



**Adult Commissioning Team**

**Schedule 1 - Specification  
SOL - Money Management (Appointee & Deputy)  
Services 2024  
(SOL-18477)**

**To provide  
Money Management Services for adults living in Solihull who  
lack capacity to manage their finances.**

<b>Service start date:</b>	<b>1<sup>st</sup> July 2024</b>	<b><u>Version 7.3</u></b>
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**Commissioner (Service Purchaser)**  
**Solihull MBC, Adult Social Care**

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## Service Overview

### 1. Introduction

- 1.1. Solihull Metropolitan Borough Council (The Council) has embarked on a programme to deliver its five-year plan for adult social care<sup>1</sup> to improve the experience for adults needing support.
- 1.2. The Council, in meeting various responsibilities under the Care Act 2014 and the Mental Capacity Act 2005, seeks to support residents to have the opportunity to access 'money management support' where residents lack capacity to manage their own financial affairs.
- 1.3. These services will predominantly support adults with learning disabilities or who are living with dementia or physical/sensory disabilities and/or mental health issues and who are known to Solihull adult social care teams.
- 1.4. The Money Management Service covers the provision of Department for Work and Pensions (DWP) appointee<sup>2</sup> and Property and Affairs deputy<sup>3</sup> for people ("Clients") without suitable family or friends to provide such support to ensure that their financial matters are maintained and protected to improve their health and wellbeing and promote independence.
- 1.5. This will include people living in their own homes, which could be a shared ownership property, rented accommodation, a supported living setting as well as people living in registered residential or nursing care.
- 1.6. The Provider will be required to comply with applicable legislation and regulatory requirements, including registration with the Department for Work and Pensions as a Corporate Acting Body plus any relevant new requirements during the contract period in relation to this support.
- 1.7. Learning together, sharing emerging ideas, including feedback from the people who use the service and adopting national practice recommendations will be vital to deliver the flexible and personalised money management support people need. As such, the Council requires the service to evolve over the duration of the contract to respond to and encompass good and emerging practice in the field.

### 2. Aim of the service

- 2.1. To provide good quality, trusted money management services to people who lack capacity to manage their own financial affairs, that supports the best interests of the person, enabling them to live within their means and be free from the risk of financial abuse.

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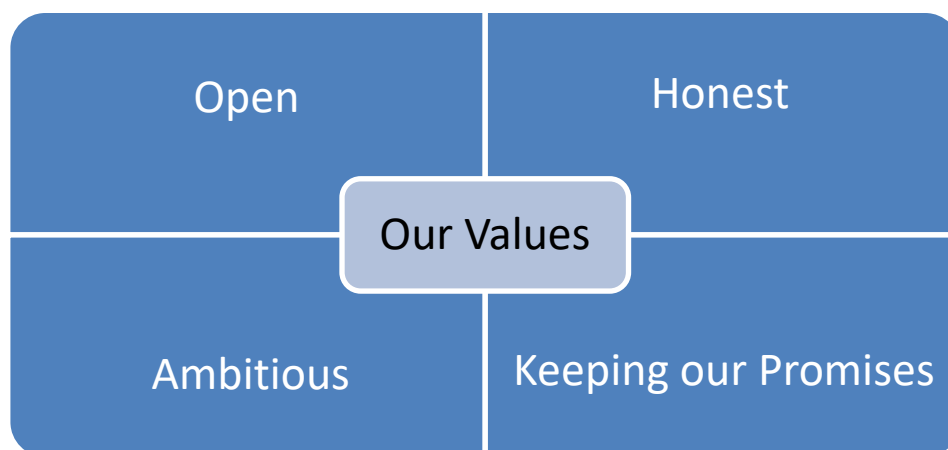
<sup>1</sup> [Adult Social Care 5-year plan 2022 to 2027 \(solihull.gov.uk\)](https://www.solihull.gov.uk/adult-social-care-5-year-plan-2022-to-2027)

<sup>2</sup> <https://www.gov.uk/become-appointee-for-someone-claiming-benefits>

<sup>3</sup> <https://www.gov.uk/become-deputy>

### 3. Values

- 3.1. The Money Management service aligns to the Council's Adult Social Care 5-Year Plan values:



- 3.2. Money management services should reflect the Council's values by facilitating or supporting people with financial support needs to make choices and decisions about their daily lives and activities along with providing clear information about options, responsibilities, and consequences.

### 4. Strengths based approach.

- 4.1. A key aim of the Care Act 2014 is to promote people's wellbeing and independence. Developing a strengths-based approach<sup>4</sup> is a key aspect of collaborative working between the person supported and the professional(s) supporting them, working together to establish and acknowledge the capacity, skills, knowledge, network, and potential of the person.
- 4.2. Lacking capacity to manage finances does not necessarily mean a person lacks capacity to make other decisions and to be involved in decisions about their lives. People should be supported to be as independent as possible and involved in making decisions about how their money is spent.
- 4.3. A person is defined as being unable to make decisions for themselves<sup>5</sup> if they are not able to undertake all of the following:
- Understand information given to them.
  - Retain that information long enough to be able to make a decision.
  - Weigh up the information available to make a decision.

<sup>4</sup> <https://www.solihull.gov.uk/sites/default/files/2021-09/Adult-Care-and-Support-Offer-to-you.pdf>

<sup>5</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/921428/Mental-capacity-act-code-of-practice.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/921428/Mental-capacity-act-code-of-practice.pdf)

- Communicate their decision by any possible means.
- 4.4. Any decision taken for a person who has been assessed to lack capacity must be made in their best interests. At all times, the Mental Capacity Act and its Code of Practice must be followed.

