

Action Plan – Finance and Management

Findings	Agreed Recommendations	Action taken
<p>Guidance on handling client's money had not been fully circulated to staff.</p> <p>Some guidance had been circulated but it had been written by the Service and not properly authorised by Sheffield City Council.</p>	<p>Guidance should be reviewed and updated by managers and brought into line with Council policies.</p> <p>Better controls should be put in place to protect clients and staff.</p> <p>New policies should be approved through the correct Council channels.</p>	<ul style="list-style-type: none"> • Current guidelines were reviewed by senior officers at a workshop in February 2015. Work continued throughout 2015 to make sure the policies were appropriate for LD Provider Services. • A review of current practice was carried out and the findings used to improve the policies. • The new procedures have been introduced and are being regularly reviewed.
<p>The cost of staff meals during outings were met from client funds.</p>	<p>The approved practice of funding staff meals from client's monies should be stopped immediately. If a client requests to go out for lunch/dinner, the staff member should pay for their food.</p>	<ul style="list-style-type: none"> • The recommendation is being followed. It is a matter for the service to determine meal arrangements (including funding issues) for staff while they are at work.
<p>The policy "Holiday guidelines and Procedures Providers Services" was out of date and led to the Service incurring inappropriate costs.</p>	<p>The policy should be reviewed.</p>	<ul style="list-style-type: none"> • The policy was reviewed and updated. There is now clearer guidance on what is classed as appropriate expenses.
<p>Controls for the management of clients' monies were not consistent across the Service. This made it difficult to know if any misuse had occurred.</p>	<p>Staff should have refresher training, which should include the new policy.</p> <p>Procedures for handling client's money should be reviewed regularly.</p>	<ul style="list-style-type: none"> • The new policy was introduced between April and May 2015, and staff have received relevant training. • The new policy is being reviewed regularly to ensure it is being implemented properly. • Daily financial balance and transaction checks are being carried out by managers.

<p>The current appointeeship contract did not meet the needs of the service or clients.</p> <p>The appointeeship service did not audit the personal money and financial records of their clients.</p> <p>Letters from that detailed the amounts of personal monies despatched were not retained at all sites</p> <p>The Social Care Accounts Service (SCAS) operates an in-house Appointee Service for people in residential accommodation. The Service to expand this to other clients.</p>	<p>There should be a review to find out what is required from an appointeeship service. A new contract should be written and providers invited to apply to provide the service. .</p> <p>The new contract should ensure that money is delivered directly to the client or that they are able to collect it at a time to suit them.</p> <p>Future appointeeship services should be required to check the personal money and financial records of their clients. All checks should be documented and evidence kept on file.</p> <p>Letters sent from the appointee service to clients with personal money payments should be kept in the client's finance file for future reference.</p> <p>There should be a decision about whether to provide this service in-house through SCAS.</p>	<ul style="list-style-type: none"> • The Social Care Accounts Service (SCAS) is currently transferring clients from Citizenship First into the Executor Services Team. The recommendations made relating to Citizenship First will be met by the Executor Services team. • A pre-paid card system is being considered to remove the need to handle cash.
<p>Cash deliveries to a client's home were not witnessed by two members of staff. This exposed the client and staff member to some level of risk.</p> <p>The recording of money transactions was not consistent across the service. Often only one signature was present for entries and withdrawals.</p> <p>The way receipts were recorded across the service was inconsistent. Some receipts were incomplete or missing.</p>	<p>All cash deliveries should be witnessed and recorded by two members of staff.</p> <p>Management need to review how clients are able to access their money. Thorough controls need to be in place to reduce the opportunity to use money inappropriately. Independent checking should also be carried out.</p> <p>Management should review the current process and ensure that a new system for handling and properly recording receipts is put in place and used across all sites.</p>	<ul style="list-style-type: none"> • Deliveries were/are witnessed by two staff when possible, however staff availability means this is not always possible. However, money is usually delivered by a manager. • The process was reviewed at a workshop in February 2015 and a review carried out by internal audit. • A review of the Business Support team and its role was carried out. Some changes have been made relating to how transactions are recorded and checked. A single approach and standard paperwork for transactions and receipts is now used.

