

Subject:

Safeguarding of Service Users' Finances within Residential and Nursing Homes and Supported Living Settings.

Circular Reference: HSC(F) 15-2016

Date of Issue: 18 February 2016

For Action by:

Chief Executive and Director of Finance of each HSC Trust, and HSCB

For Information to:

HSC Head of Internal Audit and RQIA.

**Summary of Contents:** 

This circular replaces HSC(F) 08-2015 and reminds organisations to ensure that service users' finances are safeguarded in residential and nursing homes and supported living services within the statutory and independent sectors.

**Enquiries**:

Any enquiries about the contents of this Circular should be addressed to:

Finance Policy, Accountability and Counter Fraud

Unit

DHSSPS

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BT4 3SQ

Tel: 028 9076 5696 fpau@dhsspsni.gov.uk

Related documents:

Residential Care Homes – Minimum Standards Nursing Homes – Minimum Standards

Domiciliary Care Agencies – Minimum Standards

**Superseded Documents:** 

HSC(F) 08-2015

**Expiry Date:** 

Not Applicable

**Status of Contents:** 

Action

Implementation:

Immediate

#### **BACKGROUND**

- 1. The purpose of this guidance is to update HSC (F) 08-2015 to reflect additional assurances to be sought and further checks to be put in place to ensure that service users' finances are safeguarded within both the statutory and independent sectors. Circular HSC (F) 08-2015 was issued following a review by RQIA 'Oversight of Services Users' Finances in Residential and Supported Living Settings' which highlighted the need to strengthen the level of assurances received from the Independent sector and to extend these assurances to supported living settings. Circular HSC(F) 08-2015 provided comprehensive guidance and included templates to be issued to facilities on an annual basis to gain satisfactory assurances.
- 2. A review of the process in 2014/15 identified areas where further clarification was needed to include minor amendments to the templates and additional guidance on the process for reviewing the returns. This circular reflects these changes and replaces Circular HSC (F) 08-2015 which is now superseded.

# Changes to the templates

- 3. The templates have been amended to include 3 additional questions:
  - Do you have a transport scheme in place? (Question 2.3 on amended templates attached).
  - Is your transport scheme in line with RQIA guidelines? (Question 2.4 on amended templates attached).
  - Do you have a holiday policy if you facilitate staff to support residents/tenants to go on holiday? (Question 2.5 on amended templates attached).
  - Are RQIA aware of clients' monies in excess of £20,000 per client being managed by the facility? (Question 5.4 / 6.4 on amended templates attached).
- 4. Furthermore the templates are addressed to 'Dear Registered Manager' rather than 'Dear Service Provider'.
- 5. Amended templates can be found at Annex A and Annex B.

# Other changes

- 6. A new section (section 16) has been added to the guidance below to incorporate the issues below.
  - All returns should be checked to ensure that they have been signed by the registered manager / owner; otherwise they will need to be returned to the facility for re submission.
  - Returns with 'N/A' or 'No' responses without explanations, where appropriate, should be followed up with the facility.
  - Outstanding returns to be chased up.
  - Trust Finance to share any issues identified in the returns with internal audit,
     contract management and care/case management.
  - Trusts to carry out, where possible, rolling sample inspections particularly where issues have been identified or no explanations provided or no return received.
  - Trust cover letter to highlight the issues above and emphasise that returns will be shared and compared with internal audit, RQIA and other bodies as appropriate

# THE FOLLOWING SECTIONS FORM PART OF THE ORIGINAL GUIDANCE ISSUED IN CIRCULAR HSC(F) 08-2015 (ALONG WITH THE AMENDMENTS ABOVE) AND ARE STILL APPLICABLE

# ACCOUNTABILITY ARRANGEMENTS/CONTROLS

7. Robust financial controls must be in place in all residential, nursing homes and supported living settings in both the statutory and independent sectors. This circular sets out the mandatory controls that must be in place within the statutory sector to ensure robust financial controls are in place and seeks assurances that similar controls (as appropriate) are in place within independent homes and supported living facilities.

