



Co-production at WM ADASS

Expenses and participation fees policy

April 2025 (Revised October 2025)





Contents

		1
	ntents	
1.	Introduction to this policy	3
2.	Principles	3
3.	Who is this policy for?	4
4.	What we will pay for	4
5.	Payment for participation	4
6.	Payment for expenses	5
7.	How to claim expenses and fees	6
8.	Tax and national insurance	8
9.	Implications for people receiving welfare benefits	8
App	endix 1: Role Descriptions	9
App	endix 2: New Supplier Creation Form - example	12
App	endix 3: Supplier Amend Form	17
App	endix 4: Claim Form - example	19
Арре	endix 5: Invoice	21



1. Introduction to this policy

West Midlands ADASS recognises the importance of working in co-production with people who use services and carers. We are proudly 'Making it Real' (MIR) as the first ADASS region to commit to doing personalised care and support using Think Local Act Personal MIR principles.

At West Midlands ADASS the term co-production refers "to a way of working, whereby everybody works together on an equal basis to create a service or come to a decision which works for them all".

We pay a fee for participation to people with lived experience for their input to our regional improvement programme in recognition of their contribution. The purpose of this document is to set out clear and consistent expenses and participation fee arrangements.

2. Principles

- People who use services, carers and citizens should not be left out of pocket or be put at risk of being financially worse off as a result of participation in coproduction activities.
- People with lived experience and WM ADASS will discuss and agree on the terms of participation in co-production activities before any commitment is made.
- Where payment is made, there is an expectation of contribution from the individual with lived experience. Support by WM ADASS will be provided if required.
- People who use services, carers and citizens will be given the right information at the right time to be able to make an informed choice about how and on what terms they want to participate.
- The way that the payment of expenses and fees is handled should not create barriers that put people off participating.
- People in receipt of welfare benefits should access information and support to protect their benefit rights. For more information see section 9.

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- Paperwork to claim payment of expenses and fees will be kept to a minimum.
- Where paperwork is necessary it will be accessible and clear. WM-ADASS can further support on this.

3. Who is this policy for?

- People with lived experience who have made an agreement with WM ADASS about getting involved in our improvement programme can claim expenses and participation fees.
- Paid involvement will not routinely be offered to a person who chooses to attend a meeting where they have not been specifically invited to contribute, or where no agreement has been made about their participation.

4. What we will pay for

We have developed a detailed description of a number of different roles that people with lived experience may undertake and how each of these contribute to our work, from one-off participation activities to regular involvement roles. These descriptions are at **Appendix 1**.

All types of involvement and roles are valuable, however the support and governance arrangements for different roles will vary.

5. Payment for participation

For virtual input (such as MS Teams or Zoom webinars or meetings) an hourly rate of £15 will be paid. It is expected that most input will be virtual. Where input is in person the following fees will be paid:

- Half a day (below 4 hours) = £60
- Full day (4 hours and above) = £120

Payment made for preparatory time (either to prepare for a meeting before it takes place or afterwards) must be agreed in advance with West Midlands ADASS.

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Only claims for fees and/or expenses that have been approved will be processed for payment. All required Receipts must be included at the same time as submitting a Claim.

Claimants who require hotel accommodation or 'Other' expenses that cannot be categorised as Time, Fares, Car Parking or Meals, must seek approval in advance.

6. Payment for expenses

TRAVEL	
Train and air travel tickets, taxis, buses and underground	To be booked and paid for in advance wherever possible, and agreed with WM ADASS in advance, at the cheapest appropriate rate available. Receipt(s) needed.
Mileage rates when using own vehicle	 Motor cars and vans: Up to 10,000 miles: 45p a mile (plus 5p per mile if carrying another participant) Over 10,000 miles: 25p a mile (plus 5p a mile if carrying another participant) Motorcycles: 24p a mile
Parking, congestion charges, tolls	Reasonable parking, congestion and toll costs will be reimbursed. This means using the cheapest option available so long as it is accessible for the individual and does not cause delay or significant inconvenience. Receipt(s) needed.
ACCOMMODATION	
Hotel	Up to £125.00 room and breakfast per night upon written approval of request. WM-ADASS will endeavour to book and pay for overnight accommodation in advance. In the event that the Claimant pays the hotel directly, a receipt will be required.



