

Policy Document

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Management of Patient Property

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Version Control Schedule

Version	Issue Date	Comments
1	October 2020	Final version following consultation with Financial Accounts, County cashiers, Deputy Chief Nurse, Deputy COO and ED ACN. Includes agreement use 3 page book as described in the policy on instruction of Deputy Chief Nurse (16-09-20) 13/10/2020: Updated for comments following KPMG review (points 14.2 re valuables documentation)
2	March 2021	Minor amends to disclaimer notice (Appendix 2)
3	February 2022	First Year Review. No changes required.

Statement on Trust Policies

The latest version of 'Statement on Trust Policies' applies to this policy and can be accessed [here](#)

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1. INTRODUCTION

This policy identifies the correct procedures to safeguard against the loss of Patient property and to avoid subsequent distress to patients and relatives and to avoid claims against the Trust.

2. POLICY STATEMENT

The Trust has a responsibility to provide the safe custody for any personal items handed in by patients or carers for safekeeping.

The Trust has a responsibility to provide the safe custody for any personal items found to be in the possession of patients admitted to hospital, who are unconscious, confused or lack mental capacity (Mental Capacity Act 2005). This also applies to patients who become unconscious, confused or lack mental capacity whilst being cared for as an inpatient at the Trust.

Subsequently the property handed in for safekeeping has to be managed, returned or disposed of within a secure and auditable process.

The Trust will not accept responsibility or liability for Patient valuables brought into Trust premises, unless it has been handed in for safe keeping and an official copy of the valuables book ('Record of Valuables Handed Over to the Trust For Safekeeping') is obtained as a receipt or if the Patient is not capable of managing their own affairs.

3. SCOPE OF THE POLICY

The policy applies to all Trust members of staff who handle patient property.

4. AIMS AND OBJECTIVES

- To ensure the correct procedures are understood and followed.
- To safeguard against the loss of Patient property.
- To avoid subsequent distress to patients and relatives.
- To safeguard staff in the case of dispute.
- To avert claims against the Trust.

5. DEFINITIONS

Patients' Property	Is defined as money and other personal effects of a patient, on Trust Premises during their stay in hospital prior to discharge, transfer or death.
This is split into two categories	
Patients Belongings	Non valuable items including clothing Items required to maintain normal daily living standards. (see list appendix 5)
Patients Valuables	Patients valuable items (see list in appendix 5)
Patients Property Bag for valuables / Patients Valuables Bag	An opaque bag with a numbered security seal (Bags currently carry the name 'University Hospital of North Midlands NHS Trust) available on both sites
Patients Property carrier bag	For storing regular, non-valuable items
'Record of Valuables Handed Over to the Trust For Safekeeping' Book referred to in this Policy as 'valuables book'	A printed carbon book to log Patient valuables for safekeeping Held on each ward and in cashiers at County

Patient Property (Valuables) Receipt	A carbon copy from the Patient property (Valuables) Book – BLUE copy
PoM Account	Patients' own Money Account
Disclaimer Form – (Part of Patient Risk Assessment Booklet) Appendix 1	Form that confirms that the patient does not wish to handover for safekeeping any property or valuables and that they understand that the Trust will not accept responsibility for the loss /damage to property(Valuables) of any kind in whatever way loss/damage occurs unless deposited for safekeeping
LSMS	Local Security Management Specialist
CSM	Clinical Site Manager
SOC	Silver on Call (Senior on call Manager)

6. ROLES AND RESPONSIBILITIES

6.1 The Trust Board

The Trust Board has overall accountability for the activities of the organisation.

6.2 The Chief Executive

The Chief Executive is responsible for ensuring that the Trust complies with the Management of Patient property Policy.

6.3 The Chief Financial Officer

The Chief Financial Officer is responsible for ensuring a policy exists for the Management of Patient property.

6.4 The Chief Nurse

The Chief Nurse is responsible for ensuring information pertaining to provision of safeguarding patient property is readily available to all in forms for patients, visitors and staff. For example:

- Trust Hospital admission documentation
- Trust patient information booklets at each locker on wards and available in PALS.
- Oral information on admission for elective, maternity and emergency admissions from administrative and nursing staff.
- Trust website.

6.5 Associate Directors

It is the responsibility of all Associate Directors to disseminate the Management of Patient property within their area of responsibility. To ensure the policy is implemented by providing support and advice to their managers where required.

6.6 Local Security Management Specialist (LSMS)

- The Local Security Management Specialist (LSMS) is to provide professional skills and expertise in addressing security management issues in a proactive and positive manner.
- To ensure all security incidents relating to Patient property are reviewed correctly, create and agree and implement action plans where necessary.
- To identify trends relating to incidents connected to patient property.
- To review & advise on amendments to processes as necessary to reduce risk and ensure compliance with the NHS Protect security of Patient Property.

6.7 Ward/Department Managers

The Ward/Department manager retains responsibility for Patient valuables handed in for or taken for safekeeping until they are deposited with the Cashier:

- They must ensure that all Staff are aware of the content of this policy.