- 8. Within the statutory sector, Accounting Officers must ensure that these controls are operating successfully, are in compliance with extant Departmental guidance and that they are reviewed on a regular basis.
- 9. Within independent homes and supported Living facilities, Accounting Officers must be able to demonstrate that they have taken reasonable steps to ensure that adequate financial controls are in place within independent homes and supported living settings to ensure that Trusts' interests are protected.
- 10. Trusts have a statutory duty of care to its service users', regardless of the particular setting in which care is delivered, whilst it is accepted that Accounting Officers cannot be held directly accountable for the ongoing operation of controls in independent homes or supported living settings, Accounting Officers must ensure there is a proportionate level of oversight of service users' finances.
- 11. There are a number of existing controls within Trusts to ensure that robust arrangements are in place for handling service users' finances. These include entering into contractual arrangements with the independent care home/supported living service which provides recourse where the level of care is not as expected or where there are circumstances involving financial issues. This also includes liaison with service providers re: implementation of Internal Audit recommendations. It is further recognised that the care/case management review arrangements, together with the reporting procedures for complaints and untoward incidents reporting mechanisms provide additional control mechanisms for each Trust. Notwithstanding this, it is important that Accounting Officers can also demonstrate that they have taken appropriate steps to ensure that adequate financial controls are in place to safeguard service users' interests. Accounting Officers should also ensure that liaison between Trust finance and care colleagues is taking place and operating effectively.

FINANCIAL CONTROLS IN RESIDENTIAL AND NURSING HOMES AND SUPPORTED LIVING SETTINGS WITHIN BOTH THE STATUTORY AND INDEPENDENT SECTORS

- 12. To assist with this process, two pro forma templates have been developed to seek assurances that robust financial controls are in place within (i) residential and nursing homes and (ii) supported living settings. These have been developed in conjunction with HSC finance and care/case management colleagues. We have developed two templates to allow for the different levels of control within the different settings. These templates reflect the minimum controls for which assurance should be sought and Trusts can add additional controls to the templates if they wish. It should be noted that these templates reflect controls only and are not a list of procedures. Each service should have a detailed set of financial procedures which underpin these controls.
- 13. These templates are attached at Annex A & B and include controls in relation to authorisation, procedures, clients' agreements & accounts, deposits and income, withdrawals and expenditure, monitoring, authorising signatures and property security.
- 14. There are a few additional controls in respect of supported living settings and these include controls in relation to tenancy agreements and inventory listing.

# **ASSURANCES**

- 15. Accounting Officers should ensure that there are effective processes in place to seek and obtain as a minimum, assurances in relation to financial controls for each setting (residential, nursing home and supported living in both statutory and independent sectors) within its geographical area. As the host Trust they should do this by:
  - Issuing the attached pro forma to each service within its geographical area by the end of February each year, relating to the current year;
  - Ensuring that these assurances are received by 31 March and reviewed for each service on a timely basis;
  - Where possible, use these assurances as part of the annual contract review process and consider failure to return the template as unsatisfactory performance and manage this in accordance with the terms of the regional contract/performance framework;
  - Sharing significant issues within the Trust and with other Trusts/ Internal audit and RQIA;

- Providing copies of the assurances to other Trusts when requested, where service users' are placed outside their geographical area; and
- Taking appropriate action for non-compliance.

# **REVIEW OF COMPLETED TEMPLATES**

16. Upon receipt of completed templates:

- All returns should be checked to ensure that they have been signed by the registered manager and registered owner, otherwise they will need to be returned to the facility for re submission.
- Returns with 'N/A' or 'No' responses without explanations, where appropriate, should be followed up with the facility.
- Outstanding returns to be chased up.
- Trust Finance to share any issues identified in the returns with internal audit, contract management and care/case management.
- Trusts to carry out, where possible, sample inspections particularly where issues have been identified or no explanations provided or no return received.
- Trust cover letter to highlight the issues above and emphasise that returns will be shared and compared with internal audit, RQIA and other bodies as appropriate

#### **INTERNAL AUDIT**

17. Internal audit carry out an annual audit programme which includes residential and nursing homes within statutory and independent sectors. In line with the increasing use of supported living settings, internal audit have already extended their programme to include supported living settings. Trusts should use information from the assurance process (as at paragraph 10) to help inform their internal audit programme of any services which pose a greater level of risk.

