

Manual Guide for Social Care Providers

Introduction

Lambeth currently uses a system that enables you to electronically send your invoices. Invoices will be scanned directly onto the council's system and can then be processed by our Accounts Payable department.

This solution represents a significant enhancement in how invoices are handled. This document relates to all Commercial Providers across all Adults and Children's Services.

This invoice scanning solution will provide the provider with the following:-

- Invoice scanning & Exception handling
- Automated PO validation

The reason this change took place was to

- make the processing of invoices more streamlined
- produce better communication between the provider and Lambeth
- enable the provider to track their invoice and see where the payments are

Guidance on Acceptable Invoice format

Invoices can only be sent in the following acceptable format

- PDF
- If Word or Excel documents are sent, they will need to be converted to PDF

Guidance on Unacceptable invoice format

Lambeth DO NOT accept the following document formats and where possible should be always avoided: -

- Handwritten Invoices
- Dot matrix invoices
- Invoice in the body of the email
- Pictures that were taken by mobile/camera phone etc
- Multi invoices in one PDF/attachment
- ZIP files/folders
- An email with an email attached
- Password protected invoices
- Weblinks to download invoices
- Poor quality original documents where the OCR process was unable to extract the data.

What information does the provider need to provide on their invoice?

The following information needs to be submitted to enable the invoice processing to run smoothly: -

- Supplier Name
- Invoice Number
- PO Number (N.B. Valid Mosaic purchase order starting with a prefix of FWLAM followed by 9 digits – for example FWLAM999000111)
- Invoice Date
- Invoice period start and end date
- Whether the invoice document type is an Invoice or Credit – N.B. Credit note values should always be entered as a negative
- Invoice Currency
- Description of the service
- Invoice Total Net
- Invoice Total VAT
- Invoice Total Amount
- Ensure the totals are clear and correctly calculated

Further information for providers to note when submitting their invoices

- Any providers with VAT issues and who require further assistance should be referred to HMRC – telephone number 0300-200-3700 or they can visit their website www.hmrc.gov.uk/vat
- All registered providers must quote their VAT number on all invoices they submit
- Providers must submit a valid VAT invoice (unless they are not registered for VAT) on company letter headed paper.

How does the provider send their invoices to Lambeth?

The provider can send their invoices via

- Email – mosaic.inv@kefronpaperless.com

Or

- Post – LB of Lambeth - Social
PO Box 1114
Cornwall House
Albany Park
Camberley
GU15 9TR

Lambeth recommend providers send their invoices in a PDF format via email for the most efficient payment process.

Issues with Invoice Submission

For payment enquiries contact Payment Services on the details below:

Duty Phone No:020 7926 8676

Email address: FSS_PS@lambeth.gov.uk

Guidelines to ensure providers timely payment

- ✓ Making sure the providers invoice is in the correct format (see above information)
- ✓ The provider should only accept a request for services where they have a valid Lambeth purchase order
- ✓ The provider should send invoices as soon as possible after they have provided the service
- ✓ The provider should ensure that quoted prices, quantities, and descriptions align with the purchase order unless you have a prior agreement for them to differ
- ✓ The provider should only quote one purchase order number per invoice
- ✓ The provider will receive payments based on their payment terms
- ✗ The provider should not send us an invoice in advance of the service being received by Lambeth unless we have advised the provider to do so
- ✗ The provider should not duplicate their invoice numbers

If the provider when submitting their invoice is missing any of the key information. An error message via email will be sent to the provider by our Accounts Payable team and their invoice will not be processed. Once the errors have been rectified the invoice can be resubmitted.

What do you need to do to resubmit your invoice?

Once the provider has received the email, this should provide them with clear instructions on what they need to do to resubmit their invoice.