- It is the responsibility of all ward/departmental managers to ensure disclaimer notices are displayed in prominent places throughout their area. (Appendix 2 Disclaimer notice). Ensure patients/carers are advised of procedure and of the relevant paperwork.
- That the procedure is followed by department staff including giving the necessary advice in relation to Patient property.
- The collection, safe keeping, custody, recording and disposal of Patient property are followed in accordance with this policy.
- To regularly audit the process and ensure the policy and procedures are followed.
- To complete an on-line Incident (DATIX) Form as and when necessary.
- To investigate incidents relating to Patient property in their area and liaise with other wards or departments if the patient has been transferred, before the involvement of Security.
- It is the responsibility of the manager of the area where the incident was identified, to investigate **unless** identified as a patient transfer, as this would revert back to the manager of the discharging ward/department.
- Comply with procedure for handover of patients, ensuring Patient property are included in any transfers, moves or discharges.

6.8 Those involved with Planned Care

All appointment letters, in particular where patients are to be admitted will include a statement regarding not bringing in valuable items into hospital and that the Trust will only accept responsibility for Patient valuables handed in for safekeeping.

To prevent risk and undue stress it is important to discourage patients from bringing Patient property into hospital premises. Ideally only items used for daily living are recommended.

6.9 All Staff / Employees

When a patient is admitted by planned or unplanned /emergency care, ultimately they are in control of their own property unless the Patient is not capable of managing their own affairs.

- It is the responsibility of the member of staff receiving the patient into the ward or department to ensure that all of the documentation in relation to the patient property is completed at the time of admission.
- It is the responsibility of all ward / department managers responsible for the patients care to ensure that Patient property is managed in accordance with this policy; and
- To ensure that when discharging/transferring a patient that all documentation has been completed and all belongings have been returned to the patient/carer.

6.10 Cashier

The Cashier is responsible for providing advice on collection, safe keeping, custody, recording and disposal of patient valuables also:

- To receive Patient valuables during office hours.
 - To phone wards/departments on a Friday to ascertain the status of any patient whose Patient valuables are being held. This ensures patient valuables follow the patients journey i.e. discharge out of office hours.
 - Should a patient be discharged, the Patient valuables will be returned to the patient directly or to responsible ward/departmental staff and all relevant documentation will be completed.
 - Should a patient have already been transferred to another healthcare provider, the Cashier is responsible for ensuring the patient receives their Patient valuables;
- Cash will be deposited into the Trust POM Account (Patients' Own Money). The cashier will arrange for a cheque to be sent out from the Finance department.
 - Other items may be sent out via Royal Mail (signed for) or via courier.

- Should a patient be deceased the cashier will inform the Financial Controller. Patient valuables will remain with the cashier until the Financial Controller approves their release and provides the relevant documentation.

6.11 Financial Controller

The Financial Controller is responsible for reviewing and advising on the Policy, and:

- Ensuring that valuables held in the Cashiers Office for a deceased patient are passed to the correct person on production of appropriate documentation proving entitlement.
- Providing advice on the disposal of patient valuables.
- Ensuring that Internal Audit reviews are undertaken so as to gain an assurance that the policy is being adhered to.

6.12 Legal Services

The Legal services department will advise on loss compensation where necessary.

7. CLASSIFICATION OF PATIENT PROPERTY

Patient property is divided into the following:

- **Patients valuables:** these include money, jewellery, mobile phones, laptops and other IT equipment, dentures, hearing aids and bank cards
- **Patient's belongings** include everyday items such as clothing. (These items are not recorded)

Full details of items which are classified in each category can be found in Appendix 5.

7.1 Illicit substances

When a patient arrives with what is suspected to be illicit substances the receiving member of staff **MUST** refer and act in accordance with the illicit substances policy found on the intranet (– Management of Illicit Substances - Policy Number RM11).

7.2 Dangerous Items

These include but are not restricted to Firearms, Knives and Chemicals.

In the event it is suspected that firearms, knives or chemicals are being brought in to the hospital or grounds, the police must be called immediately.

Datix Incident forms must be completed for all items that fall into this category.

8. DECISIONS ABOUT THE HOLDING OF PATIENTS' PROPERTY

The member of staff admitting the patient **MUST** proactively ask the patient if they have any patient property in their possession, ideally this should be when relatives / carers are in attendance, and can take patient property away for safekeeping. The patient shall be advised of the desirability of sending the patient property home **with** their next of kin or trusted relative or friend. It should be documented in the patient's care plan if the property is taken home by relatives.

If a patient refuses to have any patient property sent home, the patient shall be advised to have the patient valuables taken into safe custody.

If a patient chooses to keep valuables with them then a disclaimer form should be completed and kept within the patient's medical records (Appendix 1). A disclaimer form is also located in the Patient Risk Assessment Booklet [Proud to Care] as part of the admission documentation.

If it is brought to the attention of staff that a patient has valuables in their possession, a staff member should check the patient notes for relevant documentation. If this is not present then the member of staff should recommend that those valuables are handed over for safekeeping or complete a disclaimer notice.

If the patient chooses to hand in patient valuables for safekeeping, a second staff member should be present, and details entered into the Patient valuables book in accordance with this policy.

Guidelines as to when it is appropriate for others to be involved in decisions relating to a Patient property are set out in the Mental Capacity Act 2005.

Details of next of kin and anyone else entitled to be involved in such decisions must be recorded on admission or as soon as feasibly possible. If a patient has no next of kin or executor, this should also be recorded.

Patient valuables **MUST** be taken into safe custody in the following situations:

- Where the patient dies in hospital and the next of kin has not been established or are present.
- Where the patient is found to have passed away on arrival at hospital.
- Where the patient is found to be unconscious on arrival at hospital.
- Where the unaccompanied patient is found to lack mental capacity.

