

# STANDARD OPERATING PROCEDURE FORENSIC - CASH HANDLING AND MANAGEMENT OF PATIENT'S MONEY

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<b>Name of Trust Strategy / Policy / Guidelines this SOP refers to:</b>	<a href="#">Patients' / Residents' Property and Monies Procedure (Proc433)</a>

**VALIDITY – All local SOPS should be accessed via the Trust intranet**

### CHANGE RECORD

Version	Date	Change details
1.0	Jan 2022	New SOP.
1.1	March 2023	Changes to the process with patient money wallets being stored in safes on the wards. Approved at Security Committee (6 March 2023).
1.2	September 2023	Reviewed. Addition of some operational protocols, appendices and clarification of responsibilities. Approved at Security Committee (15 September 2023).
1.3	May 2024	Reviewed. Approved at Security Committee (20 May 2024).

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## 1. INTRODUCTION

This Standard operating procedure must be read in conjunction with the trust [PATIENTS'/ RESIDENTS' PROPERTY and MONIES PROCEDURE](#).

Care and welfare of people who use services and safeguarding people, who use services, from abuse.

**Care Quality Commission (CQC)** – from April 2015 the Care Quality Commission (CQC) guidance Essential Standards of Quality and Safety and the 28 'outcomes' that it contained was replaced in its entirety by the 'Raising Standards putting people First' Strategy 20132016 which asked five key questions (Key lines of enquiry known as KLOEs):-

- Are we SAFE
- Are we CARING
- Are we EFFECTIVE
- Are we WELL LED
- Are we RESPONSIVE to individual's needs.

In 2021 a new strategy 'For the changing world of health and social care' was published using four themes (People and communities, Smarter regulations, Safety through learning, Accelerating improvement) with 12 outcomes, but the five key questions (Safe, Caring, Effective, Well Led and Responsive) are still central to the way the CQC regulates services.

This will ensure that all staff involved in any transaction of patient's cash, retained in personal wallets, are checked and signed for by the patient and two witnessing members of staff.

## 2. SCOPE

This procedure applies to any member of staff involved in the handling or management of patient finances within the forensics division.

## 3. DUTIES AND RESPONSIBILITIES

All staff will be aware of the procedure regarding the management of money, and will work with services users to promote independence whilst maintaining safe practices and professional accountability within the division.

## 4. PROCEDURES

Each ward will have a safe, which is secured to the wall and is accessed via a key. At the start of each shift a registered staff member will be identified for managing access to the safe. When this staff member is on their break an alternative registered member of staff will hold the key. The key will be kept on a sealed ring. The sealed ring will always be attached to the identified registered staff member's key strap. There will be a log of all staff that have had access to the key, see appendix 1. The log will be checked by the Ward management team once a week.

When the key is handed over to another member of staff, the two staff will check that the security seal on each wallet is intact.

Any identified discrepancies in the balance will be escalated to the Duty Manager, a datix completed, and reported on the shift log for the attention of the Ward Manager. Any discrepancy will result in a count of money in every wallet in the safe.

A member of ward management will check the shift log to identify and action any reported discrepancies including possible investigation and information sharing.

#### **4.1. Patients Withdrawal and Deposits from Personal Money Wallets**

Patients have access to their personal monies 24 hours a day/7 days a week, dependent on ward situation and individual circumstances. Each patient's personal money is kept in a wallet, labelled with their name, in the ward safe. Access to the wallets can only be facilitated when there are 2 members of staff available to manage the transaction.

When accessing the patient money wallet, the staff will break the security seal and count the money in the wallet.

Once the transaction is completed the 2 staff members will count and document the remaining balance and seal the wallet with a security seal.

Money that is withdrawn or deposited will be signed for by the patient on the: PATIENT'S / PROPERTY CASH RECORD SHEET. The 2 staff members will indicate they have witnessed the transaction by signing the sheet.

#### **4.2. Deposits to Patients Wallets by Visiting Relatives/Friends**

The maximum amount of money allowed for each patient in the ward safe is £90, however, in individually assessed circumstances, a patient may be allowed up to the Trust limit of £200.

Relatives may deposit money into a patient's wallet. This transaction will be conducted at reception. They will receive a receipt of any money deposited to the unit. A copy of the receipt will be placed in a sealed envelope along with the money. Reception staff will contact the relevant ward, who will collect the envelope at their earliest convenience.

