Delegating Record Keeping and Countersigning Records

Guidance for nursing staff
This is an RCN practice guidance. Practice guidance are evidence-based consensus documents, used to guide decisions about appropriate care of an individual, family or population in a specific context.

Description
Each member of the nursing team must take personal accountability for good record keeping. This RCN guidance draws on NMC documents to clarify the issues of delegating record keeping and countersigning records for nursing staff and employing organisations.

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1. Introduction

As a member of the wider health care team, the health care assistant (HCA), nursing associate, assistant practitioner (AP) or nursing student takes personal accountability for good record keeping. They must keep clear, accurate and timely records of the care they provide to their patients to support communication, continuity and decision making. This includes all forms of patient records, ie anything that is documented about a patient and their care and treatment.

Accurate record keeping is integral to care delivery and essential for the completion of episodes of care. It is not an added extra and should be completed in a timely manner, as close to the time that care was delivered as possible.

Records include (but are not limited to):

- handwritten and electronic records
- medication charts
- text messages used in the course of professional work
- reports including test and laboratory results
- vital signs observations
- handover sheets and admission, discharge and transfer checklists
- patients assessment sheets (eg, nutrition or pressure area care assessment).

The Nursing and Midwifery Council (NMC) Code (2015) includes principles for effective delegation and there is further information on this topic on the NMC website at www.nmc.org.uk. This RCN guidance draws on these documents to clarify the issues of delegating record keeping and countersigning records for nursing staff and employing organisations.
2. Principles

- Record keeping can be delegated to HCAs, nursing associates, APs and nursing students so that they can document the care they provide.

- Record keeping is an integral part of every intervention and the HCA, nursing associate, AP or student should be assessed as competent in the complete provision of care, which includes record keeping and that it is in the best interest of the patient. Until they are deemed wholly competent in both the activity and its documentation, countersigning as in principles four and five should be performed.

- If the HCA, nursing associate, AP or student is not deemed to be competent in record keeping - it is important that there is supervision and a counter signature.

- It is good practice, where possible and where there has been training and demonstration of competence, to discuss and evaluate patient care with the patient and/or the carer or family as appropriate, so the patient’s experience of care is accurately reflected and recorded.

- The principles of accountability and delegation apply (see www.rcn.org.uk/accountability-and-delegation)

- Registered nurses should only countersign if they have witnessed the activity or can validate that it took place.

- Organisations providing health care should supply clear guidance on record keeping for all staff, in line with the principles and guidance in the NMC’s record keeping guidance.
3. Countersigning

Local policies may require registered nurses to countersign clinical records made by an HCA/nursing associate/AP/nursing student. This is not an automatic requirement.

The key issues are:

- whether the HCA/nursing associate/AP/student has been trained to appropriate standards and is competent to produce such records as part of the overall provision of care
- whether it is in the patient’s best interests for recording of care (as well as care provision) to be delegated. For further information about delegation, see the NMC’s Guidance on delegation.

If a registered nurse is satisfied the above criteria are met, then delegation of the record keeping activity will be appropriate and there will be no requirement for the registered nurse to countersign the notes.

Conversely, if there is any doubt about the individual’s competence, then supervision and countersignatures will be required until they have received the appropriate level of training and are deemed competent to complete the activity. In any event, a registered nurse should not be countersigning notes unless they have witnessed or can validate the activity as having taken place.

The act of record keeping attracts the same principles as any other delegated task in the health care setting, including the need for ongoing supervision as appropriate.

The registered nurse retains professional accountability for the appropriateness of the delegation of the task, but the HCA/nursing associate/AP/student takes on personal accountability for the content and quality of the records, in line with NMC guidance and organisational policy. See Resources on page 7 for more information.

If, however, a countersignature is required, the following advice should apply.

### The countersignature

A countersignature should enable identification of the registered nurse who has countersigned, i.e., not just initials. The NMC recommends that the person’s name and job title should be printed alongside the first entry in a record.

### Countersigning entries in electronic records

The NMC’s Record keeping guidance states that smartcards or passwords to access information systems must not be shared. Therefore, the registered nurse must log on separately to complete the authentication of the record entry. If a student or other staff member does not have access rights to electronic records, the registered nurse will have to complete the record stating who made the observation, completed the assessment, gave the care or was also present.

For example, ‘wound dressing renewed by nursing student ..... of .....University’.

Functionality can be included in electronic records to support countersigning although systems vary in the way that countersigning is achieved. Other systems allow the HCA/nursing associate/AP/student to record information and a message is sent to the supervisor to request a countersignature.
4. Resources

**Nursing and Midwifery Council**

www.nmc-uk.org


**Other resources/guidance**

Health and Social Care Information Centre. Available at: http://webarchive.nationalarchives.gov.uk/20130502102046

BBC Skillswise
Practical literacy and numeral skills for adults.
Free to access website. Available at: www.bbc.co.uk/skillswise/english

www.bbc.co.uk/skillswise/topic-group/numbers

**Royal College of Nursing**

www.rcn.org.uk

Royal College of Nursing (2012) *Health care assistants (HCAs) and assistant practitioners (APs) health records and record keeping*, London: RCN. Available at: www.rcn.org.uk/support/rcn_direct_online_advice (RCN member resource)

