NHS
Great Western Hospitals
NHS Foundation Trust

Case Note Tracking Policy & Procedure

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Approved by	Policy Governance Group	Date Approved	24/07/19
Ratified by	Policy Governance Group	Date Ratified	24/07/19
Date implemented (made live for use)	24/07/19	Next Review Date	24/07/22
Status		LIVE	
Target Audience- who does the document apply to and who should be using it. - The target audience has the responsibility to ensure their compliance with this document by: • Ensuring any training required is attended and kept up to date. • Ensuring any competencies required are maintained. • Co-operating with the development and implementation of policies as part of their normal duties and responsibilities.		All employees involved in using medical notes directly employed by the Trust whether permanent, part-time or temporary (including fixed-term contract). It applies equally to all others working for the Trust, including private-sector, voluntary-sector, bank, agency, locum, and secondees. For simplicity, they are referred to as 'employees' throughout this policy	
Special Cases		There are no special cases.	
Accountable Director		Chief Operating Officer	
Author/originator – Any Comments on this document should be addressed to the author		Health Records Manager	
Division and Department		Diagnostics and Outpatients	
Implementation Lead		Health Records Manager	
If developed in partnership with another agency ratification details of the relevant agency		NA	
Regulatory Position		• Records Management Code of Practice for Health and Social Care 2016 (Ref 3) • Care Quality Commission (CQC) (Outcome 21) • Information Governance Toolkit (Requirement 406)	
Review period. This document will be fully reviewed every three years in accordance with the Trust's agreed process for reviewing Trustwide documents. Changes in practice, to statutory requirements, revised professional or clinical standards and/or local/national directives are to be made as and when the change is identified.			

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Instant Information - Summary of Policy

- All case note movements must be recorded on the Medway Case Note Tracking (CNT) system.
- Case notes must be "Received" into each location (with the exception of some outpatient clinics).
- Case notes must be "Sent" from each Location.
- Case note movements must be recorded as they occur.
- Loose history must <u>not</u> be tracked on CNT.
- New case notes must be 'Added' on the CNT system and a barcode label attached to the notes
- New Locations will be added by senior health records employees
- Case note movements entered in error must be notified to senior health records employees for correction. Please email or telephone x4715, x4716, or x4717.

Failure to record case note movements may result in missing case notes which in turn may compromise patient safety. Employees must ensure that all case note movements are recorded. Use of the case note tracking system has been endorsed by the Patient Records Committee.

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1 Introduction & Purpose

1.1 Introduction & Purpose

The Case Note Tracking (CNT) module within Medway is used to track Great Western Hospitals (GWH) case notes throughout the Great Western Hospitals NHS Foundation Trust (the Trust).

Any outpatient clinic, department, ward, individual, or office in the Trust in which case notes reside is set up as a Location on the system, and notes are tracked to and from these locations by either a manual keyboard entry or use of barcode scanners. The scanners read a barcode label attached to the front cover of the case notes.

This document is intended to instruct, advise and guide all Trust employees who have responsibility for, or who deal with case notes during the course of their work, of the correct procedures for recording case note movements. It is imperative that all case note movements are tracked on Medway so that case notes can be located quickly and efficiently when they are needed to support patient care. There is potential for clinical risk if case notes cannot be located for treatment.

1.2 Glossary/Definitions

The following terms and acronyms are used within the document:

CNT	Case Note Tracking
CQC	Care Quality Commission
D&O	Diagnostics and Outpatients
EIA	Equality Impact Assessment
GWH	Great Western Hospital
NHS	National Health Service
PAS	Patient Administration System
PC	Personal Computer
PRC	Patient Records Committee
RMC	Right Mouse Click

2 Main Document Requirements

2.1 Sending and Receiving Case Notes on Medway

This is a relatively straightforward procedure where users will either scan or input a hospital number to send or receive case notes. The date and time is generated automatically by the case note tracking system so case note movements must be recorded as they happen. The "home" location of each personal computer (PC) will be recognised by the case note tracking system and will be displayed by default on the Send and Receive screens. However, these locations can be changed if appropriate and new PCs will require the home location to be set up by the IT Service desk.

It is important that users check the patient details which are displayed in the grid after each Send and Receive entry to ensure accuracy. If an error is made some users may have an option to cancel a movement. Right Mouse Click (RMC) on the patient details and select 'Cancel Movement'. Users who do not have this option must contact senior health records employees to request that the 'rogue' movement is deleted.

2.2 Case Note Comments

Send and Receive comments can be added to case note movements if appropriate using the 'Batch Comment' field. These comments will reflect the reason for the case note movement. For example, notes might be received by a secretary with a comment "On Investigation Shelf", or sent to a ward with a comment of "For Sister to review". The Batch comment can be applied to multiple records if necessary. The 'Receive' function also offers the ability to record a single comment.

Alternatively, a more general comment may be added using the 'Maintain Patient Case notes' menu option.

