

Name \_\_\_\_\_

Issue 1:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## RISK ASSESSMENT 16 Managing Money

Risk Assessment Objectives: To enable Name to manage her personal money

Tick box if relevant

Name's mother is their financial; appointee

Name manages their personal money which goes directly into her personal account



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PERSONAL STATEMENT

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### RISK ASSESSMENT THROUGH CONCERN LEVELS

IF THE SCORE IS BETWEEN 7-10 THESE MUST BE AN ESSENTIAL ACTION PLAN

Severity	Concern level	Tick Box for Concern level	Concern by colour
10	Safeguarding concerns	[ ]	Red
09	3 <sup>rd</sup> Party Intervention concerns	[ ]	
08	Destabilising concerns	[ ]	
07	Escalating concerns	[ ]	
06	Concerning concerns	[ ]	Yellow
05	Moderate Concerns	[ ]	
04	Medium concerns	[ ]	
03	Minimal concerns	[ ]	Light Yellow
02	Trivial concerns	[ ]	
01	No concerns	[ ]	

ACTION PLAN

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Review Monthly

Name \_\_\_\_\_

Issue 1:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## *RISK ASSESSMENT 16*

### *Managing Money*

**Outcome** Name is supported to deal with money as much as they can

#### ASSESSMENT

- Name** is able to pay for items themselves. If without the supervision of staff, **Name** understands what money is used for and that it is an exchange process.
- Name** accesses the local shop unsupported.
- Name** receives ESA , mobility DLA, managed by their mother who is the appointee.
- Name** manages their own money received from their mother

#### SUPPORT NEEDED

- Name** manages their own money with advice and guidance from mother
- Name** has an understanding of Money

#### SPECIFIC OUTCOMES / ACTIONS TO ACHIEVE

- Assist **Name** to have a better understanding of money.
- Support **Name** to make informed decisions regarding their finances
- Staff team to explain to **Name** the importance of keeping their own money safe and secure during tutorials
- Name**, keeps their personal money
- Name** is happy with them.
- Staff to remind **Name** of the importance of looking after their money

Signed \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Review Monthly