

Document Details		
Title	Finance Procedure I17: Patients Property – Cash & Valuables	
Trust Ref No	1564-57375	
Local Ref (optional)		
Main points the document covers	Procedure for ensuring the safekeeping & return of patient property and how it is accounted for.	
Who is the document aimed at?	Staff dealing with patient property and Financial Accounting staff.	
Author	David Court Head of Financial Accounting	
Approval process		
Approved by (Committee/Director)	Chief Finance Officer	
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No	Date	Amendment
1	June 2012	Para 1: Expanded introduction Para 2: New – information & advice to patients/relatives Para 12: Expanded – return of valuables Para 14: New – missing/damaged property
2	July 2015	Para 4 & 12: Flowcharts added Para 2 & 11: Direct bank transfer as method of repayment Minor additional clarification throughout Reference to updated NHS Protect document
3	August 2016	Para 1.5 & 3.1: reference to finance procedures for security of safes and cash receipts/banking Para 4.7: reference to Trust safeguarding procedures Para 12.4: procedure for handling uncollected property
4	August 2019	Para 1.4 Patient cash recommended to be paid into Trust Bank account rather than it being policy.

		Para 4.5 Updated for situation where the patient refuses cash to be banked in Trust Bank account Para 11.2 references how cash will be returned if not deposited in Trust Bank account. Appendix A – Disclaimer updated to include cash Minor additional clarification throughout Remove reference to NHS Protect
5.	October 2022	Para 7.2 replaced Petty Cash voucher with Sheet as process has been updated.

Policies, Procedures, Guidelines and Protocols

Shropshire Community Health NHS Trust

Finance Procedures

Section I Banks & Cash

I17 Patients' Property (Cash and Valuables)

1 – Introduction

- 1.1 Under Standing Financial Instructions, the Trust must provide safe custody for patients' property i.e., cash and other valuables. This procedure ensures that appropriate measures are in place for the secure management of patients' property, so that the risk of loss or damage is minimised.
- 1.2 "Valuables" are items of value, whether monetary or sentimental. Examples of items generally regarded as valuables are credit/debit cards, cheque books, savings/benefit books, passports, keys, jewellery, watches, mobile phones and other portable electronic devices. Valuables would not include clothing or "comfort items" such as toiletries.
- 1.3 The property of short-term patients (i.e., those likely to stay for less than 24 hours) is not normally taken in by the Trust. Should it be these procedures will apply.
- 1.4 The general principles of accepting property into the custody of the Trust, ensuring secure storage and returning items back to the care of the patient are the same for both cash and other valuables, with the exception that valuables are physically held on the premises, whereas the recommended option for cash is for it to be paid into the Trust bank account.
- 1.5 Where this procedure refers to storage in safes, Finance Procedure I8 – Security of Safes & Keys should also be complied with.
- 1.6 Where the cash deposited for safekeeping is foreign currency, this should be dealt with in the same way as other valuables, rather than cash.
- 1.7 This procedure covers:
 - a) General control of patients' property
 - b) Receipt of property
 - c) Withdrawal and return of property
 - d) Accounting procedures.

- 1.8 On the death of a patient, their property must be safeguarded by the Trust until released to an authorised claimant. This is covered separately in Finance Procedure I18 – Deceased Patients’ Property.
- 1.9 Staff should be informed on appointment, by the appropriate departmental or senior manager of their responsibilities and duties for the administration of patients' property.

2 – Information and advice for patients and relatives/carers

- 2.1 Information and advice provided to patients and their relatives/carers on patients’ property should include the following key messages:
- a) Patients should be told to bring as little property as possible into hospital, particularly valuables.
 - b) The Trust cannot accept liability for loss of or damage to any property unless it is handed over for safekeeping.
 - c) Amounts of cash repayable on discharge which have been deposited in the Trust’s bank account and over £100 will be made as a cheque or direct bank transfer.

