



# PAYMENT OF SUPPIER INVOICES NOVEMBER / 2020

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Name of Policy:	Payment of Supplier Invoices
Date Issued:	November 2020
Date to be reviewed:	November 2022

Policy Title:		Payment of Supplier Invoices				
Supersedes: (Please List)		All previous versions of Payment of Supplier Invoices Policies				
Description of Amendment(s):		Reformatting to new policy temp necessary / review of impact and	alysis			
This policy will impact on:		All employees of the CCG, all staff who are seconded to the CCG, contract and agency staff and any other individual working on CCG premises including financial services employees (currently hosted by NHS East Riding CCG).				
Policy Area:		Finance				
Version No:		4.0				
Author:		Victoria Rimmington, Finance Manager				
Effective Date:		25 <sup>th</sup> November 2020				
Review Date:		25 <sup>th</sup> November 2022				
Equality Impact Assessment Date:		9th October 2019				
APPROVAL RECORD			Date:			
	Integra Comm	ated Audit and Governance hittee	10 <sup>th</sup> March 2020			
	Integrated Audit and Governance Committee		14 <sup>th</sup> November 2017			
	Integrated Audit and Governance Committee		15 <sup>th</sup> November 2016			
Consultation:	Integra Comm	ated Audit and Governance hittee				
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	Integra Comm	ated Audit and Governance hittee	15 <sup>th</sup> November 2016			



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# 1. INTRODUCTION

The CCG incurs costs for the goods and services it consumes in order to deliver healthcare to its target population.

This policy provides guidance on how to pay for these goods and services in a controlled and efficient way.

# 2. SCOPE

This policy applies to all employees of the CCG, any staff who are seconded to the CCG, contract and agency staff and any other individual working on CCG premises including financial services employees (currently hosted by NHS East Riding CCG).

This policy is available on the CCG website.

Guidance and support will be provided as and when required by the CCG finance team.

# 3. POLICY PURPOSE AND AIMS

This policy is intended to provide guidance to employees and managers of the steps to take, and the controls in place to enable timely payments of invoices for goods and services supplied to the CCG.

#### 4. IMPACT ANALYSIS

#### 4.1 Equality

The CCG is committed to:

- Eliminating discrimination and promoting equality and diversity in its policies, procedures and guidelines, and
- Designing and implementing services, policies and measures that meet the diverse needs of its population and workforce, ensuring that no individual or group is disadvantaged.

To ensure the above this policy has been Equality Impact Assessed (see Appendix 1)

# 4.2 **Bribery Act 2010**

NHS Hull Clinical Commissioning Group has a responsibility to ensure that all staff are made aware of their duties and responsibilities arising from The Bribery Act 2010.

The Bribery Act 2010 makes it a criminal offence to bribe or be bribed by another person by offering or requesting a financial or other advantage as a reward or incentive to perform a relevant function or activity improperly performed. The penalties for any breaches of the Act are potentially severe. There is no upper limit on the level of fines that can be imposed and an individual convicted of an offence can face a prison sentence of up to 10 years.

For further information see <u>http://www.justice.gov.uk/guidance/docs/bribery-act-2010-quick-start-guide.pdf</u>.

If you require assistance in determining the implications of the Bribery Act please contact the Local Counter Fraud Specialist on telephone number 01482 866800 or email at <u>nikki.cooper1@nhs.net</u>.

Due consideration has been given to the Bribery Act 2010 in the review of this policy document and no specific risks were identified.

#### 5. NHS CONSTITUTION

- 5.1 The CCG is committed to:
  - The achievement of the principles, values, rights, pledges and responsibilities detailed in the NHS Constitution, and
  - Ensuring they are taken account of in the production of its Policies Procedures and Guidelines.
- 5.2 This policy supports the NHS Constitution by committing to use NHS resources responsibly and fairly and providing best value for taxpayer's money.

#### 6. **RESPONSIBILITIES**

#### 6.1 Authorised Signatories

Authorised signatories are responsible for ensuring that invoices are accurately coded and signed for within allocated limits.

#### 6.2 **Financial Services Team**

Financial services are responsible for the processing of invoices, ensuring systems and relationships are working to allow payments to suppliers to meet the 'better practice payment codes' target effectively and efficiently as possible.

# 6.3 All Staff

All staff are responsible for ensuring prompt authorisation and coding of invoices for payment targets to be met as in section 7.

