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(Office use only)

**Advance Care Planning seed fund**

**Application Form**

**2021/2022 financial year**

***Closing date: Friday 4th March at 12 noon***

******

**This application has two parts:**

**PART A: About your organisation & its governance and;**

**PART B: About your project and the costs**

**RESPONSIBLE OFFICER:**

**Corrina Grimes, Advance Care Planning Programme Lead**

**Email:** [***Corrina.grimes@hscni.net***](mailto:Corrina.grimes@hscni.net)

**Queries to Saika Akram Email *:***[***Saika.akram@hscni.net***](mailto:Saika.akram@hscni.net)

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**What is the purpose of the seed grant programme?**

The Public Health Agency has established a seed grant programme to support creative projects encouraging people to reflect on what is most important to them, and encourage conversations now, about their wishes for the future, which reflects the ambition of the Draft Advance care Planning Policy.

The funding is to be provided to assist the development of projects to inspire communities reflecting on their experiences during the pandemic and employ the arts, crafts and creativity to consider what steps they can take now to plan ahead. Individual projects might explore questions like: What adds quality to our lives? What might I want in the future, if I wasn’t able to make some decisions for myself?

The ambition is for people to find out more and normalise conversations about Advance Care Planning. Resources cannot be used to fund profit making initiatives or fundraisers. For details see <https://www.health-ni.gov.uk/what-advance-care-planning>

**Background**

The Minister of Health approved the development of an Advance Care Planning Policy for adults in Northern Ireland, which, was launched for Public Consultation in **Dec 2021 – 11 March** 2022 [**Consultation on the Draft Advance Care Planning Policy for Adults in Northern Ireland and Draft Equality Impact Assessment | Department of Health (health-ni.gov.uk)**](https://www.health-ni.gov.uk/consultations/consultation-draft-advance-care-planning-policy-adults-northern-ireland-and-draft-equality-impact)

The Seed grant comes just after the midpoint of a public consultation on a draft Advance Care Planning Policy, which provides a framework for adults (aged 18 years and over), to have greater choice and control over decisions relating to personal, legal, clinical, and financial matters, from creating a will to organ donation. Local and International research studies, and Phase I and Phase II engagement on the draft policy has identified the need to increase understand and opportunities for Advance Care Planning within communities [doh-advance-care-plan-policy-adults-report\_0.pdf (health-ni.gov.uk)](https://www.health-ni.gov.uk/sites/default/files/publications/health/doh-advance-care-plan-policy-adults-report_0.pdf)

# Examples from other seed grant programmes;

Aligned with the Department’s consultation on Advance Care Planning this new initiative is informed by Irish Hospice Foundation’s Seeds programme which supports 27 awardees reflecting an eclectic range of work, practice, medium, approach, abilities, and age groups. Awardees created books, places to talk, performance and music. They included acute hospitals, residential care homes, nursing homes, secondary schools, community groups, migrating populations and:

[St Louis School](https://hospicefoundation.ie/our-supports-services/ihf-in-the-community/arts-and-creativity/seeds-grants-2022/) leading a multi-discipline art and musical project enabling the school community to come to terms with their collective pandemic experience, with an exhibition of artwork and a series of concerts.

Glass Maker [Michelle Collins](https://hospicefoundation.ie/arts-and-creativity/glass-leaves-christmas-tree/) invited her community to make Christmas tree decorations as memorials to loved ones.

[‘Say It Feel It’](https://hospicefoundation.ie/our-supports-services/ihf-in-the-community/arts-and-creativity/seeds-grants-2021/say-it-feel-it/) podcast was created by Chris Hayes. He wanted to give voice to those grieving and dying who could not have loved ones close.

Shoyna O’Gorman and the ladies of Newport Women’s Shed are creating a patchwork [quilt of loss](https://hospicefoundation.ie/our-supports-services/ihf-in-the-community/arts-and-creativity/seeds-grants-2022/patchwork-quilt/).

