every two years unless changes to any relevant legislation require otherwise

Related Documents:

SOPs
SOP 02 - Research documentation and file management
SOP 11 - Confirmation of Capacity and Capability
SOP 14 - Study Income Distribution

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1. Introduction, Background and Purpose

The purpose of this SOP is to set out the issues to be considered when completing the Electronic Participant Expenses Spreadsheet, and the steps to be taken including trials unit approval.

Each study protocol should indicate whether or not participant expenses can be reimbursed and the maximum amount payable. If it is believed that the participants travel expenses will exceed this amount, prior approval must be obtained, in writing, from the trials unit (TU) or CRA that the amount is acceptable.

It will also be used when there are out of pocket expenses incurred specifically permitted by a TU which are paid for by petty cash.

2. Who should use this SOP?

The R&D team and any individual who is named on the delegation log should refer to this SOP to ensure they are aware of the process and kept up to date with the requirements for reimbursement of participant expenses and other permissible expenses.

3. When should this SOP be used?

This SOP is applicable to all clinical trials including those sponsored, co-sponsored and hosted by the Trust where participant expenses and consumables can be reimbursed. It should be read alongside the trial protocol and study contract/agreement. It should be referred to throughout the trial delivery to ensure all staff are aware of the process for claiming participant expenses and other permissible out of pocket expenses.

4. Why should the Patient Expenses Spreadsheet be completed

Following changes to procedures for payments via petty cash, all participant expenses should be obtained through the Trust 'Application for Payment' process; this ensures that the participant receives the money directly and that an audit trail can be provided for each of the trials undertaken within the Trust.

Participants should receive reimbursement within a month of the completed Participant Expenses Spreadsheet, being submitted to Creditor Payments. BACS (Bankers' Automated Clearing System) transfer is the preferred way for Creditor Payments to reimburse participants. If a cheque is requested by a trial participant, it must be explained that the process of reimbursement will be longer.

Only those studies where participant travel expenses are reimbursed by the Trials Unit can expenses be claimed. Each trial should indicate the amount payable within their protocol and / or contract/agreement which can be found in the site files.

5. How to complete the Electronic Participant Expenses Spreadsheet and submit to Creditor Payments

The expenses spreadsheet has been developed in liaison with Creditor Payments.

Research delivery team staff will have access to an electronic spreadsheet template to submit participant expenses requests to creditor payments.

Relevant participant details will be added to the spreadsheet ensuring full payee details are provided. Example of the Electronic Participant Expenses spreadsheet can be found in Appendix 2.

Please note the information listed in ***italic bold*** below is the essential information needed by Creditor Payments.

- i. Delivery team staff members will create trial expenses forms, capturing the basic information required to complete the expenses spreadsheet. The research team should complete as much of the form as possible before passing it on to the participant to complete.
- ii. If the participant takes the form away with them in order to attach their evidence of receipt costs, a pre-paid envelope will be provided. Participants may also scan or send photos of their receipts to an @nhs.net email account.
- iii. The completed trial expenses form should be added to the expenses spreadsheet to be processed by Creditor Payments. The spreadsheet should be completed as follows:
 - a. Trial – enter the name of the study. Ensure it is in the same format as previous entries.
 - b. Trial ID – enter the Trial ID of the participant.
 - c. **Participant name – enter the name of the participant.**
 - d. **Vendor ID – this should be left blank unless the participant has been paid previously.**
 - e. **Payee name – enter the payee name**
 - f. **Payee address – enter the address of the payee**
 - g. **Invoice number – this will be automatically generated when the date the claim was sent to Creditor Payments is inputted. Please ensure you copy the formulae to new rows.**
 - h. **(Invoice date) Date participant submitted their claim – enter the date the expenses form was received**
 - i. **Date sent to Creditor Payments – enter the date the spreadsheet is submitted to Creditor Payments.**
 - j. Dates of travel – enter the dates of the visits the participant is claiming for
 - k. Reason for travel – enter the visit type/ any other reason for travel
 - l. Description of expenses – enter any travel calculations e.g. Mileage = home to GRH x2
 - m. Miles – enter the total number of miles the participant travelled for all visits being claimed for. This is usually calculated using an internet mileage calculator.

- n. Mileage rate – enter the agreed mileage expenses rate
 - o. Mileage payment – a formulae in this cell will calculate Miles multiplied by mileage rate
 - p. Other expenses e.g. parking – enter the total amount to be paid for parking, rail fares etc.
 - q. Evidence submitted – enter details about any evidence submitted e.g. Parking ticket x 1 (date of ticket, value of ticket)
 - r. **Total amount claimed – a formulae in this cell will calculate mileage payment plus other expenses**
 - s. **Account code – enter ‘7271’**
 - t. **Cost centre – enter the code for the corresponding budget holder**
 - u. **Analysis code – enter the correct code for the trial**
 - v. **PO number – The same PO number is used for all claims. Enter ‘EXC2015’.**
 - w. **Payments type – Enter either BACS or cheque.**
 - x. **Sorting code – Enter participants bank account sort code**
 - y. **Account number – Enter participants bank account number**
 - z. **Payee/ Participant Email/s for remittance advice – Enter the email address for the payee. If you do not have an email, leave this blank and a paper copy will be sent instead.**
 - aa. Invoice request made? – This column will be completed by R&D when funds are claimed from the Trials Unit
- iv. Copies of relevant receipts/ evidence of expenses must be retained for a minimum of 7 years for audit purposes. Physical copies should be securely stored in the relevant ISF (Investigator Site File) or evidence of receipt costs can be scanned and saved on the shared RDSU network drive. If saving scanned copies to the RDSU drive, folders should include ‘RETAIN UNTIL [date records must be retained until]’, visit type and date of visit in the folder name. The Trust IT department can create folders which are only accessible to designated members of staff within the delivery teams and R&D. A copy of the list will be held in the site file for the specific trial and an amalgamated list in the Finance folder on the [RDSU drive](#). Patient expenses spreadsheet
- a. Electronic copies or physical copies do not need to be submitted to Creditor Payments, instead these must be retained for audit purposes

