# RELOCATION & ASSOCIATED EXPENSES POLICY & PROCEDURE

**F**OR

MEDICAL & DENTAL TRAINEES
IN
SPECIALIST TRAINING PROGRAMMES

WITHIN THE

EAST MIDLANDS
HEALTHCARE WORKFORCE DEANERY

Implementation Date: 1st December 2007

### 1. Introduction

The guiding principle behind the provision of relocation expenses is that a trainee should not be financially disadvantaged by reasonable costs incurred through a move in the interests of the service; however, trainees will <u>not</u> be expected to profit materially from reimbursements in respect of relocation.

This policy is applicable to trainees appointed to recognised Specialist Training(ST) programmes within the East Midlands Healthcare Deanery who in relocating to take up their training appointment are required to <u>sell</u> a property in their old home area & <u>purchase</u> a new property or who are given approval for a subsequent move during their employment on the ST programme.

This document should be included in all recruitment packs & in any case must be made available to applicants <u>prior to</u> appointment.

### 2. Policy

- 2.1 To be eligible for relocation expenses & tax relief under current legislation, a trainee must have changed their main residence as a result of:
  - > starting a new employment, or
  - > a change of duties of employment, or
  - a change of location of employment.
- 2.2 The scope & level of any financial package should be determined & agreed <u>prior</u> to the appointment being accepted or, in the case of existing trainees, a subsequent house move being agreed.
- 2.3 Expenses paid under this policy will be regarded as a loan, reducing over two years at the rate of 1/24<sup>th</sup> per complete month of service. Trainees will be required to sign a form of undertaking (Appendix 3) that they will not leave the training programme within a period of two years, unless a further move is a result of unforeseen circumstances which are deemed to justify release from the signed undertaking. The level of reimbursement by trainees will be pro rata to the length of time remaining in the two year period.
- 2.4 Specialist Trainees Year 1 & Year 2 are entitled to claim relocation expenses for removal of personal effects only.
- 2.5 Under the terms of this policy, there must be <u>no</u> improvement in the quality of the housing at a cost to the taxpayer. The property for which reimbursement of relocation & associated expenses is made must be of a broadly comparable standard in terms of present housing arrangements i.e. rented or owner occupied, number of rooms, semi-/detached (not absolute cost) to that occupied in the area of previous employment. Should this not be the case, reimbursement will be made as though the properties were similar.
- 2.6 For the purposes of claiming relocation & associated expenses, the first hospital on the ST Programme to which a trainee is placed will be that individual's 'base' hospital. The Lead Recruiting Trust will clearly identify the 'base' hospital when offering all posts & placements & this will be recorded in the trainee's letter of appointment.
- 2.7 The new residence <u>must</u> be within 30 minutes daily travelling time of the trainee's 'base' hospital on the ST programme. The old residence <u>must not</u> be within 30 minutes daily travelling time of the trainee's 'base' hospital.
- 2.8 The expenses claimed must be incurred, before the end of the year of assessment following the one in which the trainee starts their new job. It does not matter when the trainee moves to their new home.
- 2.9 First time buyers will <u>not</u> be entitled to claim financial assistance for any expenses associated with the purchase of a property.
- 2.10 Trainees who are occupying rented accommodation immediately prior to taking up their appointment will be reimbursed the cost of removal of furniture & effects.

- 2.11 Trainees appointed to Locum Appointments for Training (LATs) for a period of six months or more will be eligible for the cost of removal of personal effects only.
- 2.12 Travel & relocation expenses will be reimbursed from UK port of entry only.
- 2.13 Where a trainee elects to retain property outside the geographical area of the ST Programme, they will not be entitled to <u>any</u> expenses under the terms of this policy, unless they are able to demonstrate that they are actively attempting to sell their property & relocate.