#### CARE/CASE MANAGEMENT

18. An annual care review is carried out by a care/case manager with each service user to consider the standard / level of care that the service user is receiving and also seeks assurances in relation to the service users' finances. Trusts must ensure there are adequate processes in place for sharing all information in relation to safeguarding service users' finances and ensuring there is regular liaison between finance and care/case management and others as necessary, such that the care/case manager has a complete picture and understanding of a service users finances in advance of the care review. To assist with this, Trusts should ensure that they have a standardised file structure to allow a complete picture of a service users finances. A useful template for the financial section of the care/case management review has been attached at Annex C. The Trust must ensure that care/case management staff are adequately trained to be able to carry out this annual review of service users' finances. Concerns about potential misappropriation of service users' monies identified via care/case management or other process, e.g. RQIA/Internal Audit inspections will trigger a referral to Trusts' adult protection services.

# REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

- 19.RQIA is responsible for inspecting the availability of health and social care services and encouraging improvements in the quality of service provision. Its work provides assurance to the Department in respect of compliance with the regulations and minimum standards and the quality of service provision. RQIA's reports are published on its website at www.rqia.org.uk/inspections.
- 20. As a regulatory body, RQIA monitors compliance with the relevant regulations and minimum standards for residential and nursing home care through its programmes of inspections. RQIA takes action as necessary to ensure that the provider rectifies non-compliance. RQIA publishes all inspection reports on its website at <a href="https://www.rqia.org.uk/inspections">www.rqia.org.uk/inspections</a> and will alert Trusts immediately of any instances it may find of actual or potential abuse of vulnerable adults as well as actual or potential financial irregularity. It is the responsibility of Trusts to carry out such further investigations or audits as may be necessary; it is for Trusts to determine and take appropriate action on behalf of its service users'. However, RQIA will require reports from Trusts on the timescale and outcome of such enquiries when complete.

21. For practical purposes, responsibility for an investigation rests with the Trust in whose area the service is located and it will communicate and liaise closely with other Trusts which have placed their service users' in the facility.

#### RECOMMENDATIONS

22. Accounting Officers should ensure that existing controls operating in Trust services are reviewed to satisfy themselves that there are appropriate controls in place and that they are in compliance with extant Departmental guidance. Accounting Officers should also take steps to ensure that there are adequate financial controls in place in independent sector homes and supported living settings to ensure that Trusts' service users' interests are protected.

#### OTHER DEPARTMENTAL GUIDANCE

- 23. This circular should be read in conjunction with Care Management, Provision of services and charging guidance HSC (ECCU) 1/2010 or subsequent guidance.
- 24. In addition, your attention is drawn to the existing mandatory Departmental guidance which can be accessed through the following links:-

Residential Care Homes – Minimum Standards

https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/care-standards-residential-care-homes.pdf

Nursing Homes – Minimum Standards

https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/care-standards-nursing-agencies.pdf

Domiciliary Care Agencies - Minimum Standards

https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/care-standards-domiciliary-care.pdf

HSS (F) 13/2007 – Financial Governance Model for New HSS Trusts <a href="https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/hssf-2007-13.pdf">https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/hssf-2007-13.pdf</a>

Patients and Clients' Property can be found in section 28 of the Standing Financial Instructions within Circular HSS (F) 13/2007

https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/hssf-2007-13.pdf

# ACTION

25. Please ensure that this circular is brought to the attention of the appropriate staff within your organisation and that any relevant action points are noted.

This Circular supersedes HSC(F) 08-2015 Safeguarding of Service Users' Finances within Residential and Nursing Homes and Supported Living Settings.

Should you have any queries please contact Paula Shearer on 02890 765689.

Paula Shearer

Finance Policy, Accountability and Counter Fraud Unit

# **Template for Residential Homes and Nursing Homes**

Dear Registered Manager,

# Oversight of Service Users' Finances in Residential and Nursing Homes

The Department of Health, Social Services and Public Safety (DHSSPS) issues guidance for implementation by all Health and Social Care Trusts.

The guidance details the Trust's responsibility to take reasonable steps to ensure adequate financial controls are in place to safe guard residents' monies in all statutory and independent homes with which it places clients.

I would therefore be grateful if you would complete the attached declaration confirming the following controls are in operation within the above named facility, for which you are responsible.

