





Public – To be published on the Trust external website

# Losses and Special Payments (Including Redress)

Ref: FIN-0001-v7.0

**Status: Approved** 

**Document type: Procedure** 





Last amended: 04 December 2024

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E	Introduction





## 1 Introduction

The Trust is required to have systems for the control and safe custody of health service property, the administration of patients' and Trust property and the recording, reporting and investigation of losses. They are divided into different categories which govern the way each individual case is handled and determine the amount a Trust can approve to write off.

This procedure links to Our Journey To Change (OJTC) by having a positive effect on patients, staff and visitors as it ensures they are reimbursed all avoidable costs incurred on a Trust site

# To co-create a great experience for our patients, carers and families, so you will experience:

- Outstanding and compassionate care, all of the time.
- Access to the care that is right for you.
- Support to achieve your goals.
- Choice and control.

#### To co-create a great experience for our colleagues, so you will be:

- Proud, because your work is meaningful.
- Involved in decisions that affect you.
- Well led and managed.
- That your workplace is fit for purpose.

#### To be a great partner, so we will:

- Have a shared understanding of the needs and the strengths of our communities
- Be working innovatively across organisational boundaries to improve services.
- Be widely recognised for what we have achieved together.

## 2 Purpose

Following this procedure will help the Trust to ensure that proper and duly authorised losses are recorded and special payments made ensuring that the appropriate records are maintained.

## 3 Who this procedure applies to

- How have you sought views of people who might be affected by this procedure?
  - Engagement is completed as part of patients property policy review, this procedure is linked to reimbursement following an avoidable incident.
  - o Feedback on user friendliness of forms is recorded and implemented if appropriate





- Have you considered how the procedure aligns to the Trust values, so that people affected are treated with compassion, respect, responsibility?
  - This procedure outlines the process for reimbursement for incurred costs, this supports OJTC by ensuring no stakeholders are financially impacted by avoidable incidents on Trust sites.



- Listening
- Inclusive
- Working in partnership



#### Compassion

- Kind
- Supportive
- Recognising and Celebrating



- Honest
- Learning
- Ambitious

This procedure applies to all stakeholders of the Trust, including staff, service users and visitors. Losses and Special payments fall into predefined categories which determine:

- action to be taken in response; and
- the limits of write off delegated to the Trust.

Loss of cash due to theft, fraud, non-recoverable overpayment of
salaries, fees and allowances or physical loss of cash (e.g. due to fire).
Fruitless payments (including abandoned capital schemes).
Bad Debts and claims abandoned.
Damage to buildings, their fittings, furniture and equipment or other assets due to culpable causes, e.g. theft, fraud, arson or sabotage.
Ex-gratia payments is the main use of special payments and covers such items as loss of personal effects for either staff or patients, clinical negligence cases and personal injury claims.
Compensation payments made under legal obligation.
Extra Contractual payments to contractors.
Extra Statutory and extra regulatory payments.

During the course of work or presence on the Trust's premises, the protection of personal property is the responsibility of each individual. The Trust will not accept financial responsibility for claims arising from theft, loss or damage to personal property at the place of work, unless it can be proven to have arisen because of the organisation's negligence.





## 3.1 Roles and responsibilities

Role	Responsibility
All staff	Protecting their own and Trust property against damage or loss.  Reporting losses appropriately and promptly.
Directors and Managers	Ensuring all requests for payments, or identification of losses, are verified and authorised.
Director of Finance, Estates and Facilities	Maintaining the losses register and reporting to relevant committees and boards.

#### 4 Related documents

- Trust Criminal Incident Reporting Procedure
- Counter Fraud, Bribery and Corruption Policy and Strategy
- Patients' Money and Valuables Guidance Document

#### 5 Procedure

## 5.1 Authority to Write Off / Make Special Payment

The Chief Executive and Director of Finance, Estates and Facilities are authorised under the scheme of delegation to write off losses and make special payments. Any payments made outside of their delegated limits and up to the Trust's delegated limit must be approved by the Trust Board.

This authorisation will be by a signature of the Chief Executive or Director of Finance, Estates and Facilities with a copy of the relevant Trust minutes where Board approval was given.

## 5.2 Reporting Losses

Any officer discovering or suspecting a loss of any kind must immediately inform their line manager or Director.

In all cases the Director must be made aware of any actual or suspected losses in their Care Group / Directorate.

On discovering a loss, the following immediate action must be taken:

- Action to end the loss and attempt recovery;
- Determine full facts, causes and implement corrective action e.g.
  - Correcting weakness in control and supervision;





 Establishing negligence, misconduct or incompetence and taking any necessary or appropriate disciplinary action.



Where a criminal offence is suspected the relevant service Director will inform the Police.