<p>Some clients had their money delivered to Ecclesfield Support Unit. Operational managers held the money and then gave it to clients.</p> <p>The way additional funds were requested from the appointeeship service was not consistent across the service.</p>	<p>The practice should be stopped immediately. Citizenship First should be instructed to deliver money directly to clients at home on a specific day. A member of staff should be available to sign for the payment. The safe keeping of money should stop immediately.</p> <p>All requests to change payments should be recorded in the client's file and authorised by a manager.</p>	<ul style="list-style-type: none"> • Safe-keeping' of money has now ended. • Staff from the Council's Contracts team met with the appointeeship service to identify the affected clients. • The changes to payments are now being recorded correctly. Requests for change are now done by email request so there is a clear evidence trail.
<p>Council staff and other support workers had access to the bank cards and the PIN of clients who needed help to make cash withdrawals from a bank.</p>	<p>If a client is in charge of their own finances, staff access to their bank card and PIN details should be restricted.</p> <p>In line with the Managing Clients Monies policy, Care and Support staff can support clients to access their money but they should not be relied upon to take control of a bank card and PIN. An appointeeship service should be used where the client cannot manage their finances.</p>	<ul style="list-style-type: none"> • A review was carried out and affected clients identified. The majority of cards were found to be 'pre-loaded' rather than bank cards. • Transactions are recorded and matched to the amount withdrawn. • Clients with bank cards are being supported to access their money in ways that do not involve staff.
<p>The frequency and quality of account audits by management was inconsistent and poorly recorded.</p>	<p>Management should ensure that the audit of account sheets are carried out each month and issues raised with relevant members of staff.</p> <p>Management should carry out a fraud risk assessment and take action to prevent any financial losses.</p>	<ul style="list-style-type: none"> • A new process has been put in place and regular checks are carried out.
<p>A number of housekeeping contributions had been deducted from appointee cash payments before being recorded in clients' account sheets. This resulted in incomplete records.</p> <p>Funds were not always held securely and safes could be accessed by several people. Safe audits were not carried out regularly and the code had not been changed in several years.</p> <p>The amount withdrawn from</p>	<p>The Service should ensure that the total value of the appointee payment is recorded in the client's account sheet before any deductions are made.</p> <p>All funds should be held securely and only chosen staff should have access. Management should ensure that override keys are kept securely.</p> <p>Safe audits should take place every three months at ESU in line with the Council's Use of Worksite instructions. The safe code to be changed every three months as part of the regular check.</p> <p>The Service should ensure that principles</p>	<ul style="list-style-type: none"> • This recommendation is now in place and is being checked regularly by operational managers. • Balance checks are carried out at the start of each shift and for each transaction to address any errors when calculating deductions. • Safes have been installed where needed. Staffing levels at some sites is likely to mean that all on duty staff will need access to safes. However management will ensure the number of staff with access is kept to a minimum and on a need to know basis. • The safe checks are carried out by a Business Support Manager k.

housekeeping funds did not always match that being spent. These errors appeared to be the result of calculation / mathematical errors.	contained in "Recording transactions and accessing client finances" policy are maintained for recording housekeeping deductions.	
The process for documenting the contents of the ESU safe was too complicated and relied on too many documents.	The way the safe contents are recorded should be reviewed.	<ul style="list-style-type: none"> A new process has been put in place.
Contributions of between £12.20 and £19.72 per night were paid by some clients. There were no controls in place to differentiate between contribution paying and non-paying clients. Contributions were paid directly to the unit. Keeping records and receipts was inconsistent.	A way of easily identifying the two different client groups should be put in place. A record of those required to pay should be shared with Social Care Accounts Service (SCAS) The collection of cash contributions should be stopped. SCAS should deal directly with clients who are required to pay a contribution.	<ul style="list-style-type: none"> The Service no longer receives contributions. This is now sorted between Assessment & Care Management and SCAS.
Three clients wrongly paid contributions to Warminster Road as the Support Plan Sign off Record was not clear enough.	A review of every client attending Warminster Road should be carried out to confirm if respite care is included in their support plan. A statement of payments made should be produced and the clients should be informed that they had overpaid. Clients should be asked to identify any other payments made that are not on the statements and evidence such as receipts should be recorded.	<ul style="list-style-type: none"> The statements have been produced and sent to clients. Review Complete and action taken.
There was no way to know if clients were using the correct number of respite days that they were entitled to.	The number of respite days used by each client should be recorded and compared to the number in their Support Plan Sign off Record.	<ul style="list-style-type: none"> The Service met with Social Care Accounts Service (SCAS) and Assessment and Care Management (A&CM) to agree a way to monitor respite days. They agreed that stays will now be booked through A&CM and not directly with the Learning Disability Provider Service.
The Warminster Road Respite Unit petty cash float was being used a lot to buy groceries. This is not allowed by the Council's financial regulations.	Management should review how food is purchased for Warminster Road. Different ways of purchasing food such as online shopping and pre-paid debit cards should be looked at. Purchases should be delivered directly to the unit at agreed times so that staff are available to check what has been delivered.	<ul style="list-style-type: none"> The float has been reduced to £500. Food is still bought through petty cash but the Service is trying to find suitable providers. However, this is proving difficult given the small quantities involved.

