PIEDMONT BEHAVIORAL HEALTHCARE
LME ON-SITE FISCAL MONITORING

Location:		**Review Date:**								
Facility Description/Service:		**Reviewer:**								
Reference:	**Review Item**	**Client:**			**Client:**			**Client:**		
		Met	**Not Met**	**NA**	**Met**	**Not Met**	**NA**	**Met**	**Not Met**	**NA**
NCAC 14S .0106 APSM 95-2 .0106	Each compentent adult client or minor client above the age of 16 has been encouraged and assisted to maintain or invest his money in a personal fund account other than at the facility.									
	There is written documentation present giving the agency permission to manage the client's funds, the consent is given by the client or legally responsible person.									
	Each client has an individual bank account									
	Client's personal funds are maintained separately from operating funds & other client's funds									
	Money is kept locked in facility									
	Client is able to withdraw & deposit money									
	Receipts are issued for deposits.									
	Receipts are issued for withdrawals									
	Accurate deductions for treatment/services have been made from the client's account									
	Client has received a quarterly accounting statement of their fund account									
	The financial record contains accurate : accounting record of: b. Withdrawals									
	c. Current fund status									
	d. Interest earned on all accounts									
	e. Specific expenditures									
	f. Disbursements include items purchased									
	g. Disbursements include amount of money									
	h. Disbursements are dated									
	i. Disbursements to a client are signed for by the client									
	j. Disbursements are witnessed by a person other than the one disbursing the money									
	Bank statements are reconciled to the client ledger.									

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2

Reference:	Review Item	Client:			Client:			Client:		
		Met	Not Met	NA	Met	Not Met	NA	Met	Not Met	NA
NCAC 14S .0106 APSM 95-2 .0106	Reconciliations are initialed by responsible staff									
	Authorization has been obtained from the client or legally responsible person before any deduction was made from the client's personal funds for amount owed for damages done to the facility, to an employee of the facility, to a visitor of the facility or to another client of the facility.									
		0	0	0	0	0	0	0	0	0

Possible Scores:	0
# N/A	0
True number scored:	0
# Met	0
# Not Met	0
%Met	#DIV/0!
%Not Met	#DIV/0!

GENERAL COMMENTS ON FISCAL SERVICES: