

**INTERNAL ONLY**  
**ISLHD POLICY**  
**COVER SHEET**



**Health**  
Illawarra Shoalhaven  
Local Health District

<b>NAME OF DOCUMENT</b>	Patient Valuables
<b>TYPE OF DOCUMENT</b>	Policy
<b>DOCUMENT NUMBER</b>	ISLHD CORP PD 44
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<b>FORMER REFERENCE(S)</b>	ISLHD OPS PD 44
<b>EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR</b>	Executive Director Finance
<b>AUTHOR</b>	Financial Operations Coordinator
<b>KEY TERMS</b>	Valuables, Cash
<b>FUNCTIONAL GROUP OR HUB</b>	All Facilities
<b>NSQHS STANDARD</b>	Standard one
<b>SUMMARY</b>	This policy outlines the procedures involved when dealing with patients' monies and valuables including unclaimed items and the release of valuables after death.

**COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

Feedback about this document can be sent to [ISLHD-Corporategovernance@health.nsw.gov.au](mailto:ISLHD-Corporategovernance@health.nsw.gov.au)

**1. POLICY STATEMENT**

The aim of this Patients Valuables policy is to provide a framework for the Illawarra Shoalhaven Local Health District (ISLHD) and its employees to comply with when providing safe custody of a patient's cash or valuables.

**2. AIMS**

This policy outlines the procedures involved when dealing with patients' monies and valuables including unclaimed items and the release of valuables after death.

**3. TARGET AUDIENCE**

ISLHD employees responsible for receipting and returning patient valuables.

**4. RESPONSIBILITIES**

Wherever possible, valuables should be sent home with their relatives / Next of Kin (NOK) / Carer.

The patient will be responsible for personal items such as dentures, eyewear, or hearing aids.

Patients should be encouraged / advised not to bring cash or valuables with them when being admitted to an ISLHD facility.

Cashier	<ul style="list-style-type: none"><li>• To store patient valuables securely and release valuables in certain circumstances</li><li>• Where there is no Will, Cashier is to refer the person(s) requesting patient valuables to their Line Manager</li></ul>
Cashier Line Manager	<ul style="list-style-type: none"><li>• To explain ISLHD requirements to the person(s) requesting patient valuables before patient valuables are released</li><li>• To determine if the request needs to be escalated to the Hospital Group General Manager</li><li>• To liaise with the Hospital Group General Manager</li><li>• To determine if other ISLHD teams are to be contacted to liaise with the person(s) requesting patient valuables</li><li>• Annual review of patient valuables, cash and non-cash, stored by ISLHD</li></ul>

Hospital Group General Manager	<ul style="list-style-type: none"><li>• To determine if the person(s) requesting patient valuables is / are the appropriate person(s) to release the patient valuables to, based on the information provided by the person(s)</li><li>• To advise the Cashier Line Manager of the outcome</li></ul>
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## 5. STORAGE AND RELEASE OF PATIENT VALUABLES

### a) When storage of patient valuables is required

Where ISLHD is requested to provide safe custody for any cash or valuables of a patient the following procedures are to apply:

- Two members of staff are to witness the collection of valuables.
- Cash must be counted by the staff member in the presence of the patient and another staff member.
- The second staff member must also perform a count of the cash before it is entered into the register.
- Particulars, and a clear description of the valuables must be entered in the appropriate register, 'Patients' Money and Valuables Register' – NCR (A46) Stream Product Code NH605110.

A sufficient level of detail should be documented to ensure items can be identified and contents can be confirmed upon collection.

The following are some examples on how to describe valuables on collection:

#### **Example 1: Wallet**

“(1) black wallet containing Bank Card, Medicare Card, Pension Card”, or “(1) black leather wallet containing 'X'-Bank Card, and various other cards”.

#### **Example 2: Jewellery**

“(1) yellow coloured ring”, or “(1) yellow coloured ring with a white stone”.

Staff must not name the metal as gold or silver, rather reference the colour of the ring as 'X' colour ring or 'X' colour stone".

Condition of the item should also be mentioned – i.e. broken, missing stone, to mitigate the risk of claims of damage or theft by ISLHD staff.

The following steps should be followed when taking patient valuables in to safe custody.

