Amended: 06/04/2016

Dolphin Healthcare Services
Sheldon Community Centre, Sheldon Heath Road,
Birmingham, West Midlands, B26 2RU
Phone: 01212433384

Record Keeping Policy and Procedure

Purpose

- To comply with good practice on record keeping.

Scope

- All employees, all activities of Dolphin Healthcare Services.

Policy

- Records will be generated and kept of all activities which may affect the quality of Care and/or support given, the continuity of that Care and/or support, and any business matters which affect the integrity of the service and the safety of Service Users.

Procedure

Why do we record and what is the importance of recording?

- They provide a permanent record.
- Information that is stored in your head disappears if you forget it.
- Information can be dangerous if remembered wrongly; e.g. did I give the medication?
- Accountability – protects you and your employer from later complaints that something improper happened.
    - In the event of a question over the behaviour or competence of the organisation or any individual, for instance, in a complaint, a Coroner's referral, or a CQC inspection or investigation, all documents become formal evidence, and the view will be taken that "if it was not written down, it did not happen". It is therefore essential that documentation of all significant actions (a) exists, (b) can be found, (c) is legible, (d) is understandable, (e) is relevant, (f) is truthful, and (g) is signed.
- See AB01 for the length of time which documents must be retained.
- Examples:
    - Records can be consulted if there is a problem – information that is written down in records (as long as they are accessible, legible) are available no matter where the person who wrote the records is i.e. off sick, changed jobs etc.
    - Records provide information that can be used by several people – can be shared by people who never actually meet each other.
    - Records enable better Care for Service Users – the information you have about your Service Users is very valuable and can help other people to Care better for them. Also, the information that other people have regarding your Service Users is very valuable to

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you and can help you to provide the best possible Care.

- **Records are of no use if no one reads them and can actually be worse than useless if no one keeps them up to date. You should look at any daily records at the beginning of the shift and see how they affect your plan for the day. These may include your own personal notes from the day before. You can confirm how up to date records are by checking dates and times, and accuracy is checked by confirming with the individuals involved.**

Objective and Subjective Reporting

- Objective reporting means to report precisely what you saw, smelled, felt, or heard. If a person complains of symptoms that you cannot observe (e.g. dizziness or pain) or report exactly what the person told you. This is the better and safer way of reporting and should be used when writing Care Plans.

- Subjective reporting is used to report when you cannot sense or measure; when possible this should be avoided, but if you think something is wrong you should report it to your supervisor.

Monitoring & Obtaining Information

- Talking and listening effectively will enable you to find out your Service User's needs. Observation will also do the same.

Why is it important to be a skilled observer?

- Observe and record:
    - Being a skilled observer detects problems in their early stages and helps prevent serious problems;
    - Being alert to people and their environment, whether it is a worn rug or a change in a Service Users condition, helps to reduce accidents and maintain the well-being of the people in your Care;
    - Careful observation also increases your awareness of an individual's physical, emotional, and social needs;
    - If you work in a Community Setting it is vital that you accurately record information in the Daily Living record after each visit you make, and for all the Service User's that you provide Care for. Failure to adhere to this procedure may lead to disciplinary action;
    - Records should not be made until after the event;
    - Many things may happen which you will need to report immediately to a superior; accidents, incidents, changes in a Service User's medical or psychological conditions, serious hazards, Service User's complaints. If there is no formal way of recording such matters, you should still make your own records.

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- Guidelines for receiving and transmitting messages:
    - Write down messages clearly and legibly;
    - Listen carefully and check for accuracy with the person transmitting the message;
    - Work out a scale of urgency for transmitting messages;
    - If you leave a message with someone else to pass on be sure that the person it is intended for actually gets it.
    - When writing down messages include:
        - Name of the person sending the message;
        - Name of the person who is to receive the message;
        - Date and time the message being received and given;
        - Clear details of the communicated message;
        - Indication of the urgency;
        - Whether it was a verbal message or telephone message.