Withdrawals of petty cash from the respite unit were not signed by two staff and some receipts were missing.	Payments from petty cash should be signed by the staff member who is responsible for the float and Authorising Manager. Receipts should be kept for each payment including a valid VAT receipt where appropriate.	<ul style="list-style-type: none"> The Service is aiming to ensure that nothing should be spent without a receipt for the right amount. Throughout the week only authorised managers give out money. At weekends a small amount is left in a secure place.
Clients staying at the unit could choose to manage their money themselves or allow staff to record the amount they had and spent. It was not clear which option they had chosen.	The care plan of each client guest at the Warminster Road Respite Unit should be clear which option is being used. Where staff are monitoring the money, records should be kept up to date and all receipts kept.	<ul style="list-style-type: none"> The new care plan has a finance section which notes which option is being used.
Some small room safes were not secure.	A review of the facilities in each room should be carried out.	<ul style="list-style-type: none"> The office safe has been made secure for those clients who do not look after their own finances. Room storage security is being improved and safes secured.
The business plan for Green Cake Café (GCC) was out of date and did not show how it could be it could make enough money to run itself.	<p>The GCC business plan should be updated to include all costs and income, any risks that could affect its long term future and ideas on how to make the business sustainable.</p> <p>Once complete a decision on the café's future is needed and management will need to decide about the costs of future support.</p>	<ul style="list-style-type: none"> Work on the business plan is on-going.
<p>Yearly appraisals were not being carried out consistently across the service.</p> <p>One to one meetings were not carried out regularly.</p>	<p>Formal annual appraisals should be carried out as required by the Council. Appraisals should be kept in staff files.</p> <p>One to one meetings should be held regularly and records kept in files.</p>	<ul style="list-style-type: none"> Managers have received training on how to carry out appraisal and regular monitoring checks are carried out. One to one meetings are scheduled regularly and managers check to make sure they are being held. Documents are kept in staff files.
Formal training plans for staff were not in place. Individual development plans were not found in staff files.	A training and development plan should be written for each area of the service.	<ul style="list-style-type: none"> A review of what training is needed has been created and this is being used to plan training sessions. Regular training meetings are held. The Learning and Development Co-ordinators now have a clearer understanding of their role.
A number of training courses were cancelled and were not always rearranged quickly.	Cancelled training sessions should be re arranged quickly.	<ul style="list-style-type: none"> Learning and Development Co-ordinators now manage training sessions. Training is monitored by Management.
The way staff sickness was recorded and monitored needed improvement.	<p>Management should ensure that the staff who record employee sickness are fully aware of the guidelines.</p> <p>Records should be reviewed regularly to ensure they are accurate.</p>	<ul style="list-style-type: none"> Regular sessions were held with staff from the Council's Human Resources team. Staff are now recording sickness properly. Area managers check records each month to ensure they are accurate.
Some members of staff were paid significantly more than they were contracted for during 2012/13.	A review into the use of zero hour contracts and agency should be carried out.	<ul style="list-style-type: none"> Work is being carried out to ensure there is a fair allocation of work. Human Resources are working with the Service to ensure a new process is put in place.

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