



**Aneurin Bevan University Health Board**

# **Financial Control Procedure Patients' Property**

*N.B. Staff should be discouraged from printing this document. This is to avoid the risk of out-of-date printed versions of the document. The Intranet should be referred to for the current version of the document.*

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## **1 Scope of Policy**

**1.1** The Aneurin Bevan University Health Board has a legal responsibility to protect any patients' property that is deposited for safekeeping and to return it to the patient on demand. The Health Board has an additional responsibility to safeguard property and clothing retained by patients on wards, and to safeguard and administer patients' monies.

**1.2** The Health Board's responsibility for protecting patients' property extends from admission until discharge of the patient.

## **2 Responsibilities**

**2.1** The purpose of this procedure is: -

- To ensure that the interests of the patient, the staff and the Health Board are fully protected.
- To assist staff in the safeguarding and administration of patients' property and monies that are deposited for safe keeping
- To assist staff in fulfilling the Health Board's legal responsibility for patients' property and monies.

**2.2** The term "patient" is used throughout this procedure as opposed to "resident" or "client" or "service user".

**2.3** A short term stay in hospital should not require administration; these services are normally provided for long stay patients.

**2.4** This procedure should be read in conjunction with other financial procedures.

## **3 Monitoring**

**3.1** This procedure will be audited periodically.

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## **4 Patients' Property**

### **4.1 Planned Admissions**

4.1.1 The Health Board must ensure that all patients are advised not to bring valuables into hospital wherever possible by including a note to this effect within the literature/letters that are sent to all patients prior to admission.

### **4.2 Unplanned Admissions (Emergency)**

4.2.1 Staff in Charge must inform the patient on admission that the Health Board cannot be held responsible for items not deposited for safekeeping.

4.2.2 Property and valuables belonging to patients who are admitted unconscious or whose condition warrants assistance should be deposited for safekeeping in the General Office/Administration Office using the Patient Property Book (see 4.4 below).

4.2.3 Staff may be required to dispose of soiled or damaged patient's clothing.

4.2.4 If the patient is confused or in any way incapable of managing their own affairs on admission, the nurse should discuss the safekeeping of the property with the next of kin.

Any decision taken on behalf of the patient must be in the patient's best interest and clearly documented in the patient's notes. In case of doubt, reference should be made to the Mental Capacity Act 2005.

If the next of kin wishes the patient to retain his/her personal effects, the risk involved should be explained to them and that the Health Board cannot accept responsibility for loss and/or damage to any valuables not handed in for safekeeping.

The next of kin must be asked to sign as the patient's representative in the Patients' Property book.

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Where there is no next of kin decisions regarding property should be clearly documented in the patients' medical record.

### **4.3 All Admissions**

- 4.3.1 A chart demonstrating the key steps of admission can be found in Appendix 1.
- 4.3.1 Disclaimer notices must be displayed prominently at admission points, wards, departments, clinics and general offices to explain the extent of the Health Boards liability (Appendix 2).
- 4.3.2 Patients should be advised to give any property not required to a relative or friend at the time of admission.
- 4.3.3 On admittance to hospital the inpatient should sign a disclaimer in the Patient Care Record (PCR) stating they are keeping property at their own risk.
- 4.3.4 Hospital staff should inform, as soon as possible after admission, the appropriate Authority (e.g., Police, Social Services etc.) where they have knowledge of patient's property outside the hospital requiring protective action.

### **4.4 Patients' Property Books**

- 4.4.1 Patients' Property Books (sample shown in Appendix 3) are controlled stationery and only one book should be in use at any one time in each location. A guide showing how to complete the property book is shown in Appendix 4)
- 4.4.2 The pages in the books are sequentially numbered and in triplicate; the top copy is to be handed to the patient; the second copy should accompany valuables passed to the General office the third copy remains in the book.
- 4.4.3 Staff should enter the details of all property handed over for safekeeping in the Patients' Property Book.
- 4.4.4 Property handed over for safekeeping should be examined, listed and signed for by a member of staff.

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- 4.4.5 The patient or their representative should sign the book indicating their agreement that the list is accurate and complete
  - 4.4.6 Where patients are unconscious, or are incapable of looking after themselves, or if the patient is dead on arrival, the Health Board has a duty to have the contents of their clothing examined and all items placed in safe custody. This check should take place in the presence of two members of staff both of whom should sign the property record.
  - 4.4.7 Care should be taken to describe the items accurately but jewellery etc. should be described as "yellow metal", "white metal", "white stone", etc. The words "gold", "silver", "diamond", etc. must not be used.
  - 4.4.8 Spoilt entries in the Patients' Property Book should be marked "cancelled" and retained in the book.
  - 4.4.9 A disclaimer has been added to the Patient's Property Book stating that the Health Board will accept no responsibility for personal items not handed over and not recorded in the Patient's Property Book.
  - 4.4.10 Ward staff must keep the Patients' Property Book in safe custody and it must be available for inspection by authorised staff.
  - 4.4.11 Once the entry in the Patients' Property Book, has been completed, the valuables should be placed under lock and key until such time it is convenient to hand over to the General Office, who will place the items within the General Office safe.
  - 4.4.12 Ward staff must take the Patients' Property Book together with the property held for safekeeping to the General Office as soon as possible.
  - 4.4.13 General Office staff should verify that the items being handed over by ward staff for safekeeping are listed in the Patients' Property Book, sign the book and then remove their copy of the record.