# 7. NHS HULL CCG OBLIGATION

As an NHS organisation, NHS Hull CCG has signed up to the Institute of Credit Management 'Prompt Payment Code' whereby we undertake to pay suppliers within the terms agreed at the outset of the contract.

In addition, all CCG's must meet a 'Better Payment Practice Code' target of paying 95% of bills within contract terms or 30 days where no terms have been agreed. On a monthly basis Financial Services will provide a report to the CCG with statistics to this effect. This is reported to the Quality and Performance Committee on a monthly basis and included in the board report.

#### 8. PAYMENT OF INVOICES

#### 8.1 All Staff

All supplier invoices received by the CCG must be sent to Shared Business Services at the below address. This address also needs to be on the invoice. Invoices cannot be accepted to the site address.

> NHS Hull CCG 03F Payables L295 PHOENIX HOUSE TOPCLIFFE LANE WAKEFIELD WF3 1WE

Where appropriate, invoices must be matched with relevant order/delivery notes.

Using Oracle system non-purchase order invoices must be distributed by SBS /Financial Services to the relevant checkers/budget holders of the CCG for coding and authorisation via Oracle (please refer to SBS guidance for details on how to do this).

Each department is responsible for coding their own invoices according to the budget holder list. Invoices must not be returned without a financial code. For coding information please refer to the budget book or contact the CCG finance team.

All invoices should be checked by a person who can verify the goods/services have

been received.

Authorised signatories should then approve to authorise the payment of invoices.

All invoices relating to an individual must be signed by the line manager of the individual to which it relates. Individuals cannot authorise invoices relating to themselves

Invoices should be split-coded where appropriate for example, in cases where multiple items on the invoice require different cost codes. Under no circumstances can invoices be split-coded to other organisations e.g. other CCGs. Similarly, other organisations have no authority to allocate expenditure to NHS Hull CCG.

It will not normally be acceptable to pay part-invoices where the amount payable has been amended by an officer of the CCG. If an invoice is incorrect, the supplier should be advised they should cancel/credit the original invoice and send a revised invoice for payment.

Financial Services should be informed of any disputes with regards to invoices and the invoice should be rejected or forwarded to member of financial services (note can be included on oracle) to dispute with suppliers.

# 8.2 Financial Services/SBS Staff

VAT for business activity and contracted out services must be claimed as per current HM Revenue and Customs rules and guidance. Invoices are assessed by SBS/VAT Liaison as to what can be reclaimed. This is then reviewed by the Financial Services team and authorised by the CCG.

When invoices are authorised SBS will flag them for payment and Financial services team will confirm that sufficient funds are available before processing before being paid on the next available run.

At every meeting of the Integrated Audit & Governance Committee they will receive a report of all supplier invoices that are over £5,000 and have been outstanding for more than 6 months.

Monthly and/or quarterly meetings will be held between financial services and CCG staff to discuss the creditor's position (NHS & non-NHS).

Financial Services/CCG teams will provide training and support to oracle users as and when required.

# 9. MONITORING AND REVIEW

Monitoring compliance with and effectiveness of this policy will be accomplished via the statistics in better payment practice, creditor reports and periodic Internal Audit reviews of accounts payable systems.

This Policy will be reviewed every two years from the date of implementation, more frequently if required

# 10. ASSOCIATED DOCUMENTATION

Prompt Payment Code available at: www.promptpaymentcode.org.uk

https://www.sbs.nhs.uk/supplier-good-invoicing-practice

Raising Debtor requests Policy





#### **APPENDIX 1**

# Please refer to the EIA Overview & Navigation Guidelines located in Y:\HULLCCG\Corporate Templates and Forms\Equality and Diversity Information before completing your EIA)

