

## **NOTIFICATION AND ADMINISTRATIVE PROBATION PROCEDURES FOR INCOMPLETE MEDICAL RECORDS**

### POLICY SUMMARY FOR COMPLETION OF MEDICAL RECORDS:

In accordance with the Bylaws, Rules and Regulations of the Medical Staff of the University of North Carolina Hospitals, all medical records are to be complete within twenty-eight (28) days of discharge from the hospital. Medical records that are not completed within 28 days are considered delinquent. The specific items that make up a complete record are found in the Policies and Procedures Governing Medical Records for physicians. These include signature requirements, dictation requirements and content requirements.

### PROCEDURES FOR NOTIFYING MEDICAL STAFF OF CHART DEFICIENCIES:

#### **1. Weekly 28-Day Incomplete Records Report:**

- A. Each Wednesday the Chart Status Report, Executive Summary, Problem List And Descending Deficiency List are created to notify the clinical departments of Physicians with twenty one (21) day old incomplete records.
- B. The reports are then distributed on Thursday morning to each Department Chair, Vice-Chair, Division Chief, Program Director, Clinical Documentation Committee member or designee as applicable.

#### **2. Weekly Notification Letters:**

- A. Notification Letters (example 1) are printed every Thursday evening for each physician with incomplete medical records.
- B. These notifications Letters are distributed to the physicians' mailboxes on Friday morning.

### ADMINISTRATIVE PROBATION PROCESS:

When a physician receives a pending administrative probation, the physician is notified via letter from the Director of Medical Information Management with copies to the Department Chair in the case of Medical Staff. For residents, additional copies will go to the Department Chair, the Residency Program Director and the Office of Graduate Medical Education. When the physician receives a final administrative probation, the physician is notified via a letter from the Chief of Staff and Executive Vice-President of the Hospitals with copies distributed as indicated above for Medical Staff and residents, respectively.

#### **1. Pending Administrative Probation:**

Each Wednesday a list of physicians eligible for Administrative Probation is created. The following criteria must be met to be eligible for Administrative Probation:

- A. Incomplete medical records must be twenty-eight (28) days or older post discharge.

B. These incomplete medical records must have been available in the Physicians Workroom (if applicable) or on the physician's WebCIS activity list for the week immediately prior to when the pending probation list was created.

C. Reasons for further consideration by Medical Information Management Administration to delay the probation process by one week includes:

- physicians who are sick or on vacation. **NOTE:** a physician or designee must notify Medical Information Management personnel as to this status.
- physicians who consistently keep their medical records up to date.
- physicians having only one incomplete medical record due to documentation or dictation requirements.
- physicians who need to sign two or less charts.

D. Those physicians selected on Wednesday are notified of "Pending Probation" on the following Monday. Notification letters are hand delivered on Monday to the Department Chair, and in addition, for residents, to the Residency Program Director and the Office of Graduate Medical Education. The letters are signed by the Director of Medical Information Management, (example 2).

2. **Final Administrative Probation:**

A. Those physicians who were notified and fail to complete **all** delinquencies prior to the next Wednesday morning (9 days later) are placed on Final Administrative Probation.

B. Final Administrative Probation letters are signed by the Chief Operating Officer and the Chief of Staff and are delivered to the following (Example 3)

- Physician
- Department Chairman
- Residency Program Director for Residents
- Office of Graduate Medical Education for Residents
- Systems Manager, Medical Information Management

C. The listing of physicians placed on Final Administrative Probation is delivered To the following (Example 4):

- Senior VP & C.F.O.
- Director of Medical Information Management
- Systems Manager, Medical information Management

3. **Referral to the Medical Staff Credentials Committee (Faculty Only):**

A. All instances of final administrative probation along with the number of delinquent charts and the days on probation will be reported by the Clinical Documentation Committee to Medical Staff Credentials Committee and to the Department Chair.

B. When a threshold of 3 final administrative probations and 20 charts is reached during a rolling two year period OR when any probation lasts longer than 60 days, a medical staff member will be notified at least 2 weeks in advance that he/she are being put on the agenda for discussion and possible action

at the next MSEC meeting (faculty). Prior to the meeting, the medical staff member will have the opportunity to demonstrate to the MIM Department that the identified chart delinquencies are not accurate or complete the delinquent charts.

- C. The biennial reappointment decision for medical staff will take into account the number and length of final administrative probations and the number of delinquent charts.

4. **Referral to the Graduate Medical Education Committee (Residents Only)**

- A. All instances of final administrative probation along with the number of delinquent charts and the days on probation will be reported by the Clinical Documentation Committee to the Office of Graduate Medical Education (GME) to be placed in the resident's personnel file in the Office of GME and in their Department's program file for consideration during reappointment.
- B. When a threshold of 3 final administrative probations and 20 charts is reached during a rolling two year period OR when any probation lasts longer than 60 days, a resident will be notified at least 2 weeks in advance that he/she are being put on the agenda for discussion and possible action at the next Graduate Medical Education Committee. Prior to the meeting, the resident will have the opportunity to demonstrate to the MIM Department that the identified chart delinquencies are not accurate or complete the delinquent charts.
- C. The reappointment decision and evaluation of general competencies for residents every year will take into account the number and length of final administrative probations and the number of delinquent charts.

5. **Review by the Clinical Documentation Committee:**

A report of physicians placed on Administrative Probations will be reviewed by the Clinical Documentation Committee annually. Follow-up action will be determined by the committee on a case-by-case basis.

Approved by Executive Committee:

12/6/95

Approved by Graduate Medical Education Committee:

2/20/08

Revised: 2/08

"administrative probation policy"