Australian Hypnotherapists' Association ABN 20 004 388 872

AHA Record Keeping Guidelines





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AHA Record Keeping Guidelines

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AHA Record Keeping Guidelines

1. Introduction

This document provides guidelines for AHA members in best practice for record keeping of to ensure that accurate and appropriate records are retained for all clients to ensure quality of service.

This guideline defines what constitutes a record regardless of the format. It also covers the retention period and disposal of records.

Good record keeping is essential for the practitioner to be professional and accountable to their clients and ensuring quality service delivery. Accurate records are also essential when referring clients to other professionals and/or mandatory reporting.

Note: these are guidelines, and it is recommended that all therapists review and keep up to date with legislation and guidelines.

2. Scope

This guideline applies to all practicing AHA members as well as recently retired members who are required to retain their records for a prescribed length of time under federal, state and territory legislation.

AHA supervisors are also included in this scope whereby the supervisee is the 'client.'

3. Definitions

Administrative records means all records pertaining to the running of the practice including and not limited to financial and taxation records, leases, receipts and supplier contracts.

Client records means those records pertaining to intake, session notes, decisions made and for the monitoring of client progress.

Electronic record means a record created or captured through electronic means such as a computer, scanner. All information in a digital format shall be maintained with the necessary metadata to support retrieval and access to the information. This includes emails.

Hybrid record means a combination of physical and electronic records.

Physical record means paper format

Records means all and any information storage media including, and not limited to, documents, files, paper records, digital recordings, magnetic tapes, rigid and floppy disks, microfiche and microfilm.

4. Guideline - Client Records

Introduction

4.1. New South Wales and South Australia Codes of Conduct have been legislated in relation to services provided by self-regulating health professions. In 2015 a National Code of Conduct for Healthcare Workers was agreed to by the Council of Australian Governments (COAG) Health Council which sets out the minimum practice and ethical standards which need to be adhered to and also approved a notice which informs clients how they can lodge a complaint if they have concerns about the conduct or services delivered by an unregistered health



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service provider.

- 4.2. Records provide a history and a current status of the interaction with the practitioner and are essential where it is necessary to refer to another professional or the client wishes to seek assistance elsewhere.
- 4.3. Accurately documented records assist the practitioner in providing notes about the information, activities and/or processes undertaken in a previous session and to assist in monitoring client progress e.g. intake form with various family connections; decisions and/or discoveries for which the hypnotherapist may later be accountable.
- 4.4. Confidentiality is of the highest priority, however, the practitioner is ethically bound to disclose any information arising in a session relating to potential and/or serious self-harm of the client, or potential serious harm to others. On very rare occasions information and /or records may be subpoenaed by a court of law.
- 4.5. Client information discussed with a supervisor needs to be de-identified to ensure client confidentiality.

Contents

- 4.6. Minimum requirements cover three separate issues:
 - Contact details name, address, contact phone number(s); relevant background information e.g. any previous treatment; and major past developmental events and achievements.
 - Agreed goal for hypnotherapy- initial agreed to goal; outline of therapy approach; date of sessions; any change to initial goal; and any specific instructions or advice provided to the client.
 - End of therapy summary date of last contact; reason for termination; progress achieved; and if there is any further need for hypnotherapy on the present issue.
- 4.7. Records shall ensure that records are legible and are completed fully and in a timely manner.
- 4.8. The practitioner shall be aware that written client records may need to be accessed by other people, including the client, at a future date.

Access and ownership of records

- 4.9. Where the practitioner is self-employed in private practice, the records belong to the practitioner.
- 4.10. Where a practitioner is employed, the records belong to the employer.
- 4.11. Where the practitioner is a contract, the records belong to the party specified as the owner of the records in the contract;
- 4.12. Where the practitioner is providing services on a voluntary basis in any of the above settings, these guidelines still apply.
- 4.13. Access to client records is governed by the principles of privacy and confidentiality.
- 4.14. Access to client records is generally restricted to the practitioner who created them.
- 4.15. Consideration of employment or contract arrangements is essential, however, legal ownership of client records under these arrangements does not give an organisation, or individual, the automatic right to access confidential client records created by the practitioner.
- 4.16. Practitioners are responsible for determining whether employment laws in their state or territory take precedence over privacy considerations.
- 4.17. Client records may be shared with other professionals:
 - When a client is transferring to another practitioner and has given written consent for the records to be accessed.



