Bethany Care Ltd

Documentation Review Policy

Policy & Procedure 53

Document Review Details	
Date Created	10/03/2017
Date Reviewed	10/03/2017
Reviewed by	Brian Lynch (Quality Assurance), Board and the SM
Date of next review	February 2018
Amendment History	

Client File Management Policy

1. Object & Field of Application

1.1 The Bethany Care Document Review Policy and Procedure exists to ensure that a secure file is created for each client and that a record of care and planning is routinely managed effectively.

1.2 The policy applies to all staff and volunteers involved in the management of client information.

1.3 This policy does not provide detailed information on privacy and confidentiality. This can be found in the Privacy and Confidentiality Policy (Policy 38).

2. Definitions

2.1 Secure refers to reasonable physical, technical and administrative mechanisms in place to prevent privacy and confidentiality breaches.

Reasonable physical safeguards include:

- Locking filing cabinets and unattended storage areas
- Positioning computer terminals and so that they cannot be seen or accessed by unauthorised people or members of the public.

3. Legislation

Information Privacy Act 2009

4. Principles

4.1 Client files are an important source of information about clients, their health, social and treatment needs. Information in client files will be complete, accurate and relevant.

4.2 Every year Bethany will contact families to arrange interviews where important personal documentation can be collaboratively verified and checked.

4.3 This important process must be completed as without it, Bethany will not be able to provide the best possible care.

4.4 Client files are used to enhance safety and continuity of care by the accurate recording of client details and history.

4.5 The protection of client privacy and confidentiality is a guiding principle in the collection, use and storage of client information.

5. Outcomes

5.1 The client file management system is systematic, compliant with legislation and quality standards, informative and protects the interests of the client and Bethany Care.

5.2 It aims to ensure client files are effectively established, reviewed (every 12months), maintained and retained.

5.3 Client information should be secure, accessible, relevant and used primarily for the benefit of the client.

6. Functions and Delegations

Position	Delegation/Task
Board of Directors	Endorse Client File Management Policy.
Management	Comply with Document Review Policy and associated procedures. Be familiar with legislative requirements and ethical standards regarding the collection, storage, use and security of client information. Monitor systems that are in place to adequately collect, store, use and secure client information. <u>Administration Officer, Assistant Manager, Quality Assurance Officer</u> Review client files on a regular basis.
Staff	Comply with Client File Management Policy and associated procedures in the collection, storage and use of client information. Be familiar with legislative requirements and ethical standards regarding the collection, storage, use and security of client information.

7. Risk Management

7.1 Systems are in place to ensure client privacy and confidentiality. All client documentation is stored securely in a manner so that unauthorised access is prevented.

7.2 Staff are provided with ongoing support and advice to assist them to effectively manage client files.

7.3 Client files are to be reviewed yearly to ensure we have the most current information.

8. Policy Implementation

8.1 This policy is developed in consultation with all staff and approved by the Board of Directors.

8.2 This policy is to be part of all staff induction processes and all employees are responsible for understanding and adhering to this policy.

8.3 This policy should be referenced in relevant policies, procedures and other supporting documents to ensure that it is familiar to all staff and actively used.

8.4 This policy will be reviewed in line with the quality improvement program and/or relevant legislative changes.

9. Client File Structure (Respite & Individual Support)

Client files will be clearly identified with their name and include the following information:

9.1 Photo page with date of birth (Z:\Admin Office\Service Delivery\Hope Cottage File Construction\Client Profile - HC Files.docx)

9.2 Contents Page (Z:\Admin Office\Service Delivery\Hope Cottage File Construction\Contents Page - HC Files.docx)

9.3 Carer Notes sleeve (for medical and carer notes)

9.4 Individual Profile PART A – Client, Address, Family, Doctor, Medication, Routine, Usual Diet, personal details.

9.5 Individual Profile PART B – Plans and goals

9.6 Individual Profile PART C – Signatures, media authority consent

9.7 Summary of Stay sleeve – details of previous respite stays at Hope Cottage

9.8 Respite letters

9.9 Financials - Invoices

10. Development and Maintenance of Client Files

The Administration Assistant, Assistant Manager and Quality Assessor will ensure that all sections of the client file are complete and up-to-date.