## **5. Co-production**

- 5.1. This specification is informed by people who use, or may wish to use, money management services and links to the ambitions of the Dementia Strategy<sup>6</sup>, All Age Exploitation Reduction Strategy<sup>7</sup>, and the Learning Disability<sup>8</sup> and Autism<sup>9</sup> strategic visions and other related initiatives.
- 5.2. On a practical level, the Provider should identify opportunities for the involvement of the people accessing the service (or their advocates and representative(s)) in any major changes or decisions affecting the service, such as the recruitment of staff.
- 5.3. The Provider must ensure people using the service have the means available to make their views known on aspects of the running of the service on a personal and collective basis, to have those views listened to and demonstrably taken account of, with access to independent advocacy if requested.
- 5.4. People should have confidence and assurance that they will not in any way be penalised for the expression of critical or constructive comment.
- 5.5. The Provider must provide an annual report to the Council on the results of its approach to co-production, identifying how people were involved and any actions taken and evidence of demonstrable improvements.

## **6. Population profile**

- 6.1. In 2022/23, 3,121 Solihull adults received long-term social care support. Two thirds of those were aged 65+ and a third 18-64. Of all those receiving long-term support, the breakdown of primary need was:
- Physical disability 54%
  - Learning Disability 24%
  - Mental Health 11%
  - Memory & Cognition 9%

The Solihull profile is similar to England, although more adults aged 18-64 have a Learning Disability as their primary need (54% vs 49%).

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<sup>6</sup>[Dementia Strategy 23-28 \(solihull.gov.uk\)](#)

<sup>7</sup>[Solihull All Age Exploitation Reduction Strategy 2023 - 2026](#)

<sup>8</sup>[Strategic Vision - Learning Difficulties and Disabilities 2023-28 \(solihull.gov.uk\)](#)

<sup>9</sup>[Strategic Vision - Autism 2023-28 \(solihull.gov.uk\)](#)

- 6.2. **Older people** Over the next 10 years the 65+ population in Solihull is projected to grow at 3 times the rate of younger age groups (12% compared to 4%). Older population growth over the next 10 years is most evident among those aged 75+ (+21%). There are projected to be 4,700 more Solihull residents aged 75+ by 2029, with dementia rates rising by 31% and those unable to manage a self-care activity by 29%.
- 6.3. **Learning disability** 52% of Solihull adults aged 18-64 receiving long-term social care support have a Learning Disability. As a proportion of the population this is above the England average (422 vs 395 per 100,000).
- 6.4. Between 2020 and 2040 the adult population aged 18-64 of people with a learning disability is expected to rise by 7.7% for Solihull. For adults over 65, improvements in health care mean that the population will be rising far faster at 24.5% over the same period, within that the numbers of people who are 85 years and older rising by 58.6%. This means we need to make sure there are the right services to meet the specific needs of an increasing elderly population.

## Service Description

7. **What does a good money management service look like?**
- 7.1. As part of our approach to co-production in developing this specification, we undertook research, market engagement and heard from people with lived experience of money management services and their advocates. This input has shaped the outcomes and quality standards for the service.
- 7.2. People told us they want to be:
- actively involved in the determination, review, and implementation of their personal finances, including knowing how much money they have.
  - able to access their money quickly.
  - listened to and that people who are unable to communicate their needs should be supported or enabled to protect their best interests.
  - treated with dignity and respect, be central to all decisions about their life and have their confidentiality and privacy respected.
  - asked if they are satisfied with the service and in particular, with the approach, qualities, and skills of their worker and/or advocate.
- 7.3. The Provider will support people to manage their own money in a way that enables the person to exercise choice, control, and an awareness of any consequences, to achieve identified outcomes.

## **8. The Service**

- 8.1. The Provider will ensure that adequate management arrangements and financial procedures are in place to ensure delivery of the service including, but not limited to training, professional supervision (where required), regular supervision for staff and volunteers, annual performance appraisals for all staff and adequate out-of-hours and/or lone working arrangements.
- 8.2. For the avoidance of doubt, the Provider will be acting on behalf of the people referred and not on behalf of the Council, in the provision of appointee and deputyship services.

The Money Management Service will comprise two parts:

### **8.3. Appointee**

- 8.3.1. To deliver an Appointee service in line with Department for Work and Pensions (DWP) guidelines to people referred by the Council who:
- need support in managing their personal benefits following a Mental Capacity Act 2005 assessment and,
  - When there is no suitable person within their family and friendship circle to assist them.
- 8.3.2. The Provider will apply to the DWP to act as appointee on behalf of the person to receive their DWP benefit entitlement and pay their necessary payments. The Provider will also support the person to budget their money and ensure that any spending money that they need is available within an agreed timeframe.
- 8.3.3. The Provider will invoice the Council for the agreed price for managing each appointee client.

### **8.4. Deputyship**

- 8.4.1. To apply to the Court of Protection (CoP) to be appointed as Property and Financial affairs deputy for people signposted by the Council, or to request a Panel deputy.
- 8.4.2. The deputy will be acting on behalf of the person, not on behalf of the Council and as such, will comply with the relevant legislation and guidance on deputyship, including arranging for appropriate insurance and bonds to protect the person's assets and recovery of applicable fees to be charged to the person's estate for acting as deputy.
- 8.4.3. For clarity, the Council will not incur any charges for deputy clients.