8.1 Patients not capable of managing their own affairs

If the patient is a child/young person, is unconscious, confused or in any way incapable of managing their own affairs, a check of the patient for all Patient property as described within this policy should be carried out by the admitting member of staff plus one other staff member. Any patient valuables should be given to a next of kin (see below) or if unaccompanied, deposited with the Cashier for safekeeping as part of the admitting procedure. A note in the patients records should be made to clarify this has been completed and by whom. Two members of staff should sign the patient notes.

On admission, the admitting member of staff should discuss the safekeeping of the patient valuables with the parent/ Guardian/next of kin/carer. Any decision taken on behalf of the patient must be in the patients' best interest and clearly documented in the patient notes.

If a patient becomes unconscious, confused or in any way incapable of managing their own affairs whilst an inpatient at the Trust any patient valuables should be given to a next of kin (see below) or if unaccompanied, deposited with the Cashier for safekeeping. A note in the patients records should be made to clarify this has been completed and by whom. Two members of staff should sign the patient notes.

In case of doubt, reference should be made to the Mental Capacity Act 2005.

9. DISCLAIMER NOTICES

All wards and departments must display notices in prominent positions stating that the Trust does not accept responsibility for loss or damage to personal property of any kind, including money, unless the property is handed in for safe keeping and an official hospital receipt is obtained. As part of every admission to a ward/department, the above notices should be specifically brought to the attention of the patient.

The Disclaimer notice is shown with Appendix 2

10. DISCLAIMER FORM

If the patient decides to keep their property and not hand in for safekeeping then a disclaimer form must be fully completed and signed (Appendix 1). This must be secured within the patient notes.

11. INCIDENTS RELATING TO PATIENTS PROPERTY

If there is an incident relating to patient property or any suspicion that items of property have been stolen then an incident form should be completed on Datix.

It is the responsibility of the manager in the area the incident was identified in to investigate unless identified as a patient transfer, this would revert back to the manager of the discharging ward/department.

In all circumstances the Clinical Site Manager should be informed.

In accordance with Standing Financial Instructions if theft is suspected the Chief Financial Officer must be informed immediately by e-mail.

Advice can be requested from the Trust's Security Manager (LSMS).

12. DAMAGED/SOILED/INFECTED PROPERTY

Where patient's property is damaged beyond repair or is infected and has to be destroyed, a note should be made in the patients notes if belongings, or on each copy of the Property receipt book if patient valuables. The pockets and linings of any clothing will be checked for valuable items/cash before disposal. Patients and relatives should be informed regarding disposal.

Relatives/carers should be informed in a timely manner to ensure suitable clothing is brought in for when the patient is discharged.

In exceptional circumstances the ward or department can seek donated clothing to aid discharge.

13. DISPOSAL OF UNCLAIMED PROPERTY

Every effort should be made to return the item to its rightful owner however if the owner is unknown then:

Valuables

The Cashier will inform the Financial Controller who will determine when the valuables can be disposed of in accordance with the disposal procedure in Appendix 9.

Belongings

Property does not go to the mortuary, it remains with the ward area and staff arrange collection or disposal as per guidance in Appendix 9.

14. PROCEDURES

When a patient comes in to hospital consideration should be given to dealing with their personal property to avoid incidents and distress.

When patients are admitted to hospital for planned routine admissions, the pre-operative and pre-admission literature should advise them of the Trust policy on safekeeping of valuables and property. This will help to minimise the need for valuables being taken into short term custody.

Where Patients do arrive with Personal property then staff should follow the procedures below:

14.1 Procedure for staff receiving patient belongings

The admitting staff should advise the Patient that they are responsible for the safekeeping of their belongings and that the Trust will not take responsibility for loss or damage of items.

If the Patient is incapable of managing their own belongings then these items should be recorded in the Patient notes. Please refer to Section 8.1 and the Mental Capacity Act 2015.

Staff must take care when handling or transferring belongings to ensure items are not damaged or lost.

14.2 Procedure for staff receiving Valuables from a Patient

The admitting staff member shall enter items to be handed over in the **Valuables book** in the presence of a second staff member, and wherever possible in the presence of the patient. This is written evidence which will be used to protect staff in the event of a dispute.

The members of staff receiving the valuables **MUST** complete the valuables book in full and both must sign the book. The patient shall also sign the valuables book unless restricted by physical or mental incapacity.

When documenting items in the valuables book, terms such as 'gold' and 'silver' shouldn't be used as descriptors, use terms such as yellow or white metal - similarly with stones 'white stone' 'red stone' should be used.

Items should be separately listed and numbered where appropriate for clarity.

Any alterations to the valuables book must be signed by 2 members of staff and the patient unless restricted by physical and mental capacity.

The staff member must ensure that the valuables book and the valuables are taken to the Cashiers Office. This must take place within one working day (Mon-Fri).

Copies of the valuables document in the valuables book are distributed as follows:

- WHITE copy – Given to cashiers when cashiers receipt the valuables
- BLUE copy – given to Patient / next of kin or carer or stays with Patients notes
- YELLOW – retained in valuables book (by ward/department)

If the patient is incapable of receiving the BLUE copy should be securely kept with the Patients notes until it can be handed to the next of Kin/carers. A record should be made within the notes when the BLUE copy is subsequently handed over to next of Kin/Carer.