This deposit will be entered onto the PATIENT'S / PROPERTY CASH RECORD SHEET on the ward, and witnessed and signed by 2 members of staff. The patient receiving the funds will also sign the cash record sheet, following the same process as section 4.1. If the patient is unavailable, then as soon as the patient is available the patient will sign the cash record sheet.

At no time will the friend or relative be asked to see or sign the patient's money record sheet.

If there is a protracted delay in ward staff collecting the envelope from reception, then the envelope should be securely stored in the reception safe until it can be collected.

#### **4.3. Daily Checks of all Patient Wallets**

A daily check of all patient wallets will be undertaken to ensure the security seal is intact, with 1 staff member from the day shift and one staff member from the night shift at handover. Each weekend, the wallets will be opened by two members of staff, and the money will be checked against the balance that is documented on the PATIENT'S / PROPERTY CASH RECORD SHEET. The arithmetic will be checked for accuracy and the seal number will be checked to ensure that it corresponds with the wallet. The seal will then be replaced to secure the wallet. The seal number will be recorded on the patients' property/cash record sheet. This check will not require a patient signature.

#### **4.4. Pine View and South West Lodge**

At Pine View and South West Lodge the process for managing access to patient money will be conducted by reception and ward staff. When patients are accessing their money, a signature will be required from the patient, reception staff and ward staff.

#### **4.5. Patient Banking**

The Humber Centre bank is open from 10am until midday on Monday and Thursday each week. Each ward at the Humber centre is allocated 20 minutes on each day to complete transactions at the bank. Pine View Patients have access to funds via a proxy form which is completed by staff at Pine View and scanned to the bank operative. The funds of the requested Proxy form are transported to Pine View at the end of the working day, unless requested prior to this.

Before opening the bank, the staff member doing the unit bank will check all the balances of the patient money held in the Trust bank account and update the patient banking sheets. They will then contact the ward to inform them that they will be attending the ward to check the wallets with a member of the ward staff, against the relevant property/cash sheet for the patients that want to access the unit bank. The seals will be checked to ensure that they correspond with the paperwork and will be broken on the ward and witnessed by the finance administration personnel and a member of ward staff, which will then be transported in a secure bag to the bank.

When the patients come to the bank, the staff member will then facilitate the patient withdrawing and depositing money from the Trust bank account.

Once the transaction is completed, the staff member running the unit bank will count the money in the wallet in front of the escorting staff member, document the remaining balance and seal the wallet with a security seal.

Money that is withdrawn or deposited will be signed for by the patient on the: PATIENT'S PROPERTY/CASH RECORD SHEET. The escort and staff member running the bank will indicate they have witnessed the transaction by signing the sheet

#### **4.6. Discrepancies**

Any identified discrepancies in the balance will be escalated to the Duty Manager, a datix completed, and reported on the shift log for the attention of the Ward Manager.

The Ward management team will check the shift log to identify and action any reported discrepancies.

### **5. REFERENCES**

[PATIENTS'/ RESIDENTS' PROPERTY and MONIES PROCEDURE](#)



## Appendix 2 - Patient's Property/Cash Record Sheet

<b>HUMBER TEACHING NHS FOUNDATION TRUST</b> PATIENTS / RESIDENTS CASH RECORD SHEET SITE / LOCATION: WARD: PATIENT / RESIDENT'S NAME:					REFERENCE NUMBER: <small>(Security code)</small>  PATIENT / RESIDENT'S BED / ROOM NUMBER:				
<i>All Cash must be stored within individual patients' / residents' pouch with security tag seal and kept in the designated safe</i>									
TAG SEAL NUMBER:	DATE:	CASH IN: (£'s & p)	CASH OUT: (£'s & p)	BALANCE: (£'s & p)	PURPOSE:	PATIENT/RESIDENT'S SIGNATURE (Print & Signature)	WITNESS 1 - SIGNATURE (Print & Signature)	WITNESS 2 - SIGNATURE (Print & Signature)	NEW TAG SEAL NUMBER:
		Balance B/led from previous sheet:		£					
		Balance C/led to next sheet:		£					
<i>All Columns must be completed each transaction</i>									