# Please ensure explanations are provided for all No and N/A responses.

Control/Process		<u>Response</u>
1. Authorisation	1.1. Where your facility is appointee/controller, do you hold written authorisation to support these arrangements for each client?	Yes / No
	If <b>No</b> applies above, please provide details below (or separately if necessary).	
2. Procedures	2.1. Do you hold up-to-date comprehensive financial procedures for managing clients' monies and clients' accounts?	Yes / No
	2.2. Do all staff who are involved in the mgt of residents monies' receive adequate and regular training on these procedures?	Yes / No

	2.3. Do you have a transport scheme in place?	Yes / No Yes / No
	2.4. Is this transport scheme in line with RQIA guidelines? (If not applicable please state).	Yes / No
	2.5. Do you have a holiday policy IF you facilitate staff to support residents to go on holiday? (If not applicable please state).	
	If <b>No</b> applies to any of the above, please provide details/reasons below (or separately if necessary).	
3. Clients' Agreements	3.1. Do you have agreements in place, which clearly set out financial arrangements for each client?	Yes / No
	3.2. Are these agreements reviewed, updated, agreed and signed annually to reflect changes in circumstances?	Yes / No
	(Note: RQIA guidance recognises that where a client does not have capacity to sign and no one else is willing/available, a facility should note this on the agreement).	
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
4. Clients' Accounts <sup>1</sup> & Reconciliations	4.1. Is there a separately identifiable bank account where clients' monies are held, separate from the facility's business bank account?	Yes / No
	4.2. Are reconciliations between the bank account (as above) & clients' ledgers completed on a monthly basis?	Yes / No

<sup>&</sup>lt;sup>1</sup> Clients' Accounts are those accounts managed by the facility, which hold monies on behalf of clients.

4.3. Are all reconciliations prepared and reviewed by 2 separate Officers?	Yes / No
If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
5.1. Are all deposits to Clients' Accounts authorised by the client (where possible) and signed by two appropriate officers of the facility?	Yes / No
5.2. Is supporting documentation obtained and held on file for all deposits and income?	Yes / No
5.3. Are receipts given for monies received (where appropriate e.g. relatives)?	Yes / No
5.5. Are receipts given for monies received (where appropriate e.g. relatives):	Yes / No
5.4. Are RQIA aware of clients' monies in excess of £20,000 per client being managed by the facility?	
If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
6.1. Are all withdrawals from Clients' Accounts authorised by the client (where possible) and signed by two appropriate officers of the home?	Yes / No
6.2. Is supporting documentation obtained and held on file (receipts/invoices) for all withdrawals and expenditure?	Yes / No
6.3. Are excessive withdrawals from Clients' Accounts reviewed by a Senior Officer of the facility on a regular basis?	Yes / No
	If No applies to any of the above, please provide details below (or separately if necessary).  5.1. Are all deposits to Clients' Accounts authorised by the client (where possible) and signed by two appropriate officers of the facility?  5.2. Is supporting documentation obtained and held on file for all deposits and income?  5.3. Are receipts given for monies received (where appropriate e.g. relatives)?  5.4. Are RQIA aware of clients' monies in excess of £20,000 per client being managed by the facility?  If No applies to any of the above, please provide details below (or separately if necessary).  6.1. Are all withdrawals from Clients' Accounts authorised by the client (where possible) and signed by two appropriate officers of the home?  6.2. Is supporting documentation obtained and held on file (receipts/invoices) for all withdrawals and expenditure?

	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
7. Monitoring Of Clients' Income & Expenditure	7.1. Is there regular detailed monitoring of clients' income & expenditure by a senior officer?	Yes / No
meome & Expenditure	7.2. Is consideration given to clients' spending patterns and appropriateness of spend and are changes in spending patterns reviewed?	Yes / No
	7.3. Are any irregularities reported to key worker?	Yes / No
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
8. Client Records	8.1. Are ledger cards maintained for each client to record all income, deposits, withdrawals and expenditure?	Yes / No
	8.2. Are these ledger cards appropriately completed, and authorised by a separate senior officer of the facility?	Yes / No
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
9. Authorising Signatures	9.1. Is there an up to date copy of specimen authorised signatures held on file?	Yes / No
	If <b>No</b> applies above, please provide details below (or separately if necessary).	
10. General Security of Property Held	10.1. Is clients' property (monies/valuables) held in a safe place within the facility and adequately secured?	Yes / No
	10.2. Is the client or their representative aware of what is being held on their behalf and have authorised the safekeeping of these?	Yes / No