# Key Dates:

|  |  |
| --- | --- |
| **Thursday 17 February** | Application process opens |
| **Friday 4th March at 12 noon** | Application process closes |
| **Monday 14th March** | Successful applicants announced**.** All applicants notified. |
| **Week of 21st March** | Bespoke support. |

# How much is funding available?

Fifteen seed grants of up to £2,000 each are available

# Objectives of Seed funding

* To encourage proposals from community groups across NI
* Use creativity to engage communities with Advance Care Planning ambition
* Participate in peer network session
* Participate in one to one bespoke mentoring session
* Develop and submit a refined proposal and project plan for delivery

# What is expected from the Successful applicants?

* Submit initial proposal
* Engage in group session – Peer network session
* Attend one to one bespoke seed grant mentoring meeting
* Partake in media interview
* Agree to revise proposal and project plan for submission **28th March 2022**

# Who is eligibility to apply?

**Eligibility Criteria**

In order to be eligible for this funding, your organisation must clearly demonstrate that the organisation is able to meet the objectives in and have been evaluated as a priority to fund.

All organisations evaluated as a priority to fund must be able to provide or submit the following information before any Contract will be issued, should your application be successful.

* The bank account details which must be in the name of the organisation and include sort code and bank account number.
* Confirmation that there are at least two unrelated authorised cheque signatories.
* That the organisation has robust management and financial control procedures in place to administer public funds as set out in question 6a of the application form.
* A copy of the governing document of the organisation e.g. memorandum/articles of association, constitution or set of rules defining the aim, objectives and operational procedures for your organisation. **These must** **signed and dated as adopted;**
* A copy of the organisation’s most recent **signed** audited/unaudited annual accounts (or, for new groups, a statement of income and expenditure which are **signed** by an office holder or auditor).
* A list of current committee members/trustees/directors indicating if they represent other organisations or if they serve in an individual capacity.

If you do not currently have these documents/policies, they must be in place prior to any contract being issued.

# What are the exclusions?

Please note we **will not** fund:

* General running costs which are not related to the specific project for which funding is sought;
* Applications from individuals but collaborations with existing organisations will be considered ;
* Endowments;
* Loan payments;
* Activities promoting political beliefs;
* Activities promoting religious beliefs, this does not preclude Faith Community Groups applying for activities related to the aims of the scheme;
* Costs already incurred (retrospective funding);
* Donations (to individuals, groups or charities);
* Fundraising events or activities;
* Building programmes;
* Affiliation or membership fees; and,
* Unreasonable costs.

The PHA is keen to develop new and innovative projects and as such organisations already in receipt of an award cannot apply for additional funding for the same project.

# How will the application be accessed?

**Assessment Criteria**

Resources cannot be used to fund profit making initiatives or fundraisers.

The focus is raising awareness, generating conversations

Weightings

Is the application form complete? Incomplete forms are dismissed

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PROJECT TITLE** |  | | | |
|  | No | A little | A lot | Comments |
| Does the project relate to the core practice of the organisation |  |  |  |  |
| Is the project built from expertise? |  |  |  |  |
| Or experience |  |  |  |  |
| Is it deliverable to completion during the time frame by this group? |  |  |  |  |
| Or will it move a significant initiative along? |  |  |  |  |
| Could the project contribute to efforts to raise understanding of or tell the story of the importance of advance care planning? |  |  |  |  |
| Does it support us: to examine or explore some little visited aspect of advance care planning? |  |  |  |  |
| Does the project indicate creativity or originality |  |  |  |  |
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| **Scoring Mechanism:** |
| Each project is scored a mark out of 3. |
| 3 = excellent. 2 = possible. 1 = no. |
| Highest are carried forward for awarding or discussion. |

Should more applications be carried forward that resources are available a secondary filter will be applied to ensure the successful grantees offer a diversity of approach, location and ambition.

# Getting helping and support

The Advance Care Planning Programme is committed to making information as accessible and equitable as possible and to promoting positive and meaningful dialogue with local people.

An application form and guidance can also be requested with Sign Language Interpreting Service or spoken Language Interpreting Services.

**ISL / BSL**

There is a is a free remote interpreting service available in British Sign Language (BSL) and Irish Sign Language (ISL) in Northern Ireland, [via SignVideo(external link opens in a new window / tab)](https://signvideo.co.uk/hscni/) (previously InterpreterNow)

**Spoken Language Interpreting Services**

There is a free remote interpreting service available for those who wish to engage in a language other than English.

To access these services or make any other accessibility arrangements please contact the dedicated Patient Client Council number **02895 368542** and they will arrange for an interpreter to join the call or provide any other assistance.