15. DEPOSITING OF VALUABLES FOR SAFEKEEPING

Particular care must be taken with items such as dentures, hearing aids and glasses, which can easily be mislaid and leads to the majority of incidents for and distress from patients and relatives.

Dentures, hearing aids and glasses worn by the patient should be recorded in the patient's notes on admission and rechecked at any point of transfer to prevent loss. Staff have a duty of care to ensure that such property is looked after. In the case of dentures these should be held within receptacles provided when not in use.

If patient valuables are taken in for safekeeping the following procedure will be followed.

The admitting staff member and a second member of staff shall:

- Check the items for deposit

- Complete the Patient Property (Valuables) Book, and include the Patients Property bag number.
- Ensure the book is completed in a way that is legible and accurate including information on carbon copy pages
- On the Patients Valuable Bag clearly write the patient's name, hospital number and ward.
- Put items of cash/valuables in the Patients valuables Bag and seal. .

During Office working hours the ward/department is responsible for taking valuables to the Cashiers office. This must take place within one working day (Mon-Fri).

- On receipting the valuables the Cashiers should confirm the receipt of the articles listed in the patient valuables book by signing the white copy of the form which is then retained by Cashiers

Out of working office hours

The night safe located in the RSUH Emergency department is used for the storage of patient valuables out of office working hours and all paperwork must be completed as above and the items stored in the safe as per the departmental SoP. The departmental/ward manager is responsible for ensuring that systems are in place to transfer valuables to the **Cashiers department at the earliest possible time**. This must take place within one working day (Mon-Fri).

At the County site valuables are taken to the drop safe which is held in the security office adjacent to the cashier's office. All paperwork must be completed as above and included with the valuables in the patient's valuables bag.

15.1 Returning of Valuables during Office Working Hours

Where the valuables have been deposited with the cashier or in the night safe and subsequently transferred to cashiers the following procedure should be followed:

- Ward staff shall inform the cashier before a patient is discharged to enable the return of the deposited items.
- The ward/department staff will collect the patient valuables from the cashier's office by signing the white copy of the patient's valuables book to confirm the return of the cash/valuables. The Cashiers department will retain this white copy.
- The ward/department will then return the valuables to the patient as follows:
- The Patients Property Bag containing the patients' cash/valuables must be opened and re-sealed in front of the patient and
 - Any cash/valuables returned to the patient/ relative / carer throughout the patients stay or on discharge must be clearly marked on the yellow copy from the valuables book and signed / dated by the member of staff
 - Nursing staff shall make every reasonable endeavour to ensure the patients competence to take responsibility for their own cash/valuables. Where this is in doubt, they should arrange for an appropriate person e.g. the next of kin to receive the cash/valuables.
 - Staff must check and confirm they are next of kin, relative, carer or person trusted by the patient and a form of id given e.g. a driving licence. This should be noted on the yellow copy of the valuables book.
 - If the cashier is returning the items to the patient on the ward, a member of ward staff must be present and the yellow copy of the valuables book must be completed appropriately and signed by the patient.

15.2 Returning of Valuables Out of Office Working Hours

If there is an unexpected discharge out of office hours the Trust will hold the valuables for safe keeping until the patient is able to collect them.

The cashier will agree a time with the discharged patient for the collection of valuables. The patient will be asked to provide photographic ID to verify their identity or if photographic ID is not available then 2 separate forms of ID such as council tax and utility bills must be shown.

In some circumstances cash will be returned by post in the form of a cheque and other valuables sent by recorded delivery.

In rare circumstances it may be necessary to return the valuables when the patient leaves for example if the valuables are stored in the ED night safe then the process to be followed is:

- Senior member of staff from discharging area, with the ED Nurse in charge sign out keys.
- Open ED night safe together, taking out the required Patients Valuables bag for the discharged person.
- The ED Night safe book is completed. The items are returned to the patient - the white copy of the valuables book is completed and signed by the patient and the two staff. This copy is retained and sent to the cashier.

16. TRANSFERRING PATIENTS

16.1 Transferring Patients for Inter ward and Inter site Transfers within UHNM

This applies where a patient is transferred and has already placed valuables into safekeeping.

- Between wards on the same site.
- Between sites within the Trust.

Patient belongings must remain and be transferred with the patient, unless changing wards via theatre, in which case arrangements must be made for the secure storage and transfer of the property.

Patient belonging property bags for non-valuable items must be used for the transferring of patient's property in all circumstances. Bags must be packed and transferred with care and discretion.

Unless specifically requested to do so, the Trust would not normally take any items of property into safe custody during a transfer, which had previously been in the patient's own possession.

Where valuables have already been taken into safe custody by the Hospital Cashier, nursing staff shall inform the Hospital Cashier of the patients' new ward and/or site.

Dentures, hearing aids and glasses worn by the patient should be recorded on admission in the patient notes and rechecked at any point of transfer to prevent loss. Staff have a duty of care to ensure that such property is looked after and treated with care.

16.2 Transferring Patients outside of the Trust

Patient belonging Property Bags for non-valuable items must be used for the transferring of patients' property belongings in all circumstances. Bags must be packed with care and discretion.

When a patient is being transferred permanently outside the Trust, all property should move with the patient. Two staff members, one of which should be registered, should check all patient property. The staff should ensure that the bed space and locker have been emptied and any cash or valuables kept in safekeeping i.e. held in the cashier's office, are returned to the patient.