- A receipt, Receipt for Patients' Money and Valuables – NCR (A45) Stream Product Code NH605105, is to be written whenever any cash or valuables are taken into safe custody in accordance with Section 3.10 of the Accounts and Audit Determination for Public Health Organisations and must be attended at the time of receiving monies / valuables.
- Staff must complete the appropriate safe custody register in full. Staff members and the patient (if able to, otherwise a relative / NOK / Carer) must then sign the valuables receipt.
- The witness must check the written receipt correctly records the articles received into safe custody.
- The patient (or the appropriate nominee) shall be given a receipt. All alterations MUST be initialled.
- Once valuables are in safe custody (e.g. Hospital's main safe), no valuables are to be given to relatives / NOK / Carer without the presentation of the receipt.
- The same valuables/monies entrusted to ISLHD for safe custody are to be returned to the patient or relative / NOK / Carer on discharge.
- On discharge, the patient or relative / NOK / Carer must produce the receipt.

- The contents kept for safe custody are to be checked with the patient or relative / NOK / Carer and another staff member prior to handover of valuables.
- The patient or a relative / NOK / Carer must record in the safe custody register an acknowledgement of receipt of any valuables when returned, as well as the circumstances under which the valuables were returned if not to the patient in person.
- If cash and valuables are not returned on discharge at least two follow-up letters (to last known address) are to be forwarded to the patient requesting a collection of valuables.
- It is strongly advised not to bank any cash without the consent of the patient or their appropriate nominee.
- If cash has been banked it will then be necessary to complete the 'Register New Supplier' option in Stafflink if person(s) not already a vendor and an 'Invoice Scanning Payment Requisition Form for Oracle R12' (available on the ISLHD Intranet, [http://islhnintranet/Forms\\_Templates/Non\\_Clinical/default.asp](http://islhnintranet/Forms_Templates/Non_Clinical/default.asp) so funds can be transferred to the patient or their estate.

**b) Unclaimed patient valuables stored on behalf of discharged patients'**

- If the stored item is cash that is still being stored by ISLHD for a period of 12 months after the patient discharge date has elapsed, it is deemed to be 'Unclaimed'. The 'Unclaimed' cash is to be banked into ISLHD's 'Good Samaritan Fund'.
- Unclaimed items that are non-cash will be regularly reviewed by the Cashier Line Manager with the objective of determining which items should be treated as per Section 133 of the Health Services Act 1997. The section makes provision for the establishment of Samaritan Funds. The Cashier Line manager is to prepare a brief for the person with delegation to authorise the disposal of unclaimed patient valuables.

Refer to the current ISLHD Delegations Manual.

- If valuables have not been claimed after a period of twelve (12) months, the realised worth of non-cash valuables is to be paid into ISLHD's 'Good Samaritan Fund'. Non-cash valuables to be sold for fair market value, while items considered to have little or no value are to be donated to charity.

**c) Deceased patients**

Individual cases must be carefully considered before decisions are made regarding the release of valuables relating to deceased patients.

**i) Release of valuables generally**

Unless one of the exceptions outlined below applies, the general rule is that no valuables are to be released until ISLHD are satisfied that the formal requirements are met. This includes:

- Probate, Letters of Administration or a Certificate of Grant issued by the Court being sighted.
- ISLHD being satisfied as to the identity of the legal personal representative (executor named in the will or administrator appointed by the court).
- Acknowledgement of receipt being obtained from the representative.

**ii) Release of valuables in certain circumstances**

Outlined below are some circumstances where departure from the general rule is warranted.

There is no requirement for Probate, Letters of Administration or a Certificate of Grant issued by the Court in the following circumstances:

***Jointly owned valuables***

Where ISLHD is satisfied that monies and valuables are held in joint names with another person, the valuables should be released to the surviving joint owner upon presentation of the following:

- Death Certificate, and
- Proof of identity of the survivor as joint owner, and
- A written acknowledgement from the surviving joint owner which records the valuables released and the date that this occurs in the form of 'Release of patient's Assets (after death)' form – Stream Product Code SEI020420.

***Will is present (small estates less than \$15,000)***

Where the total value of an estate is under \$15,000 in value, assets may be released to the executor upon production of the following:

- Death Certificate, and
- Certified copy of the Will, and
- Confirmation in writing from the executor as to their identity, and
- Confirmation from the executor the total value of the estate (not just the items held by ISLHD) is less than \$15,000, and
- A detailed receipt of the items given to the executor must be obtained from the executor in the form of 'Release of patient's Assets (after death)' form – Stream Product Code SEI020420.