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## **4.5 Admissions outside office hours**

- 4.5.1 Ward staff must place all valuables handed in for safekeeping outside office hours in an envelope. The envelope should then be sealed, signed, timed and dated by two members of staff signing their names in full across the seal. The envelope should be deposited in the hospital night safe if available but if not, kept under lock and key with the Patients' Property Book and transferred to the General Office on the next working day.

## **4.6 General Office**

- 4.6.1 General Office staff will record details of property held for safekeeping in a pre-printed sequentially page numbered book as detailed in Appendix 5.
- 4.6.2 The property must be placed in an envelope or other container and placed in the office safe. The envelope and/or container must be sealed, labelled with the patient's full name, patient property book reference number, date and time, witnessed by two members of staff who should sign their names in full across the seal.
- 4.6.3 General Office staff must complete a Cash Receipt and Bank Deposit sheet (C&D) for all cash receipts. Cash receipts from patients must be banked into the Patients' Monies bank account as soon as possible but no later than five working days after the date of receipt.
- 4.6.4 General Office staff must open an ABUHB patient account by completing a New Patient Account Form PPM/10 (Appendix 6) for patients whose cash has been banked. The completed sheet should be forwarded to the Finance Department
- 4.6.5 General Office staff in acute hospitals should delay the actions in 4.6.3 and 4.6.4 above for five working days when patient's length of stay is expected to be short.

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## **4.7 Claims in Relation to Lost or Damaged Property**

- 4.7.1 In the result of any lost or damaged property, the patient is required to follow the guidance in the [Losses and Special Payments procedure](#) and complete the form in Appendix 7.

## **5 Income**

### **5.1 Benefits Receivable**

- 5.1.1 Most benefits from the Department of Work and Pensions (DWP) are paid directly into an individual's bank account but patients who do not have a bank account obtain their benefits from a Post Office Card Account (POCA) by using a card similar to a bank account and keying in their unique PIN number (Personal Identification Number).
- 5.1.2 Staff must not collect any benefits using a patient's Post Office Card Account (POCA).
- 5.1.3 Ward Staff must establish, as soon as practicable, whether the patient is in receipt of any statutory benefits, and who, if anyone is managing the patient's affairs.
- 5.1.4 Patient's relatives or friends may attend to the patient's affairs during their stay in hospital with the patient's consent.
- 5.1.5 If the patient is confused or in any way incapable of managing their own affairs on admission, the nurse should discuss the issue of benefits with the next of kin. If there is no next of kin, then the Social Worker should be notified.
- 5.1.6 Any decision taken on behalf of the patient must be in the patient's best interest and clearly documented in the patient's notes. In case of doubt, reference should be made to the Mental Capacity Act 2005.
- 5.1.7 Where ward staff are concerned that a patient is not adequately provided for when a relative or friend attends to the patient's affairs, they must refer to the Protection of Vulnerable Adults (POVA) policy. General

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Office staff will inform the Patients' Monies Manager if they have applied to the DWP for the Health Board to act as Corporate Appointee for patients unable to appoint a relative or friend to manage their affairs.

5.1.8 The Patients' Monies Manager will act as Corporate Appointee for the Health Board

## **5.2 Miscellaneous Receipts**

5.2.1 Cash and/or cheques received by patients during their stay in hospital should be dealt with in accordance with the guidance in this procedure.

## **6 Investments**

**6.1** The Assistant Director of Finance (Financial Systems and Services) is responsible for investing all monies surplus to meet the day-to-day requirements of patients in a current account held with Government Banking Service (GBS)

**6.2** Finance Staff must:

- Apportion monthly, the interest received from investments to each patient's account in relation to the balance held in each account
- Credit the interest received to each individual patient's account
- Reconcile balances on all the accounts to the value of investments held.

**6.3** The Assistant Head of Financial Accounting must countersign the reconciliation.

## **7 Expenditure**

### **7.1 Withdrawals**

7.1.1 General Office staff will complete a Miscellaneous Payment Form PPM/13 (Appendix 7) to pay for ad hoc requests.

7.1.2 The Miscellaneous Payment Form must be signed by the patient and witnessed by one member of the nursing staff and one member of the General Office.

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Patients who are physically incapable of signing their name must make a mark on the form; the mark must be witnessed in the same way.

- 7.1.3 A note should be made on the Miscellaneous Payment Form when a patient signs their name differently to the name by which they are known by.
- 7.1.4 General Office staff will forward the completed form to Patients' Monies Section, Finance Department, Block C, Mamhilad House, Mamhilad.
- 7.1.5 Finance Department staff will verify that the patient has sufficient funds in their account prior to processing the payment.

## **7.2 Withdrawals for Patients unable to manage their own Affairs**

7.2.1 Ward staff should consult with relatives of patients, who are unable to manage their own affairs, to assess whether the patient requires any goods, services or cash.

7.2.2 Ward staff should complete a Residents' Monies Request Form PPM/01 (Appendix 8) listing those items a patient requires. The form should be authorised as follows: -

Items <= £50	Ward/Residential Manager
Items > £50 to <= £250	Senior Nurse Manager/ Lead Nurse
Items > £250	General Manager

7.2.3 Ward staff should take the completed form to the General Office.

7.2.4 General Office staff must check that there are sufficient monies in the patient's account prior to issuing the cash requested.

7.2.5 General Office staff must obtain the signature of the staff member collecting the cash on the Cash Receipt Form PPM/03 (Appendix 9). This transaction must be witnessed by and countersigned by another staff member.

