

CG2 NHS Professionals
Record Keeping Guidelines

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Introduction

Record-keeping is an integral part of Nursing, Midwifery, and Allied Health Professionals' practice and is essential to the provision of safe and effective care.

Records include anything that refers to the care of the patient and records can be called as evidence as part of:

1. Coroners' inquests or criminal proceedings
2. Safeguarding and Local Authority investigations
3. Nursing and Midwifery Council Fitness to Practice Committee hearings
4. Trust Serious Incident and Root Cause Analysis investigations
5. NHS Professionals disciplinary investigations

The approach to record keeping that courts of law adopt tends to be that 'if it is not recorded, it has not been done'. Good record keeping shows how decisions related to patient care were made, while poor record keeping increases the risk of harm when making decisions.

All NHS Professionals Bank Members must comply with Information Governance and Data Protections Policies, in every NHS organisation where they work assignments, to ensure that patient personal information is dealt with legally, securely, and effectively, to deliver the best possible care.

Scope

This guidance applies to all NHS Professionals registered and non-registered Bank Members, and applies to both paper and electronic records including handwritten clinical notes, emails, and letters to and from other health professionals, as well as care plans, birth plans, and observation charts etc.

This guidance applies to all Bank Members on assignment for NHS Professionals in any healthcare setting including, Acute, Mental Health and Community NHS Trusts.

It is not intended to replace local Trust policies and guidelines, which must be always adhered to.

All NHS Professionals Bank Members must ensure they are familiar with local Trust documentation.

For Registered Nurses, Midwives and Health Visitors this guidance is intended to be used alongside the NMC Code: Professional Standards of Practice and Behaviour for Nurses, Midwives and Nursing Associates (NMC 2018).

For Allied Health Professionals this guidance is intended to be used alongside the Health and Care Professions Council: Standards of Conduct, Performance and Ethics (HCPC 2016).

Guidelines

- 1.1 Health care professionals have a duty to keep up to date with, and adhere to, relevant legislation, case law, and national local policies relating to information and record keeping.
- 1.2 Handwriting must be legible and written in black ink to enable legible photocopying or scanning of documents if required.
- 1.3 Records must be accurate and written in such a way that the meaning is clear.
- 1.4 Records must demonstrate a full account of the assessment made, and the care planned and provided, and actions taken to include information shared with other health professionals.
- 1.5 All entries in a record must be dated (date / month / year), timed accurately, and signed.
- 1.6 All entries in a record must be made, wherever possible, with the involvement of the patient / client / carer and written in language that the patient can understand.
- 1.7 Records must demonstrate any risks identified and / or problems that have arisen and the action taken to rectify them.
- 1.8 First entries on each page of the record must include the printed name and signature of the person recording the information.
- 1.9 Abbreviations, jargon, meaningless phrases, or offensive statements must not be included in any records.
- 1.10 In the event of an error being made, entries must be corrected by striking the error through with one line, and applying the author's initials, time, and date alongside the correction. The original entry should still be able to be read clearly. Errors must not be amended using white correction fluid, permanent marker, scribbling out or writing over the original entry.
- 1.11 Records must never be falsified.
- 1.12 All NHS Professionals Bank Members must develop communication and information sharing skills, as accurate records are relied upon at key communication points, especially during handover, referral, and in shared care.
- 1.13 Legal requirements and local policies regarding confidentiality of patient records must be always followed.

1.14 In line with the Data Protection Act and General Data Protection Regulations, care records and information concerning patients must not be left accessible, or in public places, and must not be unlawfully shared with anyone not directly involved in the patient's care.

1.15 Health care professionals remain professionally accountable for ensuring that any duties delegated to non-registered practitioners are undertaken to a reasonable standard, and records made by pre-registration Nurses / Midwives / Nursing Associates or Care Support Workers are countersigned.

2. Guidance for Non-Registered Bank Members

2.1 Entries may be made to patient records in line with local Trust policy.

2.2 Entries in patient records must be to the standard as outlined above.

2.3 Supervision and countersigning of care records completed by non-registered Bank Members must take place until the worker is deemed competent.

3. Electronic Records

3.1 The principles of confidentiality of information apply to electronic and digital records as they do with other records. Whilst it is no longer common practice to fax records the same principles of confidentiality apply.

3.2 Staff must use their own log-in details when accessing electronic / digital records and must log-out when not in use. Prior to the first assignment in a Trust staff must obtain a log-in / password for relevant electronic record systems by contacting the local NHSP Services Team in the Trust.

3.3 Registered Nurses, Midwives, and Allied Health Professionals are accountable for any entry they make to electronic held records and must ensure that any entry made is clearly identifiable in accordance with local Trust policy.

References

NMC (2018) The Code: Professional Standards of Practice and Behaviour for Nurses, Midwives and Nursing Associates.

<http://www.nmc.org.uk/standards/code/read-the-code-online/>

HCPC (2016) Standards of Conduct, Performance and Ethics. <http://www.hcpc-uk.co.uk/>

General Data Protection Regulations.

<https://www.gov.uk/government/publications/guide-to-the-general-data-protectionregulation>

Data Protection Act (2018).

<https://www.gov.uk/government/collections/data-protection-act-2018>

CG2 Record Keeping Guidelines Version History

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1	March 2006	Document created	Cathy Winn, Head of Clinical Governance, Jenny Carpenter head of CG
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2	March 2008	Document reviewed and updated	Karen Barraclough, CG and Risk Manager
3	March 2010	Reviewed and updated	Karen Barraclough, Senior Nurse
4	November 2012	Reviewed and updated	Karen Barraclough Senior Nurse
5	January 2016	Reviewed and updated	Karen Barraclough, senior Nurse/ Head of Governance
6	February 2018	Reviewed and updated	Karen Barraclough Chief Nurse and Victoria Neale, Nurse lead
7	March 2021	Reviewed and updated	Jane Hewitt Nurse Lead.
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