	10.3. Are there robust controls around access to clients' property (including PIN numbers, passwords etc.) and restricted to minimal named staff?	Yes / No
	10.4. Are up to date and accurate records maintained of all items held for safekeeping?	Yes / No Yes / No
	10.5. Are up to date and accurate records maintained of all items of furniture and equipment brought into the service users' room?	Yes / No
	10.6. Are there procedures to ensure that amounts kept for safekeeping are not excessive?	
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
11. Internal Audit Recommendations	11.1. Have the internal audit recommendations circulated by the Trust to you during the year been considered?	Yes / No
	11.2. If so, has an action plan been put in place to address any issues raised?	Yes / No
	If <b>No</b> applies above, please detail below any reasons why and the outstanding actions planned to be taken.	
12. RQIA Financial Inspection Recommendations	12.1. Have any RQIA requirements (under the relevant regulations) as well as recommendations issued to you during the year been considered?	Yes / No
necommendations	12.2. If so, has an action plan been put in place to address any issues raised?	Yes / No

	If <b>No</b> applies above, please detail below any reasons why and the outstanding actions planned to be taken.	
13. Serious Adverse Incidents	13.1. Have there been any Serious Adverse Incidents in respect of management of clients' finances in the past 12 months?	Yes / No
	If YES applies above, please provide details below (or separately if necessary).	

Signed:	(Registered Manager)	Signed:	 (Registered Person)
Print Name:	-	Print Name:	
Date:	-	Date:	

Failure to complete this pro forma will be considered as unsatisfactory performance and be appropriately managed.

In addition, as part of a rolling internal audit programme, a number of facilities will be visited during the financial year to ensure that they have the necessary controls in place. This may include a review of the process and evidence used by the facility to conduct the self – assessment above.

The Trust may share Information provided in this return with other bodies responsible for auditing or administering public funds, in order to prevent and detect fraud.

This return will form part of the contract management review.

Your co-operation in this matter is greatly appreciated and if you wish to discuss this further please contact
Yours Sincerely

Name and Designation

# **Template for Supported Living Services**

Dear Registered Manager,

# **Oversight of Service Users' Finances in Supported Living Settings**

The Department of Health, Social Services and Public Safety (DHSSPS) issues guidance for implementation by all Health and Social Care Trusts.

The guidance details the Trust's responsibility to take reasonable steps to ensure adequate financial controls are in place to safe guard residents' monies in supported living facilities with which it places clients.

I would therefore be grateful if you would complete the attached declaration confirming the following controls are in operation within the above named facility, for which you are responsible.

Please ensure explanations are provided for all No and N/A responses.

Control/Process		Response
1. Authorisation	1.2. Where your facility is appointee/controller, do you hold written authorisation to support these arrangements for each client?	Yes / No
	If <b>No</b> applies above, please provide details below (or separately if necessary).	
2. Procedures	2.1. Do you hold up-to-date comprehensive financial procedures for managing clients' monies and	Yes / No

