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## **HOSPITAL POLICIES AND PROCEDURES MANUAL**

**APPROVED BY: Senior Administration**

### **Management of Patient Valuables and Belongings**

#### **INTENT**

To limit the risk of losing patients' valuables and belongings and to maximize the return rate for lost items.

#### **POLICY:**

The Queensway-Carleton Hospital is not responsible for any patient's belongings of monetary or sentimental value which may be lost, damaged or stolen during a patient's hospitalization.

Staff will provide reasonable care for patient belongings which can be classified as prostheses or mobility aids (e.g. eyeglasses, artificial limbs, dentures, walkers, etc.).

Special attention is necessary to manage the valuables and belongings of the unconscious or cognitively impaired patient.

In the case of an emergency admission, the patient's valuables will be kept in a safe located in the Protection Services Office in the Emergency Department.

Small items of value will be stored in the safe in the Finance Department when possible.

In the case of death, when the body is prepared for the morgue, all jewelry that remains on the body will be released through the funeral home process.

The Hospital participates in a Lost and Found program to organize the security, storage, return and disposal of unclaimed items.

#### **PROCEDURE:**

1. Patients are advised through the Admissions Terms form that "I am hereby advised and agree that the Hospital encourages me to not keep personal property with me at the Hospital and that the Hospital accepts no responsibility or liability for any personal property that I have on site during this Admission or that I may leave behind afterwards".
2. Patients are advised in the Patient Handbook to label their belongings, including glasses, dentures, and hearing aids, prior to admission.

3. Staff recommend to all patients to send valuable and unnecessary items home with relatives.
4. If patients are keeping belongings with them during their hospital stay, designated Patient Belonging Bags are available through Logistics; the stock number is available in the Inventory Catalogue and the bags should be available on all units and in departments that provide patient care.
5. Large belongings, such as wheelchairs, canes, etc. must be labeled as belonging to the patient.
6. In the event that valuables must be stored, items of value are itemized and recorded according to guidelines in Appendix A: *Guidelines for Handling and Processing Items of Value*.
7. Small items of value are bagged using the Personal Property Inventory bag (Appendix B) and large items of value to the patient are labeled, preferably with a pre-printed patient label and a note is made in the unit specific progress notes that valuables have been collected.
8. Protection Services and Finance Department procedures will be followed to secure valuables as per Appendix C: *Patient Valuables- Finance Procedures*
9. If valuables are sent home with a family member or next of kin, the Nursing Administration Receipt and Indemnity form (Appendix D) must be completed and retained in the chart.
10. If soiled or contaminated belongings are to be discarded, they must be itemized in the unit specific progress notes and the rationale for the disposal documented.
11. Departmental procedures for handling belongings are listed below:

### **Emergency Department**

- Regular belongings are placed in the Patient Belonging Bags and a preprinted label is attached to each bag.
- The bags are placed under the stretcher and transferred to new stretchers or beds as applicable.
- Staff transferring the patient are responsible for transfer of belongings
- Staff are to remove the Patient Belonging Bags when the patient is transferred from the stretcher to a bed.
- When the stretchers are readied to be wiped down after the patient is transferred, a double check is done to ensure that all patient belongings have been removed from the stretcher.
- The same procedures are followed for managing non-admitted ED patients' valuables and belongings.
- If there is police involvement, liaise with police to maintain evidence procedures.

### **Operating Room, Day Stay Unit (Same Day Admissions) and PACU**

- At the time of the pre-operative appointment and/or phone call, the patient is reminded not to bring valuables to the hospital.

- Valuable items are immediately sent home with a family member if possible.
- In the event there are valuables that cannot be sent home, small items of value are bagged using the Personal Property Inventory bag and placed with their regular belongings, for example, clothing in a large clear plastic bag or suitcase with a preprinted patient identification label attached. These items are all stored in the Day Stay Unit (for admitted patients) or in a locker for same day surgery patients.
- For elective Day Surgery patients, the regular belongings are placed in a locker until the patient is ready for discharge. For admitted patients, the regular belongings are kept in the Day Stay Unit until the patient is ready to be transported to the inpatient unit. For emergency patients, valuables/belongings remain under the stretcher and accompany them to PACU.
- Glasses, dentures, hearing aides, etc. that come to the OR with the patient are placed in a plastic tote with a patient label and placed under the stretcher.
- If the patient comes to the OR on a stretcher and is to be transferred onto a bed post-op, the tote is placed on the bed.
- The contents remain in the tote and accompany the patient to the inpatient unit where the staff that transfers the patient removes the contents from the tote and places them in the top drawer of the bedside table.
- Staff transferring the patient are responsible for transfer of belongings
- When the stretcher is readied to be wiped down after the patient is transferred, a double check is done to ensure that all patient belongings have been removed from the stretcher.