## **9. Mental Capacity Act 2005 and managing risk.**

- 9.1. The Provider will work with adult social care, care providers, Department for Work and Pensions, the Court of Protection and Office of the Public Guardian



to ensure people maintain an appropriate level of independence and build confidence in managing their financial affairs.

- 9.2. The Provider's Best Interest approach will be in accordance with current statutory guidance, appropriate adult safeguarding multi-agency policies and procedures and the Mental Capacity Act (MCA) 2005.
- 9.3. The Provider will ensure all appropriate staff have suitable and regular training on MCA and Best Interest decision making.
- 9.4. Records of best interest decisions should be kept as evidence of the decision-making process and be shared with the Council, when requested or required.
- 9.5. The Provider will recognise the person's right to take risks to extend opportunities and independence and will ensure that people are able to choose the risks they want to take and be given support to understand the full implications of their choices.
- 9.6. People will be assisted to understand the possible consequences for themselves and others of their choices, be supported to take responsibility for their actions and record any decisions.
- 9.7. People will have access to an advocate if requested.

## **10. Advocacy**

- 10.1. The Provider will arrange for access to independent professional advocacy for people who would benefit from such support. This will be via the Social Work Team who can access the Council's commissioned Advocacy Service.

## **11. Outcomes**

- 11.1. An outcome typically identifies what is expected or what has changed and can be applied at a strategic, service, and personal level. For the purpose of this specification, the outcomes are at a personal level and will be monitored to show the results, changes or benefits a person experience as a result of the support they have received.
- 11.2. For money management services specifically, Care Act outcomes reflect the Council's strengths-based approach, i.e., building on the capacity of a person to engage and benefit from activities that:
  - encourage engagement in making financial decisions.
  - maintain and enhance a sense of dignity and self-esteem.
- 11.3. For each Care Act outcome, outcome indicators which function as measures for evidencing the outcomes are being delivered have been developed as "I" statements.

Outcome 1: Promoting wellbeing

Outcome 2: Promoting independence

Outcome 3: Promoting Dignity and Respect

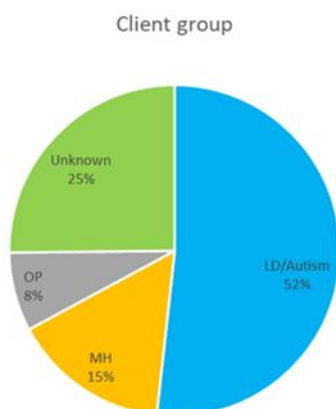
- 11.4. Full details of the outcomes, outcome indicators, measures and targets are included in the Performance and Contract Management section.
- 11.5. The Provider will evidence as part of the quality assurance process how outcomes have been developed, measured, progressed, and met for each person.
- 11.6. Each person and/or representative will be involved in reporting on and evaluating their own experiences in a way that is meaningful to them.
- 11.7. In defining the outcomes, the Council is informing the Provider *what* money management services must deliver, but not *how* they should deliver it. The Provider is expected to work within the scope of the legislative frameworks and guidance, recognising the uniqueness of people and flexibility of thought and action that is required to support them.

## **12. Demand**

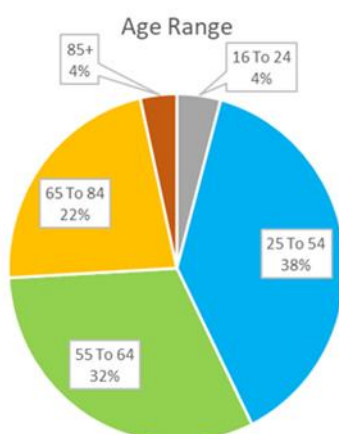
### **Current demand**

- 12.1 As of February 2024, there are 124 appointeeships in place for people supported by the Council and 23 deputyships. Final numbers are subject to review and people starting and leaving services and therefore may change before the contract is awarded.
- 12.2 Total assets (balance sheet) as of February 2024 being managed for the people currently in receipt of support are approximately:
  - Appointee £2,900,000
  - Deputy £645,000
- 12.3 The people requiring an Appointee/Deputy are people with disabilities, mental health issues and older people. Currently, people with a learning disability, autism or both are the largest client group as shown in the chart below. Some of these will also be older people but have been counted only

once for the purpose of this analysis. The category type is unknown in 25% of the cases.



- 12.4 **Age range.** 58% of people are over the age of 55. The census shows a growing older population, which with improvements in health and longevity for people living with learning disabilities and autism, will mean there is potentially increasing need for appointee and deputy support.



- 12.5 **Gender.** People are predominantly male (62%) with almost twice as many males as females in the 25-54 age bracket. This is not representative of the population overall; closer analysis shows more females in the older people cohort and more males in the LD cohort.
- 12.6 **Ethnicity.** The diversity of the population and minority communities is changing in Solihull. Language and culturally appropriate services are likely to be a growing area in the future and provision will be needed to reflect this. However, the current client profile is 92% White British, which is not in line with the Solihull population profile. The reasons for this are not clear and future Council plans should include engagement with minority groups to understand need and accessibility.
- 12.7 **Future demand** – subject to the population changes identified in section 6:

**12.7.1 Community Appointees:** It is anticipated up to 4 net new cases per annum in future.

**12.7.2 Residential Appointee:** It is anticipated up to 6 net new cases per annum in future years.

**12.7.3 Deputy:** It is anticipated up to five net new cases per annum in future years.

## Service Model

### 13. Eligibility

13.1 Eligibility will be established as a result of an assessment by the Solihull adult social care team.

People will be:

- aged 18 and over living with learning disability, physical and sensory impairment, dementia, and mental health issues.
- living in their own homes in the community or.
- living in hostels, residential homes, nursing homes, supported living units/apartments including community accommodation with care/extra care housing.
- residing within the Solihull Metropolitan Borough Council boundary or placed by the Council in accommodation described above in another locality
- assessed as lacking capacity to manage their financial affairs.

