

Management of Patient Belongings and Valuables

Healthcare entities have the duty to provide a safe and secure environment. As patients attend for outpatient or inpatient healthcare services, they may have belongings or valuables that are in their possession; while patients should be advised that personal belongings and valuables are to be left at home, there are circumstances where these items are to remain with the patients during their stay. In these circumstances, healthcare entities will need to have the appropriate measures in place to ensure the appropriate collection, storage, and release of patient belongings and valuables.

As part of their approach to managing patient belongings and valuables, healthcare entities will need to consider its range of risks and address them through a targeted risk management plan. In doing so, they must take steps to strengthen and standardize their policies, procedures, and training to ensure the safe management of patient belongings and valuables under their care.

The following guidance highlights key areas of considerations for healthcare entities in managing patient belongings and valuables. It should not be seen as an exhaustive list and should be used in conjunction with internal policies and procedures, as well in compliance with local laws and regulations, as some of the recommendations made in this document may be legally required.

1. Policies and Procedures

Establishing a policy and procedures is essential in providing guidance to the appropriate management of patient belongings and valuables. Specifically, it should clearly convey the position of the organization while providing guidance on a standardized approach to the intake, storage, documentation, and release of belongings and valuables across different areas of the organization.

Develop a comprehensive policy and procedures that addresses:
□ Intake, storage, documentation, and release of patient belongings and valuables; and
 Possession of weapons, illicit drugs, and alcohol on premises.
Each of the above policies and procedures should include but not limited to the following:
☐ Commitment to safeguarding patient belongings and valuables under its custody;
 Establishment of where the policy and procedures are enforced;
☐ Articulates accountability of all parties:
□ Employees;
□ Independent practioners (e.g. physicians, midwives);
□ Volunteers;
□ Students;



□ Vendors; a	nd
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- □ Patients/Families.
- □ Clearly defines and provides examples of paitent belongings and valuables.
 - □ Essential patient belongings
 - Personal Items (e.g. glasses, hearing aids, prosthesis, dentures)
 - Clothing
 - Medication
 - Wheelchairs, walkers, canes
 - □ Non-essential patient belongings
 - Electronics
 - □ Patient valuables
 - Money
 - Jewellry
 - Restricted items
 - Weapons, Illicit Drugs, and Alcohol
- ☐ Ensure the policy is made available to all individuals and goupss, as required.

2. Emergency Department

action the following:

When patients present to the emergency department (ED), all capable patients are to remain responsible for their belongings and valuables; they will be advised that essential belongings are to remain with the patient and they will be provided a designated belongings bag.

	Patients and family members will be advised they are responsible for their belongings/valuables:
	 Essential belongs are to remain with the patient; and
	□ Non-essential belongings and valuables are to be sent home with family members.
	In circumstances where the belongings and valuables are to remain with the patient, they should be provided the opportunity to secure their belongings and valuables:
	Ensure the patient belongings and valuables are to be placed in the designated patien belongings bag; it should be:
	□ Clearly marked by the patient's name and location; and
	□ Securely placed under the stretcher/beds or cabinets/drawers within the patient room.
	 In circumstances where the patient is incapable, staff should place the belongings and valuables in the designated patient belongings bag and provide to family members;
П	In circumstances where the patient is incapable and there are no family members, staff should



□ Clearly marked by the patient's name and location; and
□ Securely placed under the stretcher/beds or cabinets/drawers within the patient room.
If the patient is being transferred (e.g. diagnostic imaging, in-patient unit), staff to ensure that patient belongings bag is transferred with patient (e.g. placed on stretcher, wheelchair) they are responsible for conveying to the following staff as part of the transfer of care:
□ Patient transport staff (e.g. porter); and
☐ Receiving staff (e.g. diagnostic imaging, in-patient unit).
If the patient is being discharged, staff to ensure that all patient belongings are collected and itemized and provided to the patient and family to be taken home.
 If there are items that cannot accompany the patient when being transported by ambulance, alternate arrangements for transport of these items are to be made.
 If personal belongings are found after a patient is discharged, the items will be bagged dated, itemized; staff to contact patient and make arrangements to return items.
If the patient is deceased, staff to ensure that patient belongings bag is collected and provided to the patient and family to be taken home.
If there is no family or family available to take the belongings at the time of death, the patient belongings bag are taken to the designated department storing the items.
☐ If applicable, staff will notify the substitute decision maker or power of attorney that patient belongings and valuables can be collected from the designated department and arrangements

3. Inpatient Areas

When patients are admitted to an in-patient unit though the ED or out-patient clinics, all patients will continue to assume responsibility for their belongings and valuables; if not already done, they will be provided an opportunity to secure their belongings and valuables using the designated belongings bag and designated security box.

are made for pick up of belongings are documented in the patient chart.