All property should be:

- Checked where possible with the patient themselves before the transfer takes place.
- Then the valuables book signed and a copy given to the patient.

The Trust shall arrange transfer of valuables to the office of the receiving hospital only if the above procedures have not been adhered to.

17. HANDLING CASH, VALUABLES AND PROPERTY OF THE DECEASED PATIENT

Generally staff should try to give property to the next of kin, relative, carer or person trusted if they are present before they leave the ward, or if they are not present the ward stores the property for a short duration until this can happen.

If property is given to the patients next of kin or carer this should be appropriately documented in the patient notes.

If any belongings or valuables go with the patient to the mortuary this should be clearly documented on the mortuary slip in addition to a property form being completed. If a deceased patient's valuables are held by cashiers then the cashier should be informed of the death. The cashier will contact the Financial Controller who will take responsibility for returning/disposing of the valuables to the rightful owner as follows:

18. WILLS AND NEXT OF KIN

18.1 If the Deceased has left a Will

- On receipt of the information provided by the cashier, a questionnaire will be sent to the patient's designated emergency contact to determine the deceased's next of kin.
- The Financial Controller must establish who the executor of the Will is.
- Where the valuables held do not exceed £5,000, the Executor should be asked if a Grant of Probate is to be obtained. If not, the valuables may be released to the person named as Executor in the Will. Before release an Executor / Administrator Release of Property Indemnity form (Appendix 4) must be signed by the Executor. Any cheque issued for monies held must be made payable to "Executors of (Deceased)".
- Where the valuables held do exceed £5,000 or where a Grant of Probate is to be obtained the valuables may be released to the Executor, only on production of Probate. A copy of the Probate must be provided and a copy must be retained by the Chief Financial Officer before the valuables can be released. Any cheque issued for monies held must be made payable to "Executors of (Deceased)".

18.2 If the Deceased had no Will

- If there is no Will or the existence of the Will cannot be established the total value of the patient's valuables must be established. If there is any uncertainty concerning the value then professional advice must be sought.
- Where the valuables do not exceed £5,000, the Chief Financial Officer must ascertain the relationship of the person claiming the valuables to the deceased.

18.3 Direct Next of Kin

If it can be established beyond reasonable doubt that the person claiming the valuables is the direct next of kin, a signed Relative / next of Kin Release of Property Indemnity Form (Appendix 3) must be obtained from the claimant. The valuables can then be released.

18.4 Several possible claimants on the Deceased's Estate

The Chief Financial Officer must establish who is to act in administering the deceased's estate and obtain letters, from all possible beneficiaries, authorising the release of the valuables held to the nominated administrator. A signed Executor / Administrator Release of Property Indemnity form (Appendix 4) must be obtained from the Administrator before the valuables can be released.

Where the valuables exceed £5,000, Letters of Administration in respect of the deceased's estate must be obtained from the administrator before the valuables can be released.

18.5 No Next of Kin

The disposal of deceased patient's property must be effected by the Chief Financial Officer who has responsibility for its security.

In respect of a deceased patient's property, if there is no will and no lawful next of kin, the property rests with the crown. The Chief Financial Officer or his nominated officer shall, therefore notify the Treasury Solicitor, or to the Duchies of Lancaster and Cornwall, as appropriate (see Standing Financial Instructions).

19. PATIENT CLAIMS FOR DAMAGE OR LOSS OF PATIENT PROPERTY

If following an investigation by the Ward/departmental manager, the Trust is found to have been negligent in either losing or damaging patient property, and the Patient wishes to make a claim, the manager must adhere to the process detailed in Losses and Special payments Policy F09.

20. MONITORING AND REVIEW ARRANGEMENTS

Aspect of compliance or effectiveness being monitored	Monitoring method	Individual or dept. responsible for the monitoring	Frequency of the monitoring activity	Group/committee which will receive the findings/ monitoring report	Committee/ individual responsible for ensuring that the actions are completed
Monitoring incident reports	Report from DATIX	Local Security Management System (LSMS) LSMS	Monthly	Security Meetings and Executive Health & Safety Group	LSMS
Over view of Security	LSMS report	LSMS	Quarterly	Security Meetings and Executive Health & Safety Group	LSMS
Overview of adherence to Policy	Internal Audit report	Chief Financial Officer	Annually	Audit committee	Chief Financial Officer

Reporting and monitoring will be through the divisional governance groups by incident forms, loss & compensation requests.

Periodic audits of Safes and records will be undertaken by cashiers and internal auditors.

21. GETTING HELP

Staff and Patients can receive advice and support from ward/department managers and cashiers.

Independent advice and support for patients is available through the PALS office.

22. RELATED CORPORATE DOCUMENTS

Depending on the situation the following policies may need to be considered or implemented or may offer guidance:

- End of Life Policy C13
- Standing Financial Instructions – Policy F01
- Reporting and Managing of Incidents Policy – RM07
- Mental Capacity Act (2005)
- Patient Risk Assessment Booklet
- Illicit substances Policy Number RM11
- Losses and Special payments Policy F09.

23. EQUALITY AND DIVERSITY STATEMENT

The Trust is committed to ensuring that, as far as reasonably practicable, the health, safety and welfare of staff, patients and visitors is paramount and does not discriminate against individuals or groups on the basis of their ethnic origin, physical or mental abilities, gender, age, religious belief or sexual orientation.