as described above. The Delivery Team will be responsible for liaising with the Sponsor to confirm if physical evidence of receipt costs must be retained, or if digital records are sufficient.

- v. When the application for payment has been added to the spreadsheet, the spreadsheet should be prepared to be submitted to Creditor Payments.
 - a. Rows of the spreadsheet which have been-previously submitted to Creditor Payments should be hidden. The spreadsheet should be protected and marked as 'read only'. Research team staff should submit the completed spreadsheet to the budget holder for approval.
- vi. The budget holder should submit the approved spreadsheet to Creditor Payments via the group Creditors email ghn-tr.Glofssap@nhs.net, adding 'Urgent Invoices' to the subject line. A delegated member of staff can submit the approved spreadsheet on the behalf of the budget holder by attaching an email containing the budget holder's approval.

Approved patient expenses spreadsheet is used_ by the R&D governance team to claim the cost of the participant expenses from the Sponsor.

6. Participant Reimbursement Payment System

A number of Sponsors are using participant payment reimbursement systems like PatientGO or Greenphire to either direct transfer fund to patient bank accounts or provide a debit card where funds are loaded onto for the participants to use. Trial participants are asked to provide their written consent when agreeing to use these systems. Our agreement to use these systems will reviewed during the local Capability and Capacity assessment.

Appendix 1 – Electronic Participant Expenses Spreadsheet

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
	Trial	Trial ID	Participant name	Vendor	Payee name	Payee Address	Invoice Number	(Invoice Date) Date Participant Submitted their Claim	Date sent to Creditor Payments	Dates of travel	Reason for Travel	Description of expenses	Mileage Rate	Mileage Payable	Other Expenses e.g. Parking	Evidence submitted	
1	ENSEMBLE 2	45821582	Firstname Lastname		Mr F Lastname	Address Line 1 Address Line 2 Address Line 3 Postcode	TRIALEXP/0321	01/03/2021	18/03/2021	10/09/2020 13/03/2021	Vaccine visit 1 Vaccine visit 2	Mileage = home to NBT x2	87.5	£ 0.45	£ 39.38	£ 4.50	Parking tickets x1 (10/09/20)
2	ORION-4	40000000	Firstname Lastname		Ms F Lastname	Address Line 1 Address Line 2 Address Line 3 Postcode	TRIALEXP/0421	30/03/2021	19/04/2021	16/04/2019 11/12/2019 03/06/2020	Screening Visit x1 Randomisation x1 Follow up visit x1	Mileage from home to CGH and return x3	38.43	£ 0.27	£ 10.38	£ 8.10	Parking Tickets x3 16/04/11/12/2019 03/06/2020
3							TRIALEXP/0100										
4							TRIALEXP/0100										
5							TRIALEXP/0100										
6							TRIALEXP/0100										
7							TRIALEXP/0100										
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34							TRIALEXP/0100										

	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB
	Mileage Rate	Mileage Payable	Other Expenses e.g. Parking	Evidence submitted	Total Amount Claimed	Account code	Cost centre	Analysis code	PO No	Payment type	Sorting code	Account number	Payee/Participant Email/s for Remittance Advice	Invoice request made?		
1	87.5	£ 0.45	£ 39.38	£ 4.50	Parking tickets x1 (10/09/2020)	£43.88	7271	12345	R0321	EXC2015	BACS	12-34-56	11111111	firstname.lastname@gmail.com		
2	38.43	£ 0.27	£ 10.38	£ 8.10	Parking Tickets x3 16/04/2019 11/12/2019 03/06/2020	£18.48	7271	12345	R0111	EXC2015	BACS	34-56-78	23456789	lastname@gmail.com		
3						£0.00										
4						£0.00										
5						£0.00										
6						£0.00										
7						£0.00										
8						£0.00										
9						£0.00										
10						£0.00										
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34						£0.00										

Appendix 2 – Example Expenses Form

FIND-CKD Reimbursement of Expenses (up to £150.00 per visit)

Please complete this form in BLOCK CAPITALS

Participant name			
Trial ID		MRN number	
Email address			
Type of visit		Date of visit	
Bank details for BACS transfer			
Payee name			
Account number		Sort code	

Please tick the relevant box(es) to indicate what you are claiming for

Mileage*	Parking ticket**	Bus ticket**	Train ticket**	Taxi fare**	Refreshment (for visits over 3 hours, £20.00 max)

You will also be paid an inconvenience fee of £40.00 for every onsite study visit you attend. This does not include blood tests prior to your appointment.

* We will calculate your mileage for you. You **do not** need to include petrol receipts.

** Please note you must provide all relevant tickets and receipts for your parking ticket or bus ticket to be reimbursed.