

STANDARD OPERATING PROCEDURE

FORENSIC - PATIENT PURCHASES

HTFT Document Reference Humber Centre PSI Reference	SOP19-017
Version Number	1.2
Author/Lead Job Title	Thomas Greenwood Health, Safety, and Security lead
Instigated by: Date Instigated:	Clinical Network
Date Last Reviewed:	November 2021
Date of Next Review:	November 2024
Consultation:	Security Committee, e-mail circulation to senior teams. Forensic service Reducing Restrictions Group Forensic Clinical Network
Ratified and Quality Checked by: Date Ratified:	Mental Health Legislation Steering Group 17 November 2021
Name of Trust Strategy/Policy/Guidelines this SOP refers to:	N/A

VALIDITY – All local SOPS should be accessed via the Trust intranet

CHANGE RECORD

Version	Date	Change details
1.0	August 2019	New SOP
1.1	February 2021	Review Approved Clinical Network 8 March 2021
1.2	November 2021	Review and Updated following user involvement Approved Mental Health Legislation Steering Group 17-Nov-21. Note: Date of next review corrected to 3 years time (14/02/23).

Contents

1. INTRODUCTION	3
2. SCOPE	3
3. DUTIES AND RESPONSIBILITIES.....	3
4. PROCEDURES.....	4
4.1. Purchasing patient property	4
4.2. Documentation / record keeping	4
4.3. All forms considered at each weekly meeting will be scanned and stored in a folder in the service 'V' drive folder named 'Patient Purchases'	4
5. REFERENCES	5
Appendix 1: Patient Purchase Form.....	6

1. INTRODUCTION

Overarching statement

“Medium secure services provide care and treatment to those adults who present a serious risk of harm to others and whose escape from hospital must be prevented. Low secure services provide care and treatment who present a significant risk of harm to others and whose escape from hospital must be impeded” (NHSE, 2018). Consequently it is important that clinical staff are aware of and can, in some instances, apply control measures to, the property in the possession of patients in the unit.

Guidance specific to this SOP

Standard 95 for Forensic Mental Health Services: Low and Medium Secure Care (RCP, 2019) requires that “Prohibited, restricted and patient accessible items are risk assessed, controlled and monitored”. In order to safely manage the property in the possession of patients at the Humber Centre, there must be a process to manage the nature and safe management of patient purchases which are to be received and accessed within the secure perimeter of the service.

Blanket Restriction

This procedure constitutes a blanket restriction as defined by the Mental Health Act Code of Practice (2015) and, as such, is authorised by the hospital managers on the basis of the organisation’s policy and subject to local accountability and governance arrangements. The need for this blanket restriction is prevent the receipt of items that may be precluded on clinical, safety or security grounds. It is anticipated that any challenge / refusal will only be required in a very small number of cases.

2. SCOPE

This SOP purchase requests made by patients in low and medium secure services of the Trust.

3. DUTIES AND RESPONSIBILITIES

Review of SOP – Security Committee and Reducing Restrictions Group, at least annually.
With any changes being ratified by the clinical network

Implementation of SOP – Ward Clinical Teams, Charge Nurses.

Adherence to SOP – all service staff.

4. PROCEDURES

4.1. Purchasing patient property

- Patients who have funds and section 17 leave may visit shops and settings to make purchases of their own (purchases being brought on to patient areas must be in line with the banned and controlled items procedure).
- Patient can have family and friends purchase items for them, once it has been agreed by their clinical team. The clinical team may ask the security for advice with their decision making.
- Where patients have escorted leave, staff will support patients to purchase their own property whilst on leave.
- Where patients have no leave, ward staff will support patients to make purchases via the internet (with their own bank details), Patient who have leave may also purchase items on the internet.
- Where patients have no leave and no bank account/ details, ward staff will liaise with admin staff to support patients to make essential/ required purchases (agreed by the clinical team and in line with security standards). Admin staff will use the unit credit card for such purchases. Purchases must be within patient financial limits and funds redeemable from the patient.
- Staff will support patients to get their own bank accounts to enable personal purchasing and promote future independence.
- A patient purchasing form will be completed for any items other than food, clothes, and toiletries. This will be sent to security for security review. Following security review the form will go to the MDT with security advice. The MDT will then make decisions about the purchase (this clinical decision accounts for consideration of any patient risks including safeguarding risks)
- When purchases arrive at the unit the security team will check and then deliver this to the patient and ensure the patient signs to accept receipt.
- Where purchases have been made on the unit credit card the form will then be passed on to the appropriate admin staff for reconciliation with the visa statement.
- In addition to the above a weekly ward shop will be provided for all patients that do not have community leave. This will allow those without access to shops to make purchases of smaller items such as snacks and drinks. In order that all patients have fair and equitable access to this there will be a limit on how much an individual can purchase (so the staff member can carry this safely). Bulky heavy items such as multipacks will be limited to 1.