#### **Patient Transfers:**

- Belongings are collected from bedside tables, overbed tables, vanities, cupboards and windowsills, placed in the Patient Belonging Bags and a preprinted label is attached to each bag.
- A double check of the room is done by the person readying the patient for transfer to ensure that all patient belongings have been collected.
- The labeled bags are put on the patient's wheelchair/ stretcher.
- Staff transferring the patient is responsible for transfer of belongings.
- Staff is to remove the Patient Belonging Bags from the stretcher when the patient is transferred from a stretcher to the bed.
- When the stretcher is readied to be wiped down after the patient is transferred, a double check is done to ensure that all patient belongings have been removed from the stretcher.

#### **Patient Discharges:**

- Belongings are collected from bedside tables, overbed tables, vanities, cupboards and windowsills and given to the patient or relative prior to departure.
- A double check of the room is done by the person readying the patient for discharge to ensure that all patient belongings have been collected.
- Items that cannot accompany the patient when being transported by ambulance are noted in the unit specific progress notes and alternate arrangements for transport of these items are made by the person readying the patient for discharge.

#### **Deceased Patients:**

- Belongings are collected from bedside tables, overbed tables, vanities, cupboards and windowsills by Nursing and placed in Patient Belonging Bags with a preprinted label attached.

- If soiled or contaminated belongings are to be discarded, they must be itemized in the unit specific progress notes and the rationale for the disposal documented.
- If valuables or belongings are sent home with a family member, the Nursing Administration Receipt and Indemnity form (Appendix D) must be completed and retained in the chart.
- Dentures are to remain with the deceased and if not in the mouth of the deceased, then in a labeled container and documented in the unit specific progress notes.
- Any jewelry that remains on the body of the deceased, rings to be taped if loose, must be itemized and documented in the unit specific progress notes.
- If there is no family or POA available to take the belongings at the time of death, the labeled Patient Belongings Bags and the labeled large items are taken to the ACC desk.
- All remaining small items of value are itemized, recorded and bagged using a Personal Property Inventory bag and a note is made in the unit specific progress notes that valuables have been collected.
- Next of Kin or POA is notified that valuables can be collected from the Finance Department in the company of Protection Services personnel and arrangements are made for pick up of belongings from ACC desk and documented in the unit specific progress notes.
- If the belongings cannot be picked up in the short term, arrangements can be made to store these items for a reasonable period of time by contacting the Hospital Services Coordinator at extension 1701.

#### **Clinics, Diagnostic and Miscellaneous Areas:**

- When outpatients need to disrobe or remove jewelry, patients are to place their belongings and valuables in a Patient Belongings Bag labeled with the patient's name, date and location.
- If the patient does not have a suitable container to hold small items of value, utilize a denture cup or a small zip lock bag to contain the items before they are placed in the Patient Belongings Bag.
- Large belongings, such as wheelchairs, canes, etc. must be labeled as belonging to the patient.
- To reduce chance of loss, belongings should be kept in close proximity to the patient.

#### **Found Items:**

- If valuables or belongings are found that can be attributed to a patient, the items are to be placed in designated bags, labeled with the patient's name and unit/department location.
- Valuables are taken to Finance by Protection Services personnel.
- Bags of belongings are placed in a designated box at the ACC desk.
- The bags are collected from the ACC desks by EVS weekly, on Wednesday.
- Out-patient departments must have a designated area to hold found items and should contact the Hospital Services Coordinator at extension 1701 to arrange pick up
- Items are recorded in a Lost and Found Log Book by the Hospital Services Coordinator.
- The patient or owner is contacted if applicable and collection is arranged.
- The patient or owner signs the Lost and Found Log Book when the items are collected.
- In the event that valuables or contraband are detected in the found items, Protection Services are to be notified to collect the items, signing them out.
- All found items, of unknown ownership, are bagged and labeled with the date and location and handled in the same manner as patient items.

**All Unclaimed Items are:**

- Held for a reasonable period of time as determined by the Manager, EVS.
- Recorded as disposed of, in the Lost and Found Log Book.