13.2 The Provider will offer a single point of access for referrals to be made by Council staff. Referrals will include the person's details, service needed, and outcomes required.

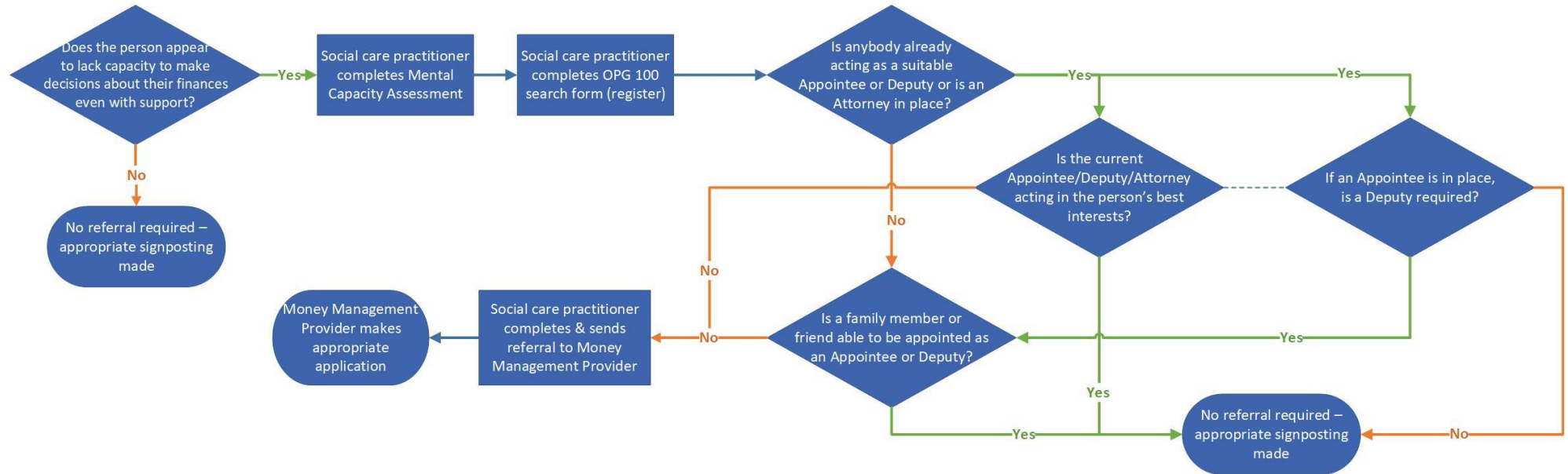
13.3 The Provider must ensure referrals are eligible and that need and desired outcomes have been identified before commencing support.

13.4 Access to the service is restricted for eligible individuals only. Should a person or their family wish to enter into a private arrangement with the Provider for this service or additional services offered by the Provider beyond those covered by this specification, the Provider will be responsible for the terms and conditions. The Provider will also be responsible for making appropriate financial arrangements with such a person and will provide general information to SMBC about how such arrangements are made.

13.5 Where a person does not meet the criteria or would benefit from an alternative service, the Provider will inform the referring practitioner.

## 14. Referral pathway

### Money Management Service Referral Pathway



## **15. Accessibility**

- 15.1 Money Management Services should be inclusive and accessible to people with a range of needs, including preferred and appropriate communication methods and formats, language, and cultural needs.
- 15.2 Services will be available Monday to Friday each week during normal office hours, for 52 weeks of the year (excluding Statutory holidays) and at other times by arrangement with the person to facilitate service delivery.
- 15.3 Support may be delivered from a number of settings; these may include but not be restricted to:
- People in their own home
  - Care homes.
  - Day services
  - Hospitals
  - Other settings as appropriate
- 15.4 The Provider will ensure the service can be contacted during office hours by SMBC staff and people using the service and that all contacts (for example, by phone, email, messaging service) are acknowledged within two working days.
- 15.5 Use of technology and digital platforms should be encouraged to promote accessibility and inclusion.
- 15.6 Advocates should be provided to people who would benefit from such support.

