## **HC-Client Documentation**

Version:

Published:

12 Jun 2025, 4:04 PM

Approved:

12 Jun 2025, Bertram Hiung

Last edited:

12 Jun 2025, 4:03 PM

## **Purpose**

This policy defines practices for documenting and managing client history and service records in line with legislative, ethical and current best practice requirements.

These records are permanent, legally accountable documents which must accurately record the total needs, care and management of clients while receiving care and services. They are an essential component of well-planned and managed client care and may need to be produced as physical evidence of care delivery.

## Applicability

#### All Home Care Providers:

- · all categories of employees
- governing body
- all volunteers
- contractors and consultants, whether or not they are employees all other service providers

### client outcome

I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

## Organisation statement

The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the client's needs, goals and preferences to optimise health and well-being.

Documents relevant to this policy



Consumer File Content Checklist

Managing business unit for this policy



Home Care Services

## **Policy Commitment**

A comprehensive and accurate record must be kept for every client that describes all care provided to them. The record will be created on commencement of services in conjunction with the initial assessment and regularly reviewed, evaluated and updated to ensure it is always reflective of the current health and care status of the client.

All records are to be maintained in a manner that respects the dignity and confidentiality of the client and staff as well as meets regulatory requirements relating to the collection, use, storage, access and disposal of health and personal information.

## - Client Documentation

transferred to

AN AND MAN THE PARTY OF THE PAR

March and the late of the late

#### and the second

The felling differential for decimality and sampling client lightly and make in the dath region till institute and in the control of the production of the p

These republicant proportion being the committee decommittee with a main accordable decordable standards. They are to according to a managed client compound to be produced as produced as

## yalini ali, sa

- The same of the sa
  - the state of the s
  - a manufact /like -
- ati kaning pakeun anite dia napatahina terup kadi dan ya terbagai panahinketa kan abata didika a

## section bells

and the best of the last the control and the c

## Commercial and State of State

The enjustration definite this told effective paleonic during them, as both during them and distingues, in accordance with the client to contact and and manufactures from health and and before

## which said an Inspector recommend



Comment of the Comment Contains

## THE RELEASE OF THE PERSON OF T



Property and people

# Policy Commitment

in the last of the property of

All teces we to be established to author and respect the signity and controllating or the above and coff to union marks regulately requirements of the conjections are presented to be a present

## Mandatory requirements

The client's family name and given name/s, date of birth and gender identity must appear on every page of a paper record or on each screen of an electronic record/or on each page of a hard copy.

## Record keeping standards

To comply with the Australian Commission on Safety and Quality in Health Care standard on information documentation, all records must:

- · be legible and written in English
- only use approved abbreviations and symbols
- · be written in dark ink (for paper based records) that is difficult to erase and write over
- · include the time (using a 24-hour clock hhmm) and date (using ddmmyy or ddmmyyyy) of entry
- be signed by the author and include their printed name and designation. Entries by students involved in the care of a client must be co-signed by the student's supervisor
- · be integrated i.e. there are not separate systems for different care types
- · be accurate statements of interactions between the client and /or their representatives and the service
- be sufficiently clear, structured and detailed to enable other members of the team to resume care of the client or to provide ongoing service at any time
- be written in an objective way, not include demeaning or derogatory remarks and distinguish between what was observed
  or performed, what was reported by others as happening and/or professional opinion
- be made at the time of an event or as soon as possible afterwards. The time of writing must be distinguished from the time of an incident, event or observation being reported
- be sequential for hard copies, lines are left between entries and must be ruled across to indicate they are not left for later entries and
- be relevant to that client and only include personal information about other people when relevant and necessary for the care and treatment of the client.

For hardcopy records, addendums must be appropriately integrated within the record and not documented on additional papers and/or attached to existing forms.

All errors are must be appropriately corrected in a manner that provides the viewer with both the erroneous and corrected record:

- For hard copy records, do not overwrite incorrect entries or use correction fluid. A line should be drawn through the incorrect entry and it noted as "written in error", followed by the author's printed name, signature, designation and date and time of correction.
- For electronic records, an additional note must be created to explain the previous incorrect entry. The history of audited changes must be retained.

## Handover

The following process is used for effective written communication concerning care issues:

- Introduction to note entry.
- · Situation that is or has happened to the client.
- . Background to the issues that led to the documentation.
- Assessment of what the clinician believes the problem is.
- Recommendation regarding what should be done to correct the situation.