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□ Non-essential belongings and valuables are to be sent home with family members.
In circumstances where the belongings and valuables are to remain with the patient, they should be provided the opportunity to secure their belongings and valuables:
□ Essential belongings are to be placed in the designated patient belongings bag; it should be:
□ Clearly marked by the patient's name and location; and
□ Securely placed under the stretcher/beds or cabinets/drawers within the patient room.

□ Valuables are to be placed in a secured bag/envelope; it should be:



□ Clearly marked by the patient's name;
□ Securely sealed; and
□ Provided to designated staff (e.g. security) for safekeeping in a secured location.
 In circumstances where the patient is incapable, staff should place the belongings and valuables in the designated patient belongings bag and provide to family members;
In circumstances where the patient is incapable and there are no family members, staff should action the following:
□ Belongings are to be placed in the designated patient belongings bag:
□ Clearly marked by the patient's name and location; and
 Securely placed under the stretcher/beds or cabinets/drawers within the patient room.
□ Valuables are to be placed in a secured bag/envelope
□ Clearly marked by the patient's name;
□ Securely sealed; and
□ Provided to designated staff (e.g. security) for safekeeping in a secured location.
If the patient is being discharged, staff to ensure that patient belongings is collected and itemized and provided to the patient and family to be taken home.
If there are items that cannot accompany the patient when being transported by ambulance, alternate arrangements for transport of these items are to be made.
 If personal belongings are found after a patient is discharged, the items will be bagged, dated, itemized; staff to contact patient and make arrangements to return items.
If the patient is deceased, staff to ensure that patient belongings bag is collected and provided to the patient and family to be taken home.
☐ If there is no family or family available to take the belongings at the time of death, the patient belongings bag are taken to the designated department storing the items.
☐ If applicable, staff will notify the subsitute decision maker or power of attorney that patient belongings and valuables can be collected from the designated department and arrangements are made for pick up of belongings are documented in the patient chart.

4. Outpatient Areas

When patients attend outpatient clinics, they will be notified in advance to leave their belongings and valuables at home. If the patient attends with their belongings and valuables, they will be provided an opportunity to secure their belongings and valuables using the designated belongings bag.

- □ Patients and family members will be advised they are responsible for their belongings/valuables:
 - ☐ Essential belongs are to remain with the patient; and
 - □ Non-essential belongings and valuables are to be sent home with family members.



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Ensure the patient belongings and valuables are to be placed in the designated patien belongings bag; it should be:
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If the patient is being discharged, staff to ensure that patient belongings and valuables is collected and itemized and provided to the patient and family to be taken home.
If there are items that cannot accompany the patient when being transported by ambulance, alternate arrangements for transport of these items are to be made.
 If personal belongings are found after a patient is discharged, the items will be bagged dated, itemized; staff to contact patient and make arrangements to return items. If the patient is being admitted to an in-patient unit, staff to ensure that patient belongings bag is transferred with patient (e.g. placed on wheelchair) they are responsible for conveying to the following staff as part of the transfer of care:
☐ Patient transport staff (e.g. porter); and
☐ Receiving staff (e.g. diagnostic imaging, in-patient unit).
5. Weapons, Illicit Drugs, and Alcohol
☐ If a patient is found to be in possession of weapons, illicit drugs, or alcohol, staff are to contact thei manager and security services.k
Under no circumstances is staff to handle and store the items without instructions from:Manager;
□ Security Services; or
□ Police Services.
 Under no circumstances is staff to dispose of any item or substance;
☐ Manager or security services will be responsible for contacting police services, as required.

Summary

To foster a safe and secure environment, healthcare entities must take the appropriate measures to safeguard patient belongings and valuables when these items are to remain with the patient during their stay. As part of this, they will need to take steps to adopt an approach to ensure the appropriate collection, storage, and release of patient belongings and valuables across their organization, while ensuring compliance with laws and regulations when addressing illicit drugs, weapons, and alcohol are involved.