## **16. Category of appointee support**

- 16.1 **Community appointee** – provided to people who live in their own homes and are therefore eligible for a wider range of benefits including Housing Benefit. People living in this setting also have a wider range of responsibility for day to day living costs such as groceries, utility costs and so forth. This will require more frequent contact with the person supported.
- 16.2 **Residential appointee** – provided to people living in residential or nursing care. This is a less complex arrangement in terms of managing benefit entitlement with people having a limited amount of disposable income each week. This is reflected in the level of support required.
- 16.3 Everyone's experience is different and money management support should be personalised and be responsive to changes in need.
- 16.4 **Appointee services – general (list is not exhaustive)**

- 16.4.1 In conjunction with other relevant parties the Provider will develop a support plan relating to money management for each person detailing the outcomes to be achieved and reviewed when circumstances change, or at least annually.
- 16.4.2 The Provider will act on behalf of the person to receive their benefit entitlement and make necessary payments. The Provider will also support the person to budget their money and ensure that any spending money that they need is available within an agreed time. Bills are paid and any surplus will be made available to them as appropriate within a reasonable time.
- 16.4.3 The Provider will provide financial support in relation to personal savings, benefits income and support monies to the person and shall include income support, housing benefit etc. (without limitation) and arrange access to independent financial advice if needed.
- 16.4.4 The Provider will work with the person to put into place a system for dealing with any debts and avoiding future debt.
- 16.4.5 The Provider will ensure excessive surpluses are not building and that savings thresholds are observed when claiming welfare benefits on behalf of the person.
- 16.4.6 The Provider will highlight and provide information on any potential safeguarding issues to relevant parties in accordance with the Council's Safeguarding Vulnerable Adults policy and Multi-Agency Safeguarding policy, procedures, and good practice guidelines.
- 16.4.7 It is expected that a direct relationship is developed between the appointee and the person, which will include in-person contact and visits.
- 16.4.8 Needs and capacity may change, and the least restrictive approach should always be taken.
- 16.5 The Provider will take into account the differing requirements of people who are either in living in the community or in a residential setting.

## 16.6 **Community Setting**

People receiving this service will either be living in a group setting with high level of support (e.g. Community Accommodation with Care) or could be a person living alone.

The Provider will (list is not exhaustive):

- maintain at a minimum, monthly contact with the person via telephone or face to face contact (note there should be a face-to-face contact with the person in their own home at least every 12 weeks as a minimum).
- provide systems to enable the person to receive their funds.

- monitor bank statements and check and verify all records and receipts on a regular basis.
- monitor expenditure and not allow additional requests outside of the agreed schedule without full and proper justification.
- authorise expenditure in line with the Standard Operating Procedure, undertaking appropriate enquiries and sign off.
- ensure that there is sufficient flexibility in meeting requests for additional funds. Such requests will be dealt with on a risk and priority basis, taking into account the circumstances and urgency of each individual request and best interest decisions e.g. is there evidence the person is being exploited or is being placed under influence?
- assist people who do not have a support worker with a range of additional tasks e.g. white good purchases, decorating, repairs when required doing so.
- manage multiple and complex payment arrangements, e.g. change of utility provider; shared house and utility bills (with non-Appointee residents)
- ensure that systems are in place to deal with on-going debt issues.
- act on behalf of the person in DWP reviews, appeals and tribunals, involving other parties for advice and representation if required.
- notify the DWP of any change in the person's circumstances.
- highlight and provide information on any potential safeguarding issues to relevant parties in accordance with the Provider's Safeguarding Vulnerable Adults policy and Solihull's Multi-Agency Safeguarding Policy, Procedures and Good Practice Guidelines
- be required to contribute to Safeguarding Procedures and attend safeguarding meetings when requested to do so. This may include assisting in the process of supporting people where financial abuse is suspected by either friends or relatives.
- ensure that the person's affairs are looked after during any frequent temporary stays away from home.

#### **16.7 Residential/nursing home**

This service is people who are living in residential settings (care or nursing homes).

The Provider will (list is not exhaustive):

- ensure funds are made available to the care home's account.



- undertake regular or spot checks on records and receipts held at the care home to ensure that the person's best interests are being met.
- ensure the person receives their available funds.
- notify the DWP of any change in the person's circumstances.
- work closely with the person to put into place a system for dealing with debts and finances.
- set up an appropriate repayment system where there have been significant debt problems and work with the person to clear their debts.
- monitor the person's finances and deal with any issues relating to fees (e.g., when the person's capital tips into self-funding).
- attend and participate at any meetings regarding Safeguarding issues.
- support the person to make Criminal injuries compensation claims if required.

## 16.8 Summary Service Elements – Appointee

The Provider shall provide the following for the people referred by the Council according to whether they live in residential care or in the community.

Service Level Schedules	Residential Care	Community
Claim, receive and manage all welfare benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Receive and manage all correspondence from benefit agencies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Ensure the person is in receipt of their maximum eligibility of Welfare Benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Transfer care and support contributions to the provider organisations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Make available personal funds to the person's	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Apply for Boarder payments for days spent at home	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Assist with the completion of forms for Fairer Charging Assessments	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Appeal decisions made by DWP that appear to be incorrect or not in the best interests of the person	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Carry out an annual benefit review	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Claim Housing and Council Tax Benefit		<input checked="" type="checkbox"/>
Correspond with the Local Authority and Landlord to ensure payment of Housing Benefit is made in a timely manner		<input checked="" type="checkbox"/>

Apply for any other relevant disability related funding and entitlements e.g. blue badge		<input checked="" type="checkbox"/>
Provide formal consultations per annum – minimum of one (1) face to face		<input checked="" type="checkbox"/>
Work with the person to devise a weekly budget		<input checked="" type="checkbox"/>
Support the person to open a bank account and provide support in the management of that account when changes are necessary		<input checked="" type="checkbox"/>
Manage correspondence and payment of both regular and one-off bills		<input checked="" type="checkbox"/>
Apply for deputyship if needed	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

## 17. Deputyship

- 17.1 If required, the Provider will assist in the setting up and transferring of affairs to a deputy. For appointee clients, this will take place if the person's circumstances change (inherit property or money for example).
- 17.2 The Provider will make the application to the Court of Protection for approval as deputy or for a panel deputy where those referred have large levels of saving or assets.
- 17.3 The Provider will comply with the relevant statutory and legal guidance as laid out by the Government and/or Court of Protection and/or Office of the Public Guardian.