**RESPONSIBLE OFFICER:**

**Corrina Grimes, Advance Care Planning Programme Lead**

**Email:** [***Corrina.grimes@hscni.net***](mailto:Corrina.grimes@hscni.net)

***Queries to:*** [***Saika.akram@hscni.net***](mailto:Saika.akram@hscni.net)

The deadline for applications for Seed Grants is **Friday 4th March 2022 at 12 noon**

# Application Form

**Application from PART A: ABOUT YOUR ORGANISATION AND ITS GOVERNANCE**

Please refer to the guidance notes while you complete this form. Answer each question in the box provided (any information disclosed will be treated in confidence). You may use additional paper if required but you must stay within the word limit, where this is indicated. Please write clearly in black ink or type.

INFORMATION ABOUT YOUR ORGANISATION

***Question 1***

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Name of your

Organisation:

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| --- |
|  |

Contact address,

including full postcode:

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If your organisation is a limited company please provide registered name and full address if different from above:

|  |
| --- |
| Mr/Ms/Mrs/Miss/Dr/Other: |

Name of main contact for your organisation :

|  |
| --- |
|  |

Address if different

from above:

|  |
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|  |

Position held in

organisation:

Phone: Daytime Fax No

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|  |

E-mail address:

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Please tell us if you

have any particular

communication needs:

***Question 2***

When was your organisation set up?

Year

***Question 3***

What type of organisation/group are you?

A Social Enterprise Organisation

Unregistered charity, club, society or association, community based group or organisation

Organisation recognised by HM Revenue & Customs (previously known as Inland Revenue) as charitable for tax purposes

Charity Registered with Charity Commission in NI

Charity registered in England or Scotland (OSCR) or Wales

Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Registered Charity Number and date of registration: |  |
| Company Limited by Guarantee Number and date of registration: |  |
| VAT registration number if applicable |  |

***Question 4***

How many people are involved in running your organisation?

Committee and/or Board Volunteers (unpaid)

members

Paid staff: Full time Paid staff: Part time

***Question 5***

Briefly describe the main aims and activities of your organisation? (Maximum word limit 250).

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**Question 6**

Your organisation must have the following financial controls in place. If you do not currently have these policies they must be in place prior to any contract being issued

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| --- | --- | --- |
| Financial Controls | Yes | No |
| A written policy on cash handling arrangements |  |  |
| A written policy on banking arrangements |  |  |
| A written policy on purchasing goods and services |  |  |
| A written policy on delegated authority |  |  |
| A written policy on how to report and respond to a suspected fraud within the organisation |  |  |
| A written policy on segregation of duties i.e. where no one person can order, receive and pay for goods and services |  |  |
| A written policy on travel and subsistence expenses |  |  |
| Systems for regular bank and cash reconciliation |  |  |
| A systems for recording income and expenditure transactions |  |  |
| That cheque books and receipts are held in a safe/cash box to which access is strictly controlled |  |  |
| Necessary insurance cover for public liability, employer liability, property/contents – where applicable |  |  |
| Have all of the above systems been approved by the management committee? |  |  |

Are all of the above regularly reviewed? Yes No

How often are they reviewed eg quarterly/annually? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If your organisation has a computer do you have IT security procedures eg, regular backups, password protection?

Yes No: Not Applicable

**PART B: ABOUT YOUR PROJECT AND THE COSTS**

Please refer to the guidance notes while you complete this form.

Answer each question in the box provided (any information disclosed will be treated in confidence). You may use additional paper if required but you must stay within the word limit, where this is indicated. Please write clearly in black ink or type.

***Question 7***

|  |
| --- |
|  |

Name of Project:

How much is your organisation applying for from this funding?

***Question 8***

1) Will you be able to attend bespoke support to develop your initial idea by the end of March 2022

Yes No

2) Will you be able to attend the peer support to enable your project to be delivered in the week of 21 March 2022.

Yes No

3) Do you give permission for your idea and project to be featured in a short video(s)?

Yes No

4) Will you be able to develop and deliver your proposal in 2022?

Yes No

***Question 9***

What is the Project location and geographical coverage? (please complete all 3 boxes if project is targeting a specific ward(s))

Local Commissioning Group / Trust Area

Local District Council Area(s)

|  |
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***Question 10***

Briefly describe your project for which you are seeking funding, what do you want to achieve. Please specify how your project will meet the objectives and standards of the funding scheme as detailed in the Guidance Notes. (word limit 450)

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FINANCIAL INFORMATION ABOUT YOUR ORGANISATION AND PROJECT

***Question 11***

Has your organisation applied to any other agency for funding in relation to this proposal. Yes No

If yes, please provide details of the organisation, amount sought and the status of your application i.e. funding secured – letter of offer received, application being processed, application to be made or contribution will be in kind.

