I. PURPOSE: To encourage Patients to be responsible for their behaviors.

II. POLICY: It is the policy of Montana State Hospital to have an organized procedure to provide reimbursement for the destruction/damage of hospital property or employee property; i.e. broken glasses.

III. DEFINITIONS:

A. Damage: Impairment of the usefulness or value of property: harm.

B. Destruction: The act of destroying; the condition or fact of being destroyed; the cause or means of destroying.


IV. RESPONSIBILITIES:

A. Patients are held responsible and accountable for damage or destruction of property while staying at MSH.

B. MSH Employees are responsible for completing an Incident Report and notifying the Nurse Manager or designee on duty whenever State property is damaged or destroyed.

C. The Nurse Manager on the Patient Unit will review incident and discuss with Patient’s Treatment Team. The Nurse Manager must notify the Program Manager who will work with the Patient’s Social Worker to ensure communication of the Patient’s financial status to the Business Office. The Program Manager must notify the Business Office of the Patient’s financial status within five working days.

D. The Maintenance Department and Property Manager will be contacted to assess damage and complete repairs. The Maintenance Department will provide an itemized invoice to the Business Office.
E. The Social Worker will coordinate with the Treatment Team, Patient, and Business Office.

F. The Business Office will ensure proper accounting procedures are followed.

V. PROCEDURE:

A. This policy must be explained to all Patients at the time of admission. The Patient must sign the attachment at this time.

B. Safety concerns must be met first. Damaged or destroyed property is to be rendered harmless to the treatment environment (i.e., maintenance department or heating plant to be notified and remove broken glass).

C. Incident Reports will be completed by Staff at the time of the incident and placed in the Nurse Manager’s basket.

D. The Nurse Manager or designee on Patient’s Treatment Unit will send original Incident Report to Safety Officer.

E. The Nurse Manager or designee will alert the Treatment Team. The Treatment Team will discuss with the Patient the consequences of his/her behavior.

F. The Program Manager will work with the Patient’s Social Worker to provide the Business Office with the name of the Patient’s payee representative and information relating to the Patient’s personal funds.

G. The Safety Officer will forward a copy of all Incident Reports that indicate property damage by a Patient to the Business Office.

H. The Business Office after receipt of Incident Report will contact the Facility Maintenance Manager or Property Manager, will prepare an invoice of damages, and will coordinate with the Program Manager to facilitate repayment. The Business Office will provide the Program Manager with an itemized invoice that identifies the cost of repairing the damage. The Business Office will provide the Program Manager with a quarterly statement that identifies the Patient’s outstanding balance.

VI. REFERENCES: The American Heritage Dictionary

VII. COLLABORATED WITH: Business Office, Safety Officer, Social Worker Supervisor

VIII. REVISIONS: #BS-05; Reimbursement for Damage-Destruction of Hospital Property dated May 3, 2011; #BS-05; Reimbursement for Damage-Destruction of Hospital Property dated December 1, 2007; #BS-05; Reimbursement for Damage-Destruction of Hospital Property dated November 17, 2004; #BS-05; Reimbursement for Damage-
IX. DISTRIBUTION: All hospital policy manuals.

X. ANNUAL REVIEW AND AUTHORIZATION: This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per M.C.A. § 307-106-330.

XI. FOLLOW-UP RESPONSIBILITY: Chief Financial Officer

XII. ATTACHMENTS: Attachment A – Business Office Invoice
Attachment B - Financial Responsibility for Hospital Property

___________________________/___/__  _____________________________/___/__
John W. Glueckert       Date       Tracey Thun              Date
Hospital Administrator       Chief Financial Officer
Financial Responsibility for Hospital Property

Patients admitted to Montana State Hospital can be held responsible and accountable for property damage or destruction while staying at Montana State Hospital.

Signature acknowledges notice of financial responsibility only. Not necessarily agreement with Hospital Policy.

______________________________________________
Print name of Patient

______________________________________________
Signature of Patient                      Date

______________________________________________
Witness                                      Date

______________________________________________
Staff Signature if Patient refuses to sign    Date