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- In a multi-disciplinary practice where the client has given written consent for their records to be accessed by other professionals to support the service delivery.
- Where there is a legal requirement for disclosure.

Legal Proceedings

Practitioners need to be aware of the legal implications of their work which includes their responsibilities in relation to record keeping, legal subpoenas of client records and access to records by clients and/or third parties.

- 4.18. Practitioners shall seek guidance and professional support as necessary with all legal matters.
- 4.19. Practitioners shall comply with all federal, state, territory, or local laws relating to privacy and record keeping. These laws take precedence over any organisation policies and procedures.
- 4.20. It is illegal to alter, add or remove notes from a client's record once a subpoena has been received and all notes must be provided to the court.
- 4.21. Practitioners may request the Court to keep sections of the notes private in certain circumstances. Such a request needs to be made in writing.

Creation and maintenance or records

- 4.22. Records may be created in either a physical or digital format as longs as they are retained in confidential manner and can be accessed as and when required.
- 4.23. Records may be kept electronically as long as an unaltered version of the document can be printed when required.
- 4.24. Paper copies of electronic records may be required under a particular law or regulation.
- 4.25. All records are required to be stored securely to ensure confidentiality.
- 4.26. All records shall be in English or easily translated into English.
- 4.27. Correspondence between the practitioner and their insurance company and/or solicitor should be filed separately to a client's session records.

Retention and Destruction

Records are retained for future client services and/or administrative or legal reasons.

- 4.28. Practitioners shall be aware of any relevant federal, state or territory laws pertaining to records retention. These laws supersede these guidelines.
- 4.29. Where there are no laws and/or regulations, practitioners shall retain client records for a minimum of seven (7) years after the last contact with the client. Where the client is a minor, under the age of 18 years, the records shall be retained until the minor reaches the age of 25.
- 4.30. Practitioners shall exercise professional judgement when determining whether to retain the records for a longer period than legally required or as recommended in these guidelines.
- 4.31. Physical records need to be held in a secure cabinet.
- 4.32. All electronic records need to be password protected and the password updated regularly.
- 4.33. All computer systems need to have virus protection and firewalls in place.
- 4.34. Electronic records need to be backed up regularly and a copy of the backup held offsite. The integrity of this data needs to be verified on a regular basis.
- 4.35. It is advisable to keep a register of client records that have been destroyed. Details include client name, period of consultation (first and last dates), and the date the file was destroyed.
- 4.36. All records are to be disposed of in a way that ensures non-disclosure and preserves client confidentiality
- Tip for emails: save the final email in a trail to ensure that full conversation is saved. Save the email



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as a .msg or PDF it and save in your documents.

Retention and Destruction of Aboriginal and Torres Strait Islander client records

A review of federal, state and territory legislation has not shown any documented rules around the retention of these records.

The Western Australia Department of Health states "Records pertaining to Aboriginal people must be retained indefinitely for patients with a birth date prior to and including 1970. Additionally, Aboriginal patient records created by remote clinics in the Kimberley and Pilbara health regions must be retained indefinitely."

The Australian Association of Psychologists Inc: "Caution is recommended in the destruction of files or Aboriginal and Torres Strait Islander people. Non-government organisations in some states such as NSW and NT are required to keep these records indefinitely." Some states have not statutory obligation to retain their records or expend resources preserving and indexing them.

Guideline - Administrative Records

Administrative records are described as those needed for the running of a business/practice to ensure compliance with federal, state or territory laws and regulations. The following are considered to be administrative records. There may be other items to be included depending on your business/practice.

- Bank statements, business loans;
- Tax records including, not limited to, tax return, business activity statements (BAS), fringe benefit tax (FBT);
- Supplier contracts e.g. water cooler, eft-pos terminal;
- Receipts and invoices;
- ASIC registration;
- Business asset register i.e. what the business owns e.g. client chairs;
- Policies and procedures relating to the running of your business.
- One procedure that many sole practitioners often overlook is "what happens to my business and records if something happens to me?" Have you documented the process in relation to your records in particular as well as the rest of your business?