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***Question 12***

Please provide a detailed breakdown of all costs you are seeking funding for using the following pro forma. Please ensure that you also provide a breakdown and rationale for each of the costs. This proforma will be used to determine your award criteria score for costs.

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| Programme costs (detail) | £ | Rationale for costing |
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**REFEREE**

Please tell us about someone who can tell us more about your organisation and its work. This person should be independent of your organisation i.e. should not be a member, trustee, beneficiary or a relation.

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Name

|  |
| --- |
|  |

Occupation

Contact address, including full postcode

|  |
| --- |
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|  |

Phone: Daytime Evening

This person must be willing to be contacted and know this organisation and its work and if necessary provide written confirmation of support for this application if successful.

This application must be signed by two authorised signatories, one of which should be the Chairperson, Chief Executive/or most senior staff member.

**DECLARATION**

All the information given is correct and complete. Please sign below

|  |  |
| --- | --- |
| Signed: | Signed: |
| Print Name: | Print Name: |
| Position: | Position: |
| Date: | Date: |

The information on this form may be made available to other government departments/agencies/other funding organisations for the purpose of the prevention of double funding or other irregularities and in the interest of public accountability.

**Checklist:**

1. Check that you have fully answered all the questions and supplied all the relevant information. The PHA reserves the right to reject any application that is incomplete.

2. All organisations evaluated as a priority to fund must be able to provide or submit the following information before any Contract will be issued, should your application be successful.

The bank account details which must be in the name of the organisation and include sort code and bank account number.

Confirmation that there are at least two unrelated authorised cheque signatories.

That the organisation has robust management and financial control procedures in place to administer public funds as set out in question 6a of the application form.

A copy of the governing document of the organisation e.g. memorandum/articles of association, constitution or set of rules defining the aim, objectives and operational procedures for your organisation. These must signed and dated as adopted;

A copy of the organisation’s most recent signed audited/unaudited annual accounts (or, for new groups, a statement of income and expenditure which are signed by an office holder or auditor).

A list of current committee members/trustees/directors indicating if they represent other organisations or if they serve in an individual capacity.

If you do not currently have these documents/policies, they must be in place prior to any contract being issued.

# Completed Application Forms

Completed Application Forms should be returned by Friday **4th March at 12noon.**

Please send your completed application to:

Email: [Saika.akram@hscni.net](mailto:Saika.akram@hscni.net)

Postal address: Saika Akram

Public Health Agency

4th Floor

12-22 Linenhall Street

Belfast

BT2 8BS

Please remember to keep a copy of this application for your own use.

# Guidance on Completing the Application Form

The application form is in two parts: Part A is about the Organisation, its governance, procedures and size (Questions 1 -6); PART B is about your project/proposal and the funding sought (Questions 7 onwards). **Part A** - Your organisation, its governance, procedures and size

|  |  |
| --- | --- |
| Question 1 | Information about your Organisation  Please provide the name in full of the organisation applying for the funding (including Ltd Company if appropriate). (Put any acronym [abbreviation] used for your organisation in brackets after the full name)  Contact Address  Please provide the contact details for the organisation. Ensure that the full postcode is included.  If your organisation is a limited company please provide the registered name and full address of the registered office.  Contact Person  Please provide the name of the main contact person in the organisation and address if different from above. This should be the person who will be responsible for the management of the proposed project and who will be most familiar with it. |
|  | *Questions 2 – 6 are intended to provide the funder with some history of your organisation including type of organisation and size* |
| Question 2 | How long has the applicant organisation/Group been established?  Please provide the year the organisation was constituted /set up. |
| Question 3 | Type of Group  Please refer to the categories detailed and indicate all those, which apply to your organisation:  A Social Enterprise Organisation  Unregistered charity, club, society or association, community based group or organisation;  Organisation recognised by HM Revenue & Customs as Charitable for tax purposes;  Charity registered with Charity Commission in NI.  Charity registered in England or Scotland or Wales;  Other (please specify)  or  Provide details on the registration of the organisation where applicable. |