## The Trust Incident Reporting Procedure must be followed irrespective of any other reporting or documentation requirements related to this procedure.

- The procedure for claiming redress for criminal damage is contained in the Criminal Incident Reporting Procedure.
- The Trust is committed to gaining redress for all criminal damage caused by members of the public or patients where criminal responsibility has been established.
- Should the criminal proceedings fail to gain redress the Trust will consider sanctions through a civil redress.
- The decision to follow a civil process will be made by the Trust's Managing Directors and Director of Finance, Estates and Facilities.

### 5.3 Losses over £1,000

The Director of Finance, Estates and Facilities or Head of Accounting and Governance must be contacted for guidance where a loss exceeds £1,000.

## 5.4 Losses under £1,000

Step	Who	Action
1	Manager	Report losses to Finance Dept. using the losses report form (see Appendix 1).
		This form also acts as a checklist for the action that must be taken in response to discovering a loss and to enable write off approval to be obtained.
		All sections must be completed and supported, where necessary, by full documentation.
2	Manager with required Authorised Signatory (AS) status	On completion the form must be appropriately authorised.
3	Service Director	Retains a copy of the form and any supporting attachments.
4	Manager	Forward the original to the Head of Accounting and Governance (Flatts Lane) for entry in the Losses Register and presentation to the Director of Finance, Estates and Facilities for write off.





5	Director of Finance, Estates and Facilities	Establishes arrangements for maintaining a Losses and Compensation Register detailing the losses notified and entry only if supported by a losses report.
6	Head of Accounting and Governance	At six monthly intervals all losses within the Trusts delegated limits must be reported to the Trust Board and the Audit and Risk Committee for information or approval. Approval of write off items/values will be recorded in the Losses and Compensation Register.

#### 5.5 Fraud



Where a fraud is suspected, the Director of Finance, Estates and Facilities must be contacted as per the Local Anti-Fraud and Corruption Policy (see intranet).

## 5.6 Special Payments - Ex-gratia Payments

Step	Who	Action	
1	Manager	To initiate a special payment where the value is below £1,000, complete a notification form 'Ex Gratia Payments Under £1,000' (see Appendix 2).	
		The forms must be fully completed and supported, where necessary, by full documentation.	
		This form is also available on the finance InTouch page.	
2	Manager with relevant Authorised Signatory (AS) status	special payment would exceed £1,000, please contact the Head of Accounting and Governance for guidance.	
3	Director	Retains a copy of the form plus supporting documents.	
4	Manager	Send the originals to the Head of Accounting and Governance for recording in the Losses and Compensations Register and for submission for payment.	



An ex-gratia payment cannot be made for any items that are related to a current, past or future legal claim against the Trust.

## 6 Definitions





Term	Definition
Losses	Losses in respect of money or property belonging to the Trust.
Special Payments	Exceptional compensatory payments made by the Trust to a member of staff, visitor or patient in the event of damage, loss or theft or property.

## 7 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website.
- Line managers will disseminate this procedure to all Trust employees through a line management briefing.
- All employees and managers are responsible for the adherence to this procedure.

#### 7.1 Training needs analysis

Staff/Professional Group	,		Frequency of Training	
All staff	Form completion	As required	As required	
Finance clerk	Administration	As required	For new starters	

## 8 How the implementation of this procedure will be monitored

This procedure will be regularly monitored by the Directorate of Finance, Estates and Facilities in conjunction with the Estates and Facilities Management Directorate and the Trust Solicitor.

The Audit and Risk Committee receives a report detailing payments made / losses to be reported, and detail on actions taken should the payments made be excessive / avoidable.

A register is maintained of all reported incidents. Should a pattern of entries emerge it is escalated and relevant training is offered to minimise future incidents.

Last amended: 04 December 2024





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## 9 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	04 December 2024
Next review date	04 December 2027
This document replaces	Losses and Special Payments (including redress) FIN-0001-v6
This document was approved by	Senior Finance Team
This document was approved	04 December 2024
This document was ratified by	n/a
This document was ratified	n/a
An equality analysis was completed on this policy on	22 November 2024
Document type	Public
FOI Clause (Private documents only)	n/a

#### Change record

Version	Date	Amendment details	Status
V6	17 August 21	Full review with minor changes to terminology and form design	Superseded
V7	4 December 2024	Full review with updates to trust structure and form design	Approved





## Appendix 1 – Losses Report for Items Under £1,000

## Loss Report For Items Under £1,000

Please complete and return the payment request to <a href="mailto:tewv.receivables@nhs.net">tewv.receivables@nhs.net</a>. **Care Group Directorate: Department: Loss Details** Place of loss: Date of Loss: Nature or loss (damage, theft, etc.): Description of item(s): Circumstance of loss: **Police Contact (suspected criminal offence)**  $\square$  Yes If yes, ref. number: Police contacted:  $\square$  No If yes, outcome: If no, reason: **Director of Finance notification** date: **Corrective Action Taken (weakness in control and supervision)** Write off/ex-gratia payment value: £ **Director/Manager name:** AS number: Signature: Date: **Finance Use Only** Authorisation: AS No.: Finance reference number: Finance signature: Date:





