	POLICY Number: 7311-95-002 Title: Management of Surplus Assets
Authorization [] President and CEO [X] Vice President, Finance and Administration	Source: Director, Facilities and Engineering Services Cross Index: Date Approved: January 30, 2006 Date Revised: February 14, 2012 Date Effective: February 21, 2012 Date Reaffirmed: Scope: SHR

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OVERVIEW

Storage, redeployment and disposal of surplus assets must align with our guiding value of stewardship. Items should be handled in a transparent, ethical manner, ensuring due care of publically funded assets. This policy does not apply to Information Technology Services (ITS) assets including hardware and storage media; for direction regarding surplus ITS assets, contact ITS.

DEFINITIONS

All Staff means SHR employees, physicians, medical/professional staff, students, and volunteers.

Surplus Assets refers to all medical and non medical devices including furnishings, equipment and building fittings; includes obsolete surplus assets.

- are no longer required due to changed policies/procedures, functions or usage patterns;
- have been removed or replaced as part of a building upgrade;
- no longer comply with occupational health and safety standards;
- are found to contain hazardous materials; and/or are beyond repair, but can be sold for scrap.

1. PURPOSE

The purpose of this policy is to establish SHR's requirements for management of surplus assets.

2. PRINCIPLES

- 2.1 SHR has a responsibility to dispose of surplus assets in an ethical, safe and transparent manner.

2.2 Redeployment, sale and donation reduces SHR storage costs as well as environmental costs associated with landfills and solid waste.

3. POLICY

3.1 Management of surplus assets must be considered in the following order: redeployment, sale, donation and recycle/discard. All redeployment, selling or discard procedures must adhere to approved methods (see procedure).

3.2 Medical assets shall not be sold to the public.

3.3 All items being sold must be made available to the public, either through auction, sealed bids, online, etc., and not solely to our employees.

3.4 SHR departments or facilities shall not sell or otherwise transfer surplus assets directly to staff or individuals¹ other than through the approved process (see procedure).

3.5 The SHR shall offer no warranty on the condition of the goods sold or donated and shall not be liable for any injury, loss, damage or expense sustained to parties that assume possession of these items.

4. ROLES AND RESPONSIBILITIES

4.1 All Staff

Ensure surplus assets are identified and disposed of in accordance with this policy and procedure.

4.2 Managers/Supervisors

Ensure their employees are aware of this policy and procedure and handle surplus assets accordingly.

5. POLICY MANAGEMENT

The management of this policy including policy education, monitoring, implementation and amendment is the responsibility of the Director, Facilities and Engineering Services.

6. NON-COMPLIANCE/BREACH

Non-compliance with this policy will result in a review of the incident. Repeated non-compliance may result in disciplinary action, up to and including termination of employment and/or privileges with SHR.

¹ Except in unusual circumstances (such as natural disasters, cases of extreme poverty) where individuals or community groups are in dire need of household items. It will be left up to the discretion of the site specialists/site managers to determine need. In rural areas where no public auction exists, facility managers may sell assets to staff and community members through an equitable, transparent process such as sealed bids.

PROCEDURE

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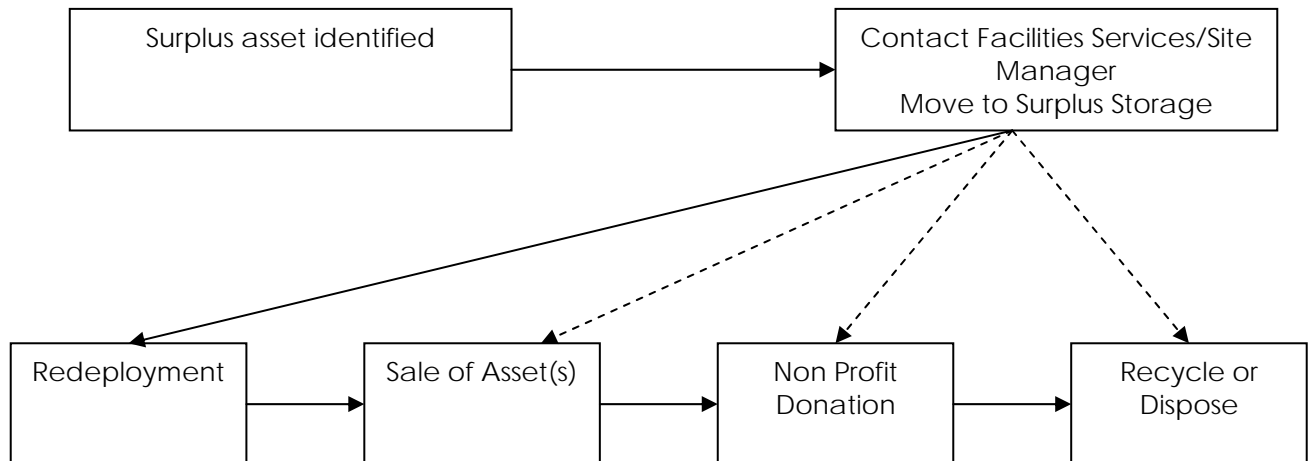
1. PURPOSE

The purpose of this procedure is to establish an ethical and transparent process for management of surplus assets including redeployment, sale, donation or disposal.

2. PRINCIPLE

Ethical management of surplus assets requires consistency among sites and transparency of the process.