HR / Corporate Policy Equality Impact Analysis:				
Policy / Project / Function:	Payment of Supplier Invoices			
Date of Analysis:	26 <sup>th</sup> September 2019			
Completed by: (Name and Department)	Victoria Rimmington, Finance Manager			
What are the aims and intended effects of this policy, project or function?	This policy is intended to provide guidance to employees and managers of the steps to take, and the controls in place to enable timely payments of invoices for goods and services supplied to the CCG			
Are there any significant changes to previous policy likely to have an impact on staff / other stakeholder groups?	No significant changes made			
Please list any other policies that are related to or referred to as part of this analysis	Raising Debtor Requests			
Who will the policy, project or function affect?	All employees of the CCG, all staff who are seconded to the CCG, contract and agency staff and any other individual working on CCG premises including financial services employees (currently hosted by NHS East Riding CCG).			
What engagement / consultation has been done, or is planned for this policy and the equality impact assessment?	IAGC			
<ul> <li>Promoting Inclusivity and Hull CCG's Equality Objectives.</li> <li>How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation?</li> <li>How does the policy promote our equality</li> </ul>	This policy applies to all regardless of any protected characteristic. This policy Is available on the internet and is available in different formats and languages If necessary.			

objectives:	
1. Ensure patients and public have improved	
access to information and minimise	
communications barriers	
2. To ensure and provide evidence that	
equality is consciously considered in all	
commissioning activities and ownership of	
this is part of everyone's day-to-day job	
3. Recruit and maintain a well-supported,	
skilled workforce, which is representative	
of the population we serve	
4. Ensure the that NHS Hull Clinical	
Commissioning Group is welcoming and	
inclusive to people from all backgrounds	
and with a range of access needs	

	Equality Data
Is any Equality Data available relating to the use or implementation of this policy, project or function? Equality data is internal or external information that may indicate how the activity being analysed can affect different groups of people who share the nine <i>Protected</i> <i>Characteristics</i> – referred to hereafter as <i>'Equality Groups'</i> . Examples of <i>Equality Data</i> include: (this list is not definitive) 1: Recruitment data, e.g. applications compared to the population profile, application success rates 2: Complaints by groups who share / represent protected characteristics 4: Grievances or decisions upheld and dismissed by protected characteristic group 5: Insight gained through engagement	Yes No No Where you have answered yes, please incorporate this data when performing the Equality Impact Assessment Test (the next section of this document). If you answered No, what information will you use to assess impact? Please note that due to the small number of staff employed by the CCG, data with returns small enough to identity individuals cannot be published. However, the data should still be analysed as part of the EIA process, and where it is possible to identify trends or issues, these should be recorded in the EIA.

Assessing Impact					
Is this policy (or the implementation of this policy) likely to have a particular impact on any of the protected characteristic groups? (Based on analysis of the data / insights gathered through engagement, or your knowledge of the substance of this policy)					
Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and, if applicable, justification where a <i>Genuine Determining</i> <i>Reason</i> <sup>1</sup> exists (see footnote below – seek further advice in this case)	
It is anticipated that these gui					
writers to complete meaningf					
issues to consider across the other issues relevant to your					
may not be relevant to your p		isted below,	and some of		
Gender	√			This has been	
				considered and has no impact. This policy applies to all regardless of gender	
Age	$\checkmark$			This has been	
				considered and has no impact. This policy	
				applies to all	
Race / ethnicity / nationality	<ul> <li>✓</li> </ul>			regardless of age This has been considered and has no impact. This policy applies to all regardless of race, othericity or patienality	
Disability	$\checkmark$			ethnicity or nationality This has been	
Disability	·			considered and has no impact. This policy applies to all regardless of disability	
Religion or Belief	V			This has been considered and has no impact. This policy applies to all regardless of religion or belief	
Sexual Orientation	<b>~</b>			This has been considered and has no impact. This policy applies to all	

<sup>1. &</sup>lt;sup>1</sup> The action is proportionate to the legitimate aims of the organisation (please seek further advice)

					regardless of orientation	sexual	
Pregnancy and Materni Transgender / Gender reassignment	ity	✓ ✓			This has bee considered a impact. This applies to all regardless of pregnancy ar maternity This has bee considered a	nd has no policy nd n	
					impact. This applies to all regardless of transgender reassignment	or gender t	
Marriage or civil partne	ership	✓			This has been considered a impact. This applies to all regardless of or civil partne	nd has no policy marriage	
		Actio	n Planni	na:		,	
	As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse impact or strengthen the promotion of equality?						
Identified Risk:	Recommended Actions:		Responsible Lead:	Completion Date:	Review Date:		
Sign-off							
All policy EIAs must be signed off by Mike Napier, Associate Director of Corporate Affairs							
I agree / disagree with t	this as	sessment / a	action plan				
If <i>disagree</i> , state action/s required, reasons and details of who is to carry them out with timescales:							
001							
Children							
Signed:							
Date: 09.10.19							