3 – Administration Office responsibilities

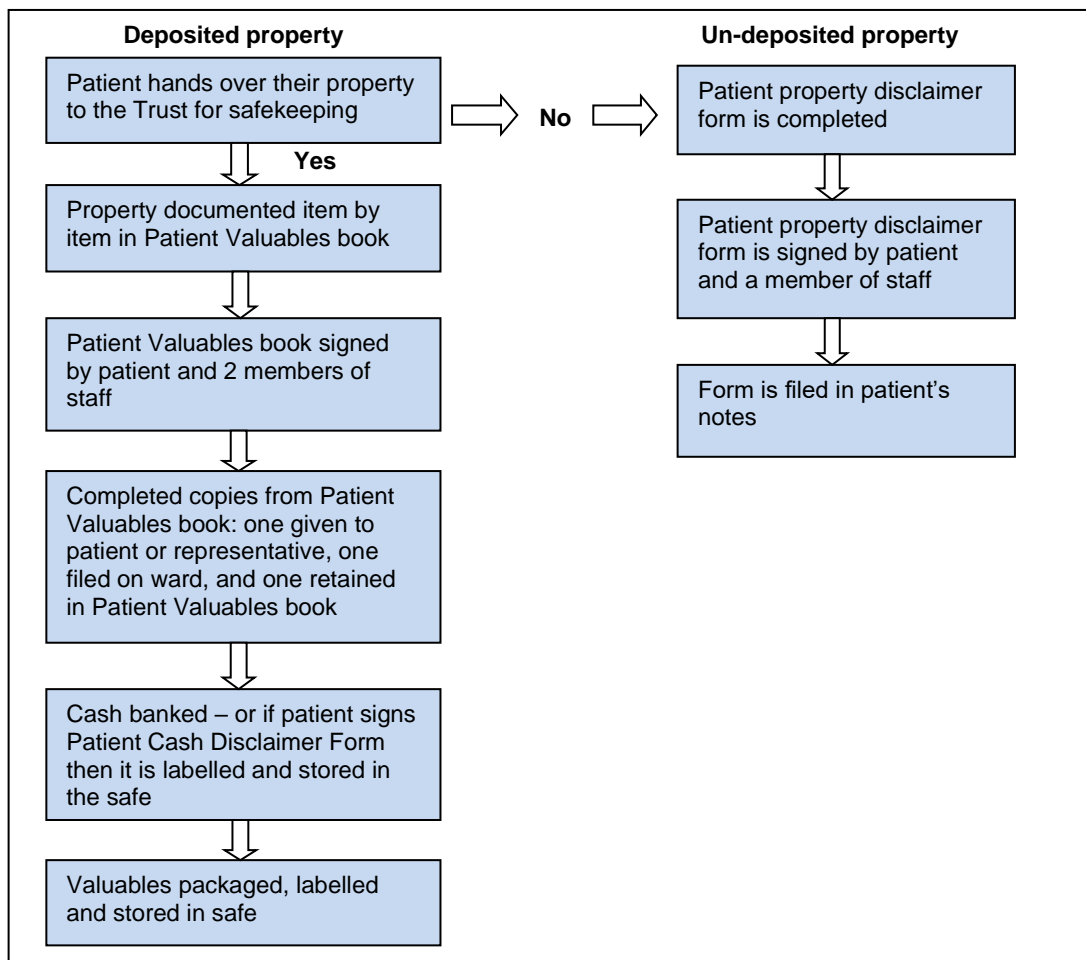
- 3.1 It is the responsibility of the Admin Team Leader/Manager to ensure the overall day-to-day security of patients’ property. This includes:
- a) Receiving any valuables into safe custody and banking any cash in line with Finance Procedure I2: Cash Receipts & Banking.
 - b) Liaison with the Department of Work & Pensions (DWP) or any other agency, regarding any benefits or allowances due to the patient.
 - c) Ensuring that property is correctly returned to patients, or their representatives.
 - d) Maintaining a record of individual patient’s cash balances, and other appropriate administrative and financial records, keeping them updated on a daily basis, and forwarding the required information monthly to the Finance Department.
 - e) Where considered necessary, preparing further local instructions detailing specific duties and procedures within the Administration Office.

4 – Receipt of patients’ property (during Administration Office hours)

- 4.1 All patients are strongly encouraged to deposit their property with the Administration Office. Staff must ensure that those patients refusing to do so sign a “Form of Disclaimer” (see Appendix A) which is witnessed, indemnifying the Trust against any loss. This form is kept with the patient’s records. If the Trust fails to obtain a signed disclaimer and the property remains with the patient, the Trust could be liable for loss, due to negligence. However, the Trust must still make suitable provision for dedicated storage (preferably lockable) that is under the patient’s control.
- 4.2 All cash and valuables are recorded in the ward Patients’ Valuables book. This is a triplicate book (format at Appendix B) which is completed and signed by a qualified healthcare professional, witnessed by a second member of ward staff (who need not be qualified) and signed by the patient.