Up to £10.00 Receipt needed.
Up to £25.00. The cost of alcoholic drinks cannot be claimed. Receipt needed.
Up to £10.00 (where lunch is not already provided). The cost of alcoholic drinks cannot be claimed. Receipt needed.
Childcare, replacement carer: up to £15.00 an hour with an overnight (11pm – 7am) cap of £65.00 Personal assistant: up to £15.00 an hour with an overnight (11pm – 7am) cap of £65.00. Travel, accommodation and meals can be claimed for a personal assistant at the same rates as above.

7. How to claim expenses and fees

Individuals (including self-employed people) wishing to claim expenses and participation fees will need to complete a **New Supplier** form at **Appendix 2** to register onto the Finance system. This usually only needs to be completed once.

IMPORTANT - Changes to Bank or Contact details

It's really important to remember to let WM ADASS know when you change any Bank or Contact details previously provided. This includes change of name and address.



The **Supplier Amend** form at **Appendix 3** can be used if just one or two details change e.g.:

Category 1 Change of Bank Details (Account Name, Sort Code, Account Number)

Category 2 Change of Contact Information (Address and/or Telephone Number and/or Email Address)

Either, but not both of the above categories can be addressed using the Supplier Amend form. However, if changes fall into both categories a **New Supplier** form must be completed. See attached at **Appendix 2**

Submitting a Claim form at <u>Appendix 4</u> lets us know exactly what activity/activities you are claiming for and how much we need to pay you. The Claim form is important because the information you provide is:

- verified & approved by a Senior Officer;
- used to request a Purchase Order number from the Finance team and a Purchase Order (PO) is issued.

Claimants need a PO Number from WM-ADASS as it MUST be referenced on their invoice(s). Invoices that do NOT reference a valid PO Number will automatically be rejected for payment. Example invoice is at **Appendix 5**.

Receipts/Tickets (evidence of expenditure) are required for all purchases excluding mileage.

Claims can be submitted on an ad-hoc basis e.g. immediately after an event, monthly, quarterly, biannually or annually, whichever is most appropriate for you.

However, all claims must be submitted between 1st April and 15th March, covering Fees & Expenses incurred during the financial year which runs from 1st April to 31st March.

Claims made after the start of the financial year (1st April) for work undertaken in the previous financial year will be deemed invalid and payment for those specific activities will NOT be paid.

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e.g. Where a claim is submitted in June and includes activities in February, March, April and May, **only April and May** activities will be paid.

Fees/Expenses for February and March activities must be claimed before the 15th March or will be lost because they were undertaken in the previous 'financial year'.

Completed claim forms, invoices and all other payment queries should be emailed to Shelley.Madley@wm-adass.org.uk.

Shropshire Council operates 30 Day payment terms. This is calculated by taking the Invoice date and adding 30 days. For example an invoice dated 1st of August will be paid by 31st August latest.

8. Tax and national insurance

People with lived experience being paid for their input will have to pay tax and National Insurance to HM Revenue & Customs on any fee paid to them by WM ADASS.

National Insurance does not have to be paid by people over the age of retirement.

It is the responsibility of the paid participant to report income and expenses in line with the requirements HM Revenue and Customs, Department for Work and Pensions and other relevant government departments as appropriate.

More information is provided on the government's website **here**.

9. Implications for people receiving welfare benefits

Before engaging in paid co-production activities at WM ADASS, it is important that you get proper advice about whether receiving payment(s) and expenses would affect any benefits you may be receiving. Please contact your local Citizens Advice Bureau for advice and support.

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Appendix 1: Role Descriptions

	Role 1	Role 2	Role 3	Role 4
Description of activity	Attend, respond or comment on 'open' engagement opportunities	Person with lived experience agrees to attend workshops/events/f ocus groups on a one-off basis	Person with lived experience is a member of a working group that meets regularly	Person with lived experience in strategic and ongoing advisory roles, may often require specialist knowledge, experience or training, Planning group
Example(s)	E.g., Responding to a WM ADASS online survey that is sent out directly or received via meeting notes, distribution lists or e-bulletins	E.g., Joining a WM ADASS workshop or event as a participant (not guest speaker or Chair). E.g. A one-off Network meeting or stakeholder event.	E.g., A member that is invited to be part of the membership of WM ADASS Thematic Network – e.g. person with lived experience a contributing member of the Digital Network.	E.g., Membership of formally agreed coproduction forums (Regional Co-production Advisory Group Networks), part of a procurement/ evaluation panel, Chair or guest speaker at an event of Network, contributor in a specific improvement activity that may requires support and preparation (Peer Challenge), directly supporting a LA on a specific task/project.
Payment	No financial	Out of pocket	Expenses and participation	Expenses and involvement
approach	contribution	expenses covered	payment	payment





Time commitment	One-off activity	One-off activity or event, one day or less	Regular meetings, one day or less. NB. There is an expectation of contribution.	Regular or one-off depending on the nature of the activity.
Experience / Skills needed	Any member of the public	Lived or related experience or understanding of the issue being discussed	Lived or related experience or understanding of the issue being discussed, and of championing health and care improvement	As role 3 AND Interacting with multiple stakeholders at senior management level Experience of representing people with lived experience in regional or national social care forums Experience of working in partnership with social care organisations or programmes Can display sound judgement and an ability to be objective. Able to put forward views on behalf of wider community / group of individuals (not just present own opinion).

Page | 10





Is an application form needed?	None	None	Yes (light touch and proportionate to the requirement, this may involve a discussion and/or short form expression of interest)	Yes – likely to include submission of an expression of interest. Template provided.
Are names published in minutes / documents?	No	Yes	Yes	Yes
Participation fee	£15 per hour	£15 per hour	£15 per hour	£ 50.00 1 hour £ 75.00 1-4 hours £ 150.00 full day Participation fee will be agreed upfront and will be based on a project to project basis.



Appendix 2: New Supplier Creation Form - example

- * Must be completed. Failure to do so may result in delay in processing payments.
- \star At least one telephone number is required, landline or mobile or both.

Your Organisation's Details

Supplier Tab

* Supplier Name as it appears on your invoice	Name
* Company Registration No (if applicable)	N/A
* VAT Registration No (if applicable)	N/A
* Detailed Description of Goods/Services/Works provided by supplier	Management Consultancy WM-ADASS Co-Production Advisor

Contact Information tab

	General Address – For orders to be sent	Payment Address - for remittances to be sent (Leave blank if the same as the Order Address)
* Street Address	Here	
* Town	Here	
* County	Here	
* Post code	Here	
* Telephone Number (Land line)	Landline and/or	
* Telephone Number (Mobile)	Mobile	
* Email Address	Here	
Contact Person from your Organisation		
* Name	N/A	
* Position	N/A	
* Email address	N/A	



Contact Person from your Organisation		
* Name	N/A	
* Position	N/A	
* Email address	N/A	

Payment Tab - Payment information

Shropshire Council payments will be made by bank transfer and all payment remittances will be sent via email to the Payment Email Address you have included above. Please supply the details below to facilitate this and avoid delays in payment. The personal information you provide to us is required to provide payment services to you and to maintain relevant business records. Information will be processed in accordance with the Data Protection Act 2018. We may contact you by either Phone or Email to verify the bank details before releasing payments.

* Account Name (As appears on your bank card/statement)	Name		
* Bank Account Number	12345678		
* Sort Code (No hyphens or spaces)	112233		
Roll Number	N/A		
Some Building Society accounts may also have what's referred to as a 'building society roll number' or just a 'roll number' – this is a reference code with letters and numbers. Please include this if applicable.			

Factoring Company

Some Organisations enter into an agreement with a Factoring Company whereby the Factoring Company will manage their sales ledger and credit control on an ongoing basis for a fixed period. If this applies to your organisation, please complete the information below, otherwise leave blank.

Factoring Company Name	N/A
Address	N/A

IF YOU HAVE COMPLETED THE ABOVE SECTION, PLEASE ASK THE FACTORING COMPANY TO PROVIDE A LETTERHEAD WITH THEIR COMPANY AND ACCOUNT DETAILS CONFIRMING THEIR FACTORING AGREEMENT WITH YOUR ORGANISATION. This Factoring agreement letter is required alongside this form. To enable the completion of the supplier set up.



Relations Tab - Additional Company Information

The below information is required to enable Shropshire Council to better report on the Local Authority National Indicators and Local Performance Framework.

* Type of Business	Charity	Ltd	PLC	Sole Trader	Other (Please State) Management Consultant
(Please use an 'X')				X	WM-ADASS Co-Production Advisor
* Are you an SME?	YES				NO
(Please use an 'X')					X
An SME is a Small and Medium Sized Enterprise. This is an organisation that has fewer than 250 employees and an annual turnover not exceeding approximately £40m.					
Nature of Business (SIC) Code	N/A				
Additional SIC Code N/A					
Additional SIC Code N/A					
A SIC Code provides info	ormation on	your Organ	nisation's n	ature of bus	siness. If you are a registered company
with Companies House,					
https://beta.companieshouse.gov.uk/ and searching for your organisation. Please leave blank if your					
Organisation does not h	ave a SIC C	ode.			

