

Saint John of God Kerry Services

Hospitality – Compassion – Respect

15

Managing Third Party Requests Procedure

Saint John of God Kerry Services

Title: Managing Third Party Requests

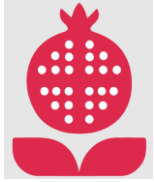
Document Reference: Kerry 15

Revision Date: Feb 2024

Revision Number: 04

Pages, incl. cover and signature: 06

Approved by: PPPG Group



Policy and Procedure

1. Purpose

Individuals who avail of Saint John of God Kerry Services are supported to the greatest extent possible to manage their financial / property affairs. There is a general legal presumption that an individual has the mental capacity to make their own decisions. Responsibility, as far as possible, remains with the individual, and their rights must be upheld at all times. It is the policy of Saint John of God Kerry Services to ensure that service user monies are used for the direct benefit of the service user.

2. Scope of Policy and Procedure

This Policy and Procedure applies to all third-party requests to pay over service user monies to someone other than the service user. This Policy and Procedure does not apply to ordinary movements on service users accounts, which they are benefitting from directly. This policy and Procedure should be applied in addition to existing controls which deal with receipt and security of service users accounts.

3. Roles and Responsibility

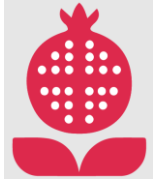
3.1 The Regional Director of Services, Senior Management, Unit Heads and Co-ordinators will ensure that all staff are aware of this policy and that it is implemented in all areas of the service.

3.2 It is the responsibility of all staff to ensure this Policy and Procedure is adhered to at all times.

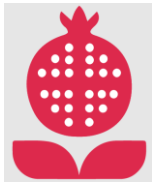
4. All requests by a third party for monies/funds from the service users' account must be made in writing to the relevant Co-ordinator/Unit Head. The request will be filed safely in the service user's file by the Co-ordinator/Unit Head.

5. Where there is no doubt about the capacity of the service user to make the necessary decision in respect of a request on his/her finances, all such requests must be approved by the service user and a written record of this maintained in the service user file and cashbook which must be countersigned by the 3rd party. This responsibility lies with the relevant Co-ordinator/Unit Head.

6. Receipts must be provided and attached to the written request for payment/reimbursement.



7. Requests for payments/monies from service user accounts/funds by family/relatives/friends who wish to purchase items for the benefit of service user do so following a recorded discussion with the relevant Co-ordinator/Unit head involved in the support and care of the service user (see appendix 1).
8. The Co-ordinator/Unit Head will advise family/relatives/friends who wish to purchase items for the benefit of service users to submit a written request to the relevant Co-ordinator/Unit head (see 4 above).
9. Where items of genuine benefit to service users have been purchased in good faith by their family/relatives or friends the Programme Manager of the relevant area must approve of the cost of same prior to reimbursement.
10. All written requests will be reviewed by the relevant programme Manager along with the relevant Co-Ordinator/Unit Head.
11. All withdrawals/reimbursements must be approved by the relevant Programme Manager.
12. Bank Accounts/Post Office Books cannot be transferred to/sent home to third parties without the prior approval of the Programme Manager.



Appendix 1



Financial Will and Preference Checklist

In determining what is in a person’s financial will and preference, the people helping to support the decision must complete the following checklist.

Service User Name: _____

Steps to consider	Evidence
1. Have we considered why the person needs support around their finances in line with their financial passport, what level of support is needed. Can they make the decision themselves?	
2. Have we considered the person’s past and present wishes and feelings?	
3. Has everything possible being done to involve the Person/help them participate in their financial decision.	
4. Have we taken into account everything that is known about the person, which would indicate what decision she/he would make if they could do so without our support. This includes taking into account whatever would add to the person’s enjoyment in life.	
5. Have we consulted with all who may know the person and what they would like? This includes others involved in formal arrangements for substitute decision making.	
6. Have we consulted with key people in line with criteria for decision making and shared responsibility/key amounts of money.	
6. Have we looked at concerns/issues that could lead to financial hardship or increases the risk of exploitation or abuse of the person’s finances?	

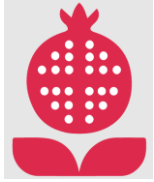
Date completed: _____

Support Staff/Family/Advocate

Present: _____

The decision made/action taken in relation to spending of money by the service user or Circle of Support on their behalf is in his/her will and preference.

Signature Unit/House Supervisor: _____ **Date:** _____



**Criteria For Decision Making & Shared Responsibility
Service User Finances.**

Amount of Money	Key People who should be involved in deciding to spend the money
€100-€500	Service User and or Advocate, Key worker & Unit Manager.
€500-€2000	Service User and or Advocate, Key worker, Unit Manager & Consult with Programme Manager & Family Will and Preference Checklist used to support decision
€2000- €10,000	Service User and or Advocate, Circle of Support which includes all of the above people and 2 others, for e.g. Social Worker, Independent Advocate, Psychologist Will and Preference Checklist used to support decision.
€10,000	All of the above and the Director of Service. Will and Preference Checklist used to support decision.



SIGNATURE PAGE

I have read, understand and agree to adhere to the attached Policy and Procedure:

Print Name

Signature

Area of Work

Date