- 7.2.6 General Office must also issue the ward staff with Residents' Monies Receipt Form PPM/02 (Appendix 10) to enable them to account for the cash issued. It is acknowledged that on shopping trips, holidays and day trips it may not be possible to obtain receipts for all purchases, e.g., food from a "snack" bar, drinks from a drink's dispenser etc. However, all items purchased must be accounted for.
- 7.2.7 Ward staff must return the completed PPM/02 form and receipts, together with any change, to the General Office.
- 7.2.8 General Office staff must re-bank any cash returned into the patient's account.
- 7.2.9 Custody of cash during holidays is the responsibility of the senior nurse on the trip.
- 7.2.10 Ward Staff should raise purchase requisitions, where possible, to purchase goods from named shops. The requisition should state the name of the resident and that payment will be made from the patient's own account.
- 7.2.11 Patients, whose benefit(s) are being paid into a patients' monies account operated by the Health Board, must purchase their own clothing. However, the Health Board's exchequer funds (budget) can be used to purchase clothing if a patient has less than £100 in their account.
- 7.2.12 Where a patient receives no benefits and has no other means of obtaining clothing, it is at the discretion of the Ward Manager as to whether they use their departmental budget to purchase these items.
- 7.2.13 Relatives or friends who manage a patient's affairs are responsible for ensuring that adequate clothing money is provided to the patient.

### **7.3 Petty Cash**

- 7.3.1 Patients may request a small amount of cash for incidental sundry items. The General Office will issue

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the cash from the patients' monies petty cash providing it does not exceed £50. The patient must sign the petty cash voucher on receipt of the cash, and a member of General Office staff should sign that they have witnessed the patient receiving the cash.

## **7.4 Pocket Money**

- 7.4.1 Ward Staff are responsible for assessing the weekly incidental sundry (pocket money) needs of those patients who are not capable of looking after their own affairs.
- 7.4.2 Ward Staff must notify General Office staff weekly of the pocket money requirements.
- 7.4.3 General Office staff will complete a Weekly Pocket Money Form PPM/04 (Appendix 11) and forward the completed form to the Patients' Monies Section, Finance Department, Block C, Mamhilad House, Mamhilad.
- 7.4.4 Finance Department staff will: -
- Arrange for a direct debit to be deducted from the patients monies bank account to our nominated cash security company
  - make arrangements for the Security Company to deliver the cash to the General Office
- 7.4.5 The General Office will: -
- Issue the cash to two members of Ward Staff
  - Obtain the signatures of the two members of Ward Staff.
- 7.4.6 Any unspent pocket money, providing it is less than £10 is to be retained on the ward. Monies exceeding this amount should be re-banked into the patient's account via the General Office and the amount of pocket money requested should be reviewed.
- 7.4.7 Patients that do not receive benefits (serving custodial sentences in hospital) may receive pocket money for sundry items at the discretion of the ward manger. This money is provided to their patient's monies

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account by the revenue budget. Surplus monies must be returned to the budget.

## **7.5 Cash Held on the Ward (Long Stay Patients)**

- 7.5.1 Cash held on wards must be kept in a locked container in a locked drawer/safe.
- 7.5.2 Cash held on behalf of one patient must not be loaned to another patient
- 7.5.3 Cash held on the ward on behalf of patients must be recorded in a record book, detailing the following for each resident: -
- Date
  - Amount paid in/out
  - Balance
  - Reason for payment
  - Signatures of staff/resident
- 7.5.4 The patient should sign for monies withdrawn from ward balances if possible, otherwise two members of staff should sign, at least one of whom is a Registered Nurse.
- 7.5.5 The Ward Sister/ Charge Nurse and a member of Ward Staff must reconcile the cash book balance to the cash held in the cash box at least once a week, and record the following: -
- Date and time of reconciliation
  - Balance recorded in cash book
  - Cash held in the cash box
  - Signatures of the two members of staff performing check.

Reconciliation discrepancies must be formally investigated and explained.

## **8 Long Stay Patients**

### **8.1 Inventory of Property**

- 8.1.1 Ward Staff will be responsible for recording property acquired by patients during their stay in hospital in the patients' property book.

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- 8.1.2 Details entered in the property book should be in accordance with the guidance contained in paragraph 4.4 of this procedure.
  - 8.1.3 Ward Staff will also record details of property condemned or lost in the patients' property book.
  - 8.1.4 Ward Staff will ensure that all items of clothing and property are tagged or marked with the owner's name and stored in a safe and secure environment.

## **8.2 Stock-checks**

- 8.2.1 Two members of staff, one of who must be the Ward Sister/Charge Nurse, must carry out regular stock-checks of the patients' property book to verify accuracy.
- 8.2.2 The results of stock-checks must be documented, signed and dated in the patients' property book.
- 8.2.3 A stock-check on a third of the records should be undertaken each quarter with a full stock-check undertaken annually.
- 8.2.4 All discrepancies between items held and those recorded should be fully & formally investigated.

## **9 Patients' Balances**

### **9.1 General**

- 9.1.1 General Office staff must keep an electronic record of the balance of monies held on behalf of each patient.
- 9.1.2 General Office staff must use the relevant form to notify the Patients' Monies Section, Finance Department.
- 9.1.3 Finance Staff will be responsible for: -
  - Updating the patients account on the Oracle Financial System
  - Reconciling the patients account balance to the monies held
  - Forwarding the updated account balances to the General Office for verification.

