



# Policy:

## FIN 012 Handling Lost & Found Property

Executive or Associate Director lead	Executive Director of Finance
Policy author/ lead	Head of Financial Accounts
Feedback on implementation to	Deputy Director of Finance

Document type	Policy
Document status	Draft v3 being submitted to PGG 27 May 2025
Revision Date	20 May 2025
Date of issue	May 2025
Reason for revision	To separate policy from process, to reflect current organisational structures and roles and to reflect practical input from site representatives who actually play a role with lost and found property.
Review Date	05/2028

Target audience	SHSC staff (permanent and contract), service users, Board of Directors, and other stakeholders (including patients and their support)
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Keywords	Lost and found property, handling, safe keeping, disposal
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Version No.	Date	Description of Change
V1	Oct 2018	Working draft
V1.1	Jan 2019	Final version released
V2	Feb 2022	Revision 1
V3	July 2025	Revision 2 – simplification and focus on timely, secure local return

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## 1. Introduction and scope

The purpose of this document is to provide guidance to all SHSC staff and premises users (eg. contractors and visitors) regarding “handling lost and found property”. There is a separate policy for Trust service users - [Service User Property and Money Policy \(FIN 016 V3 August 2024\) | JARVIS](#)

SHSC is committed to timely and secure notification, communication, safe-keeping and repatriation of lost and found property.

Due to the diverse nature of SHSC operations, it is inevitable that premises users may, from time to time, misplace personal belongings and SHSC items within buildings and grounds of SHSC properties.

## 2. Scope

This policy covers the following:

- Responsibilities
- Lost
- Found
- Liability and recompense
- Safekeeping
- Disposal

Please refer to the separate policy (noted in Sections 1 and 13) for Trust service users.

Property left on wards by inpatients following their discharge from hospital, will be handled in line with relevant ward guidelines. Every effort should be made to return items left behind by inpatients quickly to avoid issues arising with patients/family that may lead to SHSC being liable for losses.

## 3. Definitions

<i>Lost and found property</i>	Any item found within the confines of SHSC whose owner cannot be immediately identified
<i>Safe keeping</i>	To preserve items from going missing by storing them in a safe and secure place like a safe, locked drawer, or locked cabinet
<i>Sale or Disposal</i>	The process of getting rid of lost and found items by either selling them for cash, donating them, recycling them, or disposing of them via approved SHSC waste processes

#### **4. Responsibilities**

All staff of SHSC are responsible for implementation of this policy.

Site reception staff or the locally agreed site representative shall be responsible for safekeeping and communication regarding lost and found property.

#### **5. Lost property**

Site reception or the most relevant locally agreed alternative shall remind other site users to notify them if someone loses an item. This will establish an awareness to help with repatriation if and when the item is later found.

Such representative for the site shall decide, given the nature of the lost item, whether it is appropriate to broadcast its loss in order to help find it.

Each site shall determine the most pragmatic communication method for broadcasting lost items.

When an item remains lost, or is found damaged, then it remains the underlying responsibility of the owner of the item. However, there may be situations where [Losses and Special Payments Policy \(FIN 013 V4 October 2023\) | JARVIS](#) becomes relevant and should be referred to.

#### **6. Found property**

Any found property shall be taken to site reception or to the locally agreed alternative.

Such representative for the site shall decide, given the nature of the found item, whether it is appropriate to broadcast its loss in order to help find it.

Each site shall determine the most pragmatic communication method for broadcasting found items.

Found items should be retained securely at the site at which they are found. This is to support speedy repatriation as the owner is most likely to expect to retrieve it from the site where they lost it.

Each site shall be provided with appropriate storage facilities.

In the event that the found item is considered to be of high value or attractive to theft, and if the site is concerned about the adequacy of storage facilities, then the site representative should contact Financial Accounts and consider transfer of the item to Financial Accounts for secure storage at Wardsend Road.

## **7. Personal belongings, liability and recompense**

Individuals are responsible for their own belongings. As a default, SHSC shall not be liable for the loss of personal belongings. There is a separate policy which considers special payments and compensation for damage to property.

## **8. SHSC assets and liability**

Individuals are responsible for good stewardship of the Trust assets that they use and encounter. Items may be misplaced unwittingly and the same common-sense approach to communication of lost and found items should be followed.

Line managers should be aware of assets used in teams and entrusted to team members. Where there is negligent behaviour then appropriate interventions should be considered, with appropriate HR input.

## **9. Record keeping**

Each site shall maintain a log of items notified as lost or found, with date, description, location and contact details for people involved. Please see Appendix C.

## **10. Retention and Disposal**

If an item has not been reclaimed within 3 months then it shall be disposed of. A common sense approach to shorter or longer retention should be applied based on the nature of the item eg. perishables, valuables, etc.

Waste items should be disposed through the usual process for other waste on site.

Valuables should be notified to Financial Accounts for advice on sale or donation.

The proceeds of sale should be donated to Sheffield Hospitals Charity.

## **11. Complaints, Dispute, Fraud and Theft**

Any complaints or disputes that arise regarding lost and found property should be resolved in line with standard Trust complaint processes. The underlying principle of personal responsibility for personal items should remain in mind.

Where fraud is suspected, cases are treated in line with Bribery and Corruption Policy and Local Counter Fraud Specialists should be contacted for advice before investigation commences.

Where theft is suspected, Local Security Management Specialists should be consulted. The Security Officer is responsible for investigating theft cases involving lost and found property. (SHSC Security Policy)

## 12. Communication

This Policy will be maintained by the Finance Directorate and made available via JARVIS.

All staff shall be expected to be aware of it as part of their general duty to be aware of SHSC policies.