24. EDUCATION/TRAINING AND PLAN OF IMPLEMENTATION

There is no specific training required as communication of responsibilities will take place as per the policy.

University Hospitals of North Midlands 
NHS Trust

Patient Label

**PATIENT PROPERTY DISCLAIMER FORM
(IF UNABLE TO ACCESS PATIENT RISK ASSESSMENT BOOKLET)**

Name (In capitals)

I confirm that:-

- I do not wish to hand over for safekeeping any property currently held by myself.
- I also understand that the Trust will accept **NO** responsibility for the loss of, and or damage to, property and / or valuables of any kind in whatsoever way loss or damage occurs, unless deposited for safekeeping.

Patient/Relative signature

.....

Date

.....

Staff name (in capitals)

.....

Staff signature

.....

Designation

.....

Date and Time

.....

IMPORTANT NOTICE FOR PATIENTS

Personal property

The primary responsibility for the safe-keeping of Patient Property [including cash, mobile phones, electronic devices and jewellery] lies with the patient and patients should send all valuable items home with relatives/friends if possible.

The Trust will not accept any responsibility for theft, loss or damage to any personal belongings brought into the hospital unless it is formally handed in for safe keeping and an official hospital receipt is obtained.

Any items you choose to keep with you, including mobile phones and other devices, are done so at entirely your own risk and the Trust will not be held liable for any loss or damage to these items.

Please take care of your own and your friends / relatives personal property.

Patient Label

**RELATIVE / NEXT OF KIN INDEMNITY FORM IN RESPECT OF RELEASE OF PATIENT PROPERTY
ONCE COMPLETED FILE IN PATIENTS NOTES FOR FUTURE REFERENCE**

I..... (Print name) confirm safe receipt of the items listed below
belonging to... (Patient's name) from (staff member's name)

Property:

.....
.....
.....
.....

I confirm that I have read/been offered* the opportunity to read the Trust's Patient Property Policy and hereby state that I am the appropriate person to take custody of the property listed above in accordance with the Policy. In removing this property from the Trust, I agree to indemnify the Trust in relation to any claim/dispute and or/legal proceedings in connection with the above property and to keep the Trust indemnified.

Signed.....

Relationship to the patient

Contact address:

Witnessed by:

Print name:

Sign:

* delete as applicable

University Hospitals of North Midlands

NHS Trust

EXECUTOR / ADMINISTRATOR RELEASE OF PROPERTY INDEMNITY FORM

University Hospital of North Midlands [NAME]
Finance Department [ADDRESS]
Floor 3, Springfield Building, RSUH,
Newcastle Road [ADDRESS]
Stoke on Trent
Staffs, ST4 6QG

Regarding the property of the late [NAME]

In consideration of your handing over the valuables listed below:

[LIST VALUABLES/MONEY/CHQ]

Please release these valuables to:

Name.....

Address.....
.....

Being the assets now in your hands in respect of the above-named, I hereby undertake to indemnify you and keep you indemnified against all actions, proceedings, claims or demands whatsoever which may be taken or made against you by any person claiming to be interested in the property of the above-named or otherwise and against any costs or expenses whatsoever which may be incurred or become payable in respect thereof

Signature

Relationship to patient.....

Date.....

Witnessed by
Name.....

Address.....
.....

Date.....

Signature

Witness must not be a relative of the claimant

University Hospitals of North Midlands

NHS Trust

Classification of Patients' valuables and property

Patients' belongings are divided into the following:

- Patient valuables
- Patient belongings

The following lists are not extensive but include

Patient Valuables

• Cash	• Cheques	• Credit/Debit Cards
• Foreign Currency	• Travellers Cheques	• Jewellery
• Watches	• Keys	• Pension Books
• Rent Books	• Cheque Books	• Savings Certificates
• Premium Bonds	• Lottery Tickets	•

• Motor Vehicles	• Other private modes of Transport
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There may be times when Patients arrive by their own vehicle and subsequently get admitted. In this event the car park security officers will be informed by the admitting department, and the keys treated as Patients Valuables

UHNM will not accept liability for the loss of, or damage to motor vehicles or other private modes of transport. Motor vehicles brought onto the sites are entirely at the owners' risk

• Dentures	• Hearing aids	• Glasses
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Are classed as Patient valuables but are normally required to maintain daily living standards and are generally not taken into safekeeping. Staff should pay particular attention that these are not misplaced by the individual and should be kept in the receptacles provided when not in use. The patient remains responsible for these items during their stay within the hospital.