- 9.1.4 General Office staff will be responsible for: -
- Verifying the balances notified
  - Investigating any discrepancies
  - Reporting their findings to Finance Staff
- 9.1.5 Finance Staff must also forward a copy of the patients' balances to the respective Divisional Manager.
- 9.1.6 Finance Staff have sole responsibility for providing patients' monies balances to the patient's appointee. The respective Divisional Manager and/or General Office staff must forward details of any such requests to Finance Staff to process.

## **10 Discharge and Transfer of Patients**

### **10.1 Discharge of Patients**

- 10.1.1 When a patient is due to be discharged from hospital the ward staff are responsible for returning those items that have been handed in for safe keeping.
- 10.1.2 It is not advisable for Health Board staff to hand over property to anyone other than the patient without written consent.
- 10.1.3 Articles of small value and clothes may be handed to friends and relatives and a receipt obtained.
- 10.1.4 Upon discharge every effort must be made to return funds held in safe custody to the patient directly or if the patient is incapable of handling it, to a properly authorised custodian, to another hospital or Local Authority in the event of the patient being transferred into their care. See form in Appendix 3.
- 10.1.5 General Office staff may provide patients who are being discharged from hospital with a maximum of £50 from patients' money petty cash to cover their immediate needs providing the patient has sufficient funds in their account.
- 10.1.6 General Office staff must complete a Discharged Patient Form PPM/17 (Appendix 12)

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- 10.1.7 Finance Staff will be responsible for: -
- Verifying the balance notified
  - Rectifying any discrepancies between the two sets of balances
  - Issuing payment to the patient for the balance or
  - Arranging for cash to be available via the General Office where a patient does not have a bank account.
  - Notifying the Department of Work and Pensions (DWP) that the patient has been discharged from hospital if the patient was in receipt of benefits.
- 10.1.8 General Office staff will: -
- Return any property handed in for safekeeping
  - Record the return of the property in the Patient Property book
  - Obtain the patient's signature and ensure that a member of General Office staff witness the signature

## **10.2 Transfer of Patients**

- 10.2.1 Where a patient is transferred from one hospital to another within the Health Board, General Office staff must: -
- Complete a Patient Transfer Form PPM/11 (Appendix 13)
  - Forward one copy of the completed form to Patients' Monies Section, Finance Department, Block C, Mamhilad House, Mamhilad
  - Forward one copy of the completed form to the General Office of the hospital where the patient is being transferred.
- 10.2.2 Finance Staff will be responsible for: -
- Verifying the balance notified
  - Rectifying any discrepancies between the two sets of balances
  - Notifying the General Office of the hospital where the patient is being transferred of the balance being transferred.
- 10.2.3 Ward staff must ensure that all the property listed in the Property book must be transferred with the patient, even if the patient is moving between wards within the

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same hospital. Where possible and practical the property must be handed back to the patient.

- 10.2.4 Patients transferred to hospitals outside of the Health Board are classed as discharged.

## **11 Estates of Deceased Patients**

### **11.1 Administration**

- 11.1.1 General Office staff must: -

- Complete a Deceased Patient Form PPM/18 (Appendix 14) to notify the Finance Department of the death of a patient where a patients' monies account is in operation. It is important that all known details of next-of-kin and/or Executors are shown on the form
- Forward the completed form to Patients' Monies Section, Finance Department, Block C, Mamhilad House, Mamhilad

- 11.1.2 Ward staff must: -

- Return any monies being held on the ward to the General Office
- Ensure that only next of kin take any property held
- Ensure that next of kin sign the Patients' Property book for any property they receive. In this case the property book can be used as an inventory of the deceased patient's property.
- Ensure that written consent is received from next of kin for any property donated to the hospital
- Dispose of any personal clothing not claimed by next of kin

- 11.1.3 General Office staff must not use petty cash to pay the deceased's next of kin the money held on the deceased's behalf.

### **11.2 Funeral Expenses**

- 11.2.1 The policy for Funerals for ABUHB should be referred to.

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- 11.2.2 The member of staff who arranges the funeral must complete the certificate given on "Registration or notification of death" and send to the DWP where necessary.
- 11.2.2 General Office staff must notify the Patients' Monies Section, Finance Department, Block C, Mamhilad House, Mamhilad of funeral arrangements made.
- 11.2.3 Finance staff must ensure that, where sufficient funds are available, the funeral cost is charged to the patient's account. The Health Board will bear the cost of a contract funeral when insufficient funds exist.
- 11.2.4 Finance staff are permitted to settle funeral accounts of deceased patients where sufficient funds are available and the funeral arrangements have been made by relatives or friends of the deceased. Payment can be made direct to the Funeral Director upon presentation of the original invoice for the funeral.

### 11.3 Property of Deceased Patients

- 11.3.1 Finance Staff must: -
- Write to the next of kin or Executor informing them of the monies and/or property held
  - Enclose a Form of Indemnity PPM/08 (Appendix 15) and a Form of Enquiry PPM/07 (Appendix 16)
- 11.3.2 Finance Staff must take the appropriate action upon receipt of the completed Form of Indemnity and Form of Enquiry. Current legislation states that: -
- **Where there is a will and the value of property held exceeds £5,000** no action should be taken until a Grant of Probate has been obtained.
  - Where there is no will and the value of property held exceeds £5,000 no action should be taken until Letters of Administration have been obtained.
  - **Where there is no will and the value of the property held does not exceed £5,000** Finance staff will
    - establish the relationship of the claimant
    - obtain written authority from all equally entitled persons to release the monies to the

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claimant

- obtain a signed Form of Indemnity PPM/08 from the claimant.