## 18. Managing finances

- 18.1 The Provider will set expenditure limits on the prepaid cards for security and safeguarding purposes and undertake routine monitoring of the expenses associated with the account. Limits on expenditure are to be managed in line with the Provider's own policies and procedures.
- 18.2 The Provider will maintain accurate records for the financial affairs of each appointee and deputy client.

## 19. Dealing with Affairs of Deceased Persons

Upon becoming aware that a person is deceased, the Provider will:

- Notify Adult Social Care as soon as possible after a person dies.
- Cease making regular expense payments to the person (or their nominated representative).
- Contact any utility providers regarding payment and cessation of on-going standing orders or direct debits.
- Cease making financial contributions to the Local Authority; and pay off any final bills.

- Notify the DWP.
  - Arrange for any benefit payments made since the time of death to be repaid to the DWP.
- 19.1 For Deputyships the cost of this work is to be billed to the person's estate and the deceased person is to be removed from the scheme with immediate effect.
- 19.2 For Appointee cases the Council will continue to pay the Service Provider until work is concluded.

## **20. Case records and files**

- 20.1 The Provider will have in place appropriate information technology systems for managing the service, including financial records and case management records for each person.
- 20.2 The policies and procedures will detail the standards for recording personal information, internal audit and quality monitoring, storage, archiving and destruction.
- 20.3 The data will be made available to DWP, Court of Protection and Office of the Public Guardian on request.

## **21. Recruitment and Training**

- 21.1 The Provider's recruitment and selection procedure should be based on the principles and obligations of the 'Better Hiring Toolkit'. Where agency staff are used the Provider should ensure that the employing agency have used principles of the 'Better Hiring Toolkit'. Through this the Provider shall ensure the protection of vulnerable people and meet the terms of the contract.
- 21.2 The Provider will have a Staff Code of Conduct or policies which specify the standards expected of staff when on duty.
- 21.3 The Provider will provide a staff training and development programme, including refresher training to ensure all staff deliver a personalised service consistent with statutory obligations, guidance, and best practice.
- 21.4 The Provider will ensure that all staff have the necessary training, competencies, personal qualities, and caring attitudes to enable them to build and maintain effective and trusting relationships with people including with people with learning disabilities or dementia.
- 21.5 Staff training shall be specifically targeted to the needs of the client group. These are likely to include but not limited to:
- Assessing ongoing capacity to manage money.
  - Making best interest decisions

- An understanding of and ability to work with people with learning disabilities, with mental ill health, who are neuro-diverse and with autistic people and people affected by dementia.
  - An understanding of and ability to work in a person-centred way.
  - The ability to use a wide range of communication techniques.
  - The management of people who can become distressed and need support to regulate emotions.
  - An understanding of the emotional needs of people who may be using the service and how they wish to spend their money.
  - The need to maintain the highest standards of care, courtesy, and consideration.
  - The need to carry out duties in a respectful manner.
- 21.6 Where staff are required to support people with specific needs, they will have additional training to enable them to competently support that individual.
- 21.7 The Provider's induction and basic training programmes will be submitted to the Council on request.
- 21.8 Evidence of training practice supervision/monitoring must be made available to the Council as part of performance management.
- 21.9 Training requirements are not exhaustive, and it is the Provider's responsibility to recruit and retain a workforce with skills to meet the needs of people who require support.

## Quality and Safeguarding

### 22. Quality

- 22.1 The Provider will demonstrate a clear approach to quality management and financial governance in relation to the delivery of the service. This will be evidenced through the implementation of a quality assurance system.
- 22.2 Quality issues may be identified through a variety of means including but not exclusively:
- findings following a Quality Audit or visit, and/or Contract Review
  - complaints, whistle blow, provider activities or concerns from partner agencies
  - failure to meet the outcomes of the service.
  - identification of serious contract default including significant financial irregularities.

- Complaints to the DWP
- Office for the Public Guardian

## **23. Quality standards**

23.1 The following quality standards are applicable to the Money Management service.

- I am listened to and communicated with in a way that I can understand or respond to
- I have a service delivered in line with my expressed needs, wishes and preferences.
- I know how to complain if I am not happy with the support I receive.
- My spiritual, cultural, and religious needs are met.
- My expectations are managed fairly.
- I am satisfied with the service and the approach of my worker and/or advocate.

## **24. Complaints**

24.1 The Provider shall observe and comply with Schedule 5 of the Terms and Conditions for the service.

24.2 Complaints relating to deputy provision should be directed to the appropriate regulatory body.

## **25. Regulation**

25.1 The Provider is required to adhere to relevant regulation set out by the Government, Department for Work and Pensions, Court of Protection and Office of the Public Guardian. For the Appointee Service the Service Provider will be registered with the DWP as a Corporate Acting Body (CAB) and will supply their registration details including their registration number to the Council as well as advising the name of the person in the organisation who holds the delegated authority to provide the appointee services.

## **26. Safeguarding**

26.1 The Provider shall ensure that they abide by the policies and procedures developed and agreed by the Safeguarding Adults Board in Solihull and Safeguarding Adults Multi-Agency Policy and Procedures for the West Midlands.

26.2 The Provider must be able to meet the specified timescales within the statutory services to prioritise and respond timely to any requests relating to adult safeguarding.