Awareness for other premises users shall be supported through welcome and induction, and by signage in helpful locations to alert staff to the policy and to the reclaim period

Dissemination and storage is on JARVIS.

## 13. Links to other policies, standards, and legislation (associated documents)

This policy should be read in conjunction with:

[Losses and Special Payments Policy \(FIN 013 V4 October 2023\) | JARVIS](#)

[Service User Property and Money Policy \(FIN 016 V3 August 2024\) | JARVIS](#)

[Counter Fraud, Bribery and Corruption Policy \(FIN 010 V4 December 2024\) | JARVIS](#)

[Security Policy \(FIN 009 V8 August 2023\) | JARVIS](#)

## 14. Contact details

Title	Name	Phone	Email
Head of Financial Accounts	Rod Ismay	0114 271 6092	rod.ismay@shsc.nhs.uk

## Appendix A. Equality Impact Assessment Process and Record for Written Policies

**Stage 1 – Relevance** - Is the policy potentially relevant to equality i.e. will this policy potentially impact on staff, patients or the public? This should be considered as part of the Case of Need for new policies.

<b>If NO</b> – No further action is required – please sign and date the following statement.	Name/Date: <i><b>I confirm that this policy does not impact on staff, patients or the public.</b></i>	<b>YES, Go to Stage 2</b>
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**Stage 2 Policy Screening and Drafting Policy** - Public authorities are legally required to have ‘due regard’ to eliminating discrimination, advancing equal opportunity and fostering good relations in relation to people who share certain ‘protected characteristics’ and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don’t know and note reasons). Please see the SHSC Guidance and Flow Chart.

**Stage 3 – Policy Revision** - Make amendments to the policy or identify any remedial action required and record any action planned in the policy implementation plan section

SCREENING RECORD	Does any aspect of this policy or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
Age	No	No	No
Disability	No	No	No
Gender Reassignment	No	No	No
Pregnancy and Maternity	No	No	No
Race	No	No	No
Religion or Belief	No	No	No
Sex	No	No	No
Sexual Orientation	No	No	No
Marriage or Civil Partnership	No		

Please delete as appropriate: - no changes made.	Impact Assessment Completed by: Rod Ismay	20 May 2025
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## Appendix B. Review / New Policy Checklist

This checklist to be used as part of the development or review of a policy and presented to the Policy Governance Group (PGG) with the revised policy.

		Tick to confirm
	<b>Engagement</b>	
1.	Is the Executive Lead sighted on the development/review of the policy?	
2.	Is the local Policy Champion member sighted on the development/review of the policy?	Y
	<b>Development and Consultation</b>	
3.	If the policy is a new policy, has the development of the policy been approved through the Case for Need approval process?	N/A
4.	Is there evidence of consultation with all relevant services, partners and other relevant bodies?	Y
5.	Has the policy been discussed and agreed by the local governance groups?	
6.	Have any relevant recommendations from Internal Audit or other relevant bodies been taken into account in preparing the policy?	Not aware of any
	<b>Template Compliance</b>	
7.	Has the version control/storage section been updated?	Y
8.	Is the policy title clear and unambiguous?	Y
9.	Is the policy in Arial font 12?	Y
10.	Have page numbers been inserted?	Y
11.	Has the policy been quality checked for spelling errors, links, accuracy?	Y
	<b>Policy Content</b>	
12.	Is the purpose of the policy clear?	Y
13.	Does the policy comply with requirements of the CQC or other relevant bodies? (where appropriate)	Y
14.	Does the policy reflect changes as a result of lessons identified from incidents, complaints, near misses, etc.?	N/A
15.	Where appropriate, does the policy contain a list of definitions of terms used?	Y
16.	Does the policy include any references to other associated policies and key documents?	Y
17.	Has the EIA Form been completed (Appendix 1)?	Y
	<b>Dissemination, Implementation, Review and Audit Compliance</b>	
18.	Does the dissemination plan identify how the policy will be implemented?	Y
19.	Does the dissemination plan include the necessary training/support to ensure compliance?	Y
20.	Is there a plan to i. review ii. audit compliance with the document?	Y
21.	Is the review date identified, and is it appropriate and justifiable?	Y



## Appendix C. Process

### Lost and Found Property Log Books

Each site should maintain a log book for notifications of lost items and for records of found items, including the repatriation of them. Such local log books might include the following:

#### *Lost Items*

Date	Sequential reference	Description	Location	Contact details for owner	Found (reference to Found Items)
01-01-25	001	Key	Kitchen	Pat & tel no	
02-02-25	002	Hat	Carpark	Mel	

#### *Found Items*

Date	Sequential reference	Description	Location	Contact details for finder	Repatriation. Name, date and signature of owner on collection.	Cross ref to Lost Items ref number	Disposal. Where, how, when and cross ref to receipt and proceeds
01-01-25	001	Shoe	Room 4	Viv & tel no			

*“Receipt” – evidence of repatriating a found item or disposing of one*

The site representative should ensure that the owner signs and dates, with all relevant information, the Found Items log book alongside the relevant item. That item should also have sufficient and helpful description next to it, to assist in the event of any subsequent dispute. Similarly for disposals.

## Appendix D. Example signage

Example signage to alert people to this policy and to the reclaim period.

Site management for each location shall determine the most helpful location(s) for such signage.

Lost & Found Property	
Contact for this site	eg. Main reception Eg. Pat Potter, Team A, 1 <sup>st</sup> Floor (telephone xxxxx)
Policy	<a href="#">Handling Lost and Found Property Policy (FIN 012 V3) on JARVIS</a>
Reclaim period	Found items will be disposed of after 3 months Earlier for perishable items