|  |  |
| --- | --- |
| Question 4 | Scale of Organisation  Please provide the numbers of employees and volunteers in your Organisation. |
| Question 5 | Aims and activities of the organisation  Detail in no more than 250 words the main aims and activities of your organisation including the general services the organisation provides. Specific detail about the proposal for which you are seeking funding is requested in Question 10 of the application form. |
| *Questions 6 need to be answered fully. This provides the funder with assurance regarding your organisations management, governance and financial control practices and procedures.* | |
| Question 6 | Organisation Financial Controls and Policies/ Procedures  Please complete the financial controls checklist which outlines the necessary financial controls required to ensure the appropriate financial management of the project. You may have these requirements in a single financial procedures document. If you do not currently have these controls in place, they must be in place prior to any contract being issued. (See further guidance note regarding financial controls in Appendix B attached).  Please tell us how often you review these controls.  Please tell us about your IT security procedures if applicable. |

**PART B – About your Project & the Costs**

|  |  |
| --- | --- |
| *Question 7* | *Project Name*  Provide the name of the project to be funded. If there is no project name please give details about what you propose to spend the funding on i.e. the specific work area the funding will cover.  Please tell us how much you are applying for from this funding? |
| Question 8 | Start dates for the project  Projects must be able to deliver within the funding timeframe specified. |
| Question 9 | Project location and geographic coverage  The PHA is responsible for ensuring equity of access to services and therefore will need to understand where the services it funds are delivered. There are a number of geographic units which are routinely used in Health and Social Care. Northern Ireland is divided into 5 locality commissioning groups which are co-terminus with HSC Trust boundaries. It would be helpful if you could use these geographical units to locate the service and describe what population it is intended to serve.  State where the project is based and try to profile the area you will cover with the project as clearly as possible. Identify the Local Commissioning Group area(s) (Southern LCG, Northern LCG, Western LCG, Belfast LCG, South Eastern LCG), the district council area(s) and ward(s). NISRA website can help you to identify the locality profile, ward/district areas ([www.nisra.gov.uk](http://www.nisra.gov.uk) – *click into NISRA information areas, then click Neighbourhood stats NINIS*)-(See Appendix A - map). |
| Question 10 | Tell us about the project for which you are seeking funding for  Please remain within the word limit of 450, please summarise the project, clearly setting out how your project will meet the aims and objectives of the Grants Award Programme. |

|  |  |
| --- | --- |
| Question 11 | Is your organisation receiving funding or seeking funding from the PHA, Health and Social Care Board or Health and Social Care Trust(s)? Please detail this, including:  project title,  amount awarded  funding source  funding status- secured funding/awaiting confirmation |
| Question 12 | Breakdown of funding requested  It is important to breakdown the project costs. |
| Referee | Referee for your Project/Service  Please tell us about someone who can tell us more about your organisation and its work. This person should be independent of your organisation i.e. should not be a member, trustee, beneficiary or a relation. |
| Declaration | REMEMBER TO SIGN THE APPLICATION!  Two signatures are required from your organisation, one of which should be the Chairperson, Chief Executive or most senior staff member. The PHA reserves the right to reject any application that is incomplete. |

**Appendix A**

Map showing LCG boundaries

**

**Appendix B**

Internal Financial Controls

The following guidelines are intended to assist organisations that are in receipt of funding from the PHA.

All organisations must have robust systems of financial control in place i.e. proper procedures, controls, accounting records and supporting documentation in respect of funding provided by the PHA.

The organisation must have the following procedures in place before funding will be released and should include;

**Cash Handling**

An outline of how all income is receipted.

An outline of how the Petty Cash system is operated to include maximum limits, the procedure for increasing/decreasing floats, recoupment procedures and access to Petty Cash.

Procedures to ensure cash boxes, cheque books and other financial documents are kept in a safe place and that appropriate responsibility and restrictions are laid down for access to the keys to any safe.

A statement regarding regular cash lodgements i.e. lodgements shall be made in order to keep amounts of ‘cash in hand’ to a minimum.

A list of authorised cheque signatories should be maintained.

**Bank Account / Cash Book**

The organisation should have a bank account in the name of the organisation. Funding in respect of the project shall only be paid into the official bank account of the organisation.

The name and address of the Bank/Building Society or Post Office branch and name of account.

Details on the type of account, whether it attracts interest.

Balance/overdraft limits

Bank mandates must be formally approved by the Management Committee or Board.

Payments from the bank account in respect this project/funding shall be on the signature of two authorised signatories.

