Delinquent Note Policy

Farrell Community Healthcare Center

It is highly encouraged that ambulatory care notes be completed immediately after the conclusion of medical services but should be in Epic no later than 24 hours after the office visit. When notes are returned back to the resident for corrections, the resident has 24 hours from receipt to complete the corrections and return the notes back to their preceptor/attending. If ambulatory care notes are not completed within 24 hours of service or corrected within 24 hours of request for revision, the delinquent note policy will be activated (see below).

Inpatient Service

Discharge summaries should be completed at the time of hospital discharge. Daily progress notes should be completed before rounds, but at the latest on a daily basis. Medical records deficiencies reported to the department by Health Information Management Department shall be immediately forwarded to the resident and their advisor with the expectation that notes must be cleared within 24 hours. Noncompliance will activate the delinquent note policy.

Delinquent Note Policy

Notes identified by the concerned Attending/Preceptor as not completed within the prescribed time frame shall be deemed delinquent.

The first episode of note delinquency will merit a warning email requiring completion of the note before the 48th hour from service and counseling/education from the attending/Preceptor in charge of the session on (1) the medico-legal importance of timely documentation of all medical services rendered, (2) tips on how to be more successful in timely completion of notes and (3) consequences of repeated delinquency (progression to suspension from rotation duties until notes are done). The Attending/Preceptor shall take charge of following up the notes to its completion. Upon receipt of an e-mailed notification of delinquency, the resident is expected to acknowledge receipt also by email and to complete all outstanding notes within 48 hours from delivery of clinic service. The resident shall inform their Attending/Preceptor of its completion as soon as all outstanding notes are submitted. The Attending/Preceptor shall copy email the Program Director and resident's advisor in the event of failure in performance after the 2nd delinquent offense or for non-completion of notes after the 49th hour.

The second episode of note delinquency (no note past 49th hour or a 2nd FHC session with a 24 hour note delinquency) will result in the following:

1) After consultation with the Program Director or designee, immediate suspension of the resident's current rotation activities or proceeding on to a new rotation including away electives or vacation until all notes are completed will be implemented. Completion of notes shall be verified by the Preceptor coing the Program Director or other designee before the suspension is lifted and the resident is allowed to resume their rotation activities or take their time off.

2) 2nd warning email/notification documenting the failure of completion of the note before the 48th hour from service and additional counseling/education from the Attending/Preceptor in charge of the session and another designated faculty on (a) the medico-legal importance of timely documentation of all medical services rendered, (b) tips on how to be more successful in timely completion of notes and (c) consequences of continued episodes of delinquency (suspension and progression to behavioral plan for cure)

The third episode of note delinquency (no note past 72nd hour or a 3rd FHC session with a 24 hour note delinquency) will result in:

- 1) after consultation with the Program Director or designee, immediate suspension of the resident's current rotation activities or proceeding on to a new rotation including away electives or vacation until all notes are completed
- 2) recall to Farrell immediately where completion of notes shall be performed under the direct monitoring of an assigned preceptor. Completion shall be verified by the same Preceptor (or Program Director or other designee) before the suspension is lifted and the resident is allowed to resume their rotation activities or take their time off
- 3) An improvement plan shall be enforced by the Program Director or Associate PD. This improvement plan shall be developed and documented for the resident with the assistance of the faculty advisor. Additional counseling and education from the medical director and advisor will be provided to enhance the resident's understanding of (1) the medico-legal importance of timely documentation of all medical services rendered, (2) tips on how to be more successful in timely completion of notes and (3) written documentation of the consequences of repeated delinquency (stepped up monitoring of documentation compliance and onto period of intensive behavioral focus previously known as probation)
- 4) This documentation of behavioral remediation shall include weekly meetings reviewing the resident's session tallies and counterchecking documentation progress and shall be included in the resident's confidential file. At this point GME will also be alerted and copies of all documentation will be forwarded for any future action.