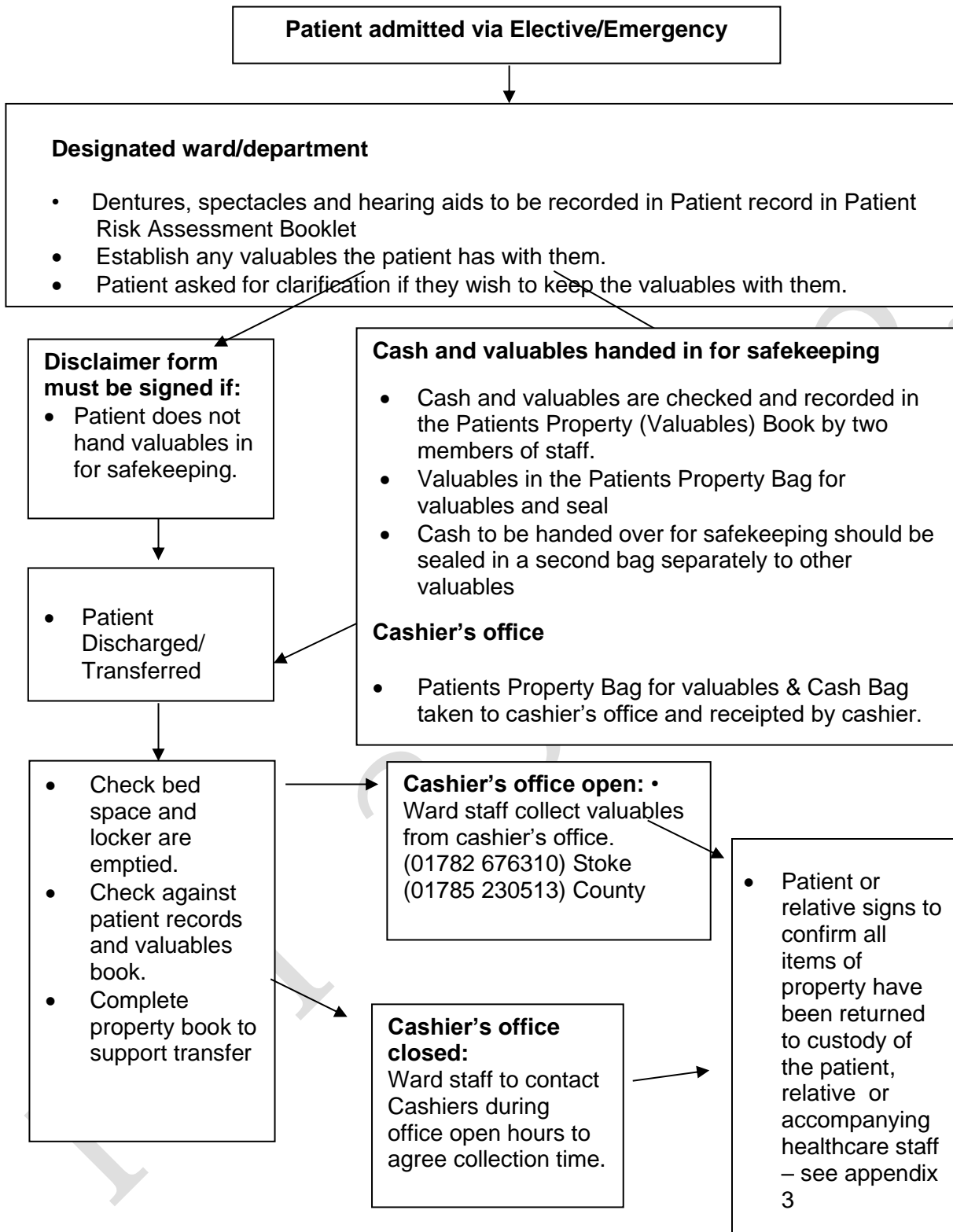
• Mobile Telephones	• Electronic games	• Laptops and other IT equipment
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Mobile phones and Electronic goods are permitted in Trust premises on the understanding that the Trust will only accept responsibility for personal items handed in for safekeeping

Patient belongings

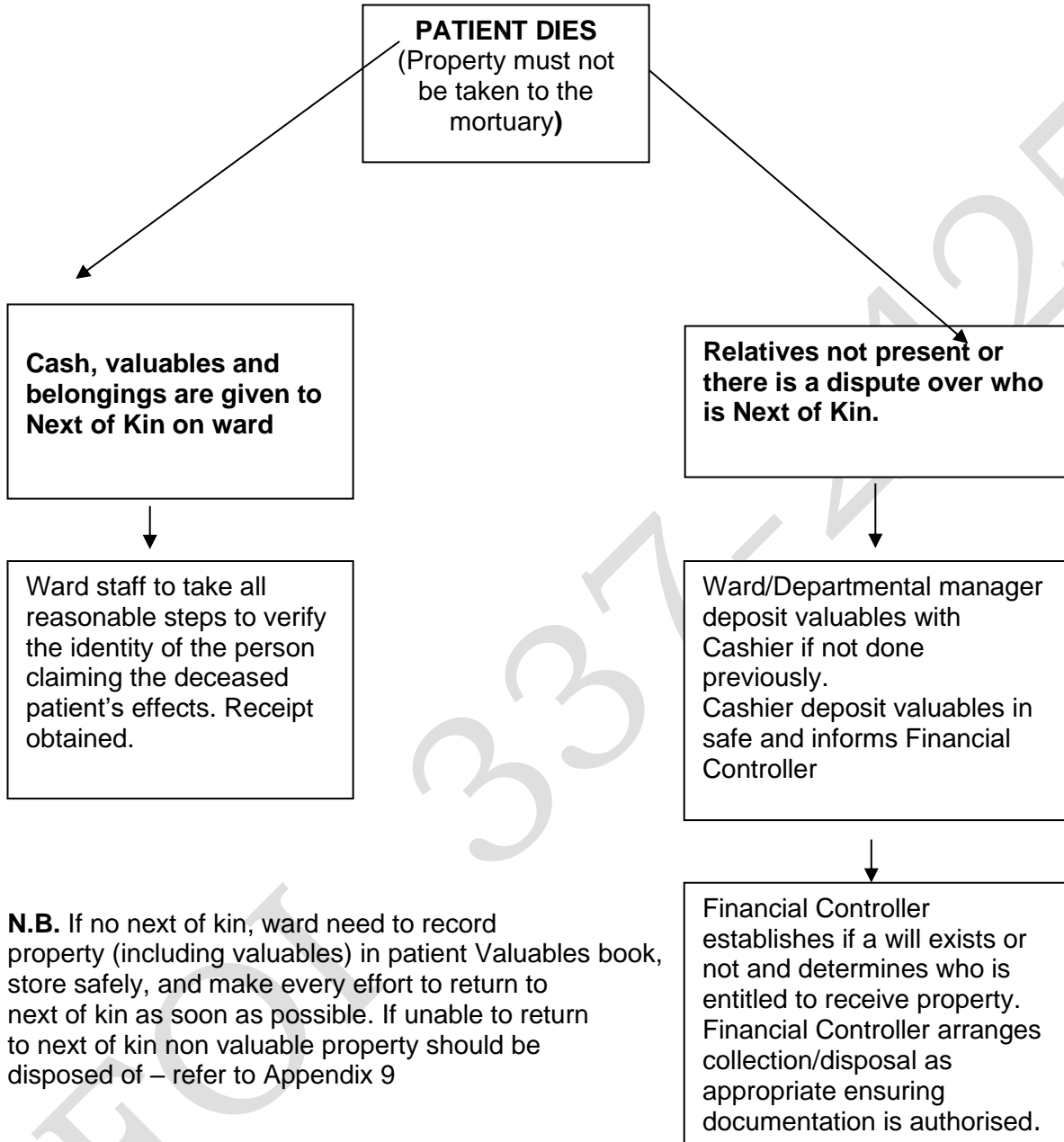
• Clothing	• Toiletries	• Books and Magazines
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PROCEDURE FOR HANDLING PATIENTS PROPERTY



