IM.103 DOCUMENTATION OF CLINICAL SERVICES



Approved By:	Board of Directors	Adopted Date:	01/11
Distribution:	Licensed Practitioners, Site Medical Directors	Revision Date(s):	11/17, 10/18
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PURPOSE:

To describe the required documentation and timeliness of documentation standards for services provided by Open Door Community Health Centers (ODCHC) practitioners to ensure timely, quality patient care and billing.

DEFINITIONS:

Open Encounter: Documentation of a patient encounter or service that has not been completed and signed off by the rendering practitioner.

POLICY:

ODCHC practitioners are responsible for timely completion of documentation related to patient visits, in order to allow patient prescriptions, referrals, diagnostic studies and billing to be processed in a timely manner. It is expected that most clinical encounters will be documented and closed on the date of service. Clinical encounters that are open 72 hours or more after the date of service will be considered delinquent. After-hour calls that are not documented on the day received will be considered delinquent.

- All services by ODCHC practitioners must be documented in the EPIC electronic record system.
- Documentation made in EPIC must not be duplicated in paper or hardcopy (e.g., in the existing hardcopy medical record). Documentation made in EPIC must not be duplicated in electronic form, except in the case of disease- or service-specific databases adopted for use by ODCHC.
- No ODCHC practitioner will maintain patient documentation outside the EPIC system, except psychotherapy notes.
- Timeliness and completeness of clinical documentation is the responsibility of the Licensed Practitioner providing care. Monitoring timeliness of clinical documentation is the responsibility of the Compliance Officer (CO) and the Chief Medical Officer (CMO). Monitoring the quality of clinical documentation is the responsibility of Site Medical Directors (SMDs) and the ODCHC Peer Review Committee.
- Practitioners who provide care under supervision (e.g., nurses, advance practice practitioners, clinicians in training or on probation) must close completed encounters prior to routing them to their supervisor for review.
- Practitioners with delinquent open encounters will be offered additional training, tutoring, and/or one-on-one assistance.
- Practitioners who continue with delinquent open encounters after offers of the additional support outlined above, will be subject to increasingly severe disciplinary actions including:
 - o Hands-on support from EPIC specialists to learn EPIC processes that may streamline their workflow. These will be coordinated with their Site Administrator (SA).
 - Mandatory discussion with a SMD regarding issues preventing chart closure.
 - Mandatory attendance at an off-hours Open Encounters workshop without additional compensation.
 - Reduction in the number of scheduled clinics, to allow for keeping current with open encounters. This will result in a subsequent reduction in pay.

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- Reduction in responsibilities, to allow for further focus on the timely closure of open encounters.
- Suspension without pay
- o Termination of employment with ODCHC.
- At the discretion of the Chief Operations Officer and the CMO, repeated violations of this policy may result in suspension without pay or termination

The levels of support or discipline will be handled as per the following table:

Trigger for	Required % of	Support Services	Disciplinary	Corrective Action
Support Assistance	Charts Closed	Provided	Action	Completed
Weekly report	95% of charts	One-on-one	None	When 95% of
shows by 2 nd	closed within 72	paired desktop		charts are closed
reporting period	hours, and/or less	support with a		within 72 hours, as
that required % of	than 5 open	site specialist to		reported by weekly
charts closed is not	charts at 8 weeks	support the		report
met		process workflow		
Weekly report	95% of charts	Discussion with		When 95% of
shows by 4 th	closed within 72	CMO regarding		charts are closed
reporting period	hours, and/or less	challenges to		within 72 hours, as
that required % of	than 5 open	closure		reported by weekly
charts closed is not	charts at 8 weeks			report
met				
Weekly report	95% of charts	Mandatory	Without additional	When 95% of
shows by 6 th	closed within 72	attendance at an	compensation, attend	charts are closed in
reporting period	hours, and/or less	off-hours open	the off-hours open	72 hours, as
that required % of	than 5 open	encounters	encounters closure	reported by weekly
charts closed is not	charts at 8 weeks	closure	workshop.	report
met		workshop,	At the discretion of	
		without	the Chief Operations	
		additional	Officer and the CMO,	
		compensation	certain responsibilities	
			outside of patient care	
			may be removed from	
			job duties. Reduction	
			of the related stipend	
			equal to the	
			responsibilities	
			removed.	

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Weekly report	95% of charts	A reduction by	Reduction in FTE	When 95% of
shows by 8 th	closed within 72	one in the	status with a	charts are closed in
reporting period	hours, and/or less	number of	commensurate	72 hours, as
that required % of	than 5 open	scheduled clinics	reduction in	reported by weekly
charts closed is not	charts at 8 weeks	per week, by the	compensation equal	report
met		Site	to the number of clinic	
		Administrator,	hours reduced	
		for purposes of		
		allowing time for		
		closing		
		delinquent open		
		encounters		

REFERENCES:

None

ASSOCIATED DOCUMENTS:

OPS.073 Documentation of Medical Services (Retired) CLN.039 After Hours Call

KEYWORD TAGS:

Documentation, guidelines, timeliness