



Policy Title: Timely and Comprehensive Nursing Documentation

Policy Number: NS 01.01.2024

Effective Date: July 26, 2024

Department: Nursing

Approved By: Shelton B. Anthony, CEO

Purpose

To ensure that all nursing documentation at West Ascension Parish Hospital is completed accurately and timely, capturing patient interactions, changes in condition, and ongoing care throughout the patient's stay. Comprehensive documentation is critical for maintaining high-quality patient care, accurate records, and effective communication among healthcare providers.

Scope

This policy applies to all nursing staff, including Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and any other personnel involved in patient care documentation at West Ascension Parish Hospital.

Policy

1. Documentation Requirements

a. Patient Interactions

All patient interactions must be documented immediately following the encounter. This includes but is not limited to, assessments, procedures, patient education, and communication with the patient or their family.

b. Changes in Condition





Any changes in the patient's condition, including deterioration, improvement, or unexpected events, must be documented promptly. This ensures that all significant alterations in the patient's health status are recorded and communicated effectively.

c. Ongoing Care

Documentation of ongoing care must be completed at regular intervals as defined by the patient's care plan or hospital protocols. This includes monitoring vital signs, administering medications, and providing treatments as outlined in the care plan.

2. Documentation Timeliness

a. Real-Time Documentation

Nursing staff are required to complete documentation in real-time or immediately following each patient encounter. This minimizes the risk of missing important details and ensures that patient records are up-to-date.

b. End-of-Shift Documentation

Any remaining documentation should be completed before the end of each shift. Nurses must ensure that all patient records are updated and accurate before handing over to the next shift.

3. Documentation Standards

a. Accuracy and Completeness

Documentation must be accurate, complete, and reflect the patient's current condition and care. All entries should be legible, and any corrections must be made following hospital procedures.

b. Standardized Format

Use standardized documentation formats as provided in our electronic health record (EHR) system. Ensure all required fields are filled out as per hospital guidelines.

4. Review and Compliance

a. Regular Audits





Nursing documentation will be subject to regular audits to ensure compliance with this policy. Audits will focus on completeness, accuracy, and timeliness of documentation.

b. Accountability

Nursing supervisors and the Nursing Director will review documentation practices regularly. Any deficiencies or deviations from this policy will be addressed through counseling and corrective actions as necessary.

5. Training and Support

a. Ongoing Education

Staff will receive regular training on documentation standards and use of the EHR system. Training sessions will be provided to ensure that all nurses understand and adhere to documentation requirements.

b. Support Resources

Nursing staff are encouraged to seek guidance and support from supervisors or documentation specialists if they have questions or need assistance with documentation practices.

Responsibilities

- **Nursing Staff:** Responsible for completing all documentation in accordance with this policy and ensuring that patient records are accurate and up-to-date.
- **Nursing Supervisors:** Responsible for monitoring compliance with documentation standards and providing feedback and support to nursing staff.
- **Nursing Director:** Responsible for overseeing the implementation of this policy, conducting audits, and addressing any issues related to documentation.

Review and Revision

This policy will be reviewed annually and revised as necessary to ensure its effectiveness and compliance with current regulations and best practices.





Approved By:

Shelton B. Anthony

CEO

7/26/2024