- **where there is no will and there is no next of kin and the property held is over £500** Finance staff will notify the Treasury Solicitor
- **Where there is no will and there is no next of kin and the property held is under £500** Finance staff will treat the property as unclaimed property, see paragraph 12 below.

## 11.4 Exceptional Circumstances

- 11.4.1 General Office staff must liaise with Finance staff to resolve any financial issues that relatives may raise during their period of grief.

## 12 Unclaimed Property

### 12.1 General Office and Ward staff must:

- Make every effort to trace and return property to next of kin
- Keep unclaimed property for a month before arranging its disposal.
- Record the details of property to be disposed in the property book
- Send the property with a copy of the property book to the Patients Monies section of the Finance Department for disposal.

### 12.2 Finance Staff must: -

- Credit unclaimed cash and the proceeds of the sale of any unclaimed property to the Health Board's revenue unclaimed patients' monies account from whence the patient should be reimbursed if a subsequent claim is made
- Ensure that the payments of claims received in the future for monies originally credited to the unclaimed patients' monies account are charged to that account.
- Maintain a register of monies credited to and paid from the unclaimed patients' monies account.

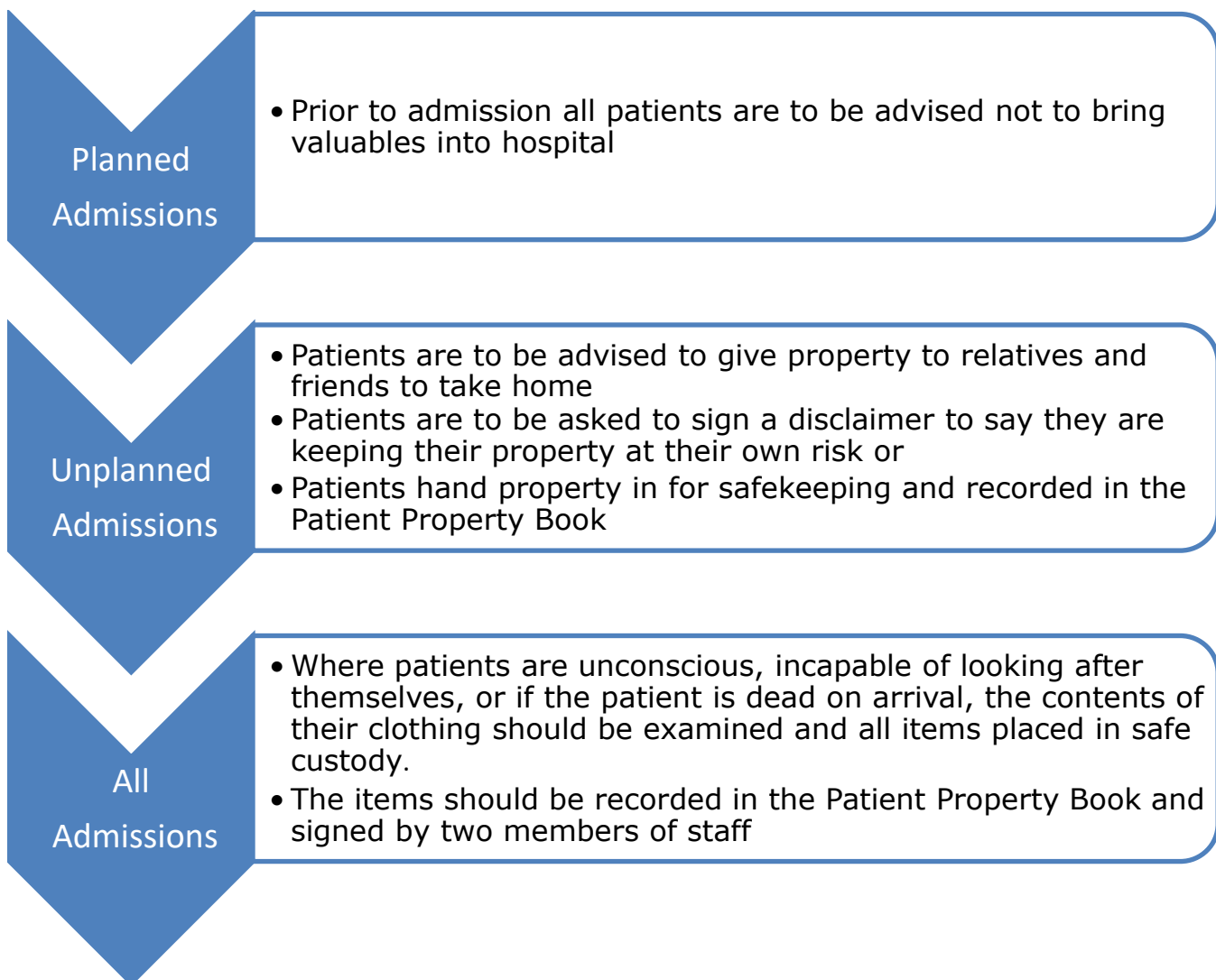
- Write to banks, building societies etc, to inform those organisations of the patient's death.
- Seek expert advice, if appropriate, to establish whether the property is valuable

### **13 Accounts**

- 13.1 Patients' monies should be included in the Health Board's annual accounts under third party assets.

