

Safe Keeping of Patient and Resident Valuables

1. Introduction

1.1. Purpose

This policy addresses the provision of safe and secure storage of patient and resident valuables upon admission to a Providence Health Care (PHC) facility and for their efficient return to the patient, resident, or authorized person upon transfer, or discharge of the patient or resident.

1.2. Scope

This policy applies to all PHC [Staff](#) who work in PHC hospitals and long- term care homes or are otherwise involved in the safekeeping of patient or resident valuables, including staff in Admitting/Access Services and the Emergency Department, Cashiers, Nurses, Unit Coordinators, Managers and Site Leaders.

PHC does not provide for any safekeeping of outpatient valuables. Personal property kept with the patient at the assigned location (e.g. stretcher bay) will be the responsibility of the patient.

2. Policy

On admission to a PHC facility, the patient or resident shall be informed of their responsibility for the care of valuables. The admitting staff shall advise the patient or resident to keep no more than minimal personal items and valuables in their possession. Patients will be asked to return excess valuables, including cash, to their home via a family member or other authorized person. Residents will be asked to safe keep valuables with family or other authorized person where possible. Patients and residents should keep no more than \$20 cash at their bedside.

Personal valuables kept by the patient or resident in their room will be the responsibility of the patient or resident. If the patient or resident is unwilling or unable to leave excess cash or other valuables at home, with a family member or other authorized person and chooses not to deposit valuables in safekeeping, the designated staff shall have the patient or resident initial and sign the "Loss of Valuables" section on the [Record of Admission form](#).

Valuables entrusted to PHC Staff will be kept in a secured place with restricted access. PHC will make reasonable efforts to safely secure valuables deposited in safekeeping and to return the items in the same condition in which they were received.

PHC will make reasonable efforts for patients or residents to access their valuables in safekeeping during their stay within a PHC facility.

An attempt will be made to contact the patient or resident to collect valuables left at PHC. Except in extenuating circumstances, unclaimed valuables that remain in safekeeping for longer than three months after a patient or resident is discharged will be disposed of.

2.1. For all Items Deposited in Safekeeping

Two people, one of whom must be a staff member, must complete the administration of patient or resident valuables at all times. The [Personal Belongings form](#) must be fully and accurately completed listing all patient or resident valuables deposited in safekeeping, witnessed and signed by the patient, resident or authorized person and a staff member.

Distribution of this three part form is as follows:

- (1) White copy: Patient or resident's health record copy
- (2) Canary copy: Storage envelope copy
- (3) Pink copy: Receipt for patient, resident, or authorized person

The patient or resident should observe the placement and sealing of their valuables into the [Storage Envelope](#) if possible. The patient or resident should observe that the canary copy of the Personal Belongings form is placed into the Storage Envelope.

If the patient or resident is incapable of signing the Personal Belongings form and there is no authorized person present, at least two staff members must complete and sign the Personal Belongings form.

The Storage Envelope must be locked in the designated secured place for safekeeping.

2.2. For all Items Withdrawn from Safekeeping

All withdrawal of valuables from safekeeping are to be properly documented, witnessed and signed by the patient, resident or authorized person

The patient, resident, or authorized person should observe the opening of the Storage Envelope.

Patients or residents may retrieve their valuables from safekeeping by presenting their copy of the completed Personal Belongings form along with proper identification (e.g. driver's license or other official picture identification) to a Staff member.

Persons other than the patient or resident retrieving valuables from safekeeping will be required to provide formal proof of authorization to receive the valuables and PHC requires two pieces of ID from the person claiming the valuables including at least one government-issued picture ID.

Return of valuables upon patient or resident discharge, transfer to another care facility or death shall only be to the patient, resident, or authorized person.

Valuables in safekeeping must follow the patient or resident upon permanent transfer of the patient or resident between all facilities, including non-PHC facilities.

If a patient or resident's deposited valuables are reported missing or damaged, the Patient or Resident Care Manager must be informed immediately and a Property/Security incident report should be completed in the Patient Safety Learning System (PSLS).

Patient or Resident Care Managers or designated staff will perform a periodic review of valuables in safekeeping to identify any Storage Envelopes belonging to patients or residents who have been discharged for longer than 3 months. Reasonable efforts will be made to follow up with patient, resident, or authorized person regarding valuables left in PHC's possession and not claimed within 3 months of the discharge date. Refer to the instructions on the Storage Envelope for the proper disposal of unclaimed patient or resident valuables.