Creation and maintenance or records

- 4.37. Records may be created in either a physical or digital format as longs as they are retained in a confidential manner and can be accessed as and when required.
- 4.38. Records may be kept electronically as long as an unaltered version of the document can be printed when required.
- 4.39. Paper copies of electronic records may be required under a particular law or regulation.
- 4.40. All records are required to be stored securely to ensure confidentiality.
- 4.41. All records shall be in English or easily translated into English.

Retention and Destruction

4.42. Administrative records have differing retention dates.



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- ATO tax records need to be retained for five (5) years unless required for an audit when they
 need to be retained for a further four (4) years.
- ASIC business records need to be retained for seven (7) years from the last transaction on an item e.g. contract.
- When a business/practice has capital assets which are subject to Capital Gains Tax (CGT) the records may need to be retained for a longer period.

❖ Tip for emails: save the final email in a trail to ensure that full conversation is saved. Save the email as a .msg or PDF it and save in your documents.

File Naming Conventions

The following file naming conventions can be used for both documents and emails. It is advisable to have the folders mirror each other for ease of access. Start with the type of record followed by the contents e.g. Legal - Insurance

- Financial: Create a folder for each year e.g. Tax FYE end June YYYY with the following sub-folders:
 - o Receipts e.g. 2023-01-25 Telstra
 - Tax documents
 - o Purchase orders 2023-01 Telstra
 - o Bank statements
- Legal:
 - o Asset registers
 - o Leases
 - Agreements / contracts e.g. suppliers
 - o Business registration
 - Insurances
- Employee records (where appropriate):
 - Staff rosters, attendance, pay leave
 - o Bank and superannuation account details
 - o Contracts
 - Work performance and history
- Policies and Procedures (where appropriate):
 - o Work Health and Safety plans
 - Dress standards
 - Harassment
 - o Operations manuals
 - Privacy

5. References

Gov 02 AHA Code of Ethics and Conduct

Gov 06 NSW Code of Conduct for non-regulated health practitioners (updated August 2022)

SA Code of Conduct for non-regulated health practitioners.

Privacy Act 1988 (Cth)

PACFA Guidelines for Client Records



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Queensland Health. Retention and disposal of clinical records

Office of the Australian Information Commission (OAIC) Guide to Health Privacy

King, R Record keeping in psychotherapy in Psychotherapy in Australia V6(3) May 2010

Australian Psychological Society (APS) <u>APS position statement: record keeping in organisations</u>. December 2020

Australian Association of Psychologists Inc. Ethical note taking and record keeping guide. V1.0 August 2020

WA Rural Health Practice Assist. <u>Retention and destruction of medical records.</u> V2 November 2020 – not found on website March 2023.

ATO: Record keeping evaluation tool – online tool that only 'you' can see.

Legislation

Jurisdiction	Public Sector	Private Sector
Commonwealth	Privacy Act 1988 (Cth)	Privacy Act 1988 (Cth)
ACT	Privacy Act 1988 (Cth) Health Records (Privacy & Access) 1997	Privacy Act 1988 (Cth) Health Records (Privacy & Access) 1997
NSW	Privacy and Personal Information Protection Act 1998 Health Records and Information Privacy Act 2002 Health Records and Information Privacy Regulation 2022	Privacy Act 1988 (Cth) Health Records and Information Privacy Act 2002 Health Records and Information Privacy Regulation 2022
NT	Information Act 2002	Privacy Act 1988 (Cth)
QLD	Information Privacy Act 2009	Privacy Act 1988 (Cth)
SA	Information Privacy Principles Instruction 2020	Privacy Act 1988 (Cth)
TAS	Personal Information Protection Act 2004	Privacy Act 1988 (Cth)
VIC	Information Privacy Act 2000 Health Records Act 2001	Privacy Act 1988 (Cth) Health Records Act 2001
WA	Criminal Code 1913 Section 81 Health Act 1911	Privacy Act 1988 (Cth)