#### 3 RELOCATION EXPENSES APPLICATION PROCEDURE

- 3.1 Trainees who have to move house to take up a Year 3 6 appointment on an East Midlands Healthcare Deanery ST programme may be reimbursed relocation expenses up to a maximum of £5,000.
- 3.2 Trainees <u>must</u> submit an application form (Appendix 1) for assistance with relocation expenses. Written authorisation <u>must</u> be obtained before making any firm arrangements (Appendix 1). <u>No</u> responsibility for expenses incurred will be accepted where arrangements are made without written confirmation that expenses are authorised for reimbursement.
- 3.3 Application (Appendix 1) & claim forms (Appendix 5) can be obtained from the trainee's 'base' hospital & all correspondence, application forms & claim forms should be sent n the first instance to the 'base' hospital.
- 3.4 Stamp duty will not be reimbursed, under any circumstances
- 3.5 One abortive purchase may be reimbursed where the trainee is not responsible for the abandonment of the transaction or the trainee's withdrawal is entirely reasonable
- 3.6 Claims for reimbursement of relocation expenses <u>must</u> be made within twelve months of the incurring of authorised expenditure. Claims submitted outside this timescale will not be considered.
- 3.7 Expenditure may be reimbursed in one payment or as it is incurred. A record (Appendix 6) will be retained in the Medical Staffing / HR Department at the 'base' hospital.
- 3.8 A signed undertaking will be required that trainees will not recover any expenses (in part or in full) from another source e.g. partner's employer (Appendix 4)

### Expenses During Search for Accommodation

3.9 On appointment to the training programme, trainees are entitled to make preliminary visits to the area of their new employment in search of accommodation.

The following expenses for preliminary visits will be reimbursed:

- Accommodation & subsistence for a maximum of 4 nights, (payable in accordance with the rates outlined in the Whitley Council Medical & Dental Terms & Conditions).
- Return travel at public transport rate (as outlined in the Whitley Council Medical & Dental Terms & Conditions) or standard 2<sup>nd</sup> class rail fare.

#### Allowances and Rates

- 3.10 Subsistence will be payable only against the provision of original receipts.
- 3.11 Rates for accommodation & meals will be in accordance with local Trust policy.

### Continuing Commitments

- 3.12 Whilst the old property remains unsold, reasonable accommodation costs may be reimbursed. Reimbursement will be for the lower of the monthly mortgage on the old property & the monthly mortgage/rent on the new property.
- 3.13 Trainees who have not found suitable accommodation in the new area & who are in single accommodation may be reimbursed the travel costs of weekly visits home at public transport rate or standard 2<sup>nd</sup> class rail fare for a maximum of twelve months.

3.14 To be eligible for reimbursement under 3.12 & 3.13 trainees will be required to demonstrate that they are actively marketing their former property at a realistic price &/or that they are actively seeking suitable accommodation in the new area.

### Expenses on Removal

- 3.15 Trainees & their dependants will be reimbursed for travelling expenses incurred on relocation from the old property to the new property at public transport rate or standard 2<sup>nd</sup> class rail fare.
- 3.16 Before storage and/or removal of furniture is agreed, three quotes <u>must</u> be obtained for approval. Reimbursement will be limited to the lowest quote. For small removals reimbursement of a self-hire vehicle is available..
- 3.17 Reimbursement will not be made until the trainee takes up the appointment. Original receipts must be provided by the trainee as proof of outlay against authorised expenditure. Generally reimbursement will not be made to third parties. Typical examples of expenses for reimbursement & excluded expenses are given in Appendix 2.

### 4 ELIGIBILTY FOR ASSOCIATED EXPENSES

### Trainees relocating & also making a subsequent house move

4.1 Due to the rotational nature of the ST Programme, approval may be given to one subsequent move of house within the rotation. This move will be subject to the criteria outlined in paragraph 2.1 of this policy & reimbursement of a second claim will be up to a maximum of £5,000. However, where a trainee has been in receipt of excess mileage expenses prior to a subsequent move, the maximum sum of £5,000 will be reduced by the amount of excess mileage reimbursed to the trainee. In addition, no further excess mileage expenses will be reimbursed for the remaining duration of the ST programme.

Applications for expenses associated with a subsequent house move should be submitted for consideration to the Medical Staffing / HR Department at the hospital where the trainee will be undertaking the placement for which they wish to relocate. Retrospective applications will not be considered.

### Trainees not relocating or making a subsequent house move during the ST Programme

- 4.2 Where a trainee has not had to move to take up an appointment to an East Midlands Healthcare Deanery ST programme & does not subsequently move house to take a placement in a hospital on the programme, they may apply for reimbursement of excess mileage expenses up to a maximum of £5,000 for the <u>duration</u> of the ST programme.
- 4.3 Excess mileage will be paid at public transport rates in accordance with the Whitley Council Medical & Dental Terms & Conditions of Service.
- 4.4 Should a trainee be able to demonstrate that their journey from home is not tenable by public transport, they may apply to the Trust they are working in at the time, for payment of excess mileage at standard rate. Any decision to reimburse excess mileage at standard rates is out with this policy, will be at the discretion of that Trust & will apply only for the duration of that placement.
- 4.5 In these circumstances, the mileage that can be claimed will be the difference between the mileage the trainee would have travelled from their home to their 'base' hospital' & the excess mileage they will travel from their home to their subsequent hospital placements on the ST programme.