Failure to improve with the behavioral plan and/or continued note delinquency will result in progressive major disciplinary actions as follows:

1) revision by both PD and Assoc PD of the improvement plan to stepped up monitoring of documentation compliance after each FHC session with the Program Director or designee (instead of a weekly review). The resident will receive a written notification of this and a copy shall be forwarded again to GME as well as kept in the resident's confidential file. If successful, after 2 weeks of increased monitoring the resident may step down to weekly and/or monthly reviews as well as release from the improvement plan. On the other hand, continued delinquency x 3 consecutive FHC sessions will merit escalation to the PD with the recommendation for a 90 day Period of Intensive Academic Focus through GME.

2) 90 day period of intensive academic focus (PIAF). After review of all documentation of delinquency, faculty recommendations and evaluations, the process for applying the period of intense focus shall be determined by the Residency Program Director and Chair of the CCC. Implementation of further actions if any will be done in accordance with the procedure set forth in the GME Policy. In the event the resident does not demonstrate satisfactory progress and/or continued non-compliance with the improvement program, the Clinical Service Chief and/or the Program Director, in consultation with the Vice President, Medical Affairs, shall determine a further course of action to address the matter in accordance with the Graduate Medical Education Policies and Procedures and/or Medical Staff By-Laws.

Procedure

Preceptors should maintain an accurate tally of precepted resident's patients. Inpatient attendings should maintain a list of their service patients.

Attendings should review and sign completed notes no later than 48 hours after the date of medical service rendered.

The Attending shall notify the resident, and, when needed, their faculty advisor, the PD, and the Associate PD in the event of delinquent notes past 24 hours as described above.

Upon completion of required notes, the resident should immediately contact the preceptor by the agreed upon method (eg in person when under Farrell recall, or email/phone call) to confirm completion. The attending in charge/preceptor shall be responsible for following through completion and reporting up outcomes to the PD and Associate PD. The resident shall submit the list of cleared hospital discharge summary deficiencies signed off by medical records upon completion of identified delinquent in patient medical records.

Stepped up monitoring of documentation compliance and 90 day Period of Intense Focus shall always require evaluation and recommendation from the Residency Program Director and the Chair of the CCC.

All actions are subject to the proscribed grievance process.

1 st warning email: NOTIFICATION OF FIRST OFFENSE DELINQUENT NOTE past 24 hrs
Resident: Attending/Preceptor in Charge: Date reported:
RESIDENT ACTIONS REQUIRED: 1) COMPLETE NOTES BEFORE 48 TH HOUR POST MEDICAL SERVICE (not the time of notification); 2) document all communication by email a) to preceptor (ccing PD) receipt of notification b) to preceptor (ccing PD) after completion of all notes c) to PD when appointment for counseling with preceptor has been arranged and when completed 3) call back immediately attending/ PD when paged for notification and as soon as notes are submitted
MRNs delinquent: 1 2 3 4 5.others:
4) schedule appointment with preceptor to do the following counseling: a. review the medico-legal importance of timely documentation of all medical services rendered, b. tips on how to be more successful in timely completion of notes c. consequence of continued or repeated delinquency (REVIEW DELINQUENT NOTE POLICY□suspension form rotation)
2nd warning email NOTIFICATION OF SECOND OFFENSE DELINQUENT NOTE past 49 th hour or 2 nd FHC session with delinquent notes
Resident: PD: Administrative suspension implemented: yes no (why not) Rotation affected note that resident backup needed for ff: icu, wards, peds in patient or adult ed \(\square \text{please} \) call chief resident for class
asap to arrange for coverage; also please inform rotation supervisor

RESIDENT ACTIONS REQUIRED:

- 1) COMPLETE NOTES BEFORE **72nd HOUR POST MEDICAL SERVICE** (not the time of notification);
- 2) document all communication by email
 - a. to PD re receipt of notification
 - b. to PD) after completion of all notes
 - c. to PD when appointment for counseling with preceptor + other faculty has been arranged and when completed
- 3) call back immediately attending/PD when paged for notification and as soon as notes are submitted