2.3 Maintain Patient Case Notes

This menu option can be used to fulfil a number of actions, including sending and receiving of case notes. Select a patient and then right mouse click (RMC) to display a sub-menu. The menu options will depend on the permissions granted to each user. In other words, not all users will have all of the available menu options:

2.3.1 Add Case Note

For each new case note folder created, an electronic case note must be created on Medway. This is done using the 'Maintain Patient Case notes' menu option. Select a patient and then RMC on the case note details line and select 'Add Case note'.

2.3.2 Print Case Note Documents

Patient demographic labels, case note barcode labels, and case note front sheets can be printed through this option.

Please note, case note documents may also be printed via the patient's homepage.

2.3.3 Mark as Lost

Missing notes can be identified on CNT and a Temporary volume can be created and tracked until the original is located. This option is available only to senior health records employees.

2.3.4 Mark as Destroyed

When paper case notes are destroyed in accordance with the Health Records Operational Policy (Ref 1), they are identified on Medway via this option. This option is available only to senior health records employees.

2.3.5 Request Case Notes

This option relates to Batch Requesting and is not currently in use.

2.3.6 Add Comment

Select a patient and then RMC on the case note details line and select 'Add Comment'.

New comments will override any previous comments where they are displayed in the speech bubble or on the 'Quick Case note Status' report. However, previous comments are retained and can still be viewed.

2.3.7 View Comments

All comments can be viewed via the 'Maintain Patient Case notes' option on the menu. Select a patient as described above, RMC and select 'View Comments'. Case note movements can be deleted via this option. This is a high level function which will not be available to all employees.

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2.4 Quick Casenotes Status

This is a menu option within case note tracking which allows users to input multiple hospital numbers and then view or print the output. The display/report lists the hospital number, patient name, last location, last comment, and last event date. This report will be useful for those employees searching for a number of case notes in a variety of locations.

Enter the hospital number in the 'Patient Search' field, press the <Enter> key to display the 'Patient Case notes' then (for the first patient only) select the Casenote Type of 'General' and click the 'Add' button.

It is also possible to view the patient homepage through this screen. Simply highlight any patient on the list and their details will be displayed at the top of the screen.

To print the report, RMC and select 'Print Grid'. Select 'Landscape' printing to produce the best report layout.

2.5 Batch Requesting

The case note tracking module includes a facility to automatically request case notes. The relevant menu options are 'Batch Requesting' and 'View Batch Requests'. This service is not currently in use within the Trust.

2.6 Lost/Temporary Case Note Folders

CNT must be updated to reflect when a temporary paper case note folder is created. The 'General' volume of the case notes must be 'Marked as Lost' which will automatically create a Temporary volume. When tracking or viewing the case notes on Medway users must select the Temporary volume – this is in the 'Case note Type filter' field on Quick Case notes Status or the 'Case notes' field on Send and Receive.

Please note, temporary folders will be created by the health records supervisor or team leaders.

2.7 Loose History

CNT only tracks paper case notes. Loose history must not be tracked on CNT. If loose history is tracked, the system gives the mistaken impression that the case notes are in that location. If loose history is tracked by mistake employees must inform a member of the health records senior team who will delete the relevant movement.

2.8 Send or Receive Input Errors

It is inevitable that errors will sometimes occur whilst tracking. An incorrect hospital number may be input, and errors can also occur when scanning. If employees are aware that an error in tracking has been made, they must contact the health records supervisor (Ext. 4715) or manager (Ext. 4717) who will be able to delete any incorrect (rogue) movements.

2.9 Case Note Tracking Audits

Case Note Tracking audits are carried out bi-monthly in four locations, one from each clinical division. 10 sets of notes are selected at random from within each location and 10 sets of notes which are tracked to each location on Medway are selected at random from the 'Current Location' report. The findings of the audit are presented in a report and sent to the D&O divisional governance facilitator for sharing with other divisions and reporting in the Diagnostics & Outpatients monthly quality report.

2.10 Useful Reports

The Reporting module includes a number of case note tracking reports.

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These include:

- Current Location.
- Case notes not moved.
- Case notes Destroyed.
- List of Movements to and From.
- Lost & Found Case Notes.
- Hourly Activity.

2.11 User Guides

Instructions for all the procedures for case note tracking are included in the Medway Quick Reference Guide which is issued during training, or is available on the intranet (Ref 2).

2.12 User Support

Any general queries or problems regarding CNT must be directed through the IT Service Desk on Ext. 5858.

Requests for new Locations or for the deletion of incorrect or rogue movements must be directed to the health records team on extension 4714 or 4715, or by email to one of the senior health records team.

