

PROCESS FOR PAYMENT OF PLACEMENT FEES for:

www.kmms.ac.uk

LOCAL EDUCATION PROVIDERs - LEAD EDUCATOR GP PRACTICEs

Invoices for placement activity shall be raised by the Local Education Provider or the Lead Educator GP Practice on behalf of all the GP Practices in the PCN.

Invoices shall be addressed to "Kent and Medway Medical School" at the following address:

Finance Department Kent and Medway Medical School **Pears Building** Parkwood Road University of Kent Canterbury Kent, CT2 7FS

A purchase order (PO) for each year group shall be raised by Kent and Medway Medical School (KMMS) and issued to the Local Education Provider or Lead Educator GP Practice at the beginning of the academic year.

On receipt of the PO, invoices for each year group shall be raised at the end of each term, by the Local Education Provider or Lead Educator GP Practice in line with the following timetable:

Invoice 1	Covering placements September - December	Invoice raised by 31 December	
Invoice 2	Covering placements January - March	Invoice raised by 31 March	
Invoice 3	Covering placements April - June	Invoice raised by 30 June	

Please refer to the guidance on Annex A: Raising Invoices

Invoices should be saved as a PDF and submitted to finance@kmms.ac.uk using the following subject heading: "Invoice - name of PCN/Local Education Provider - year group - purchase order number"

Should changes arise after a PO or invoice has been issued, either an additional PO will be raised by KMMS for additional monies owed, or the Lead Educator GP Practice/Local Education Provider will arrange for a credit note, which will be deducted from the subsequent payment.

Payment for placements in relation to student absence, either short term or longer term planned absence will be subject to HEE funding conditions. In the event of a student withdrawal from the course, further placements won't be paid.

In the event a student transfers to another PCN/Local Education Provider due to extenuating circumstances, funding shall follow the student.







Payment shall be made by KMMS within 30 days of the invoice date.

The fee to be claimed per Student per session shall be in accordance with rates agreed by Health Education England (HEE) for undergraduate medical students. The rate for the 2023-24 Academic Year is £83 per Student per session; these are subject to revision by HEE.

The Local Education Provider and Lead Educator GP Practice shall have responsibility for ensuring that an appropriate payment process is established. With regards to the Lead Educator GP Practice, they shall need to ensure that an appropriate means of recording placement attendance across the PCN is established and available in sufficient time to ensure accurate invoices can be submitted to KMMS.

Each Local Education Provider and GP Practice shall be responsible for complying with all relevant statutory and regulatory requirements.



ANNEX A: RAISING INVOICES AND CREDIT NOTES

Invoices

Purchase orders and invoices shall include details of the dates of completed placement weeks by relevant year group, number of students and total number of sessions to be claimed.

To help ensure it can be processed promptly, please ensure your invoice includes the following details before submitting to KMMS:

- The document should be clearly labelled as an 'Invoice'
- Your practice name and address
- Your invoice number (*this should be a unique number*)
- The e-mail address for any invoice correspondence and for KMMS to send the remittance advice
- The date of your invoice
- Please check the KMMS invoice address has been included, as detailed on the purchase order
- The relevant purchase order number has been included
- Placement dates by week, no of students per date, total sessions, price per session (see note 3)
- Total price of each date and total overall price
- Please ensure all listed placement dates and totals match the purchase order
- Your bank details (see note 1)
- No student identifiable data should be included on the invoice
- Please check the totals add up correctly (e.g. if invoice is prepared via word)
- If VAT registered, please include your VAT registration number (see note 2)
- Payment terms of 30 days

Note 1

KMMS will require confirmation of your bank details in order to set you up as a supplier on the system. This could include a scanned copy of a bank statement, a copy of a cheque or paying-in slip, a bank letter. KMMS will contact each Local Education Provdier/Lead Educator GP Practice for this information prior to raising the first PO.

Note 2

There isn't any VAT on educational provision.

Note 3

An example invoice is included as Annex B.

Credit Notes

A credit note may need to be raised if the placement totals has changed after an invoice has been raised. For example, if a planned student had moved to a different PCN.

A similar format to the invoice can be used. Please ensure it is clearly labelled as a credit note and includes a unique credit note number. It should clearly state specific dates and number of students being credited.



ANNEX B: EXAMPLE INVOICE

INVOICE

FAO: Finance Department Kent and Medway Medical School Pears Building Parkwood Road University of Kent Canterbury Kent, CT2 7FS

Name of Surgery Address Postcode

Tel: 01XXX XXXXXX Email: XXXX@XXXX.co.uk

Invoice No
ХХХХ
Invoice Date
xx/xx/2023
Order No:
Include the Purchase
Order number
Account
eg:KMMS001
(the account reference on your
system)

Dates	Description	Total sessions completed	Unit Price	Total £
Include details as pe	r the purchase order number			
Year 1 - Immersion	Week 1			
30/10/2023	6 students - full week	12	£83.00	£996.00
31/10/2023	6 students - full week	12	£83.00	£996.00
01/11/2023	6 students - full week	6	£83.00	£498.00
02/11/2023	6 students - full week	12	£83.00	£996.00
03/11/2023	6 students - full week	12	£83.00	£996.00
Year 1 - Immersion	Week 2			
27/11/2023	6 students - full week	12	£83.00	£996.00
28/11/2023	6 students - full week	12	£83.00	£996.00
29/11/2023	6 students - full week	6	£83.00	£498.00
30/11/2023	6 students - full week	12	£83.00	£996.00
01/12/2023	6 students - full week	12	£83.00	£996.00
		TOTAL		£8,964.00
				See note 2/
		VAT		Annex A
Payment Terms:	Within 30 days	INVOICE TOTAL		£8,964.00

BACS Details: Account Name: xxxx xxxx Sort code: xx-xx-xx Account Number: xxxxxxxx

Please send remittance to: email address