Effective and Safe Handling of Patient Valuables

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Introduction
Kwai Chung Hospital (KCH) is a psychiatric hospital. In general, over 50% of inpatients deposit their valuables in hospital for temporary safekeeping. Those items include cash, credit cards, cheque, ID cards, jewelry and other personal items. The safe handling and custody of patients' valuables is an essential part of the service provided by the hospital. This helps protect the interests of patients, staff and the hospital. The system however shall also have built-in flexibility in accommodating urgent request.

Objectives
To ensure an effective internal control system provided for the safe handling and keeping of patient's property and valuables

Methodology
A study of practices adopted by different hospitals and review of processes and workflows of handling patient valuables have provided some insights on how to improve our services. The following major elements have been considered when conducting the review: (1) Procedures complying to the prevailing rules and guidelines of handling patient valuables (2) Sufficient monitoring systems in place (3) Reduction of risk-taking procedures and practices (4) Deployment of sufficient resources to meet service demand (5) Provision of mechanism in handling urgent and ad-hoc requests

Result
There was significant improvement in reducing the long-held unclaimed patient valuables. As shown in the internal audit report on patient valuables handling in 2008, KCH had kept over 550 nos. of patients valuables held for over 9 months. The figure had been drastically reduced to 14 nos. as revealed in the follow-up audit on the same subject in 2014. This encouraging result was contributed by the combining two
committees into one Patient Valuables Committee to improve the overall management of patient valuables. The provision of regular reports also provided details of patient valuables for on-going review of long-held unclaimed cases. There was so far no lost case or complaint of patient valuables reported by KCH. It was greatly depended on the effective running of the monitoring mechanisms such as quarterly in-house audit requiring physical random check of patient valuables kept in strong room, the half-yearly text check conducted by finance colleagues and annual stocktaking of patient valuables. Moreover, clearly defined roles and segregation of duties for handling patient valuables were also key factors improving the check and balance system. To further enhance the service to patients and their relatives, restructuring of the service unit and redeployment of staff had made the opening of two service counters to handle deposit and retrieval of patient valuables particularly during peak hours. The posting of patient valuables supervisor near the counter area also facilitated better support to the service. Though handling patient valuables has rules and guidelines to be followed, retrieval of patient valuables during non-office hours is quite complicated and not advised unless it is of very urgent need. In case of receiving urgent request, there is an established mechanism requiring the administrator on-call and a finance colleague to come back to hospital to withdraw the requested item from the strong room.