### Trainees relocating to take up their appointment, then choosing to travel between home & other subsequent placements

4.6 A trainee who has been reimbursed relocation expenses to take up their appointment, may subsequently choose to travel the greater distance between their home & other hospital placements on the ST Programme on a daily basis instead of moving again. In these circumstances, they may be reimbursed, in addition, to their original relocation

- expenses, excess mileage expenses up to a <u>maximum</u> of £5,000 in total for the remaining duration of the ST programme.
- 4.7 In these circumstances, the mileage that can be claimed will be the difference between the mileage the trainee would have travelled from their home to their 'base' hospital' & the excess mileage they will travel from their home to their subsequent hospital placements on the ST programme.

### Trainees not relocating, with a home convenient to second or subsequent placements

4.8 Trainees who would be eligible for support to move house to take up their appointment on an ST Programme may choose not to move, as they occupy a home convenient to the hospital(s) in which their second or subsequent placements are to be held. In these circumstances they may elect to travel the extra distance to the hospital in which their first placement is to be held. If a trainee chooses to exercise this option it should follow a discussion with the 'base' hospital, may be done only once in a rotation & must be effected prior to commencement of the first post.

### Trainees who do not wish to move house or travel on a daily basis to a hospital placement(s) on the ST Programme

4.9 Trainees who do not wish to move house & do not wish to travel on a daily basis to the next hospital placement(s) on the ST Programme may apply to the appropriate Trust(s) to be reimbursed for accommodation costs. In such circumstances the decision whether to pay accommodation costs will be at the discretion of that Trust and will be based on an assessment of the projected costs of travel versus the cost of accommodation either private or provided by the Trust. Where agreement is reached the trainee will be issued with a disclaimer notification by that Trust informing them that it is a local agreement only & not automatically replicated by any other Trust participating in the ST Programme. In all circumstances the maximum contribution to accommodation costs for the duration of the ST Programme will not exceed £5,000.

### Reimbursement of Excess Mileage Expenses

- 4.10 Excess mileage claims must be submitted for reimbursement on a monthly basis to the Trust where the trainee is undertaking their placement. Claims in excess of a 3 month period will not be considered for payment.
- 4.11 Excess mileage is not included within those allowances eligible for tax relief under the provisions for relocation expenses. Although in most cases placements on rotations are classed as temporary workplaces and expenses paid in these circumstances are not subject to tax, trainees should be aware that this may not be the case in all circumstances.

#### FOOTNOTE:

Where ST3 trainees have become displaced through transition arrangements & are already in receipt of relocation or associated expenses remunerated under the old policy, they may submit a revised claim under the terms of this policy, but any authorisation will be 'off set' against those expenses already approved.

### <u>ADMINISTRATING TRUST – (Insert name)</u>

### SPECIALIST TRAINEE APPLICATION FOR ASSISTANCE WITH RELOCATION EXPENSES

This form must be completed as far as possible & returned to the (insert contact details – Medical Staffing / HR Department, Name of hospital, Name & address of Trust)

The information provides details of your circumstances & will enable an assessment to be made of the assistance, which can be granted to you in relation to relocation expenses. It will be treated in confidence & used for the above purposes only.

1.	FULL NAME:		
2.	MARITAL STATU	JS: Single / Married / Living with Partner *	
3.	CHILDREN:	a) Number:	
		b) Date(s) of Birth:	
		c) Number in full-time education:	
4.		RRIED / LIVING WITH PARTNER, & YOUR ARTNER ARE IN EMPLOYMENT:	
	a) Will he/she re	eceive assistance with removal expenses?	YES/NO *
	b) If yes, from w	hom?	
5.	DETAILS OF YOU	UR APPOINTMENT ON THE ST PROGRAMM	ΛE
	a) First Post on t	he ST Programme:	
	b) Year of Entry:		
	c) Specialty/Depa	artment:	
	d) Date or propo	sed date of commencement:	
6.	DETAILS OF PRE	EVIOUS EMPLOYMENT:	
	a) Employer:		
	b) Base Hospital		