## Performance and Contract management

### **27. Performance management approach**

- 27.1 The Council and Provider will review performance and assess the quality and contract performance of the service being delivered.
- 27.2 The Specification will be reviewed, initially 6 months after the start date of the service and then at least annually, by representatives of the Provider and the Council to ensure the effective operation of the service in achieving the outcomes required and relevance to the strategic objectives of the Council.
- 27.3 This review will be informed by:
- an analysis of performance information
  - achievement of the measures
  - the nature and outcome of all complaints, compliments, and comments.
- 27.4 The Provider shall assist the Council in monitoring and review of the services by:
- i. Giving the Council access to relevant records and staff for the purpose of audit if required.
  - ii. Co-operating with the Council's Commissioning Team in order to enable them to effectively monitor the quality-of-service provision.
  - iii. Responding to periodic requests for information around delivery against particular outcome requirements of the specification as outlined in the Outcomes Framework.
  - iv. Sharing results of any surveys/engagement/feedback sessions with Commissioners.
  - v. Participating in regular and ad hoc meetings arranged by the Council.
  - vi. Completing any action plans developed to support service improvements.
  - vii. Complying with any action(s) required by the Council following receipt of evidence of under performance of the Contract.
  - viii. Alerting the Council to any issues or findings following visits or inspections from the DWP or OPG.
  - ix. Providing any other information requested by the Council's Commissioning Team.
- 27.5 On an annual basis, the Provider will return the following information to the Council:
- Evidence that outcomes are being met.

- Results of any customer surveys
  - Complaints and outcomes of those complaints.
  - Number and nature of safeguarding concerns raised and outcome.
- 27.6 The Provider will be required to respond to any other performance and quality data and information requests, including any quarterly monitoring requests.
- 27.7 The Provider will notify the Council immediately of any key local/ branch management changes concerned in the management of this contract e.g., resignations etc.

## 28. Outcomes framework

- 28.1 The purpose of the outcome's framework is to support continuous improvement and to inform good practice in achieving the aims of the service.
- 28.2 On an annual basis, data should be aggregated against the outcome indicators to demonstrate achievement against the targets and a short report be submitted to the Council as part of performance review.
- 28.3 Where targets are not met, an explanation and remedial action plan should be presented to the Council.
- 28.4 Aim of the service: To provide good quality, trusted money management services to people who lack capacity to manage their own financial affairs that supports the best interests of the person, enabling them to live within their means and be free from the risk of financial abuse.
- 28.5 We will know the aim is being met when people agree with the following statement: *I receive good quality money management support that enables me to maintain my independence and be free from the risk of financial abuse.*

Outcome 1: Promoting wellbeing	
<b>Outcome indicator</b> <ul style="list-style-type: none"> <li>• I have less stress related to conducting financial matters.</li> <li>• The service takes into account my individual personality, lifestyle, interests, physical and mental health needs</li> </ul>	
<b>Evidence/measure</b> Financial support plan/case file Annual survey Case studies Safeguarding reports Complaints	<b>Key performance indicator</b> 1. People have a financial plan which identifies income and expenditure. Target: 100% 2. Initial contact to be made with the person within 5 working days of the referral being made. Target: 95% of people referred

<b>Outcome 2: Promoting independence</b>	
<b>Outcome indicators</b> <ul style="list-style-type: none"> <li>• I have choice and control over my finances, wherever possible</li> <li>• I am supported to be independent and plan for key changes.</li> <li>• I am supported to manage risks positively</li> </ul>	
<b>Evidence/measure</b> Financial support plan/case file Annual survey Case studies Safeguarding reports Complaints	<b>Key performance indicator</b> 1. People have a financial plan which identifies income and expenditure. Target: 100% 2. Satisfaction with service. Target: 95%
<b>Outcome 3: Promoting dignity and respect</b>	
<b>Outcome indicators</b> <ul style="list-style-type: none"> <li>• I am treated with dignity and respect.</li> <li>• I am free from discrimination, harassment, and abuse.</li> <li>• The service takes into account my age, gender, ethnicity, language, religion, culture, and sexuality.</li> </ul>	
<b>Evidence/measure</b> Financial support plan/case file Annual survey Case studies Safeguarding reports Complaints	<b>Key performance indicator</b> 1. People have a financial plan which identifies income and expenditure. Target: 100% 2. Satisfaction with service. Target: 95%

## **29. Contract Management**

29.1 The Council will regularly monitor service delivery including through contract monitoring meetings to ensure compliance with the Service Specification and Contract Terms and Conditions and the Schedules to assess the contract performance of the service being delivered to people. This will include:

- number supported as a Council supported appointee.
  - breakdown of the above figures based on age, gender, ethnicity, and client group – (people with a physical disability, people with a learning disability, people under 65, people over 65, people with mental health needs.)



