

LAC+USC MEDICAL CENTER POLICY

Subject: HEALTH/MEDICAL RECORDS; INCOMPLETE AND DELINQUENT	Original Issue Date: 2/11/99	Policy #: 407
	Supersedes: 11/12/13	Effective Date: 5/9/17
	Departments/Areas Consulted: Health information Management Graduate Medical Education Medical Administration Information System	Reviewed & Approved by: Health Information Committee Attending Staff Association Executive Committee Senior Executive Council

PURPOSE

To delineate a process that assures the timely completion of patient medical record information.

SCOPE

The scope includes all attending staff, allied health professionals and resident providers (physicians, dentists and podiatrists) employed by or granted clinical privileges by the LAC+USC Medical Center and who are required to make entries in the patient medical record.

POLICY

Each attending staff, allied health professional and resident providers providing patient care shall complete the requisite medical record information in a timely manner.

Health Information Management reviews medical records for compliance with documentation standards and monitors the following indicators to ascertain timeliness and completion of information in the patient medical record.

- Admission History and Physical is completed and signed within 24 hours after admission. An H&P may be written within 30 days of admission, surgery or procedure requiring anesthesia or procedural sedation but interval changes must be documented prior to the surgery or procedure requiring anesthesia or procedural sedation. H&P will be considered complete if the elements established by departments are approved by the Health Information Committee and determined to be complete.
- Operative and Procedure notation is written immediately in the progress notes following the completion of the procedure.
- Operative and Procedure Report is dictated or written within 24 hours following the completion of the procedure.
- Operative and Procedure Report is reviewed and signed within 72 hours after it is electronically filed in the medical record, but no later than 2 weeks following the date of discharge.

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- Verbal orders shall be authenticated in charts with date, time, signature, and within 24 hours.
- All written notations are authenticated, signed, dated, and timed. Current Staff ID number shall be included. Electronic notations shall include electronic authentication.
- Medical record deficiencies are corrected within 14 days after discharge.

The responsible attending staff, allied health professionals and resident providers are considered delinquent with the medical record documentation if the identified deficiencies are not corrected within the specified timeframe.

DEFINITIONS

Provider For purposes of this policy, provider means attending staff, allied health professionals and resident physicians, dentists and podiatrists.

Deficiency Any failure to document in the patient medical record according to documentation standards specified in the LAC+USC Medical Center Attending Staff Manual and/or the Medical Center Policy Manual.

Delinquency A medical record deficiency that is not corrected within 14 days after the date of discharge.

PROCEDURE

- A message is automatically sent to the provider immediately once the deficiency is assigned by Health Information Management (HIM) in the electronic health record, ORCHID.
- Health Information Management (HIM) will electronically send a weekly notification to the provider's incomplete medical records.
- Health Information Management will send an additional notification to providers in need of completion of a history and physical examination.
- A weekly notification will be sent electronically to the department chairs and service chiefs.
- It is each provider's responsibility to monitor his or her delinquent medical records and to keep the Attending Staff Office or Graduate Medical Education Office apprised of up-to-date information about how he or she may be contacted.
- In the event of any dispute over the responsibility for delinquent medical records, the responsibility will be assigned according to the "Chain of Accountability" as defined in the Attending Staff Manual.

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- On or around the 10th of each month, HIM will prepare a list of all providers who did not correct the delinquency.

This list will include at least the following information: Provider name, Identification number, Supervising Physician for residents, Type and Number and details of delinquencies. This list will be sorted by Department and Division and will be sent to the Department Chair/Service Chief. If the provider is in a residency training program the list of residents assigned deficient records will be sent to the program directors and the GME Director.

- On or around the 15th of the following month, the Department Chair/Service will correct the delinquency by having the responsible provider correct the delinquency.
- A report will be presented to the Health Information Committee (HIC) and then to the Medical Executive Committee (MEC) notifying them of the incomplete/delinquent medical records.

HIM ADMINISTRATIVE CLOSURE

- HIM will receive a monthly report generated from Information Systems ORCHID Cactus Database a list of all attendings and allied health professionals who are no longer members or have privileges.
- HIM will receive a monthly report generated from Information Systems ORCHID Cactus Database a list of all residents who are no longer enrolled in an approved training program.
- HIM will administratively sign all resident reports and signatures so that the records can be released for attending staff signatures.
- HIM will re-assign any dictations, discharge summaries, consultations, and or operative reports to the attending staff for completion.
- At no time should there be any incomplete or delinquent medical records in the ORCHID for residents that are no longer active in the Cactus Database.
- HIM will provide a list of the attending staff that are no longer in the Attending Staff Database that have incomplete/delinquent medical records.
- This report will include the Department, Attending Staff or Allied Health Professional's Name, and the type and number of delinquencies that are to be administratively signed off by HIM, thus closing the medical record.
- Upon approval of the above delinquency report by the HIC, MEC, HIM will administratively close all medical records for the attending staff and allied health professionals.

ACTIONS TO ENSURE COMPLIANCE

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- Resident providers who are delinquent as defined here shall be held accountable to approved Graduate Medical Education (GME) policies and procedures for completion of duties which may include delay in promotion to the next ACGME year of training. Providers, including affiliating residents, who rotate from non- LAC+USC Medical Center programs and who are delinquent in their medical records will be prohibited from additional rotations within the Medical Center facilities.
- Providers who are delinquent in their medical records, including operative dictations, are required to complete all records prior to leaving the Medical Center as part of the final sign-out process.
- Resident physicians who fail to correct delinquent medical records prior to the end of their residency-training period will be subject to approved GME policies and procedures for completion of professional duties, which may include not being issued a diploma certifying satisfactory completion of residency training until delinquent medical records are acceptably resolved.
- All attending staff and allied health professionals must provide the Attending Staff Office with accurate information as to how they may be contacted (e.g., current phone and beeper numbers).
- All resident providers must provide the Graduate Medical Education Office with accurate information as to how they may be contacted (e.g., current phone and beeper numbers).
- Providers who are delinquent as defined here may face disciplinary action including, but not limited to, loss of clinical privileges, revocation of operative privileges, right to perform procedures, administrative reassignment, suspension, or termination.

RESPONSIBILITY

Attending Staff
Housestaff
Allied Health Professionals
Director, Health Information Management
Director, Graduate Medical Education Office
Chief Medical Officer

PROCEDURE DOCUMENTATION

Attending Staff Manual
Health Information Management Policy and Procedure Manual

REFERENCE

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Joint Commission Standards (Management of Information)

REVISION DATES

September 26, 2001; April 9, 2002; March 23, 2004; October 06, 2008; November 12, 2013; May 9, 2017