	c)	Post:	
		Post type:	Permanent / Rotational / Temporary / Fixed Term *
	d)	Specialty/Depa	artment:
7.			y:VIOUS ACCOMMODATION:
	a)	Full Address:	
			8
	Th	e accommodati	on was rented/owned by myself *
	b)	If owned estim	ated selling price:
	c)	If rented, it was	s Hospital/Private accommodation * & Furnished/Unfurnished *
	d)	I was living wit	h parents *
	e)	Distance from	home to old base:
	f)	Distance from	home to new base:
8.	NE	W ACCOMMOI	DATION:
	a)	Address:	
	b)	Is this tempora	rry / permanent *
	c)	If it is rented, i Furnished/Unf	t is:- Hospital/Private Accommodation * & urnished *
	d)	Date of remova	al:
	e)	Purchase price	<b>9</b> :
	*	Delete as app	ropriate
I	decla	are the informat	ion detailed on this form is correct.
S	igne	d:	
_			

For Office Use Only

**AUTHORISATION** 

I confirm the following entitlements to relocation & associated expenses for the above named doctor:	ıe
Signed:	
Date:	

### **Examples of Relocation & Associated Expenses for Reimbursment**

The following are offered as examples only & are neither inclusive nor exclusive.

House Purchase (not applicable to first time buyers)

- ♦ Solicitors' fees
- Land registration fees
- Survey fees
- Incidental legal expenses

### **House Sale**

- ♦ Solicitors' fees
- ♦ Estate agents' fees
- ♦ Incidental legal expenses
- Furniture removal & storage expenses

### Other Expenses

- Travelling expenses in connection with the move
- Continuing commitments allowances
- Miscellaneous expenses

### **Excluded Expenses**

The following categories of expenses are excluded from the policy:

- Stamp Duty
- Interest on bridging loans
- Increase in insurance premiums
- Mortgage redemption fee

### **ADMINISTRATING TRUST - (Insert name)**

## SPECIALIST TRAINEE - RELOCATION & ASSOCIATED EXPENSES UNDERTAKING

I understand that any monies issued to me in respect of relocation & associated expenses are regarded as a loan, reducing over a period of two years at the rate of 1/24<sup>th</sup> per month, & that if I leave the East Midlands Healthcare Deanery, *insert Specialty* Specialist Training Programme within two years of taking up my appointment for which those expenses were issued, I will be liable to repay the appropriate amount, unless my leaving is (in the opinion of the Post Graduate Dean & Director of Human Resources) the result of unforeseen circumstances which are serious enough to justify my being released from this undertaking.

I understand that any amount to be repaid will be deducted from final salary or other amount owing without further reference to me.

Signed:	 	 	 	
Date:	 	 	 	

### ADMINISTRATING TRUST - (Insert name)

# SPECIALIST TRAINEE - REMOVAL & ASSOCIATED EXPENSES UNDERTAKING

I confirm that in taking up my appointment to the East Midlands Healthcare Deanery, *insert Specialty* Specialist Training Programme, I will not attempt to recover any removal or associated expenses, in part or in full, from any other source.

Signed	
<b>.</b>	
Date	

### **ADMINISTRATING TRUST – (Insert name)**

### MEDICAL STAFFING / HR DEPARTMENT

### SPECIALIST TRAINEE - RELOCATION EXPENSES CLAIM FORM

Γ.,	V
Name:	Year of Entry:
Department:	
Department.	
Post:	Start Date:
Agreed Limit for Reimbursement of Relocation £ Expenses	
Expenses	
Total Amount claimed Previously £	
Reason	Amount
TOTAL CLAIM ON THIS FORM	£
For Office Use Only	
For Office use Offiny	
AUTHORISATION	
Receipts are attached & I authorise reimbursemen	t of the relocation expenses detailed
above:	
To be charged to:	
To be charged to.	

Completed form to be passed to Finance for action. Original copies of invoices / receipts attached.	
Signed: Date :	
Appendix 6	
ADMINISTRATING TRUST – (Insert name)	
DEPARTMENT OF HUMAN RESOURCES	
SPECIALIST TRAINEE - RELOCATION EXPENSES CONTROL SHEET	
Name:	
Department :	
Post:	
Date Appointed :	
Year of Entry :	
Amount of Relocation Expenses agreed for reimbursement £	
Expenses Reimbursed £	
Estate Agent Fees	
2. Solicitors Fees	
3. Removal Expenses	
4. Storage Expenses	
5. Assistance with Rent / Accommodation	
6. Other (please specify)	



Copies of all invoices / expenses claims must be attached to this form & filed in the doctor's personnel file.

