	DOCUMENT NAME	DOCUMENT NUMBER
	HEALTH RECORDS OF USERS IN ACCORDANCE WITH THE REQUIREMENTS OF SECTION 13 OF THE ACT	

VERSION	**1**	
COMPILED BY		**DATE**
AUTHORIZED BY		**07/2025**
NEXT REVISION DATE		**07/2027**

1. PURPOSE & SCOPE

To ensure that all user health records contain accurate and complete biographical, demographic, and contact details, as required by **Section 13 of the National Health Act** and aligned with the **HPCSA Booklet 9 (Section 4.2)**.

This SOP applies to all health care personnel and administrative staff involved in capturing and maintaining user health records.

2. RESPONSIBILITIES

Job description of person responsible	Duties
Reception/Front Office Staff	Capture complete and accurate information during registration.
Health Care Personnel	Review and verify user information during consultations.
Practice Manager	Ensure compliance, conduct routine checks, and address gaps

3. PROCEDURE

Required Information for Each User Health Record

Each file (manual or electronic) must contain the following:

No.	Information Item	Notes
1.	**Name & Surname**	As per ID or official document
2.	**Unique Registration Number**	Manually or electronically generated alphanumeric ID
3.	**Gender/Sex**	Male, Female, Other (if applicable)
4.	**Identification Info**	SA ID number / Date of Birth / Passport / Refugee number
5.	**Residential Address**	Street address, suburb, postal code
6.	**User Contact Details**	Cell phone, landline, email (if applicable)
7.	**Next of Kin Contact Details**	Name, relationship, phone number
8.	**Ink Requirements (Manual Records Only)**	All entries must be in **non-erasable ink** (black or blue); **no correction fluid** may be used. Strike-through with initialling is acceptable for corrections.

3.1 Data Capture Process

- Data is collected at first visit and **updated annually or at each visit** if any detail changes.
- A standard registration form must be used and filed.
- Incomplete records are flagged and corrected before the next consultation.

3.2 Quality Control Measures

- Random monthly audit of 10% of health records for completeness.
- Audit log retained by Practice Manager.
- Any inconsistencies must be reported and corrected immediately.

3.3 Training

All front desk and healthcare staff must receive **annual training** on data collection standards and confidentiality (aligned with POPIA).

3.4 Storage and Confidentiality

- Paper records must be kept in a **secure, access-controlled area**.
- Electronic systems must be **password-protected and encrypted**.
- Next-of-kin data must be used strictly for emergencies or authorised contact.

3.5 Review and Updates

This SOP will be reviewed every **two years** or when there are changes in the law or practice protocols.

4. INTERNAL SUPPORTING DOCUMENTATION

Document	Number	Retention period	Location

5. ATTACHMENT

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	HEALTH RECORDS OF USERS IN ACCORDANCE WITH THE REQUIREMENTS OF SECTION 13 OF THE ACT	

Receipt Acknowledgement for this SOP

I have read and been informed about the content, requirements, and expectations of this policy for this practice. I understand that if I have questions, at any time, regarding this policy, I will consult with my immediate supervisor or my Human Resources staff members. Please read the policy/procedure carefully to ensure that you understand the policy/procedure before signing this document.

Employee Signature	Employee Printed Name	DATE	Employee Signature	Employee Printed Name	DATE