N.B. If patient lacks capacity 2 nurses to sign and after checking property and valuables

VALUABLES AND BELONGINGS OF THE DECEASED PATIENT



Quick guide to Accepting Patients Valuables - Out of normal cashiering hours

When a patient is admitted by planned or unplanned emergency care, ultimately they are in control of their own belongs – unless they are incapable of managing their own affairs.

It is the responsibility of the member of Staff receiving the patient into the ward or department to ensure that all of the relevant documentation in relation to the patient is completed at the time of admission.

Staff MUST proactively ask the patient if they have any cash or valuables in their possession, ideally this should be when relatives/carers are in attendance and can take belongings away for safekeeping, patients will be advised of this.

If the patient chooses not to have any valuables taken away by the relatives or handed to Trust staff for safekeeping a disclaimer form must be signed and kept with patient notes, which can be found in the Patient Risk Assessment Booklet – or in appendix 1 of this policy

If the patient chooses to have the valuables taken into safe custody this should be recorded in the patient's valuables book by 2 members of staff (one registered) and a signature obtained from the patient.

The WHITE copy of the Valuables should be placed into Patients Property Bag, sealed and placed in night safe in accordance with local SoP

The cashier will provide a receipt the next working day as proof of the deposit.

Disposal Methods for Patients Property

Disposal Methods - Lost Property			
Item	Period kept for	Action to be taken	Method of Disposal
Cash & Foreign Currency	3 months	Held securely in Cashier safe	Banked in to Trust exchequer account at end of financial year
Cheques in someone's name	3 months	Cashier contacts bank	Return to bank or destroys by shredding
Credit/Debit Cards	24 hours	Cashier contacts bank	Return to bank or destroys by shredding
Savings Certificates	3 months	Cashier contacts provider	Returns to provider or destroys by shredding
Pension Books	1 month	Held securely in Cashier safe	Cashier returns to provider
Cheque books	1 month	Held securely in Cashier safe	Cashier returns to provider
Rent Books	1 month	Held securely in Cashier safe	Cashier returns to provider
Travellers Cheques	1 month	Held securely in Cashier safe	Cashier returns to provider
Premium Bonds and Lottery Tickets	1 month	Held securely in Cashier safe	Cashier returns to provider
Jewellery & watches	6 months	Held securely in Cashier safe	Procurement disposal of scrap process
Glasses	1 month	Sodexho to hold securely (Stoke only)	Procurement disposal of scrap Process
Teeth	1 month	Sodexho to hold securely (Stoke only)	Domestic Waste
Hearing aids	1 month	Sodexho to hold securely (Stoke only)	Domestic Waste
Keys	3 months	Held securely in Cashier safe (Stoke only)	Procurement disposal of scrap Process
Clothing	1 month	Sodexho to hold securely	Destroyed
Toiletries	1 week	Sodexho to hold securely (Stoke only)	Domestic Waste

University Hospitals of North Midlands NHS Trust
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Books & Magazines	24 hours	Sodexo to hold securely (Stoke only)	Put in wards/ waiting room/disposed in domestic waste
Motor vehicle	1 month	Transport Department to secure	Passed to Local Authority
Other private modes of transport	1 month	Transport Department to secure	Passed to council
Electronic games	3 months	Held securely in Cashier safe	Procurement disposal of scrap Process
Mobile telephones	3 months	Held securely in Cashier safe	Procurement disposal of scrap Process
Laptops & other IT equipment	3 months	Held securely in Cashier safe	Procurement disposal of scrap Process