# **HEALTH REPAYMENT SCHEME (DONATIONS) FUND**

# ACCOUNT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2022

	2022 €	2021 €
Income		
Donations	0	0
Returned Bank Fees	0	0
Total Income	0	0
Expenditure Bank Charges Donations paid over to Long Stay Units Total Expenditure	0 0	0 0
Total Exponditure	Ü	Ü
Surplus / (Deficit) for year	0	0
The Statement of Accounting Policies and Principles form part of this account.	0	0
Surplus / (Deficit) carried forward to following year	0	0

The Statement of Accounting Policies and Principles form part of this account.

Bernard Gloster

Chief Executive Officer, Health Service Executive

24 November 2023

# **HEALTH REPAYMENT SCHEME (DONATIONS) FUND**

# BALANCE SHEET AS AT 31 DECEMBER 2022

<u>Assets</u>	2022 €	2021 €
Current Assets Bank	0	0
Net Assets	0	0
Represented By		
Fund	0	0
Reserves	0	0

The Statement of Accounting Policies and Principles form part of this account.

The Statement of Accounting Policies and Principles form part of this account.

Chief Executive Officer, Health Service Executive 24 November 2023

#### **HEALTH REPAYMENT SCHEME (DONATIONS) FUND**

#### STATEMENT OF ACCOUNTING POLICIES AND PRINCIPLES

#### **Background**

The Health (Repayment Scheme) Act 2006 provides for a scheme to repay certain charges imposed on persons with full eligibility for in-patient services in Health Service Executive (HSE) long stay facilities and to regulate Patients Private Property Accounts. In accordance with the Act a Special Account was established which is an account with the Paymaster General held in joint names of the HSE and the Minister for Finance. The Special Account was established on 30 June 2006.

In March 2007, in accordance with section 11 of the Act the Health Service Executive established a fund known as the Repayment Scheme (Donations) Fund (the Fund) to be applied for the purposes of providing improvements in public health services provided to dependent older persons and persons with disabilities. The Act provides that an applicant under the repayments scheme may direct that any or all of a repayment due should be paid into the Fund.

#### **Administrative Arrangements**

The Fund was administered by the HSE.

As the last Donation received to the Fund was in 2012, the HRS unit does not anticipate receipt of any further Donations. In the event a Donation is received, alternative arrangements may be made to accept and transfer amounts through another appropriate HSE bank account.

All of the Donation funds received are fully allocated and expended for their intended purposes in accordance The Statement of Accounting Policies and Principles form part of this account.

#### **Basis of Accounting**

The account has been prepared on an accruals basis.

The Statement of Accounting Policies and Principles form part of this account.

#### Period of Account

The Income and Expenditure Account records that there were no transactions in the period 1 January 2022 to 31 December 2022



# **Ard Reachtaire Cuntas agus Ciste Comptroller and Auditor General**

# Report for presentation to the Houses of the Oireachtas Health Repayment Scheme (Donations) Fund

## Opinion on the financial statements

I have audited the financial statements of the Health Repayment Scheme (Donations) Fund prepared by the Health Service Executive for the year ended 31 December 2022 as required under the provisions of section 18 of the Health (Repayment Scheme) Act 2006. The financial statements comprise

- the account of income and expenditure
- the balance sheet, and
- the statement of accounting policies and principles

In my opinion, the financial statements properly present

- the transactions on the Fund for 2022, and
- the balance at 31 December 2022.

### Basis of opinion

I conducted my audit of the financial statements in accordance with the International Standards on Auditing (ISAs) as promulgated by the International Organisation of Supreme Audit Institutions. My responsibilities under those standards are described in the appendix to this report. I am independent of the Health Service Executive and have fulfilled my other ethical responsibilities in accordance with the standards.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

## Report on other matters

My responsibilities to report in relation to certain other matters upon which I report by exception, are described in the appendix to this report.

I have nothing to report in that regard.

John Crean
For and on behalf of the

**Comptroller and Auditor General** 

**29 November 2023** 

#### Responsibilities of the Health Service Executive

The Health Service Executive is responsible for

- the preparation of the annual financial statements in the form prescribed under section 11 of the Health (Repayment Scheme) Act 2006
- ensuring that the financial statements properly present the balance at year end and the transactions in the year
- ensuring the regularity of transactions, and
- such internal control as it determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

# Responsibilities of the Comptroller and Auditor General

I am required under section 18 of the Health (Repayment Scheme) Act 2006 to audit the financial statements and to report thereon to the Houses of the Oireachtas.

My objective in carrying out the audit is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement due to fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with the ISAs, I exercise professional judgment and maintain professional scepticism throughout the audit. In doing so,

- I identify and assess the risks of material misstatement of the financial statements whether due to fraud or error; design and perform audit procedures responsive to those risks; and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- I obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal controls.
- I evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures.

I communicate with the Health Service Executive regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

I report by exception if, in my opinion,

- I have not received all the information and explanations I required for my audit, or
- the accounting records were not sufficient to permit the financial statements to be readily and properly audited, or
- the financial statements are not in agreement with the accounting records.

#### Reporting on other matters

My audit is conducted by reference to the special considerations which attach to State bodies in relation to their management and operation. I report if I identify material matters relating to the manner in which public business has been conducted.

I seek to obtain evidence about the regularity of financial transactions in the course of audit. I report if I identify any material instance where public money has not been applied for the purposes intended or where transactions did not conform to the authorities governing them.