Charity Tab

Charity No (if applicable):	Number or N/A
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Construction Industry Scheme (CIS) Information

(Only complete the relevant section below If the work your Organisation is doing, falls within the Construction Industry Scheme)



Sole Trader			
Confirmation of HMRC Registered Name	N/A		
Unique Tax Reference	N/A		
National Insurance Number	N/A		
Partnership			
Confirmation of HMRC Registered Name	N/A		
Unique Tax Reference	N/A		
Partners Unique Tax Reference or National Insurance Number (If an Individual)	N/A		
Partners Unique Tax Reference or Company Registration Number (If a Company)	N/A		
Company			
Confirmation of HMRC Registered Name	N/A		
Company Unique Tax Reference	N/A		
Company Registration Number	N/A		

Personal Service Companies / Partnerships

Please confirm if your Organisation is a personal service company / partnership (covered by IR35 legislation).

A personal service company is a limited company that typically has a sole director, the contractor/individual supplying personal services, who owns most or all of the shares. The Council reserves the right to seek assurances and information and evidence to show that income is being treated correctly for tax and NIC purposes and especially with regard to IR35. We determine that, if you answer yes, in the absence of the intermediary, the person supplying the services would have been regarded as an employee will need some additional information (date of birth; personal address; National Insurance Number). We will contact you if this is required.

Are you a Personal Service	YES	NO
Company? (Please use an 'X')		X

This may be reviewed by the Engaging manager. (Personal Service Company is a limited company set up by self-employed individuals, typically contractors, to provide specialist services.

Please Note:

- The Council operates a '**no purchase order, no pay**' policy. Invoices will only be paid where they quote a valid Shropshire Council purchase order number.
- Please send all invoices electronically as a PDF document to shropshirecouncil.invoices@proactiscapture.com



- If it is not possible to send an electronic invoice, please send a paper copy of the invoice to the deliver address stated on the Purchase Order you have received.
- Shropshire Council is committed to deal fairly and equitably with its suppliers and similarly expects to deal with suppliers that also operate in a responsible manner. To assist us in this we expect firms to accept our standard terms of business (unless a separate contract exists) which can be found at http://www.shropshire.gov.uk/doing-business-with-shropshire-council
- For more information on how we handle personal information, please refer to www.shropshire.gov.uk/privacy

I confirm that I have understood the above and have completed the form fully:

* Organisation	N/A
* Name	Name Name
* Position / Job Title	Management Consultant Co-Production Advisor
* Date	<mark>01.01.01</mark>

Thank you for completing this form which will allow us to process orders and payments to you as quickly and efficiently as possible. Please return this form by email to the requestor who has sent it to you.

What happens next?

- Please return the form electronically to the person from Shropshire Council who has sent this to you.
- They will complete the Council's internal documentation and forward this to the Payments Team where the request will be reviewed and, if all is in order, create a record for your organisation on the Council's Purchasing System.
- Once this record is activated the Council will be able to commence using your organisation by issuing you with a valid purchase order and process for payment any invoices received against the purchase order.
- If you have any queries, please send an email to purchaseledger@shropshire.gov.uk



Appendix 3: Supplier Amend Form

Payment Information

- * Must be completed. Failure to do so may result in delay in processing payments.
- * At least one telephone number is required, landline or mobile or both.

Shropshire Council payments will be made by bank transfer. Please supply the details below to facilitate this and avoid delays in payment. The personal information you provide to us is required to provide payment services to you and to maintain relevant business records. Information will be processed in accordance with the Data Protection Act 2018. We may contact you by either Phone or Email to verify the bank details before releasing payments.

* Account Name		
(As appears on your bank card/statement)		
* Bank Account Number		
* Sort Code (No hyphens or spaces)		
Roll Number	Number or N/A	
Some Building Society accounts may also have what's referred to as a 'building society roll number' or just a 'roll number' – this is a reference code with letters and numbers. Please include this if applicable.		
Email Address to Receive Remittance	Number or N/A	
Preferred Telephone Number	Number or N/A	

Have your Bank details in the table above changed from those originally provided? YES or NO

If your Bank details have NOT changed and you would like to tell us about 'Other' Changes please let us know using the table below. (Only complete as relevant and leave unchanged information fields blank).

