Delinquent Medical Records: Sanctions

PURPOSE: Specifies rules, regulations and specified time period medical records are required

to be completed by staff personnel.

POLICY: Medical records are to be completed and signed within the time period specified

by the medical staff in their rules and regulations. Practitioners with delinquent medical records will be subjected to the sanctions policy as outlined below. Non-

Medical staff sanctions are covered by separate Seattle Children's Human

Resources policies.

PROCEDURE:

I. Documentation Requirements:

Note Type	Documentation	Delinquent Record	Eligible for Suspension
	Requirements	incomplete notes (any notes	(1 st notice from Med Director-
	(dictation/direct entry)	not documented and signed)	medical privileges will be
		meeting the aging criteria	suspended if notes are not
		below constitutes a	resolved within 2 business
		delinquent record. *	days)
Operative Report	24 hours from Date of Surgery	7 days from Date of Surgery	15 days from Date of Surgery
Emergency Department	24 hours from Date of Service	7 days from Date of Service	10 days from Date of Service
Report			
History & Physical Exam	24 hours from Admission date	7 days from Admission date	15 days from Admission date
Discharge Summary	24 hours from Discharge date	7 days from Discharge date	15 days from Discharge date
Query Response	72 hours from Date of Query	Not defined	Not defined
Clinic Note	72 hours from Date of Service	10 days from Date of Service	18 days from Date of Service
Sleep Study	14 days from Date of Service	14 days from Date of Service	22 days from Date of Service
Neurodiagnostic Report	14 days from Date of Service	14 days from Date of Service	22 days from Date of Service
Neuropsychiatry Report	14 days from Date of Service	14 days from Date of Service	22 days from Date of Service
Non-Invasive Cardiology	14 days from Date of Service	14 days from Date of Service	22 days from Date of Service
(eg Holter/Event Monitor)			

^{*}See Appendix I for notification and escalation pathway for delinquent records

II. General Procedure:

A. The Health Information Department will communicate with the Department/Division/Service/Clinic Chief as outlined below when a provider has delinquent records and additionally with the Chief Medical Officer or designee when a provider faces possible suspension of clinical privileges due to delinquency in completing medical records.

Please Note: On many services residents may dictate reports; however, the responsibility for documentation and signature ultimately remains with the attending practitioner or those documents.

- B. The Chief Medical Officer or designee may suspend privileges or take disciplinary action against the medical staff member if delinquent records are not completed as outlined in the Bylaws and Rules and Regulations of the medical staff.
- C. Vacation or Leave of Absence:
 - 1. Providers are encouraged to contact the Health Information Management (HIM) Department/Transcription Services (206-987-2076) prior to leaving town for extended periods of time (e.g. leaves or absences greater than 7 days).
 - 2. The transcription staff will try to prioritize the provider's dictations to make them available for electronic signature prior to leaving town.

III. Notification Procedure:

- A. Refer to Seattle Children's Deficiency Notice Process Flow attachment.
 - 1. Medical Staff Services Actions
 - a. All suspension notices will be placed in the credentialing QI file for each provider.
 - b. The Chief Medical Officer will make a recommendation regarding a corrective action plan to the Credentialing & Professional Standards Committee for any provider who has received 3 or more suspension notifications in one year. Applicable HR policies will also apply.
 - 2. Residents who have not completed records within the defined time frames will receive a final letter stating that the rotation at Seattle Children's has not been completed. Extensions may be granted for vacations, illness, or approved leaves of absence greater than 7 days, or provider scheduling.
 - a. Individual review/application applies to active members of the medical staff and credentialed allied health practitioners.
 - b. Individual review/application, to the Residency Program Director, who will communicate with Pediatrician in Chief and Surgeon in Chief if applicable.

REFERENCES:

Medical Staff Bylaws

Owner: Health Information and Privacy Director

Reviewed by: Medical Informatics Committee

Revised by: Sue Stubbs, Health Information & Privacy Director

Approved by the Medical Executive Committee: 11/15

APPROVED BY: Mark Del Beccaro, MD, Senior Vice President, Chief Medical Officer

Madlyn Murrey, RN, MN, Sr. Vice President, Chief Nursing Officer

ORIGINATED: 11/99

REVIEWED: <u>06/03, 05/04, 06/06, 05/09</u>

REVISED: 06/01, 05/02, 05/05, 11/09, 04/14, 5/15, 12/15

Additional Key Words: Documentation, Electronic Signature, Medical Records, Sanctions, Signature

APPENDIX I:

Seattle Children's Deficiency Notification Process Flow