**All Unclaimed Valuables are:**

- Held for a reasonable period of time as determined by the Manager, Finance.
- Final disposition is to be recorded in the Patient Valuables Book

## **Appendix A**

### **Guidelines for Handling and Processing Items of Value**

#### **Jewelry**

Items are listed and described separately (e.g. one gold coloured ring with three clear stones; one silver coloured watch with expansion bracelet).

#### **Glasses, hearing aids, prostheses, etc.**

Items are listed separately.

#### **Money**

Document total amount of cash received, listing foreign currency separately.

#### **Small Items**

Small items of value are secured using the Personal Property Inventory bag.

#### **Steps to utilize Personal Property Inventory bag**

1. List items on the Personal Property Inventory bag
2. Affix a pre-printed patient label over the brand name label on the Personal Property Inventory bag so that the serial number is not obscured.
3. Photocopy the Personal Property Inventory bag
4. Place the photocopy in the patient chart
5. Give the patient the Personal Property Inventory bag receipt
6. If the patient is unconscious or cognitively impaired, the receipt is to be retained with the patient chart until such time that it can be reclaimed by the patient or released to the Power of Attorney.

#### **Large Items**

Items such as wheelchairs, prostheses, and canes must be labeled, preferably with a pre-printed patient label.

# Appendix B

Remove this Receipt Before Attempting to Seal Bag. Retain for Records.



CAUTION: ATTEMPTS TO REOPEN WILL INDICATE TAMPERING

7244050

DO NOT CUT HERE TO OPEN - Alert Security Products



TEST, QUEENSWAY 26 Jun 2010  
NG00-222-020 ER0000040/11 =  
TEST, FAMILY LOC = OCT 1948  
8888888804-00 613-555-2000  
02 02 049 011004

### INSTRUCTIONS:

1. Use ballpoint pen. Work on a smooth, flat surface.
2. Complete required information in all white areas of the bag and receipt.
3. Tear-off perforated receipt. Remove adhesive backing and fold at line indicated to create tamper evident seal.

## Personal Property Inventory

Name \_\_\_\_\_ Date \_\_\_\_\_

Location \_\_\_\_\_

Identification# \_\_\_\_\_

| Inventory | Received By |
|-----------|-------------|
| 1. _____  | 6. _____    |
| 2. _____  | 7. _____    |
| 3. _____  | 8. _____    |
| 4. _____  | 9. _____    |
| 5. _____  | 10. _____   |

Comments \_\_\_\_\_

DO NOT CUT HERE TO OPEN - Alert Security Products - DO NOT CUT HERE TO OPEN - Alert Security

## **Appendix C**

### **Patient Valuables- Finance Procedures**

Patient Valuables are delivered to Finance by Protection Services personnel.

#### Delivery of Valuables to Finance

1. Finance enters the patient name in the Patient Valuables Book located in the Finance safe and the dollar amount and/or description of Patient Valuable.
2. The Patient Valuables Book is signed by the Protection Services personnel delivering the valuables and by Finance staff receiving the valuables.
3. Valuables are then placed in the appropriate envelope with patient name as identification.
4. Patient Valuables Envelope and Patient Valuables Book are returned to and kept in the Finance Safe.

#### Pickup of Patient Valuables from Finance

1. Valuables may be picked up by Protection Services personnel who may be accompanied by the Patient or Person showing Power of Attorney for the patient.
2. In the event that a patient is incapable of making decisions, a copy of the Power of Attorney for Personal care must be presented.
3. \*If patient is deceased, a Power of Attorney must be made available to Finance and Protection Services personnel by the person claiming the valuables.
4. A photocopy of the Power of Attorney must be kept in the Patient Valuables Book.
5. Finance and Protection Services personnel, and the Person picking up all or a portion of the valuables must both sign and date the Patient Valuables Book.



## Appendix D



Queensway Carleton  
Hospital

### **NURSING ADMINISTRATION** **Receipt and Indemnity**

I acknowledge receipt of the personal property of

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(Name of Patient)

listed below and in consideration of such delivery to me, I hereby undertake and agree to indemnify QUEENSWAY CARLETON HOSPITAL against all claims and demands which may be made by any person against the Hospital relating to same.

DATED this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

#### **DELIVERED BY AND IN THE PRESENCE OF:**

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(Hospital Representative)

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(Signature of Person Receiving Valuables)

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(Relationship to Patient)

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(Address)

#### List of Personal Property:

|  |
|--|
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|  |
|  |
|  |