A statement of how, when and who shall complete the bank reconciliation, this will be countersigned by Treasurer/Secretary or Chairperson as evidence of review.

A procedure for dealing with cheques that are outstanding for a period of time.

A procedure for stopping, cancelling and reissuing cheques.

How the bank balance is monitored.

A cash book with details of all income received (including date, source and receipt number) and a summary of expenditure (including date, payee, nature and cheque/payment reference number) shall be maintained and reconciled to the bank statement on a monthly basis.

**Purchasing Procedures**

Organisations shall ensure that the procurement in relation to projects complies with the requirements for quotations and tendering stipulated in guidelines available from the PHA (known as the mini code).

**Delegated Authority**

Details of who is authorised in the organisation to commit and approve expenditure and what the limits of authorisation are.

**A policy on how to report and respond to a Suspected Fraud**

Avenues for how and to whom a suspected fraud is reported.

The roles and responsibilities of all staff within the organisation in relation to fraud awareness.

The response plan should lay out the responsibilities of the senior management within the organisation in terms of handling suspicions or allegations of fraud.

Any suspected fraud or other financial irregularity shall be reported to the Funder, the Police and the PHA at the earliest opportunity.

**Segregation of Duties**

This policy should prevent any one person carrying out a transaction without another authorised person being involved within the organisation.

Where this is not possible due to the small number of staff employed then work should be reviewed by the management or Committee members.

**Travel and Subsistence Expenses**

Details on insurance requirements, mileage rates, public transport rates, passenger supplements, car parking and incidental expenses, subsistence and accommodation.

How payment will be made.

**Payment of Invoices**

All invoices paid by the organisation must be supported by original invoices, not photocopies, which shall be retained for inspection.

Invoices shall be properly checked before payment. This shall include checking against delivery and purchase orders and where appropriate contracts for accuracy.

Invoices should be approved by an appropriate staff member with delegated authority.

VAT shall be accounted for in accordance with Revenue legislation and HM Revenue & Customs Regulations.

**Cheque Journal**

The organisation shall maintain a cheque journal, which includes the information necessary for the completion of financial claims to the PHA. This may be done through the use of separate cost centres with a clear audit trail.

**Maintenance of Records**

Bank mandates, statements and reconciliations shall be retained for audit inspection for the period stipulated by the PHA.

All records of income and expenditure shall be retained and filed in an orderly system with a clear audit trail to allow for audit inspection. Records shall be readily accessible for monitoring purposes. This will include, original invoices paid (not photocopies), receipts for cash transactions, such as petty cash expenses and any other documentation to support disbursements of money. Cancelled receipts and cancelled cheques should be retained.

**Security of Assets**

The organisation shall maintain a record of assets purchased (Asset Register), which will include the source of funding for each individual asset. This will enable assets to be returned to the appropriate ‘owner’ in the event of a project coming to an end.

**Financial Management**

The Service Provider shall put in place and maintain systems for sound financial management including an appropriate budgetary control system. The Treasurer/Secretary or Chairperson shall review financial records on a monthly basis and shall present a financial report to the Management Committee, which will highlight any variances from forecasts and budgets. The Management Committee shall take immediate and appropriate action to address variances from agreed budgets. The PHA shall be notified at an early stage of any non-compliance with the terms of the funding agreement.

**Reimbursement Claims to the HSCB/PHA**

The Service Provider shall adhere to the monitoring and evaluation timescales outlined in the Contract.

Authorised claim forms and other financial returns shall be approved by an appropriate official.

**IT Security**

Where a financial IT system is in operation, security and control procedures should be in place to ensure restricted access, integrity of data and information and secure storage and transmission of data.

Examples of such controls include separate administrator and user access, system to change passwords regularly, virus guards and fire walls, and system recovery plans.

These controls should be previous payment controls and should be exercised jointly when an on-line treasury function is in place.

**Payment of Salaries and Wages**

Either a manual or a computerised payroll system shall be maintained. This shall clearly show the amount of gross and net wages for each employee. All payments to staff shall be through the payroll and shall be in accordance with Legislation and HM Revenue &Customs Regulations. A separate record of payments to the HM Revenue & Customs for Tax and National Insurance shall also be maintained.

**Other - Staff**

Persons responsible for financial transactions in the organisation should be properly trained.

Contracts of employment should be in place for all staff employed and made available for inspection by the PHA.