- 4.3 When completing the Patients' Valuables book, the following should be taken into account:
- a) The terms "yellow metal", "white stones", etc. should be used to describe jewellery.
 - b) For credit cards, the type should be recorded (e.g., Barclaycard) but not the number.
 - c) For cheque books, the next usable cheque number should be recorded.
 - d) For allowance/pension books, the date of the next counterfoil should be recorded.
- 4.4 The **top copy** (the patient's receipt) is immediately detached and handed to the patient. If the patient is incapable or will not accept the receipt it is filed with their patient notes until it can be accepted. The book is then taken, with the property, to the Administration Office where a member of Administration Office staff checks that the form is completed correctly and is an accurate record of the property to be deposited. No alterations to the forms may be made without the patient's knowledge.
- 4.5 The **second copy** is removed from the book by the Administration Office member of staff and retained in the file for the appropriate ward. Valuables are packaged, clearly labelled (cross referenced on the outside of the package with the patient's name and the number of the Patient's Valuables receipt) and stored in the Administration Office safe. Any valuables which are too large to be held in the safe are kept in an appropriate labelled container. A separate receipt is issued for cash. The cash is held securely in the Administration Office until it is banked into the Trust bank account unless the patient gives strict instruction not to. In this situation staff must ensure the patient refusing to deposit cash into the Trust bank account sign a Patient Cash Disclaimer Form. The cash will then be treated as if a valuable and kept in the Administration Office safe unless the patient refuses to do so in which case the Trust must still make suitable provision for dedicated storage (preferably lockable) that is under the patient's control
- 4.6 The **third copy** is retained in the book. The book is then returned to the ward where it should be stored securely.
- 4.7 If the patient's mental or physical condition is such that they are unable to ask the Trust to safeguard their valuables, or they are unable to sign their entry in the Patients' Valuables book, the member of ward staff makes a note to this effect on the form in the space where the patient would normally sign. This note is witnessed. In these cases, all valuables are taken for safekeeping. The Trust's safeguarding procedures must also be complied with.
- 4.8 Patients' Valuables books are classified as controlled stationery. They are kept by the Financial Accounting section of the Finance Department and issued to the Administration Office in accordance with Finance Procedure I5 – Controlled Stationery. As they are controlled stationery, each receipt must be accounted for. If it is necessary to cancel an entry, all three copies must be retained in the book, clearly marked "CANCELLED". It is also best practice to mark the reason for cancellation on the top copy.
- 4.9 The Administration Office should have their own local procedures for issue and retention of the Patients' Valuables books to wards e.g., issue on production of the old, completed book, and retention on the ward for inspection when required.

- 4.10 The flowchart below outlines the key actions for staff with regard to deposited and un-deposited patient's property during their stay.



5 – Receipt of patients' property (outside Administration Office hours)

- 5.1 When the Administration Office is closed, the property, together with the Patients' Valuables book is kept in a designated ward safe.
- 5.2 On the re-opening of the Administration Office, a member of Administration Office staff collects from the ward any valuables and the Patients' Valuables books deposited with them. The valuables are checked against the details in the book, and any cash counted and verified.

6 – Other cash receipts

- 6.1 Benefits and allowances
Patients may be entitled to cash benefits from the DWP, or other sources. Where the patient has requested it, the Administration Office Manager will arrange for such benefits to be paid directly into the Trust bank account and allocated to the patient's individual balance. Any documentation relating to benefits for patients (passbooks etc) is retained in the Administration Office and recorded in a control book for that purpose.
- 6.2 Other money
Patients may be given money by friends and relatives and should be encouraged to hand all or part of it into the Administration Office for safety. Such deposits are recorded in the Patients' Valuables book.

7 – Withdrawal of patients' cash (during Administration Office opening hours)

- 7.1 Patients may withdraw up to £100 in cash during Administration Office opening hours, providing sufficient funds are held. For security reasons patients are discouraged from carrying large sums of money.
- 7.2 Cash is paid to the patient from the petty cash float held in the Administration Office (refer to Finance Procedure I11 – Petty Cash Administration). The Petty Cash Sheet signed by the patient if possible, or a nurse on behalf of the patient, as well as the member of the Administration Office staff paying out the money. Details from the Petty Cash Sheet (ref number, date and amount) are recorded on the patients' cash ledger against the patient's name.