	clients' accounts?	
	2.2. Do all staff who are involved in the mgt of residents monies' receive adequate and regular training on these procedures?	Yes / No
	2.3. Do you have a transport scheme in place?	Yes / No
	2.4. Is this transport scheme in line with RQIA guidelines? (If not applicable please state).	Yes / No
	2.5. Do you have a holiday policy IF you facilitate staff to support residents/tenants to go on holiday? (If not applicable please state).	Yes / No
	If <b>No</b> applies to any of the above, please provide details/reasons below (or separately if necessary).	
3. Financial Support Agreements	3.1. Do you have agreements in place, which clearly set out financial arrangements for each client?	Yes / No
ng, cements	3.2. Are these agreements reviewed, updated, agreed and signed annually to reflect changes in circumstances?	Yes / No
	(Note: RQIA guidance recognises that where a client does not have capacity to sign and no one else is willing/available, a facility should note this on the agreement)	
	3.3. Is income and expenditure clearly documented in FSA and updated annually?	Yes / No
	3.4. Is there an up to date schedule of clients' benefits entitlements for each client?	Yes / No
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
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4. Tenancy Agreements	<ul><li>4.1. Are there Tenancy Agreements in place for all tenants and signed by both parties (or representatives)?</li><li>(Note: RQIA guidance recognises that where a client does not have capacity to sign and no one else is willing/available, a facility should note this on the agreement)</li></ul>	Yes / No
	4.2. Do you maintain an Inventory listing detailing tenants' ownership of additional items in the event of a tenant leaving the facility?	Yes / No
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
5. Clients' Accounts & Reconciliations	5.1. Is there a separately identifiable bank account where clients' monies are held, separate from the facility's business bank account?	Yes / No
	5.2. Are reconciliations between the bank account (as above) & clients' ledgers completed on a monthly basis?	Yes / No
	5.3. Do you operate common household accounts/shared kitties?	Yes / No
	5.4. Are these accounts/kitties reconciled monthly?	Yes / No
	5.5. Are all reconciliations prepared and reviewed by 2 separate Officers?	Yes / No
	5.6. Does the facility actively seek to minimise the use of cash by tenants through the use of standing orders for bills etc?	Yes / No
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	

6. Deposits & Income	6.1. Are all deposits to Clients' Accounts authorised by the client (where possible) and signed by two appropriate officers of the facility?	Yes / No
	6.2. Is supporting documentation obtained and held on file for all deposits and income?	Yes / No
	6.3. Are receipts given for monies received (where appropriate e.g. relatives)?	Yes / No
	6.4. Are RQIA aware of clients' monies in excess of £20,000 per client being managed by the facility?	Yes / No
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
7. Withdrawals & Expenditure	7.1. Are all withdrawals from Clients' Accounts authorised by the client (where possible) and signed by two appropriate officers of the facility?	Yes / No
	7.2. Is supporting documentation obtained and held on file (receipts/invoices) for all withdrawals and expenditure?	Yes / No
	7.3. Are excessive withdrawals from Clients' Accounts reviewed by a Senior Officer of the facility on a regular basis?	Yes / No
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	

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8. Monitorir	ng Of Clients' 8	8.1. Is there regular detailed monitoring of clients' income & expenditure by a senior officer?	Yes / No
	•	8.2. Is consideration given to clients' spending patterns and appropriateness of spend and are changes in spending patterns reviewed?	Yes / No
	8	8.3. Are any irregularities reported to key worker?	Yes / No
	  -	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
9. Client Red	cords 9	9.1. Are ledger cards maintained for each client to record all income, deposits, withdrawals and expenditure?	Yes / No
	Ğ	9.2. Are these ledger cards appropriately completed, and authorised by a separate senior officer of the facility?	Yes / No
	-	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
10. Authorisii	ng Signatures 1	10.1. Is there an up to date copy of specimen authorised signatures held on file?	Yes / No
	1	If <b>No</b> applies above, please provide details below (or separately if necessary).	
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	_ <del>_</del>	
11. General Security of Property Held	11.1. Is clients' property (monies/valuables) monies held in a safe place within the facility and adequately secured?	Yes / No
	11.2. Is the client or their representative aware of what is being held on their behalf and have authorised the safekeeping of these?	Yes / No
	11.3. Are there robust controls around access to clients' property (including PIN numbers, passwords etc.) and restricted to minimal named staff?	Yes / No
	11.4. Are up to date and accurate records maintained of all items held for safekeeping?	Yes / No
	11.5. Are there procedures to ensure that amounts kept for safekeeping are not excessive?	Yes / No
	If <b>No</b> applies to any of the above, please provide details below (or separately if necessary).	
12. Internal Audit Recommendations	12.1. Have the internal audit recommendations circulated by the Trust to you during the year been considered?	Yes / No
	12.2. If so, has an action plan been put in place to address any issues raised?	Yes / No
	If <b>No</b> applies above, please detail below any reasons why and the outstanding actions planned to be taken.	
13. RQIA Financial Inspection Recommendations	13.1. Have any RQIA requirements (under the relevant regulations) as well as recommendations issued to you during the year been considered?	Yes / No

	13.2. If so, has an action plan been pu	t in place to address any issues raised?	Yes / No
	taken.	any reasons why and the outstanding actions planned to be	
14. Serious Adverse Incidents	If <b>YES</b> applies above, please provide det	verse Incidents in respect of management of clients' finances tails below (or separately if necessary).	in Yes / No

Failure to complete this pro forma will be considered as unsatisfactory performance and be appropriately managed.