## Appendix 1

### Admissions





## **PRIVATE PROPERTY**

Please note that Aneurin Bevan University Health Board accepts no responsibility for the loss of or damage to personal property of any kind, including money, in whatever way the loss or damage may occur unless an official receipt is obtained from the Health Board for property which has been handed in for safe custody.

**Appendix 3**

**Patients' Property Books**

ANEURIN BEVAN UNIVERSITY HEALTH BOARD

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.....Hospital	<b>FOR OFFICE USE</b>
<b><u>PERSONAL PROPERTY, CASH AND VALUABLES</u></b>	
Patients Name..... Address..... Date of Admission..... Ward.....Unit No..... Date of Receipt of Property.....	Patients Property File Number.....  Indemnity File No.....  Other Reference .....
<b>TO BE COMPLETED AT THE WARD</b>	To be signed by Officer receiving cash/articles from ward.
(a) Cash £	Received the sum of £.....  Signed.....Date.....
(b) Valuables..... ..... ..... .....	Received the articles listed in Section (b)  Signed.....Date.....
(c) Other Personal Property..... ..... ..... .....	Received the articles listed in Section (c)  Signed.....Date.....
CERTIFIED that that the above is a correct list of cash and property handed over for safe custody.  Signed Nurse..... Date .....	To be signed by the patient or his/her representative on return of articles.
I agree that the above is a correct statement of the property handed by me today to the person whose signature appears above.  Signed Patient/Witness.....Date.....	RECEIVED the following: (a) Sum of £  (b) Valuable listed in Section (b)  (c) Other Personal Property as listed in Section (c)
This receipt must be produced when claiming the above property. No property will be handed to any person other than then patient unless it be a person authorised by the patient in writing to collect it.  The Health Board will accept no responsibility for personal items not handed over and not recorded above.	Signed..... Patient/Representative  Date.....  If property is not handed back to patient state:- Relationship to Patient..... Address..... ..... Signed..... Officer Issuing Property

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## Aneurin Bevan University Health Board      Appendix 4

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### Patients' Property Book – Instructions for Completion

1. Each ward must have its own Patients' Property Book. New books can be obtained from Oracle as a catalogue item, using code WNN091G.
2. This book should only be completed where property is physically handed in for safe keeping. It should not be used as an inventory for the patient's belongings on admission.
3. The receipt should be completed as accurately as possible – clothing and non-valuable items need not be itemised.
4. Terms such as "gold", "silver", "diamond" etc. must **not** be used and the description "yellow metal", "white metal" and "white stone" etc. must be used instead.
5. A receipt entry must be completed for each patient (using the **left-hand side** of the book). This receipt will be pre-numbered and in three parts
  - The top copy (blue) to be handed to the patient/relative as a receipt
  - Second copy (also blue) to be handed to either
    - a) the General Office with the cash/valuables handed over for safekeeping. They will sign to acknowledge receipt.Or
    - b) the patient if discharged before the property is handed into the General Office. The patient/representative to sign to acknowledge return.
  - Third copy (white) to be retained in the Patients' Property Book
6. Staff must sign the receipt together with the patient, or their representative, confirming the entry is accurate and complete.
7. Spoilt receipts (all copies) should be marked "Cancelled" and retained in the book.
8. Cash/valuables **must** be kept in a locked unit (safe, cupboard, drawer) in the ward/department until it is convenient to take to the General Office.
9. Ensure that the items are placed in an envelope marked with the patient's name and property book reference and that it is sealed and signed, timed and dated by two members of staff across the seal.
10. The Patients Property Book **must** be stored in a locked location and

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be available for inspection by authorised staff.

## **Aneurin Bevan University Health Board**

### **What do I do next?**

11. Take cash/valuables to the General Office along with the completed Patients' Property Book, as soon as possible after admission.
12. The General Office will sign the book to acknowledge receipt of the items.
13. Cash received will be banked into a Patients Monies account held by the Health Board and an internal account assigned to each patient
14. If a significant amount of cash (over £500) has been handed in, please take to the General Office **immediately**.
15. Outside of office hours, a night safe or drop box should be used, **if available**, to deposit patients' property. Ensure that the second blue copy from the Patients' Property Book is placed in the envelope containing the property and that the envelope is sealed and signed, timed and dated by two members of staff across the seal.
16. If a night safe is unavailable the envelope should be kept under lock and key and handed to the General Office on the next working day.
- 17. Do not take cash/valuables home for safe keeping.**
18. When the patient is discharged, please ensure their property is returned to them and the relevant Property Book entry signed by both patient or their representative and staff member to confirm return.
19. Any cash that has been banked by the General Office will be reimbursed to the patient via the Patient Monies Section (Finance Department) in the form of a cheque or bank transfer, upon receipt of a Discharge Form supplied by the General Office.
20. In the event of a patient being admitted unconscious, or incapable of looking after themselves, or dead on arrival, the Health Board has a duty to have the contents of their clothing examined and all items placed in safe custody. This check should take place in the presence of two members of staff both of whom should sign the property book receipt. The above procedures still apply.



**Appendix 6**

**PPM/10**



**Aneurin Bevan University Health Board  
 Patients' Private Monies  
 NEW PATIENT**

**To:** Patients' Monies Officer, Financial Services, C Block,  
 Mamhilad House, Mamhilad  
 Tel No: 01495 765412 Fax No: 01495 765405

**From:**

The following patient has been admitted to this hospital and I would be grateful if you could set up an account in accordance with financial procedures.

