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Clinical Documentation received by Referring Provider

Linda Butler
Maine Medical Center

Julie Plourde
Maine Medical Center

Nate Fuller
Maine Medical Center

Brandy Brown
Maine Medical Center

Roslyn Gerwin
Maine Medical Center

See next page for additional authors

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Authors
Linda Butler, Julie Plourde, Nate Fuller, Brandy Brown, Roslyn Gerwin, Alyssa Gaudette, Cheryl Wilbur, Rachel Garnsey, and Jim Bailinson

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The KPI was created to rule out the fact that requests were not being sent due to notes not being signed, the misses were sent, just not within 48 hours stated on the KPI.

It was discovered that the cc requests never sent did not appear on the report run by HIM department daily. This is a glitch with the EMR currently being used, the Data Analyst is working with there team to resolve.

Countermeasures

July 1, 2018 is the target date to correct all steps below. It was discovered that the only documentation not sent was documentation not on the report.

Solution Description | Root Cause Addressed | CIG Impact | Implementation Effect | Quick Win
--- | --- | --- | --- | ---
CC request will be entered correctly into EMR | Not all staff were trained to enter correctly resulting in not all requests being captured on report | High | High | Yes
Clinical documentation will be signed within 48 hours so all requests can be sent timely. | HIM staff cannot send notes in draft, note must be finalized | High | High | Yes
Meditech report will be corrected to capture all CC requests | If signed by multiple providers the request is not showing on report | High | Low | Yes
All medical professionals are working on final notes | Notes signed by multiple providers are not pulling on the report | High | High | Yes
All Maine Medical Departments will be on the same EMR | Different EMR’s throughout the system delay documentation being readily available to Providers | Low | Low | Yes

Outcomes

Below is the temporary process put into place until report was corrected:

Providers will send intake folders to HIM within 48 hours of appointment.

HIM will check EMR for CC request.

HIM will send CC request.

This chart displays all request made were captured on the report. The 3 requests not sent were at the Providers request, not an error.

Providers are able to focus on patient care.

Providers no longer researching why clinical documentation not available.

Exceptional customer experience for both the patient and referring Provider.

Next Steps

Health Information Management
- Run CC request daily, follow up all pending requests
- Enter CC request correctly
- Monitor staff performance

Providers
- Record and final sign all notes within policy guidelines
- Educate staff on all policy and procedure changes

Management Team
- Educate staff on all policy and procedure changes