Previous Email Address:	New Email Address:
Previous Telephone:	New Telephone:
Previous Address inc Postcode:	New Address inc Postcode:



I confirm that I have understood the above and have completed the form fully:

* Organisation	
* Name	
* Position / Job Title	
* Date	

Thank you for completing this form which will allow us to process orders and payments to you as quickly and efficiently as possible. Please return this form by email to the requestor who has sent it to you.



Appendix 4: Claim Form - example

WM-ADASS FEES & EXPENSES CLAIM FORM [e.g. XY-001]

Only complete and submit this form if you are not being paid by anyone else for your participation.

Guidelines & Queries: Please see bottom of the form for further guidelines and if you have any queries

relating to the claim or payment of the expenses please email

Shelley.Madley@wm-adass.org.uk or Call 07500 944766

Expert by Experience Details:		
Name:	Telephone Number:	
Address:	Purchase Order no: After you submit this claim form to Shelley Madley; you will be given your Purchase Order Number which must then be referenced on your invoice.	
Event / Activity Name:	Activity Date(s):	
e.g. WMADASS Co-Production Advisory Group Meeting	12.04.24 to 10.05.24	
e.g. WMADASS HWBB ICS Research Programme		

Claim Details:			
Element Time:	Date:	Description:	£
(Hours, Half or Full Day)	12.04.24	1.5 hours virtual meeting @ £15 per hour	22.50
(Hours, Half or Full Day)	18.04.24	1.0 hour prep - meeting 21.04.24 @ £15 per hour	15.00
(Hours, Half or Full Day)	21.04.24	2.0 hours virtual meeting @ £15 per hour	30.00
(Hours, Half or Full Day)	10.05.24	1.5 hours virtual meeting at £15 per hour	22.50
Element Expenses:			
Fares			
Car Parking			
Meals			
Other Approved Expenses			
Element Mileage:			
Number of Miles @ 45p per mile			

Total Time	£67.50
*Total Expenses	£0.00
Total Mileage	£0.00
GRAND TOTAL	£67.50

^{*}Please provide receipts for any Expenses incurred.

Please scroll down to sign and date the Declaration



Declaration:

I confirm that the amount(s) claimed were incurred whilst working to support [INSERT ACTIVITY HERE] activity with WM-ADASS.

I understand that it is my responsibility to declare this payment with all relevant Government Agencies, e.g. Department for Work & Pensions, HM Revenue & Customs, etc.

Claimant Signature	
Date of Signature	
WM-ADASS Signature	
Date of Signature	

Guidelines for Submitting Forms:

- Complete all sections and attach **receipts for all expenses** incurred.
- Please **highlight** items on your phone bill that you are claiming for or **list** details of phone calls if phone bill is not available.
- You can choose to make one claim per Event/Activity or multiples claims so long as all activity falls within a financial year April to March.
- All claims must be submitted <u>before</u> 15th March in any financial year.
- Claims should be submitted to Shelley will return your Claim form to you with the PO Number included. You will then have all the information you need to create an Invoice.



Appendix 5: Invoice

<u>Please note</u> that Shropshire Council will reject invoices that do not contain the following:

- Unique Invoice Number
- Your name and address
- Billing date / date of invoice
- Purchase Order number

Invoice [insert your invoice number e.g. XY-001]

From: [insert your name, address]

Billing date: [insert today's date]

To: Shropshire Council

The Guildhall, Frankwell Quay,

Shrewsbury

Shropshire, SY3 8HB

Purchase Order Number	Payment Terms
[Insert PO Number]	
(This will be provided by WM ADASS when you submit	30 days
your claim form and it is approved)	

Description & Date(s)		Details	Total	
കൂ Co-Production Advisory Group	00.00.25	1.5 hours virtually at £15 per hour	£00.00	
പ്പെ Co-Production Advisory Group	00.00.25	Full day in person at £120 per day	£00.50	
e g Co-Production Advisory Group	00.00.25	1.5 hours virtually at £15 per hour	£00.00	
ക്ര Co-Production Advisory Group	00.00.25	1.5 hours virtually at £15 per hour	200.00	
Travel Expenses Approved	00.00.25	Car/Rail/Bus	200.00	

	Grand total	£00.00	
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Please make payment by BACS to:

Account name	Sort code	Account number
[Enter your Account name here]	[Enter your sort code here] (no spaces no hyphens)	[Enter your Account number here]

With thanks