Entries in client files must be:

10.1 Brief, timely, accurate and complete

10.2 Factual, objective and sequential

10.3 Do not contain value judgements or abbreviations

10.4 Legible and signed, dated, with name of the author printed

10.5 Written in black or dark blue ink

10.6 To have any mistakes crossed out and initialled, with no liquid paper/white out used.

11. Review of Client Files

Staff Responsibilities

11.1 QA – Creation of an Excel spread sheet, to help systematically review all files. Review a sample set of client files during the yearly internal audit process.

11.2 AA – To contact clients and families to arrange interviews where client records can be validated and updated.

11.3 AM – While plans are being reviewed, the AM will also get the Individual Profiles A, B, C, quick sheets, medication information. To contact clients and families to arrange interviews where client records can be validated and updated.

12. Key Documents/Areas to be Reviewed in Client Files

12.1 Individual Profile - Part A – Personal Details, Care Notes Z:\DATA\Admin Office\Quality Assurance\PART 1 - HSQF\Standard 2 - Service Access\Individual Profile Parts A B C\Individual_Profile_Sheet_PART_A.doc

- Client Details, Contact Person, Disability & Medical Information, Emergency Medical Assistance
- Personal Assessment
- Personal Record Book, Client Routine Information

12.2 Individual Profile - Part B Z:\DATA\Admin Office\Quality Assurance\PART 1 - HSQF\Standard 2 - Service Access\Individual Profile Parts A B C\Individual_Profile_Sheet_PART_B.doc Individual

- Future Vision & Goals

12.3 Individual Profile - Part C Z:\DATA\Admin Office\Quality Assurance\PART 1 - HSQF\Standard 2 - Service Access\Individual Profile Parts A B C\Individual_Profile_Sheet_PART_C.doc

- Nomination of Support Person
- Program Activity Authority & Consent
- Assessment Information Checklist
- Media Authority & Consent

13. Retention & Disposal of Client Files

13.1 Inactive client files are retained at Bethany Care due to the possibility that:

- The client may return to the service
- There may be litigation or other legal proceedings
- There will be a need for Bethany Care to provide evidence that it fulfilled its duty of care obligations (for example, if a client became a danger to themselves or others).

13.2 Client files will be securely stored for a period of 7 years after the client has ceased receiving services from Bethany Care.

13.3 Client files will be disposed in a manner which ensures that they cannot be retrieved and protects the privacy of clients and others. For more information, refer to the Privacy and Confidentiality Policy.

14. Security of Client Files

All client documentation is to be kept securely with consideration given to physical, technical and administrative security safeguards. For more information, refer to the Privacy and Confidentiality Policy.

15. Key Documents Used in This Process

1) Client File Update Letter to Families

Z:\Admin Office\Service Delivery\Hope Cottage File Construction\Client File Update Letter to Families.docx

2) Individual Profile - Part A

Z:\DATA\Admin Office\Quality Assurance\PART 1 - HSQF\Standard 2 - Service Access\Individual Profile Parts A B C\Individual_Profile_Sheet_PART_A.doc

3) Individual Profile - Part B

Z:\DATA\Admin Office\Quality Assurance\PART 1 - HSQF\Standard 2 - Service Access\Individual Profile Parts A B C\Individual_Profile_Sheet_PART_B.doc Individual

4) Individual Profile - Part C

Z:\DATA\Admin Office\Quality Assurance\PART 1 - HSQF\Standard 2 - Service Access\Individual Profile Parts A B C\Individual_Profile_Sheet_PART_C.doc

5) Service User Information Pack

Z:\DATA\Admin Office\Quality Assurance\PART 1 - HSQF\Standard 2 - Service Access\Information_Pack\Service_User_Information _Pack.doc

16. Procedural Flowchart