2.3. Deceased Patients

Personal items and valuables belonging to a deceased patient or resident must be gathered, inventoried, documented, witnessed and deposited in safekeeping until they can be released to the authorized person of the deceased patient or resident.

Valuables should be neatly packed and labeled in the Personal Belongings Bags or alternately into a suitcase or duffel bag if brought in by the patient or family. Under no circumstances should garbage bags be used.

Special care is to be given when handling items such as Eagle Feathers, Traditional Medicines, or other valuables of cultural significance, and every effort made not to damage these items.

2.4. No Known Family

If a patient or resident dies and the authorized person does not immediately claim the patient or resident items, the items should be gathered, inventoried, documented, witnessed and deposited in safekeeping until they are released to the authorized representative of the estate. Valuables may be released to the Public Trustee upon presentation of appropriate documentation and identification.

2.5. Dead on Arrivals (DOAs)

With the exception of cases with the BC Coroner Service and unless otherwise instructed by an authorized person, all valuables of a deceased patient should be gathered, inventoried, documented, witnessed and deposited in safekeeping until they can be released to the authorized representative of the estate.

2.6. Release of Responsibility

When conducting a final release of all items in safekeeping, valuables may only be released to the patient, resident, or authorized person after they have signed the "Receipt of Effects on Discharge" section on the Personal Belongings form. By signing the "Receipt of Effects on Discharge" section, the patient, resident, or authorized person agrees to indemnify PHC from any and all claims pertaining to the release of the valuables.

2.7. Release of Safekeeping After Hours

If the patient is discharged after-hours, provide the patient with the contact information for the Cashier's Office (St. Paul's Hospital) or Admitting Offices (all other sites) to arrange for withdrawal of valuables during office hours.

3. Responsibilities

3.1. Staff

Staff are responsible for communicating to the patient or resident the available options for storage of their valuables while in a PHC facility and inform them that all valuables kept by the patient or resident will be the responsibility of the patient or resident

If the patient or resident is incapacitated or is otherwise unable to place their valuables in safekeeping, PHC staff will act on behalf of the patient or resident and arrange for safekeeping of their valuables.

If a patient or resident lacks capacity to make decisions about their property (e.g. is brought unconscious into the Emergency Department; has dementia), PHC staff will take reasonable and appropriate measures to identify and deposit personal items as per this policy, with patient and resident care being the first priority.

Staff will release valuables held in safekeeping to the patient, resident, family or authorized person upon adequate proof of identity and authorization.

Staff must review patient or resident charts for any valuables kept in safekeeping, notify patient or resident of valuables in safekeeping and if applicable, direct the patient or resident to the Cashier's Office (St. Paul's Hospital) or Admitting Offices (all other sites) to withdraw valuables upon discharge.

4. Compliance

All staff members are responsible for adhering to this policy and monitoring their activities in accordance with the policy. Staff members may warn others if they observe a violation of this policy. Failure by staff to comply with this policy may result in disciplinary action up to and including termination of employment, services or privileges.

5. Supporting Documents

5.1. Related Policies

[Comfort Funds](#)

[Release of Information and Belongings to Law Enforcement](#)

5.2. Guidelines/Procedures/Forms

Personal Belongings Form No. PHC-SE003 (available from Royal Printers/Printing Services)

Record of Admission Form No. PHC-AD064

Safekeeping and Return of Resident Belongings in Long-Term Care (Procedure)

Storage Envelope – Temporary Storage of Patient Valuables

6. Definitions

“Authorized Person” means any individual or agency the patient or resident has given consent for release of their valuables kept in safekeeping. This consent must be documented in the patient or resident’s health record.

“Safekeeping” means a Providence Health Care (PHC) administered program for the secure storage of patient or resident valuables while the patient or resident is receiving services within a PHC facility.

“Secured Place” means a locked cabinet or safe with restricted access located at the patient or resident hospital or long-term care home for the purpose of safekeeping.

“Staff” means all employees (including management and leadership), medical staff (including physicians, midwives, dentists), nurse practitioners, residents, fellows and trainees, health care professionals, students, volunteers, contractors, researchers and other service providers engaged by PHC.

“Valuables” are patient or resident personal items that are considered of high value or high cultural significance and require secure storage, including, but not limited to, cash, jewelry (e.g. rings, watches, necklaces, earrings, bracelets, anklets, cuff links, tie tacks), electronics, items of cultural significance (e.g. eagle feathers, abalone shells, or drums), and miscellaneous items (e.g. credit cards, check books, keys, personal papers).

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