POLICY: Health Record Completion by Medical Staff

Program Area: Health Information Services

Section: Health Information

Reference Number: ORG.1410.PL.002

Approved by: Regional Lead – Corporate Services & Chief Financial Officer

Date: Issued 2017/JAN/19

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PURPOSE:

To ensure compliance with the Southern Health-Santé Sud Medical Staff Bylaw by defining a consistent approach for:

- The completion of health records;
- The identification of the minimum requirements which will be monitored and flagged for completion;
- > The application of consequences when health records are not completed by the required date.

To assure completed health records are available to enable the conversion of clinical documentation and abstracted data into meaningful secondary data. This data will support planning, evaluation, and research efforts by authorized stakeholders, while also ensuring compliance with the reporting requirements set forth by the Health Services Insurance Act of Manitoba and the Canadian Institute of Health Information (CIHI)

BOARD POLICY REFERENCE:

Executive Limitation (EL-2) Treatment of Clients

POLICY:

The health record shall be maintained to communicate information required by health care providers for the provision of quality health care.

To ensure that a complete and accurate health record is maintained for all clients, health care providers shall:

- Complete the health record concurrent with the client encounter,
- > Ensure that health record documentation is complete, accurate, and legible, and
- Comply with all regional policies related to clinical documentation standards.

DEFINITIONS:

Medical Staff- includes physicians, dentists, midwives, clinical assistants, nurse practitioners.

Most Responsible Medical Staff – for the purposes of this policy, attending physician at the time of discharge or death is most responsible.



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Suspension of Privileges for Incomplete Health Records means a suspended physician is not permitted to admit, treat, consult, perform surgery or participate in a call schedule for inpatients or ambulatory clients advised by Regional Lead – Medical Services & CMO.

Exception - A suspended physician retains treatment and discharge privileges for clients who are already admitted to a health centre/hospital at the time of suspension

IMPORTANT POINTS TO CONSIDER:

- Concurrent documentation by medical staff facilitates effective communication, supporting the provision of quality healthcare.
- Medical Staff that author health record documentation are responsible for signing and dating all entries within the record. Electronic signatures, where supported and approved, are considered the legal equivalent to the handwritten signature.
- When Health Records remaining deficient >28days, based on date assigned, they will be considered delinquent
- > Delinquent records will be brought to the attention of the facility Chief of Staff by Health Information Services
- ➤ The Regional Lead Medical Services & Chief Medical Officer (CMO) will be notified if records remain delinquent
- Failure to comply may result in suspension of privileges

PROCEDURE:

- Physicians shall complete health records according to the minimum standard as outlined in ORG.1410.PL.002.SD.01 Completion of Health Record Standards, the Medical Staff Bylaw, and all regional policies related to clinical documentation standards.
- 2. Health Information Services staff shall:
 - 2.1. Review the health record for completion according to ORG.1410.PL.002.SD.01 Completion of Health Record Standards.
 - 2.2. Assign incomplete health records to physicians for completion within one (1) week of the client's discharge.
 - 2.3. Generate a ORG.1410.PL.002.SD.02 Physician Deficiency Slip through the chart deficiency module.
- 3. Incomplete health records shall be available to physicians for completion during normal business hours of the Health Information Services Department with access 24 hours a day, 7 days a week at some sites.
- 4. Physicians shall complete health records prior to planned absences. They shall notify the designated staff, including Health Information Services staff, of planned absences to avoid the preparation and distribution of incomplete record notices and suspensions.
- 5. Departing Medical Staff Members shall:
 - 5.1 Notify Health Information Services of intent to leave or of an extended leave and provide the last date at the site. This shall be done as soon as possible and at least three (3) weeks prior to the member's departure.
 - 5.2 Notify the Health Information Services Department of any records that may not have been assigned to him/her for completion, i.e. patients recently discharged or deceased

6. Health Information Services will track all health record deficiencies as per the standard requirements and provide notification to each Medical Staff member every 2-4 weeks, indicating any deficient health records using the ORG.1410.PL.002.SD.04 Physician Deficiency Notice. Medical Staff members are required to comply within 7 days.

Exceptions:

- 6.1. The physician has been granted an extension to the period for health record completion by the Chief of Staff or Regional Lead Medical Services & CMO due to extenuating circumstances, e.g. illness, unplanned leave of absence.
- 6.2. The health record is not available for the physician to complete because the client has returned to the facility and the record has been forwarded to an area providing care. In this case, Heath Information Services staff will identify where the chart is located or retrieve in order for the record to be completed in a timely fashion.
- 7. Once a month, Health Information Services staff will notify the facility Chief of Staff of any records deficient > 28 days using the ORG.1410.PL.002.SD.03 Physician Deficiency List 28+ Days report printed from the Chart Deficiency module. The Chief of Staff will provide further notice to the physician(s), including a 7-day window for compliance.
- 8. If the record(s) remain deficient after the 7-day window, the Chief of Staff will notify the Regional Lead Medical Services & CMO of the delinquency. In addition, the Health Information Analyst will notify the Regional Lead Medical Services & CMO of all records across the region that are deficient > 28 days using the ORG.1410.PL.002.SD.03 Physician Deficiency List 28+ Days report printed on monthly basis from the Chart Deficiency module.
- 9. The Chief of Staff or Regional Lead-Medical Services & CMO will notify the physician that his/her privileges are being suspended for failure to complete health records using ORG.1410.PL.002.FORM.01 Notice of Suspension to Physician.
- 10. A suspension of privileges at one facility may result in the progressive suspension of the physician's privileges at all Southern Health-Santé Sud facilities.
- 11. The facility Chief of Staff or Regional Lead-Medical Services & CMO will notify Health Information Services and Nursing Units of the Medical Staff member's suspension via ORG.1410.PL.002.FORM.02 Notice of Suspension to Inform Health Information Services/Nursing Units.
- 12. Once health records are completed, the Chief of Staff or Regional Lead-Medical Services & CMO will lift the suspension and restore privileges during normal Health Information Services business hours, Monday to Friday, excluding statutory holidays, when possible, using ORG.1410.PL.002.FORM.03 Reinstatement of Privileges.
- 13. Physicians with repeated suspensions for incomplete health records shall receive progressive discipline, which may lead to the permanent restriction or suspension of privileges, or termination of appointment. Disciplinary action resulting in permanent restriction or suspension of privileges or termination of appointment shall be reported.

14. For situations where there is non-compliance with the required actions outlined in this policy refer to ORG.1410. PL003 Management of Incomplete Records.

SUPPORTING DOCUMENTS:

ORG.1410.PL.002.FORM.01 Notice of Suspension to Physician

ORG.1410.PL.002.FORM.02 Notice of Suspension to Health Information Services/Nursing Units

ORG.1410.PL.002.FORM.03 Reinstatement of Privileges

ORG.1410.PL.002.SD.01 Completion of Health Records Standards

ORG.1410.PL.002.SD.02 Physician Deficiency Slip

ORG.1410.PL.002.SD.03 Physician Deficiency List 28+ Days

ORG.1410.PL.002.SD.04 Physician Deficiency Notice

REFERENCES:

ORG.1410. PL003 Management of Incomplete Records
Interlake-Eastern RHA Health Record Completion by Medical Staff
Prairie Mountain Health Minimum Documentation Standards – Acute/Transitional Care
Winnipeg Regional Health Authority, Completion of Medical Records Policy