- E.g if the provider has submitted a pdf via email with the incorrect Purchase Order number, the provider will receive an email stating to resubmit their invoice with a valid Purchase Order number

Weekly Scheduled Timetable

For Domiciliary Care invoices the provider needs to follow the 4 weekly invoice period date format

ADULTS/CHILDREN SOCIAL CARE		
DOMICILIARY CARE - 4 WEEKLY PERIOD CHART FINANCIAL YEAR 2022/22		
Invoice <u>period</u> start date		Invoice period end date
07/03/2022	to	03/04/2022
04/04/2022	to	01/05/2022
02/05/2022	to	29/05/2022
30/05/2022	to	26/06/2022
27/06/2022	to	24/07/2022
25/07/2022	to	21/08/2022
22/08/2022	to	18/09/2022
19/09/2022	to	16/10/2022
17/10/2022	to	13/11/2022
14/11/2022	to	11/12/2022
12/12/2022	to	08/01/2023
09/01/2023	to	05/02/2023
06/02/2023	to	05/03/2023

Please note that invoices that fail to follow the above timeframe will have a delay in payment being made.

The 4 weekly scheduled invoice process has an impact on the manual Electronic Call Monitoring (ECM) type of invoices i.e., only invoices that are required to be manually sent in will be affected. The ECM providers will now be sending in their invoices via the agreed email address (mosaic.inv@kefronpaperless.com). The rest of the ECM process remains the same.

Invoice Format Template

The information below explains the expected requirements on invoices sent into Kefron for Lambeth invoices: it is extremely important to minimise delays in your payment and to meet audit requirements that the following information is detailed on your invoices.

The invoice format below relates to a Domiciliary care invoice.

Invoice		Company Name and Address	Email Address	
Invoice Address:		Service User Address:		
Lambeth Address	Invoice Date 01/03/2021 Invoice Number 12345 (this is a Mandatory Field. Please fill it in with anything Legible) Invoice Period: 08/03/2021 to 04/04/2021	If applicable, please provide Service User Address		
Customer Information				
This will be provided by <input type="text" value="Lambeth Council"/>		Client ID FWLAM123456789+	Order Number For the PO Number, if you enter a prefix of "FWLAM" followed by 9 Digits	
Invoice Summary				
Product/Service	Quantity	Sub Total	Grand Total	
Invoice Detail				
Week Ending	Description	Hours	Rate	Value
14/03/2021	What the Service entails			
	Sub Total			
21/03/2021	What the Service entails			
	Sub Total			
28/03/2021	What the Service entails			
	Sub Total			
04/04/2021	What the Service entails			
	Sub Total			
If it is a VAT Registered Provider, please ensure the VAT amount has been entered		VAT		
Net Total				
Remittance Advice				
Company Name and Address		Customer Name Lambeth Council Service User Name Invoice Date 01/03/2021 Invoice Number Invoice Value		
BACS Details				

Invoice format for Nursing example

LAMBETH INVOICE		Invoice Date 28/03/2022	Company Name and Address
		Invoice Number	
Order Number:	Reference		
Client ID:			
Description	Quantity	Unit Price	Amount GBP
Description Week 1			
Description Week 2			
Description Week 3			
Description Week 4			
		Subtotal	
		Total NO VAT	
		Total GBP	
Due Date			

Payment Advice	Customer: L B LAMBETH Invoice Number: 123456789		
Company Name and Address	Amount Due: 123.45 Due Date: 9 May 2021		

Invoice format for CSC example

LAMBETH COUNCIL Children's Social Care INVOICE				
Invoice Number:		Invoice Date:		
123456		28/03/2022		
Address:		Purchase Order No:		
Company Address		FWLAM123456789		
TO:		FROM		
COMPANY MAIN NAME:				
LONDON BOROUGH OF LAMBETH		COMPANY MAIN NAME		
Address:		Company HQ Address:		
LAMBETH ADDRESS		COMPANY HQ ADDRESS		
Telephone No:		Telephone No:		
Fax Number:		Fax Number:		
Email:		Email:		
		Main Contact:		
Placement Details:				
Child/Young Person:		Placement Start Date:		
Establishment Name:		Placement End Date:		
Social Worker:		Invoice Period From:		
Swift Number:		Invoice Period To:		
Costs:				
Description		Number of Nights	Unit Price Per Night	Total
Details 1		28	0.00	0.00
Details 2		28	8.41	235.48
VAT				0.00
Invoice Total Payment Due			235.48	



Conclusion

This guidance has been put together to assist providers with their invoice journey with the scanning solution. If the provider has any further queries, please contact Lambeth's Account Payable team via email FSS_PS@lambeth.gov.uk

Further support

If you have any further queries, please contact admin@kefron.com

Please contact your manager or the Oracle Support Team if you require this user guide in an alternative format

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