

AURORA ACADEMIES TRUST

Policy Title:	Trustees' and Local Academy Board (LAB) Members' Allowances and Expenses Policy
Policy Reference:	AAT T&M A&E- Exp Jan 2020
Function:	<u>For Information and Guidance</u> /Statutory
Audience:	Prospective Parents, Trustees, LAB Members, Executive Headteachers, Head Teachers, Support Staff, as necessary
Ownership/ Implementation:	The Trustees/LAB Board (as required) have overall responsibility for ensuring that this policy is implemented
Version:	001
Approved by Policy Working Group:	Jan 2018
Next Date for Review:	Jan 2020



Trustees' and LAB Members' Allowances and Expenses

1. Introduction

Aurora Academies Trust will pay Trustees' and LAB Members' allowances and expenses, under specific circumstances as set out below. The policy seeks to ensure equality of opportunity for all members of the community to serve as Trustees or as LAB Members and so is an appropriate use of Trust funds. Any payment of allowances and/or reimbursement of expenditure will only be made in relation to costs directly incurred as a result of performing Trustee or LAB Member duties. The specific allowable items reflect this objective.

This Trustees' and LAB Members' Allowances and Expenses policy and fraud response plan applies to you if you are a LAB Member or Trustee of the Aurora Academies Trust (the "Trust"), i.e. whether you are a member of the Trust Board or a member of a Local Academy Board (LAB) at a Trust academy.

The purpose of the policy is to ensure a consistent and fair approach to the payment of Trustees' and LAB Members' allowances and the reimbursement of expenses incurred in performing your duties as a Trustee or a LAB Member in a Local Academy Board (LAB).

The Trust delegates its authority in the manner set out in this procedure.

2. Eligible Expenses

From 1 September 2017, all Trustees and LAB Members of Aurora Academies Trust may, if they wish, be entitled to claim as follows:

- Childcare or babysitting allowances, up to a maximum expenditure of £6 per hour, for the duration of any meeting plus one hour travel time (not including any payments to a current/former spouse or partner or a responsible person normally living at the family home)
- Cost of care arrangements for an elderly or dependent relative, up to a maximum expenditure of £6 per hour, for the duration of any meeting plus one hour travel time (not including payments to a current/former spouse or partner or a responsible person normally living at the family home)



- Any reasonable additional costs incurred in performing duties either because they have a medical need, disability or because English is not their first language
- The cost of travel to Trustee or LAB Member meetings/training courses using mileage and fuel allowances at the current rates specified by HMRC (currently at a rate of 45 pence per mile for cars) or the ticket cost of using standard class public transport (tickets to be provided as receipts, in support of any claim)
- The cost of related car parking or cycle storage can be claimed providing the ticket/receipt is presented in support of the claim
- Subsistence costs including:
 - Breakfast, including incidental refreshments, up to £10
 - Lunch, including incidental refreshments, up to £10
 - Evening meal, including refreshments, up to £20
 - Accommodation expenses to a maximum of £90 per night (outside London) and a maximum of £150 (in London)
 - The above allowances exclude the cost of any alcoholic beverages, newspapers, mini bar and laundry expenses
- Telephone charges (itemised highlighted bills should be submitted), photocopying costs (where Academy photocopying services are not accessible), stationery costs (where Academy supplies are not accessible), postal charges (where the Academy post is not available), etc
- Any other justifiable allowances and/or reasonable expenditure reimbursement at the discretion of the person who will be authorising the claim.

3. Non-Eligible Expenses

The Trust Board acknowledges that:

- Trustees and LAB Members may not be paid any attendance allowance
- Trustees and LAB Members may not be reimbursed for any loss of earnings.

4. Procedure

Trustees wishing to make claims under these arrangements need to obtain the prior written approval of the Chair of the Trust Board or the Chief Executive before the expense is incurred and when a claim is submitted.



LAB Members wishing to make claims under these arrangements need to obtain the prior written approval of the Chair or Vice Chair of the Local Academy Board (LAB) before the expense is incurred and when a claim is submitted.

Any claim made needs to be submitted within three months of the expenditure being incurred.

Providing prior approval has been obtained and the timeframe adhered to, Trustees should complete a Trustees Expense Claim Form (Annex 1), obtainable from the Trust Financial Director. Receipts should be attached where at all possible. The completed Trustees Expense Claim Form should then be sent to the Trust Financial Director who will submit it for the approval of the Chair of the Trust Board, or the Chief Executive, before any payment is made.

Providing prior approval has been obtained and the timeframe adhered to, LAB Members of a Local Academy Board (LAB) should complete a LAB Members' Expense Claim Form (Annex 2) obtainable from the Clerk to the LAB Members. Receipts should be attached where at all possible. The completed LAB Member's Expense Claim Form should then be sent to the Clerk to the LAB who will submit it for the approval of the Chair or Vice Chair of the Local Academy Board (LAB), before any payment is made.

5. Scrutiny

Claims will be subject to independent audit and may be investigated if they appear excessive or inconsistent.

6. Monitoring Evaluation and Review

The Trust Board will review this policy at least every two years and assess its implementation, effectiveness and affordability.



Annex 1: Trustees Expense Claim Form

Please complete and pass to the Chair of the Trust Board or the Chief Executive for approval, via the Trust Financial Director, if required, before submitting it to the Trust Finance Department, for payment.

Name:	
Address:	Date:
Post Code:	Claim Period:

I claim the total sum of £..... for Trustee expenses as detailed below.
I have attached relevant receipts to support my claim.

Signed.....

	£
Child care/babysitting expenses (£6 per hour max.) Please state number of hours:	
Care arrangements for an elderly or dependent relative (£6 per hour max.) Please state number of hours:	
Support for Trustees with medical needs or a disability	
Support for Trustees whose first language is not English	
Travel to meetings/training courses Please state mode of transport:	
Car parking/cycle storage	
Travel/subsistence to national meetings or training events (Who, where and why)	
Entertainment charges (Who, where and why)	
Telephone charges (itemised, highlighted bill)	
Postage	
Photocopying	
Stationery	
Other (please specify)	
TOTAL EXPENSES CLAIMED	

I authorise / do not authorise the above expenditure.

Date _____

Chair of the Trust Board/Chief Executive



Annex 2: LAB Member Expense Claim Form

Please complete and pass to the Chair or Vice Chair of the Local Academy Board (LAB) for approval, via the Clerk to the LAB, if required, before submitting it to the Academy Finance Department, for payment.

Name:	
Address:	Date:
Post Code:	Claim Period:

I claim the total sum of £..... for LAB Member expenses as detailed below.
I have attached relevant receipts to support my claim.

Signed.....

	£
Child care/babysitting expenses (£6 per hour max.) Please state number of hours:	
Care arrangements for an elderly or dependent relative (£6 per hour max.) Please state number of hours:	
Support for LAB Members with medical needs or a disability	
Support for LAB Members whose first language is not English	
Travel to meetings/training courses Please state mode of transport:	
Car parking/cycle storage	
Travel/subsistence to national meetings or training events (Who, where and why)	
Entertainment charges (Who, where and why)	
Telephone charges (itemised, highlighted bill)	
Postage	
Photocopying	
Stationery	
Other (please specify)	
TOTAL EXPENSES CLAIMED	

I authorise / do not authorise the above expenditure.

Date _____

Chair or Vice Chair of the Local Academy Board (LAB)