- breakdown of number of people who live within the community (includes housing with care or supported living schemes) and number of people living in residential /nursing homes.
- balance of funds held for each person.
- number of self-funding appointees
- number supported as a deputy.
- number requested for allocation of Court of Protection Panel Deputy
- numbers accessing independent advocacy support.
- approach to co-production.
- staffing, recruitment, training, and supervision
- leadership and management
- people's experience and care planning
- environment
- quality and outcomes
- risk, issues, contingency plans.
- billing/invoicing
- accounts for the most recent completed financial year (audited if required by law)
- insurance Schedules and Certificates
- Business Continuity Plan
- Cyber Essentials Basic Certificate
- delivery of Social Value

### 30. Provider tasks

<b>Community appointee</b>
Advise the Council's Finance Department of appointee application/status.
Application for bank account if applicable.
Complete and submit to DWP, the BF56 Application to act as Appointee
Contact previous Appointee & arrange resignation letter - where appropriate.
Liaise with Social Services - as appropriate during set up period only.
Meeting with person / family members (if appropriate).
Set up payment arrangements for necessary payments.
Standard Introduction Letter to Care Provider/Family.
Transfer spending allowance into person's own account, if applicable

Carry out all roles and responsibilities required of an Appointee as required by DWP.
Encourage the person to make a will (if appropriate).
Checking accommodation-based records of individual's expenditure at pre-agreed intervals.
Application for citizen no 2 account (incl. pin and debit card) where appropriate
Complete bank reconciliations on receipt of statements / pass books
Monitor no 2 account and notify the Council of any concerns.
Provide input to visits from Financial Assessments / new disability spend review process
Pay approved invoices
Safeguard people by monitoring expenditure and reporting concerns to the Care Manager / Duty Team.
Minimum monthly contact with person (home, office or other)
Participation and attendance at Safeguarding meetings
Frequent contact (up to weekly) with Care Managers and other Stakeholders.
Ongoing contact with relatives if appropriate.
Administer ILF if appropriate
Apply for Community Care Grant/Social fund
Contact/Liaise with Solicitors
Deal with Housing Improvement Grant applications
Deal with any issues relating to care fees, including arranging reimbursement to the Council where the Council has paid care fees during periods of no access to funds
Tasks relating to ending tenancy including arranging for a property to be cleared; obtaining final meter reads for utilities final accounts
Dealing with complex and non-routine / payment queries e.g. BT Sky TV etc or person instigated changes of utility provider.
Referral to Court of Protection activity - i.e. Deputyship
<b>Residential appointee</b>
Liaise with Social Services – for initial set up only
Application for bank account as appropriate.
Complete and submit to DWP, the BF56 Application to act as Appointee
Meeting with person / family members/advocate (if appropriate)
Contact previous Appointee & arrange resignation letter - where appropriate
Advise the Council Finance Department of appointee application/status.
Set up Standing Order for Care Home fees
Set up Standing Order for person's money into Home's account
Standard Introduction Letter to Care Provider / Family
Complete bank reconciliations on receipt of statements / pass books
Receive regular statements from Home re: person's expenditure

Annual amendment of fee payments (mid-April)
Carry out all roles and responsibilities required of an Appointee as required by DWP.
Encourage the person to make a will if appropriate
Checking accommodation-based records of person's expenditure (at agreed intervals or spot checks)
Contact with Social Workers and other staff
Develop and maintain a working relationship with person & carers
Ensure people have access to their money in a timely manner
Provide input to visits from Financial Assessments / new disability spend review process
Liaise with the Council's Financial Assessment Team if required
Have contact and meet the person as required to build a trusting relationship
Assess debts and arrange for repayments
Deal with any issues relating to care fees, including arranging reimbursement to the Council where the Council has paid the care fees during periods of no access to funds
Assist in transferring affairs to a solicitor (e.g. house sale)
Attend and participate in safeguarding meetings
Support financial aspects of moving to a community setting or alternative care home.
Setting-up expense/delivery procedures at new address
Other activities (e.g. supporting Criminal Injuries claim; liaising with solicitor over inheritance etc)
Referral to Court of protection activity - i.e. Deputyship

<b>Dealing with a Death (Person with insufficient funds)</b>
Register death / support whoever is registering.
Notify the Council Finance Department of person's death.
Liaise with Hospital Bereavement Services
Liaise with relatives where appropriate
Notify Bank and cancel standing orders / direct debits
Notify relevant benefit agencies / dept's
Pay balance of estate to beneficiaries/or Crown Treasury as appropriate
Complete Form BV1a -Crown Treasury Form (Information about deceased) where applicable
Payment of any outstanding debts where funds permit
Payment of Funeral Costs (first legal obligation of estate)
Send indemnity forms to beneficiaries.

Transfer any cash to bank
If a suitable next of kin is identified – transfer duties.

## Legislation, Relevant Regulations and Guidance

31. The Provider must deliver a service consistent with current legislation, including any general and specific change in law and relevant regulations and guidance including, but not restricted to:

### 31.1 Acts of Parliament

- Care Act 2014
- Public Services (Social Value) Act 2012
- Equality Act 2010
- Mental Health Act 2007
- Mental Capacity Act 2005 and Mental Capacity (Amendment) Act (2019)
- Human Rights Act 1998
- The Disability Discrimination Act 2005
- Safeguarding Vulnerable Groups Act 2006

### 31.2 National regulations and guidance

- Care and Support Statutory Guidance
- Living Well with Dementia: A National Dementia Strategy 2009
- Transforming Care 2015
- Building the Right Support 2015
- The Adult Social Care Outcomes Framework (ASCOF)
- The National Disability Strategy 2021
- The Court of Protection Rules 2007
- Office of the Public Guardian Public Authority Standards
- Court of Protection Rules 2007
- Social Security (Claims and Payments) Regulations 1987

### 31.3 Local Policy Context and Strategic Priorities

The full list of policies and key documents for the Council's Adult Social Care can be found here <https://www.solihull.gov.uk/About-the-Council/policies-adult-social-care>