8 – Withdrawal of patients' valuables (during Administration Office hours)

- 8.1 The item to be withdrawn is verified against the second copy of the Patient's Valuables book, held on file, which is then signed by the patient to confirm withdrawal.
- 8.2 The withdrawal of patients' valuables outside normal Administration Office hours is not allowed.

9 – Goods obtained on behalf of patients

- 9.1 Wherever possible, purchases made by patients should be in cash. However, there may be occasions when this is not possible (e.g., where the medical condition of the patient is such that they cannot handle cash or make purchases for themselves).
- 9.2 It is the responsibility of ward staff to ensure that goods purchased are identified to individual patients and used for that patient's personal benefit. Ward staff maintain a simple account for each patient of all purchases and issues made.

10 – Payment of patients' bills

- 10.1 There may be occasion when a patient wishes the Trust to pay an external bill on their behalf. Such payment is made at the discretion of the Admin Team Leader/Manager, who arranges for an appropriately worded request to be prepared and signed by the patient, witnessed by a member of ward staff and forwarded to the Accounts Payable section of the Finance Department. A bacs/cheque is raised and either sent directly to the payee or returned to the Administration Office, who forward it to the payee (with an appropriate covering letter from the Trust if necessary).
- 10.2 Administration Office staff record any such payments on the patient's individual record.

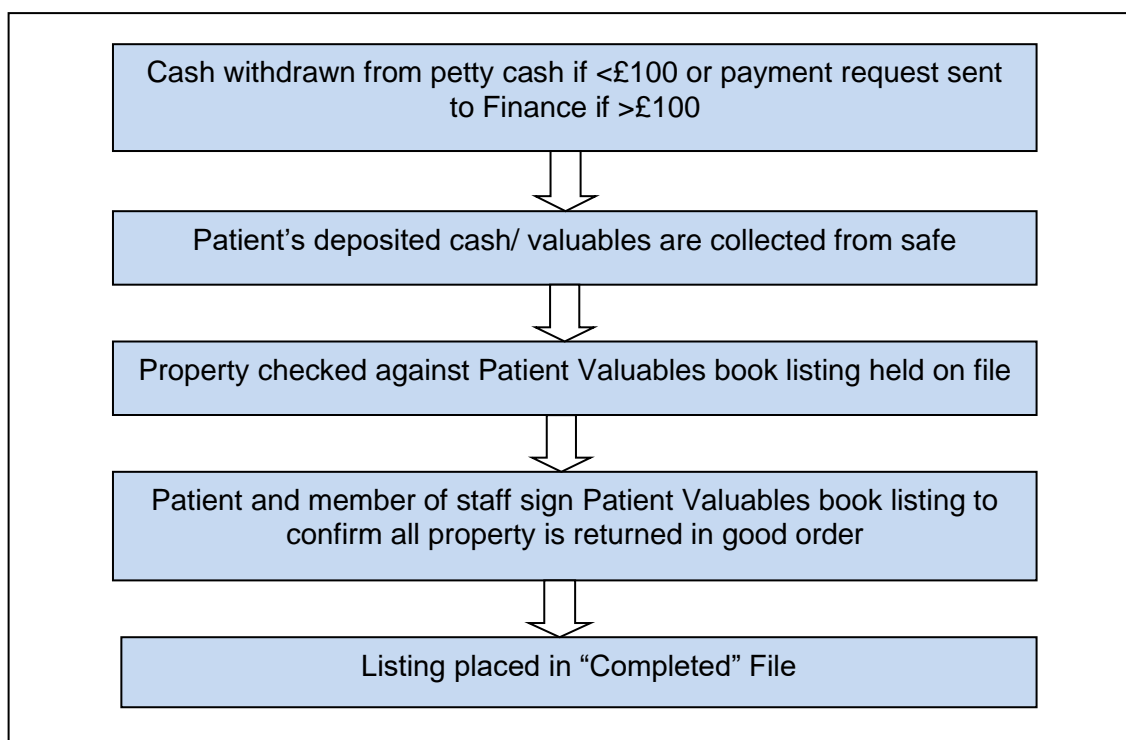
11 – Return of patient's cash on discharge

- 11.1 When a patient is discharged, depending on the balance of money held on their behalf, they can be given up to a maximum of £100 in cash and the balance by cheque or direct bank transfer. A request is sent to the Accounts Payable section of the Finance Department to make the payment. This may be given to the patient or posted, depending on the circumstances of the discharge and the judgement of the Admin Team Leader/Manager. If the patient does not have a bank account, then the full amount of the balance can be paid in cash.