3. PROCEDURE



3.1 Identification

3.1.1 Departments will determine what items are surplus.

- Once the department determines that an asset is surplus, and they do not want or have the capacity to store it, they will:
 - At RUH, SCH, SPH and PRC, contact Facilities and Engineering Services through the Online Request Forms or at 655-2535.
 - All other sites – contact site or program manager

Once an item is deemed surplus and has left the unit/area, the “donor” has ceded all right to that item. Assets will not be held indefinitely and cannot be returned to the originating unit/area.

- 3.1.2 Site or program manager/FES, inspects the asset to determine the appropriate action plan.
- 3.1.3 Prior to any Medical equipment leaving a department, it must first be decontaminated; any and all patient information must be removed/destroyed by clinical engineering (or other such trained personnel) and the ECN#, serial number and equipment name sent to clinical engineering for their records. It is the originating department/site’s responsibility to ensure all this has occurred.
- 3.1.4 Items appropriate for surplus storage must be tagged with the day’s date. Whoever places the item into storage is responsible to take measurements and a brief description and relay that information to admin support to aid in the redeployment process.

3.2 Redeployment

- 3.2.1 Site manager/FES inspects the surplus asset to confirm the asset functions and meets current OH&S standards.
- 3.2.2 Surplus assets may be redeployed to other departments or facilities within SHR. Such transfers shall be at no cost to either department/facility (other than moving costs where necessary).
- 3.2.3 The department requesting the redeployed asset should contact the Site Manager or FES. The requesting department may be charged for the moving expenses.
- 3.2.4 Assets that have been removed from service as part of an Occupational Health & Safety (OHS) upgrade shall not be redeployed within the health region, but may be considered suitable for donation to community groups or sale at auction.
- 3.2.5 Surplus assets that are not re-deployed within 30 days² will then be made available for sale.

² This is at the discretion of the site manager or delegate. 30 days is the suggested **minimum** to allow for redeployment.

3.3 Sale of Assets

- 3.3.1 Primary responsibility for sale of assets is that of Facilities and Engineering Services (RUH, SCH, SPH and PRC) or the respective site manager. As all of our assets are purchased with public funds, they must be made available to the public when they are no longer required. Suggested avenues are public auctions, onsite sales advertised to the public, and online servers such as Kijiji.
- 3.3.2 Medical assets may be sold to other health providers. In these cases, Finance shall determine the value of the item(s). The originating site or department will assist in locating a buyer. The funds shall be returned to the capital fund and records made of the serial number, value and destination.
- 3.3.3 The net proceeds from sales from non-medical assets shall be returned to the originating site. At RUH, SCH and SPH the funds shall be returned to FES's Sustainability Department, minus associated moving and auction costs.
- 3.3.4 Assets that are sold are not to be reused or returned to SHR departments or facilities.

3.4 Surplus Asset Donation to Non Profit Organizations

- 3.4.1 Assets may also be donated to Non Profit Organizations or educational institutions. Primary responsibility for asset donation is that of the site manager or site specialist. The FES Sustainability Coordinator can, if need be, assist with this process and should be made aware of all donations from RUH, SCH, SPH and PRC.
- 3.4.2 Preference will be given to organizations that are able to remove the asset at no cost to SHR, in a timely fashion³. Recipients of donated medical items must complete the *Condition of Transfer - Surplus Medical Assets* form (see Appendix A).

3.5 Recycling or Discarding Assets

- 3.5.1 Assets that remain leftover once all other avenues have been exhausted, will be recycled where applicable (scrap metal) or transported to the landfill.
- 3.5.2 Primary responsibility for asset recycling is that of the site manager or site specialist. The FES Sustainability Coordinator will assist in this process and, for reporting purposes, should be made aware of items recycled from RUH, SCH, SPH and PRC.

3.6 Reporting

- 3.6.1 To ensure transparency in the management of surplus assets, any employees involved in the sale, donation, recycling or disposal of surplus assets with a value >\$100 must make a record of the asset, including any serial number,

³ As of October, 2011, Food for the Hungry is the charity of choice for medical items.

and its eventual destination. These records must be sent to Finance for annual reporting purposes.

4. PROCEDURE MANAGEMENT

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5. NON-COMPLIANCE/BREACH

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Saskatoon Health Region
 Sustainability Coordinator
 Facilities and Engineering Services
 Room 331, Ellis Hall
 Royal University Hospital
 Saskatoon, SK S7N 0W8
 Phone 655-0676, fax 655-0673

Condition of Transfer – Surplus Medical Assets

_____ (Recipient) agrees to receive from the Saskatoon Health Region (SHR) the item(s) identified below. The Recipient agrees that the item(s) are received "as is" and agrees that SHR makes no warranty, representation or condition as to the item(s) and the Recipient agrees that SHR will not be held responsible for the state of repair or any claim for loss of any nature that may occur through the use of the said item(s).

In particular, in consideration of the transfer of the item(s) to the Receiver, the Receiver agrees to release to SHR, its employees, servants and agents from any and all claims or actions arising from the transfer or use of the item(s) and agrees to indemnify and save harmless SHR, its employees, servants and agents from and against any and all claims or demands from any third parties arising from the transfer or use of the item(s).

QUANTITY	DESCRIPTION

Dated this ____ day of _____, 2012

 Recipient (print)

 (signed name)

 SHR (print)

 (signed name)