Cheque / Cash / Other on admission £ \_\_\_\_\_

Note: Please ensure that details relating to one patient only are shown on this form

Surname:		Next of kin Address	
First Names:			
Title:			
Address:			
Ward:		Relationship	
Account No:			
Date of Admission		NI Number	

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Appendix 7**

**PPM/13**



**Aneurin Bevan University Health Board  
 Patients' Private Monies  
 MISCELLANEOUS PAYMENTS**

**To: Patients' Monies Officer, Financial Services, C Block  
 Mamhilad House, Mamhilad Park Estate, Pontypool  
 Tel No. 01495 765412 Fax No. 01495 765405**

**From:**

**PAYMENTS**

The attached invoice should be charged to the patients accounts scheduled below:-

Cheque to be made payable to: \_\_\_\_\_

Cheque total: £ \_\_\_\_\_

Date	Ward	Patient Name	Account No	Amount £	Details

Patient's signature / mark \_\_\_\_\_ **Total Payments**

Witness to signature / mark \_\_\_\_\_ Print Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**For Finance use only**

Cheque actioned by: \_\_\_\_\_ Date: \_\_\_\_\_

Input on System by: \_\_\_\_\_ Date: \_\_\_\_\_

Month: \_\_\_\_\_

**Appendix 8**

**PPM/01**



**Aneurin Bevan University Health Board  
 Patients' Private Monies**

**To:** **General Office** **Ext No:** \_\_\_\_\_

**From:** **Name:** \_\_\_\_\_ **Ext No:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Ward:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**RESIDENTS' MONIES REQUEST**

The following resident(s) would like money withdrawn on their behalf as follows:-

	Date Required	Amount £	Patient Name	Account No	Reason for Request	Family Involvement
1						
2						
3						
4						
5						
			Total			

**Receipts must be retained and forwarded together with form PPM/02 (blue) within 7 days to the General Office**

**Authorising Signature**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Ward Manager (for withdrawals of up to £50 per resident)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Senior Nurse (for withdrawals of between £50 and £250 per resident)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 General Manager (for withdrawals of over £250 per resident)

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**Appendix 9**

**PPM/03**



**Aneurin Bevan University Health Board  
Patients' Private Monies  
CASH RECEIPT FORM**

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Received from \_\_\_\_\_

the sum of \_\_\_\_\_

in respect of \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Witnessed by: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
General Office



Appendix 11

PPM/04

**Aneurin Bevan University Health Board**



**Patients' Private Monies  
 Pocket Money**

**To: Patients' Monies Officer, Financial Services, C Block, Mamhilad House**  
**Tel No. 01495 765412 Fax No. 01495 765405**

**From: General Office**

**Ext No: \_\_\_\_\_**

Please would you raise an open cheque for pocket money for week ending \_\_\_\_\_

for an amount of \_\_\_\_\_ made payable to \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

	Name	Account No	Amount £	Changes Notified	Notes	Ward
1						
2						
3						
4						
5						
6						
	<b>Total</b>		<b>0.00</b>			
1						
2						
3						
4						
5						
6						
7						
8						
	<b>Total</b>		<b>0.00</b>			
1						
2						
3						
	<b>Total</b>		<b>0.00</b>			
1						
2						
3						
	<b>Total</b>		<b>0.00</b>			
	<b>TOTAL</b>		<b>0.00</b>			

For Finance use only

Input on System by: \_\_\_\_\_ Date: \_\_\_\_\_

Month \_\_\_\_\_ Cheque No.: \_\_\_\_\_

**Appendix 12**

**PPM/17**



**Aneurin Bevan University Health Board  
Patients' Private Monies  
DISCHARGED PATIENT**

**To:** Patients' Monies Officer, Financial Services, C Block,  
Mamhilad House, Mamhilad Park Estate, Pontypool  
Tel No. 01495 765412 Fax No. 01495 765405

**From**  
.

**PAYMENT**

The following patient has been discharged from this hospital and I would be grateful if you could release monies held in accordance with financial procedures.

Cheque to be made payable to: \_\_\_\_\_

Cheque total: £ \_\_\_\_\_

**Note: Please ensure that details relating to one patient only are shown on this form**

Patient Name	_____	_____	Balance @ last statement
Address:	_____	_____	Payments notified
	_____	_____	Receipts notified
	_____	_____	
Ward:	_____	_____	Payments not yet notified
Account No:	_____	_____	Receipts not yet notified
Date of discharge	_____	_____	Total

**Reconciled by Finance**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**For Finance use only**

Cheque actioned by: \_\_\_\_\_ Date: \_\_\_\_\_

Input on System by: \_\_\_\_\_ Date: \_\_\_\_\_

Month: \_\_\_\_\_ Cheque No: \_\_\_\_\_

**Appendix 13**

**PPM/11**



**Aneurin Bevan University Health Board  
 Patients' Private Monies  
 PATIENTS' TRANSFER**

**To: Patients' Monies officer, Financial Services, C Block,  
 Mamhilad House, Mamhilad Park Estate  
 Tel No. 01495 765412 Fax No. 01495 765405**

**From:**

**TRANSFER**

The following patients have either been transferred to another ward within this hospital or to another hospital  
 Please would you amend your records accordingly

Date	Ward	Patient Name	Account No	Balance £	Transferred to	
					Ward	Hospital

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Finance use only**

Input on System by: \_\_\_\_\_ Date: \_\_\_\_\_

Month: \_\_\_\_\_

**Appendix 14**

**PPM/18**



**Aneurin Bevan University Health Board  
 Patients' Private Monies  
 DECEASED PATIENT**

**To: Patients' Monies Officer, Financial Services, C Block  
 Mamhilad House, Mamhilad Park Estate, Pontypool  
 Tel No. 01495 765412 Fax 01495 765405**

**From:**

**PAYMENT**

The following patient has died at this hospital and I would be grateful if you could release monies held on their behalf in accordance with financial procedures.