## What to record

client records must be created and maintained by an appropriately qualified staff member and include:

- · referral information, social and medical history
- · the initial and all medical, risk and other assessments
- · the care plan

## and the second second second

The discussionity cores and given some is, then of testic and goodpe (dentity count appear to every maps of a paper record or go doors account an electronist sound for on testic page of a force count

## Annual seconds research

We comply with the destroiting Consolution and Salary and Hally in Book Consider on Islia and inconsequents and

- while the state of the last of
- Madaya har madalamada bayaran san yini.
- resum autivo liana, principi un incertifica a mode (especiale) balental yrapage and) plan altiste più percolver lian
- be described by the nation of makes their principles and described by the factor of the restriction of the control of their principles.
  - bett enveloped to the first of decise the environment of between the
  - astronomic for anticommunity of the policy o
- In antisymptotomy descious not detailed to embiguities montage of the legit of requestrate of the client by the client of the client of the control of the control of the control of the client of the control of the cont
- be willterels an difficitive with not include dissembly or dissipling members and littlinguist followers which your characters or particularly what was reported by others as improved applicate.
  - to made at the time of an event or at each or public afterward. The rone of writing made hardland from the
    store at an incident, exclusive transfer over pointed.
  - be requestly! for food capies. They are lost believes and asset by rating across to include they are not last for input process and.
- In return to the class and only just the property of the cuttor (provide which return reconstrued response) for the course and discrepance of the classic.

to barbary metric, altroport one or against may beregated with the month wat of discussion of eithered papers solder accesses to existing steps.

homeonic has immercial that the report his tableau tall arrain and immercial platerarium of four ris core in fineses.

- the best copy species, do set consider a minespecient of the consecuent basis, a line plant of the storage maincreases when and it possed at "white we area." I calcured by the source I proget of an area of consection.

## TOY COURSE

- and the latter of the latter o

- make the state of the product of the state o

## COUNTRY OF THE COUNTRY

interface that we have the product to the contract of the face of the contract of the contract

- personal latter and the latter product the latter of
- the state of the s
  - manner v

- · contacts including substitute decision makers and consents
- · progress notes and clinical monitoring charts to record:
  - o diagnoses, reports, assessments and recommendations from relevant health and medical practitioners
  - · transfers and discharges
  - o instructions from clients and/or their representative/s
  - o changes in condition such as pain, wound care, behaviours and general condition and
  - consultation concerning treatment, goals, interventions with client, responsible person, medical officer, allied health, other consultants, Guardianship Board and Protective Officer.
- all incidents including relevant information, interactions related to open disclosure and cross reference/link to the incident management system
- all dignity of risk assessments if a client seeks to make a choice that is possibly harmful to them, the organisation is expected to help the client understand the risk and how it could be managed and document
- any leave taken by the client along with the date and time they left and returned and any assessments prior to and/or on return and
- issues that require particular attention or pose a threat to the client, staff or others including:
  - o allergies/sensitivities or adverse reactions and the known consequence
  - · infection prevention and control risks
  - behaviour issues that may pose a risk to themselves or others and/or
  - o where clients have similar names and other demographic details.

Any such issue should be 'flagged' or recorded conspicuously on appropriate forms, screens or locations within the care record. They must be apparent to and easily understood by health care personnel and regularly reviewed. Where alerts relate to behaviour issues the alert should be discreet to ensure the privacy and safety of the client, staff or others.

Complaint records are not to be kept with the client's health care record.

#### When to record it

<u>Care coordinator:</u> An entry on the client's record should be made at least monthly with additional entries made more often to reflect changes in the client's status, condition and/or care plan as these occur.

<u>Registered nurses</u> should make an entry at the time of events, or as soon as possible afterwards, including when clinically assessing the client.

Other health care personnel should make entries to reflect their level of assessment and intervention consistent with the care plan.

Care workers should enter information related to tasks or observations into the record.

## **Documenting Case Notes**

When documenting case notes or changes in care or a condition staff should consider following the SAP documentation method:

Situation - what is reported by the worker or client i.e., a general summary of the situation or observation.

Actions - what actions need to be taken or were undertaken e.g. referrals to medical officer, dietician, other allied health professionals or instructions for staff to report certain changes.

Plan - what is the final plan? Once the above have been determined, a final summary of actions and plans should be recorded with who is responsible and when should it be followed up.

At all times the focus should be on the client's needs, goals and preferences.