In addition, as part of a rolling internal audit programme, a number of facilities will be visited during the financial year to ensure that they have the necessary controls in place. This process may include a review of the process and evidence used by the facility to conduct the self-assessment above.
The Trust may share Information provided in this return with other bodies responsible for auditing or administering public funds, in order to prevent and detect fraud.
This values will form part of the contract management review

# Resident's/Tenant's Review Record Finance Section (Final V. 17.6.15) (Residential/Nursing/Supported Living)

Name of Client:
Placement Details:
Date of Placement:
Date of Review:
1. Is the resident placed at the appropriate regional tariff rate for their assessed Category of Care (as per RQIA classifications)? (For Residential/ Nursing Home only)
Regional Rate
Rate paid by Trust $\Box$
2. Please outline reasons if the payment is above the appropriate regional tariff rate. (For Residential/ Nursing Home only)
3. Does the file contain the necessary assessment and subsequent specialist letter from contracts (if appropriate) corroborating the need for payment above the appropriate regional tariff rate? (For Residential/ Nursing home only)
Yes □ No □
If no specify what action you have taken:

4. Does the resident/tenant have capacity to manage finances, confirmed at multi-disciplinary review?

	Yes □ No □
5.	Does the Tenant have a Financial Support Agreement (FSA) and is it up to date?  (Statutory Supported Living Only)  Yes  No
6.	Who is the Tenant/Resident's appointee (where applicable)?
7.	Is there a Third party "Top Up" in place? ( <b>For Residential/ Nursing Home only</b> )  Yes  No  Amount of Top up: - £
8.	Has the Top Up changed this year? (For Residential/ Nursing Home only)
	Yes ☐ Complete a NEW "Top-up Undertaking to pay form" No ☐
9.	Have there been any changes to arrangements for the management of finances since the last review?
	Yes □ No □
10.	List any changes to the services within the Care Plan/Individual Agreement since the previous review and record the reason or these.

11. Does the resident/tenant have available resources to fund those services which he/she privately funds? (this does not refer to top up)

If no, please highlight the issues  12. What are the additional resources/activities required above contract? Does the penave assessed need?  13. What additional expenditure has been made from the resident's/tenant's personal account since the last review? For example; holidays, payments to other parties including family and transport costs.  14. Have these costs been agreed and recorded in the Care Plan?  Yes	
have assessed need?  13. What additional expenditure has been made from the resident's/tenant's personal account since the last review? For example; holidays, payments to other parties including family and transport costs.  Have these costs been agreed and recorded in the Care Plan?	
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account since the last review? For example; holidays, payments to other parties including family and transport costs.  Have these costs been agreed and recorded in the Care Plan?	
account since the last review? For example; holidays, payments to other parties including family and transport costs.  Have these costs been agreed and recorded in the Care Plan?	
Yes	
No $\square$	
If not, why?	

15. Is the Home holding an accumulating balance in the Resident's Personal Allowance? If so please address how the Personal Allowance is being spent (refer to the resident's care plan).

	ail any changes to the weekly fees since the last revie is should include changes to any third party agreemen	
(key wo	dent's/tenants contributions (Assessed charge) to wee rker checks with Finance Department in advance of residential/ Nursing home only)  Yes  No	
If no, pl	ease outline why.	
	Home confirmed that all financial transactions are pronce with RQIA Standards?	operly receipted i
	Yes □ No □	
last 12 r	ker to review a sample amount of receipts e.g. a month nonths in the residents/ tenants personal cash books? reasonable?	
	any other concerns in respect of the resident's/tenant'	- Consession

Signed by Keyworker:
Designation:
Date:
Signed by Home/Facility Manager or Representative:
Designation:
Date:
Signature of Resident or Relative/Representative (*delete as appropriate):
Date: