Connecticut Valley Hospital Nursing Policy and Procedure	SECTION G: PATIENT SAFETY CHAPTER 24: SAFETY/SECURITY POLICIES AND PROCEDURES POLICY AND PROCEDURE 24.11 Patient Property
Authorization: Nursing Executive Committee	Date Effective: May 1, 2018 Scope: Registered Nurses and Licensed Practical Nurses

## **Standard of Practice:**

The nursing staff will ensure every patient will have access to their personal belongings.

## Standard of Care:

Each patient can expect to have access to their personal belongings.

### **Policy:**

Patients will be provided access to their personal belongings.

Each patient will be provided a lockable wardrobe located near their bedside for storage of personal property and belongings permitted at the hospital.

All personal clothing and valuables will be searched by unit staff on admission, including those items on person (Refer to OP&P Section 1:11). All clothing and valuables will be recorded on the Property Clothing Record CVH-23. Items permitted for use only with staff supervision will be labeled and locked in a secure, designated area.

Items brought in after admission will also be searched before they are distributed to the patient and recorded on the Patient Property List (CVH-23).

Prescription and over-the-counter (OTC) medications will be taken from the patient and forwarded to the Pharmacy for storage. These will be recorded on the Log of Confiscated Patient Medications. Medications that belong to someone else or are unlabelled or non-uniform in appearance will be confiscated and noted on (CVH 319). Medications will be returned to the patient on discharge with a written LIP's Order.

Contraband articles will be confiscated, turned over to Security, and destroyed per CVH procedures (CVH-319).

No more then \$30 cash can be left with the patient at admission and that amount must be noted on the Property/Clothing Record. Patients will be encouraged to deposit cash amounts of more than \$30 into Patient Accounts.

Changes in the patient's risk status may effect what property the individual may have or use, such as belts, shoelaces, eyeglasses, jewelry (chain longer than 14 inches). (Please see OP&P 2.11 Special Observation)

## **Procedure:**

Search patient and property (Refer to OP&P, Section 1.11). Include all clothing, bags, luggage, wallets, purses, and opened cigarette packs. Check outside and inside pockets, seams and cuffs, watch pockets of jeans and hooded areas of coats.

Tag all items with the patient's name and assigned unit.

Store all bags, luggage, etc. in the designated area until the patient is discharged.

Receipt all monies (checks may be endorsed "Deposit Only" by the patient) into a three-part Receipt Book and send to the Patient Account Unit. It is recommended that the patient retain no more than \$30 in cash. Note the amount of cash retained by the patient on the Property Clothing Record.

### **Items which may be kept by Patient:**

Reading Materials Personal Clothing Eyeglasses, Contact Lenses, Dentures, Jewelry

### Items kept by the Patient per unit Policies/Treatment Team Discretion:

Pens/Pencils **Musical Instruments** Computers (No Modems) Televisions Wallets/Purses Privilege Level Cards **Identification Cards** Bankbooks/Checks and Checkbooks/ATM Cards **Orthopedic Aides and Prostheses** Insurance Cards **Birth Certificates** Food Stamps Legal Pornography Stuffed Animals/Pillows Pocket Radio, Tape Players, Hand-Held Games

#### Items Secured by Nursing per unit Policies/Treatment Team Discretion:

Razor and Razor Blades	Scissors
Nail Clippers	Knitting Needles/Crochet Hooks/Craft Sharps
Glass Containers, Mirrors, Frames with Glass	Keys
Bags, Suitcases	Wire Hangers
Food	Electric Appliances
Cell Phones	All Tobacco Products
Electronic devices with cords, such as IPod,	
CD Players, Boom Boxes, and Ear Buds	

## Non-permissible Items:

Dental Instruments/Miscellaneous Sharps Racially Offensive Clothing/Materials Aerosols Gang-Related Clothing/Materials

Contraband:	
Weapons	Alcohol
Explosives	Unauthorized/unidentified substances
Mace	Illicit substances

## **Guidelines For The Safe Management of Patient Personal Property**

- The space behind doors is not to be used for storage.
- There must be a clear path of travel to and around the patient's bedside to provide emergency care (medical personnel, emergency cart and stretcher access).
- The floor must be clear of obstacles and trip hazards.
- The room surfaces (floors, windows, vents, radiators) must be accessible for thorough cleaning.
- The amount of personal property is limited that which can be stored in the wardrobe or bureau in addition to an approximate volume of 3'x3'x3' in the patient room. The remainder of the patients' personal property is to be stored in an area where patients can access it in a timely manner.
- The amount of wall covering is to be limited to the size of a standard bulletin board.
- One hospital approved surge protector only for computers is allowed. Extension cords are not allowed.
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# **Electronic Equipment Monitoring (CVH-688):**

1. List any patient who is approved and wants to use his / her electronic equipment on CVH-688. If you have more than 12 patients another form may be utilized.

2. When doing census checks for all patients, any patient with electronic equipment should be checked separately utilizing CVH-688. Patients utilizing electronic equipment are being checked to ensure that they are in possession of the electronic equipment released to them. If the patient does not have the released electronic equipment the employee is to search for the equipment and confiscate it. Any identified problems should be reported to the charge nurse on the unit immediately.

3. Staff is to identify the type of electronic equipment the patient is using by placing a number from the key code on the form. If a single patient has two different pieces of equipment, list the patient's name again and the piece of additional equipment.

## **Department of Correction Transfers:**

Patients escorted to the Hospital by the Judicial Marshall generally do not bring any personal belongings.

Nursing staff shall inform all patients transferring from the Department of Corrections about the CVH Property Retrieval Procedure.

The Clients Rights Officers will meet with the patient and complete Request for Service Form with the patient.

The CRO then notifies appropriate correctional facility and faxes the required authorization forms.

Once property is located by the correctional facility, arrangements are made for property to be sent to CVH either via mail or by DOC Property Officer.

The General Psychiatry Division's CRO escorts the DOC Property Officer to the patient's unit and a receipt is signed. Patient keeps a copy of the receipt (CVH is not responsible for the contents shipped).

Nursing staff records the date property is received and specifying where property originated on the Property/Clothing Record (CVH-23).