3 Monitoring Compliance and Effectiveness of Implementation

The arrangements for monitoring compliance are outlined in the table below: -

Measurable policy objectives	Monitoring or audit method	Monitoring responsibility (individual, group or committee)	Frequency of monitoring	Reporting arrangements (committee or group the monitoring results is presented to)	What action will be take if gaps are identified
Case notes are tracked to their correct location on Medway	Case note tracking audits	Health Records Manager	Bi-annually	Report prepared for divisional governance facilitator and submitted to Patient Records Committee for oversight. Results are published in the D&O monthly quality report.	The report highlights areas of good practice and areas for improvement. The governance facilitator shares the report with clinical divisions and areas with a poor result will be re-audited in six months.
Effectiveness of CNT in supporting case note availability	Case Note Availability report	Health Records Manager	Bi-annually	Patient Records Committee	The Patient Records Committee will be asked to agree an action plan to resolve any gaps

4 Duties and Responsibilities of Individuals and Groups

4.1 Chief Executive

The Chief Executive is ultimately responsible for the implementation of this document.

4.2   Ward Managers, Matrons and Managers for Non Clinical Services

All Ward Managers, Matrons and Managers for Non Clinical Services must ensure that employees within their area are aware of this document; able to implement the document and that any superseded documents are destroyed.

4.3   Document Author and Document Implementation Lead

The document Author and the document Implementation Lead are responsible for identifying the need for a change in this document as a result of becoming aware of changes in practice, changes to statutory requirements, revised professional or clinical standards and local/national directives, and resubmitting the document for approval and republication if changes are required.

4.5   The Patient Records Committee (PRC)

The Patient Records Committee (PRC) is responsible for patient records matters across the Trust, including the promotion of effective health records processes and the implementation of policies.

5   Further Reading, Consultation and Glossary

5.1   References, Further Reading and Links to Other Policies

The following is a list of other policies, procedural documents or guidance documents (internal or external) which employees should refer to for further details:

Ref. No.	Document Title	Document Location
1	Health Records Operational Policy	T:\Trust-wide Documents
2	Medway Quick Reference Guide – Case Note Tracking	http://gwh-intranet/trust-wide/it-services/it-training-and-guides/it-guides.aspx
3	Records Management Code of Practice for Health and Social Care 2016	http://systems.hscic.gov.uk/infogov/iga/rmcop16718.pdf

5.2   Consultation Process

The following is a list of consultees in formulating this document and the date that they approved the document:

Job Title / Department	Date Consultee Agreed Document Contents
Health Records Supervisor	18.06.19
Deputy Elective Admissions Manager – Brunel Treatment Centre	26.06.19
Deputy Health Records Manager	18.06.19
Senior Information Governance Officer	18.06.19

6   Equality Impact Assessment

An Equality Impact Assessment (EIA) has been completed for this document and can be found at Appendix A.

Appendix A - STAGE 1: Initial Screening For Equality Impact Assessment

	At this stage, the following questions need to be considered:		
1	What is the name of the policy, strategy or project? Case Note Tracking Policy & Procedure		
2.	Briefly describe the aim of the policy, strategy, and project. What needs or duty is it designed to meet? This document is intended to instruct, advise and guide all Trust employees who have responsibility for, or who deal with case notes during the course of their work, of the correct procedures for recording case note movements		
3.	Is there any evidence or reason to believe that the policy, strategy or project could have an adverse or negative impact on any of the nine protected characteristics (as per Appendix A)?		**No**
4.	Is there evidence or other reason to believe that anyone with one or more of the nine protected characteristics have different needs and experiences that this policy is likely to assist i.e. there might be a *relative* adverse effect on other groups?		**No**
5.	Has prior consultation taken place with organisations or groups of persons with one or more of the nine protected characteristics of which has indicated a pre-existing problem which this policy, strategy, service redesign or project is likely to address?		**No**

Signed by the manager undertaking the assessment	Alison Koster
Date completed	10.07.19
Job Title	DDoN D&O

On completion of Stage 1 required if you have answered YES to one or more of questions 3, 4 and 5 above you need to complete a STAGE 2 - Full Equality Impact Assessment

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Equality Impact Assessment

Are we Treating Everyone Equally?

Define the document. What is the document about? What outcomes are expected?

Consider if your document/proposal affects any persons (Patients, Employees, Carers, Visitors, Volunteers and Members) with protected characteristics? Back up your considerations by local or national data, service information, audits, complaints and compliments, Friends & Family Test results, Staff Survey, etc.

If an adverse impact is identified what can be done to change this? Are there any barriers? Focus on outcomes and improvements. Plan and create actions that will mitigate against any identified inequalities.

If the document upon assessment is identified as having a positive impact, how can this be shared to maximise the benefits universally?

Our Vision

Working together with our partners in health and social care, we will deliver accessible, personalised and integrated services for local people whether at home, in the community or in hospital empowering people to lead independent and healthier lives.

9 Protected Characteristics

- Age
- Disability
- Gender Re-assignment
- Marriage & Civil Partnership
- Pregnancy & Maternity
- Race - including Nationality & Ethnicity
- Religion or Belief
- Sex
- Sexual Orientation

Trust Equality and Diversity Objectives

Better health outcomes for all	Improved patient access & experience	Empowered engaged & included staff	Inclusive leadership at all levels

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