MRNs delinquent:
1.
1
3
4
5.others:
 schedule appointment with preceptor as well as Dr Jani to do the following counseling: a. review the medico-legal importance of timely documentation of all medical services rendered,
b. tips on how to be more successful in timely completion of notes
c. consequence of continued or repeated delinquency (REVIEW DELINQUENT
NOTE POLICY ☐ suspension, Farrell recall and behavioral plan)
Third warning email
NOTIFICATION OF THIRD OFFENSE DELINQUENT NOTE past 73 rd hour or 3 rd
FHC session with delinquent notes
Resident:
ין וע
Administrative suspension implemented: yes no (why not)
Rotation affected note that resident backup
needed for ff: icu, wards, peds in patient or adult ed □please call chief resident for class
asap; also please inform rotation supervisor resident will return to Farrell
-
RESIDENT ACTIONS REQUIRED:

- 1) call back immediately PD/designee when paged
- 2) FARRELL RECALL leave rotation immediately and report to current session preceptor at Farrell FHC
- 3) COMPLETE NOTES IN PRECEPTING ROOM under the direct monitoring of current session preceptor (content of notes will be checked by original preceptor)
- 4) document all communication by email
 - a. to PD re receipt of notification
 - b. to PD (ccing original preceptor) after completion of all notes

- 5) schedule appointment with advisor + PD for development of the 30 day Behavioral Plan for cure
- 6) email Residency Program Director time and date of appointment with above for development of the 30 day behavioral plan

Or complete below	and 2^{nd} warning email MRNs notes remain incomplete after 1^{st} notification and 2^{nd} offense
$1^{st} = \underline{\hspace{1cm}}$	
2 nd =	MRNs
	MRNs
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Data	
Date	
Improvement Plan	
Dear Dr.	

You have demonstrated continued inability to comply with our documentation policy. This is being instituted to ensure safe, appropriate and timely documented care. We will put you on a one month period of rigorous working together with your faculty advisor, medical director, and the Program Director in order to develop behaviors and methodologies that shall attempt to increase your ability to fulfill your patient care responsibilities of documentation in a timely fashion. This shall include:

1) Review your notes with your advisor and identify areas that can be improved or removed in order to allow you to produce a more concise but still complete note

- review your use of Epic and enhance your ability to use it more effectively and efficiently with your advisor and/or the medical director/associate medical director.
- 3) discuss documentation requirements and how to apply effectively to your notes
- 4) review with your advisor the escalation process for non-progress in this competency and the grievance process
- 5) weekly meetings with the PD or Associate PD to monitor documentation compliance for the past week's clinic sessions, and additional education as needed on issues blocking timely completion of notes
- 6) identify any other evaluation/educational interventions if needed
- 7) recommendation for action at the conclusion of 30 days or earlier if warranted (see attachment)

Signature Prog Director or Assoc PD/Date	Signature	Resident ADVISOR /Date
I have reviewed the above an	d agree.	
Signature Resident /Date		
	Attachment	
	IMPROVEMENT PLAN M Monitoring of documentatio	
WEEK 1 (pls attach tallies reviewed)	SUCCESSFUL	UNSUCCESSFUL
Corrective action needed		
		UNSUCCESSFUL
Corrective action needed		
WEEK 3 (pls attach tallies reviewed)	SUCCESSFUL	UNSUCCESSFUL
Corrective action needed		
WEEK 4 (pls attach tallies reviewed)	SUCCESSFUL	UNSUCCESSFUL

Corrective action needed _____

nal recommendation at the conclusion of	<u> </u>
-	to every 2 weeks x 2 and reassess
-	to monthly review x 2 and reassess
	m monitoring and reassess as needed
 recommend escalation 	to Intense monitoring and warning
nature Prog Director or Assoc PD/Date	Signature Resident ADVISOR /Date
gnature Prog Director or Assoc PD/Date	Signature Resident ADVISOR /Date
gnature Prog Director or Assoc PD/Date	Signature Resident ADVISOR /Date
gnature Prog Director or Assoc PD/Date	Signature Resident ADVISOR /Date
gnature Prog Director or Assoc PD/Date have reviewed the above and agree.	Signature Resident ADVISOR /Date