## Security and access

- - delicated about the control of the control of the control of the control of
- more than the free less till and inserted early to rether any or has become a greater transcribe a
  - thread with time medium of
  - A secretary with the latest and water than
  - has matrifered because the accompanient course between poles and application of assertion will be a
- commission concerning tentrimed, guiler, fatoresentenes seas, commissioned, medical effects, alled to attle, forus completes. (Language Architecture and Proposed Language).
  - in incidence incoming to interpretate the second of the second continues and only obtained into the second content of the second content.
- allotigative all our conservance. For efformation reporter that we consider format the relative to a reporter to tell our district and format in a manufact to the relative to the conservance.
- The first of submission was first three bearing that the base of the policy and charles and submission of the policy and the pol
  - molecular amendo del loca comitió militar acordina pero no normana delegidam militare, testa mejor y
    - consequences from when I begin multiplied as white the effective decrease with
    - between metalism pick is place purcuit word surhold in
      - alatti yirlamgamii midadaa amaaniilatii aadi tiraba taatid

Any such such a filler of the property of the

Complement formation with rotation for the Property William Completion and the Property Completion (Completion Completion Completion

A precessed models

Continuation in temperature the cited's mound around to being at least manufactors and a surely manufactors as The charges in the client's abuse, confident and a continuation as their occur.

forward care should make in only at the limb of results, or at our improving otherwise. Forming when childrenly

arter to the second distinct or the first of the first with the second of the second with the conplant.

described and in continuous of the continuous of

explicated patronicio

religion of the contract of the property of th

- Laboratoria a contract of the viscosity beautiful and the other will be between the base at time.

definite a sent actions now to be some at ward spate tolors of a referral to messarily allow, department in the limit of the sent also should be referred to the spate of the sent also should be referred to the spate of the sent also should be referred to the spate of the spate

Plan - what is the lind plant these the status force been determined, a first amounts of estions and plant decided by recorded and sets of the determined by an object of the determined by the

A second the first plant of the client of the college and the

DESCRIPTION OF STREET

All information in a client's care record is confidential and subject to prevailing privacy laws and policies. Records must be securely stored when not in use e.g. in locked storage or password protected software. client records should only be accessed and the information used or disclosed when it is directly related to the staff member's duties and is essential for the fulfilment of those duties or as provided for under relevant legislation. All requests to access client records are to be managed in line with the Privacy Policy.

client records must be readily available at the point of care or service delivery. Records must not be removed from the business site unless prior arrangements have been made e.g. required for a home visit.

client records must be kept for the mandated retention period and disposed of in a manner that will preserve the privacy and confidentiality of any information they contain.

## Staff education

All care staff inclusive of contractors such as allied health are to receive initial and ongoing education in the management of care documentation processes and procedures.

#### Monitor and review

The organisation will periodically assess the performance of the record management systems through client file audits and process review to evaluate the design and effectiveness of practices and identify areas for improvement.

## Roles and Responsibilities

Senior management is responsible for:

- · Establishing mechanisms to ensure compliance with the requirements of this policy.
- · Ensuring implementation of a framework for auditing of health care records and reporting of results.

Care Coordinators and Nurses are responsible for:

- · Ensuring the requirements of this policy are disseminated and implemented in their area of responsibility.
- · Monitoring compliance with this policy, including health care record audit programs, and acting on the audit results.

Care workers are responsible for:

- Maintaining their knowledge, documentation and management of health care records consistent with the requirements of this policy.
- Ensuring they are aware of current information about the client under their care including where appropriate reviewing entries in the health record.

## References

Name	Source
Documentation of Information Standard	Australian Commission on Quality and Safety in Health Care

All information is blicable one event to confidence be provided preside the confidence of the local internal confidence of the event of the confidence of th

arternof self-read beautiful material for the printer introduction at interest for the printer for the beautiful for the

proving set is being from the legal of the interpretation protection and adoption of the province of the provi

#### and the state of the state of

All care staff includive of contractors took or allful health are its receive initial and origining education in the management of care.

#### section to a section to

The important of the particular of the particula

## Roles and Responsibilities

And Aldinosper & Instrument Vermal

- opting this however respect to the headquest assume translation gratified in
- States to find state that the state of the s

mit aldersgam see mense kan materialsocitons?

- a simple of its and shall be belong both the belong the belong the beautiful as with a streaming or any unbound.
- other and the partie and processing which there are a closely which the parties of the label or and the state of

the worken were manufalled for

- To assess the second development of the second seco
- gaves by a minimum in seaster grafted in from sixth astern structs with fronte continuous in section 70 seases one year granted as

## References

bullet in the collection of the collection in collection i

والمستقبل والمستبرا والمحركي المنصلين والما المحرورين المدانان المراد