4.2. Documentation / record keeping

- The patient purchase request form is attached as Appendix 1.
- All requests for purchase will be made using this form. All must include specific items, the name of the supplier (with any reference number), and the price of the item. Any sourcing of items will be done by the patient, with any required support from ward staff.

4.3. All forms considered at each weekly meeting will be scanned and stored in a folder in the service 'V' drive folder named 'Patient Purchases'

- The security team will meet weekly and comprise at least one senior clinician (Band 7 or above) and one member of the admin team (to facilitate any approved purchases).
- This is independent of any ward MDT and serves as a supportive review / assurance process in ensuring that purchases are made through a robust and effective process.

- They will consider all patient purchase requests, using the following parameters;

The purchase does not breach any available guidance (i.e. current contraband list, MSU environmental standards, etc.) or pose an obvious risk to health and safety that requires additional review / consideration.

The purchase request is in line with required financial audit standards – e.g. the form is complete, signed by all required parties and all printed names are legible

Any MDT-supported purchase and any item valued over £50 is supported by an RC signed purchase form and an entry in the patient record

- Approved requests will be returned to the ward for the ward to process as soon as is practicable. Those that require admin input (use of unit credit card) will be passed to admin for immediate action.
- Any requests prompting concern will be returned to the ward for resolution (this may include forms not meeting audit standards, or where there is concern as to the nature of the purchase, or as to the process of the purchase request being submitted).
- Approval / deferral will be noted on the rear of the form to inform ward staff as to the concern.

The patient will be kept informed of the progress of any purchase request, particularly if a request has been declined – this would require an explanation, recorded in the patient's notes.

5. REFERENCES

MHA Code of Practice (DoH, 2015)

Environmental Design Guide - Adult Medium Secure Services (DoH, 2011)

Standards for Forensic Mental Health Services: Low and Medium Secure Care V3 (RCP, 2019)

Service Specifications for Adult Low and Medium Secure Services (NHSE, 2018)

Appendix 1: Patient Purchase Form

Finance sheet updated:



FORENSIC MENTAL HEALTH AND LEARNING DISABILITIES SERVICES PURCHASING OF GOODS AND SERVICES BY STAFF FOR PATIENTS

I, (patient), Ward
hereby authorise staff to purchase the goods listed below on my behalf. For this purpose I can confirm that I have sufficient funds to cover this. These funds will be transferred into the trust account before being purchased, if the trust is purchasing them for me.

Date : Order Value £.....

Details of goods/services (please mark if 'new' or 'used')		Cost inc del
1		
Supplier		Order No:
2		
Supplier		Order No:
3		
Supplier		Order No:
4		
Supplier		Order No:
5		
Supplier		Order No:

*Signed *Signed(staff) *Date
(patient)
Print

Goods / Services are risk assessed as appropriate for patient use, **AND** the patient has signed the request above
*Sign and Print Name
Ward Manager / Responsible Clinician / Charge Nurse (delete)

Receipt of goods
I confirm I have received the goods/services detailed above and any change entitled to me.
Signed (patient) Date

*** Please note no form will be processed without relevant signatures**

Date	Present Admin _____	Clinical _____	
Item no.	Notes / concerns	Outcome	
		Purchase	return
1			
2			
3			
4			
5			

Scanned to folder	
-------------------	--

Date	Present Admin _____	Clinical _____	
Item no.	Notes / concerns	Outcome	
		Purchase	return
1			
2			
3			
4			
5			

Scanned to folder	
-------------------	--

Date	Present Admin _____	Clinical _____	
Item no.	Notes / concerns	Outcome	
		Purchase	return
1			
2			
3			
4			
5			

Scanned to folder	
-------------------	--