If the total value of the estate is more than \$15,000 refer to the ISLHD Head of Legal for guidance.

***Will is not present (release up to \$5,000 provided conditions are met)***

Where there is no will and no clear instruction as to who the Next of Kin is a number of requirements must be met to ensure the patient valuables are released to the appropriate person(s).

Any person(s) making a request in this circumstance is to be directed to the Cashier Line Manager. The Cashier Line Manager can explain the reasons for the delay and ISLHD's requirements before the valuables can be released. The Cashier Line Manager will determine if further escalation is required to the Hospital Group General Manager or if other ISLHD team are to be engaged such as Health Care Interpreter Service, Multicultural health Service, and / or Social Work, to ensure all requests are processed in an appropriate and sensitive manner.

Where the total worth of valuables held by ISLHD is under \$5,000, valuables may be released to a person claiming to be entitled upon production of:

- Evidence that establishes the person's relationship to the deceased (e.g. birth, marriage and death certificates), and
- A detailed receipt of the items given to the executor must be obtained from the executor in the form of 'Release of patient's Assets (after death)' form.

If the total value of the patient valuables is more than \$5,000 refer to the ISLHD Head of Legal for guidance.

***Where there is no Next of Kin - Public Trustee's Office / Protective Commissioner / Guardianship Tribunal***

Reasonable effort should be made to contact the deceased patient's Next of Kin to arrange the return of patient valuables. In the event no Next of Kin can be contacted, The Public Trustee's Office is to be contacted for further advice.

Where an order for management of the patient's financial affairs has been made under the *Protected Estates Act 1983* or the *Guardianship Act 1987*; the Officer of the Protective Commissioner or the Guardianship tribunal is to be contacted. Section 247 of the *Mental Health Act 1990* requires that any funds in a trust account of a deceased patient whose affairs have been committed to the Protective Commissioner are to be paid to the Protective Commissioner.



**d) Patient property deemed 'Lost'**

If patient property has been 'lost' an insurance claim is to be prepared. Forms are to be filled in and forwarded to the ISLHD Corporate Governance and Risk team. All forms and further information can be found on the ISLHD Intranet on the 'ISLHD Corporate and Governance Services' page under 'Insurance',

[http://islnintranet/Forms\\_Templates/Non\\_Clinical/default.asp](http://islnintranet/Forms_Templates/Non_Clinical/default.asp) or by contacting [ISLHD-EnterpriseRisk@health.nsw.gov.au](mailto:ISLHD-EnterpriseRisk@health.nsw.gov.au)

**6. DEFINITIONS**

**Valuable:** a thing that is of great worth to the patient, especially a small item of personal property. Valuables may include personal items such as wallets, watches, clothing and jewellery.

**7. DOCUMENTATION**

Receipt for Patient's Money & Valuables – NCR (A45) Stream Product Code NH605105

Patients' Money & Valuables Register – NCR (A46) Stream Product Code NH605110

Release of Patient's Assets (After Death) – Stream Product Code SEI020420

Invoice Scanning Payment Requisition Form for Oracle R12

**8. AUDIT**

An annual review by District Finance is to be conducted to ensure that this policy is being adhered to and that Patient Valuables are being held and recorded appropriately.

**9. REFERENCES**

NSW Ministry of Health, 2014, *Accounting Manual for Public Health Organisations*, (Section 2)

NSW Ministry of Health, 2020, *Accounts and Audit Determination for Public Health Entities in NSW*, (Section 3.10)

*NSW Government Health Services Act 1997 No 154*, (Section 133)

*NSW Government Protected Estates Act 1983 No 179*

*NSW Government Guardianship Act 1987 No 257*

*NSW Government Mental Health Act 1990 No 9, (Section 247)*

*ISLHD Delegations Manual Part 1 2020*

## 10. REVISION & APPROVAL HISTORY

<b>Date</b>	<b>Revision No.</b>	<b>Author and Approval</b>
June 2016	0	Manager Accounting Services Draft for comment February 2016
October 2017	0.1	Manager Financial Services Accountant, Financial Services
August 2018	0.2	Executive Director, Finance, Workforce and Strategic Improvement
July 2021	1	Financial Operations Coordinator <b>Approval/Date:</b> Corporate Policy Recommendation committee/ June 2021 <b>Approval/Date:</b> Executive Director Finance/ July 2021