Note: Please ensure that details relating to one patient only are shown on this form

<p><b>Next of Kin</b></p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<p><b>Solicitors</b></p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<p>Patient Name: <input style="width: 90%;" type="text"/></p> <p>Address: <input style="width: 90%;" type="text"/></p> <p>Ward: <input style="width: 90%;" type="text"/></p> <p>Account No: <input style="width: 90%;" type="text"/></p> <p>Date of death: <input style="width: 90%;" type="text"/></p>	<p><input style="width: 60%;" type="text"/> Balance @ last statement</p> <p><input style="width: 60%;" type="text"/> Payments notified</p> <p><input style="width: 60%;" type="text"/> Receipts notified</p> <p><input style="width: 60%;" type="text"/> Payments not yet notified</p> <p><input style="width: 60%;" type="text"/> Receipts not yet notified</p> <p><input style="width: 60%;" type="text"/> Total</p>

**Reconciled by Finance**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**For Finance use only**

Cheque actioned by: \_\_\_\_\_ Date: \_\_\_\_\_

Input on System by: \_\_\_\_\_ Date: \_\_\_\_\_

Month: \_\_\_\_\_ Cheque No: \_\_\_\_\_

PPM/08



**Aneurin Bevan University Health Board  
Form of Indemnity  
Estates of Deceased Patients**

Re the Late ..... of ..... Hospital

PLEASE COMPLETE IN FULL

I the undersigned (Name) .....

Of (Address) .....

Declare that the said .....

Died intestate (without a will) and that Letters of Administration have **not** been obtained.

I further declare that I am the ..... (please state relationship)  
Of the deceased and as such am entitled to the whole/part of the £..... Monies held for  
safekeeping.

In consideration of the payment by you to me of the aforesaid, I undertake to indemnify  
and keep Aneurin Bevan University Health Board indemnified from and against all  
claims, demands, costs and expenses in respect thereof or in any way arising there  
from.

Signed ..... Date .....

Witnessed by:

Signed ..... Date .....

Name .....

Address .....

.....

.....

PPM/07



**Aneurin Bevan University Health Board  
FORM OF ENQUIRY  
ESTATES OF DECEASED PATIENTS**

Re: The Late.....

The amount of £..... is held in respect of the above named patient who died at ..... Hospital on ..... and I would be grateful if you could let me know the following information:-  
(Please delete where appropriate).

- 1. Did the deceased leave a Will? YES / NO
  - a) Has probate been obtained or is it intended to be obtained? YES / NO
  - b) Please state the names and addresses .....  
of the deceased's Executors. ....
  - c) Please state the name and address .....  
of the Executor's Solicitor. ....

If you have answered **yes** to question 1.a. proceed to item 9 and complete the Declaration and arrange to forward the Probate Document once available. In these circumstances you are **not** required to complete the Indemnity Form attached.

- 2. a) Have letters of administration been or are intended to be taken out in respect of the deceased's Estate? YES / NO
- b) Please state the names and addresses .....  
of the deceased's Administrators or Intended Administrators. ....
- c) Please state the name and address .....  
of the Administrator's Solicitor. ....

If you have answered **no** to question 1, but **yes** to question 2.a. proceed to item 9 and complete the Declaration and arrange to forward the Letters of Administration once available. In these circumstances you are **not** required to complete the Indemnity Form attached.

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If you have answered **no** to question 1 and **no** to question 2.a. please complete questions 3 to 8 along with the Indemnity Form attached.

3. Please state the name and address of the person who arranged the funeral (not the Funeral Director) .....
4. Has the funeral account been paid? YES / NO
5. a) What is your relationship to the deceased?.....  
b) Are you over 18 years of age? YES / NO
6. Are you the next-of-kin? YES / NO
7. Are there any other next-of-kin of the deceased known to you? YES / NO

For your information, next-of-kin is normally determined in the following order of priority: Widow / Widower (but not if a decree of judicial separation was in force), Children, Father or Mother, Brothers or Sisters, other relatives.

8. If you have answered **yes** to question 7 please supply the information requested below concerning the next-of-kin (if known)

Name	.....	.....	.....
Address	.....	.....	.....
Age	.....	.....	.....
Relationship To Deceased	.....	.....	.....

If there are more than one next-of-kin please provide same information about all next- of-kin in the spaces provided. A separate sheet of paper may be used if necessary.

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**9. Declaration**

I declare that the replies furnished by me to the foregoing questions are to the best of my knowledge correct.

Signed: ..... Date:.....  
Address: .....  
.....  
.....

Please return completed form to: Patients' Monies Manager  
Aneurin Bevan University Health Board  
PO Box 10  
Pontypool  
NP4 0XG

Telephone Enquiries: 01495 765414