- 11.2 If a patient refused to deposit their cash in the Trust bank account, then the return of cash will follow procedure 12 Return of patient's valuables on discharge.

12 – Return of patient's valuables on discharge

- 12.1 Property should not be handed over to anyone other than the patient, or their representative if incapacitated, without the written consent of the patient.
- 12.2 Valuables belonging to the patient are retrieved from the safe and checked against the second copy of the Patients' Valuables book, held on file. Both the member of staff and the patient's signature are obtained, and the completed form placed in the "completed" file.
- 12.3 If a patient leaves the hospital without collecting any valuables previously recorded in the Patients' Valuables book and held in the safe, then the Admin Team Leader/Manager tries to contact them to make arrangements for them to call and collect the valuables. If collection is not possible, arrangements are made to post the valuables to the address held on record, using either recorded delivery or proof of posting as a record.
- 12.4 If contact cannot be made and valuables remain uncollected, the hospital will keep them for a time then dispose of them. In line with the Limitations Act 1980, valuables are kept for 6 years and non-valuables for 3 months. If items are to be disposed of, a record must be maintained of attempts to contact the patient. This should be signed off by the Hospital Manager.
- 12.5 The flowchart below outlines the key actions for staff with regard to returning patient's property on discharge.



13 – Accounting procedures within the Finance Department

- 13.1 It is the responsibility of the Accounts Payable section to raise cheques or make direct bank payments from the Trust bank account for return of a patient's cash on discharge, payment of a patient's bill or payment for goods purchased on behalf of patients.
- 13.2 Control account reconciliations are carried out by the Senior Financial Accountant. Any variances are investigated, and the Administration Office notified of any adjustments that are required to correct the Patients' Cash records.

14 – Missing or damaged property

- 14.1 If a patient's deposited property is reported missing, the staff responsible for its storage must investigate immediately. If the property cannot be found, or the circumstances seem suspicious, the Local Security Management Specialist must be informed, and an incident report completed.
- 14.2 If a patient's property is reported damaged, the staff responsible for its storage must make enquiries to ascertain the cause, and an incident report completed.
- 14.3 In both cases, the patient may make a complaint and/or claim compensation (see Finance Procedure J1 – Losses and Special Payments).

References & associated documents

Patients' Property (Cash & Valuables) Form of Disclaimer
Patients' Valuables book

Reviewed By _____

Date _____

Authorised By _____

Date _____

Shropshire Community Health NHS Trust

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Appendix: A Form of Disclaimer

Shropshire Community Health NHS Trust

Patient's Cash and/or Valuables

Form of Disclaimer

I confirm that I do not wish to hand over for safe custody any property currently held by me. I understand that the Trust accepts no responsibility for loss of or damage to personal property of any kind, including cash, in whatever way the loss or damage may occur, unless deposited for safe custody, and an official receipt has been obtained.

Signed _____

Print name _____

Witness _____

Full name & designation of witness _____

Date _____

Shropshire Community Health NHS Trust

Finance Procedures

I17 Patients' Property (Cash and Valuables) Appendix: B Format – Patients' Valuables Book

Serial No: PV _____

Shropshire Community Health NHS Trust

Patients Valuables Receipt

Hospital: _____ Ward: _____

Surname: _____ First Names: _____

Address: _____

Date Admitted: _____ Case Note Number: _____

Cash Deposited: £ _____

Valuables Deposited:

(This includes credit/debit cards, cheque books, savings/benefits books, passports, keys, jewellery, watches, mobile phones & other portable electronic devices. For cheque books record the next usable cheque number, for benefits books record the next counterfoil date.)

Signature of nurse receiving the above: _____

Rank of nurse: _____

Signature of witness: _____ Date: _____

Signature of patient: _____ Date: _____

Received in Admin Office by: _____ Date: _____

Receipt number for cash: _____