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## Appendix 2 - Ex Gratia Form

## Ex-gratia Payment Request (Under £1,000)

Please complete and return the	ne payment request to tewv	.receivab	les@nhs.net.	
	Claimant Incident Details			
Claimant:	□ Patient □ Staff	□0	ther (state)	
Claimant name:				
Claimant address:				
Department / ward:	Site:		Assignment No. (i	f employee):
		Inciden	t Details	
Incident number:				
Incident details:				
Details of damage / loss / stolen:				
Disclaimer statement signed:	☐ Yes ☐ No ☐ N/a i.e. spectacles			
Original cost of item(s):	Original purchase Cost of repair / replacement (incl. receipts):			
£		£		
Claimant signature:		Date:		
		Approval		
Recommended payment:	£			
Reason if different to the above	ve:			
Cost centre:	Director/manager name: AS No.:			
Signature:		Date:		
Authoritoral formation	Finance Use Only			
Authorised for payment:	AS No.:	Financ	ce reference numbe	r:
			T	
Finance signature:		Date:		



Approved date: 17 August 2021

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## **Appendix 3 - Equality Analysis Screening Form**

Please note: The <u>Equality Impact Assessment Policy</u> and <u>Equality Impact Assessment</u> <u>Guidance</u> can be found on the policy pages of the intranet

Section 1	
Name of service area/directorate/department	Finance
Title	Losses and Special Payments (Including Redress)
Туре	Procedure
Geographical area covered	Trustwide
Aims and objectives	Ensure losses and special payments are processed correctly
Start date of Equality Analysis Screening	29 <sup>th</sup> November 2024
End date of Equality Analysis Screening	29 <sup>th</sup> November 2024

Section 2	Impacts	
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	All stakeholders of the Trust (employees, service users, visitors etc.)	
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	<ul> <li>Race (including Gypsy and Traveller) NO</li> <li>Disability (includes physical, learning, mental health, sensory and medical disabilities) NO</li> </ul>	
	Sex (Men and women) NO	
	Gender reassignment (Transgender and gender identity) NO	
	Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.)     NO	
	Age (includes, young people, older people – people of all ages) NO	
	<ul> <li>Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO</li> </ul>	
	Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO	
	Marriage and Civil Partnership (includes opposite and same sex couples who are	

	<ul> <li>married or civil partners) NO</li> <li>Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO</li> <li>Human Rights Implications NO (Human Rights - easy read)</li> </ul>
Describe any negative impacts / Human Rights Implications	n/a
Describe any positive impacts / Human Rights Implications	n/a

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	National legislation
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	No
If you answered Yes above, describe the engagement and involvement that has taken place	
If you answered No above, describe future plans that you may have to engage and involve people from different groups	Policy is equally applicable to all. See section 3 of policy for more detail of wider engagement.

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	n/a
Describe any training needs for patients	n/a
Describe any training needs for contractors or other outside agencies	n/a

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## Appendix 4 - Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title		
Is the title clear and unambiguous?	Yes	
Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2. Rationale		
Are reasons for development of the document stated?	Yes	
3. Development Process		
Are people involved in the development identified?	Yes	
Has relevant expertise has been sought/used?	Yes	
Is there evidence of consultation with stakeholders and users?	Yes	Forms updated following feedback from users
Have any related documents or documents that are impacted by this change been identified and updated?	n/a	
4. Content		
Is the objective of the document clear?	Yes	
Is the target population clear and unambiguous?	Yes	
Are the intended outcomes described?	Yes	
Are the statements clear and unambiguous?	Yes	
5. Evidence Base		
Is the type of evidence to support the document identified explicitly?	Yes	
Are key references cited?	n/a	
Are supporting documents referenced?	n/a	
6. Training		
Have training needs been considered?	Yes	
Are training needs included in the document?	Yes	

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7. Implementation and monitoring		
Does the document identify how it will be implemented and monitored?	Yes	
8. Equality analysis		
Has an equality analysis been completed for the document?	Yes	
Have Equality and Diversity reviewed and approved the equality analysis?	Yes	
9. Approval		
Does the document identify which committee/group will approve it?	Yes	
10. Publication		
Has the policy been reviewed for harm?	Yes	
Does the document identify whether it is private or public?	Yes	
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	
11. Accessibility (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	Yes	
Do all pictures and tables have meaningful alternative text?	Yes	
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	Yes	

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