

CHAPTER 20

Health Record System Continuous Quality Improvement

I. POLICY

HRS shall ensure that the health record system includes continuous quality improvement as part of the overall Quality Management (QM) program. The QM program shall establish acceptable performance standards and activities that identify problems or opportunities to improve services. Findings will be documented and an analysis and monitoring of service activities and corrective actions will validate the corrective action taken.

II. PROCEDURE

A. The HRS supervisor shall assign supervisory or lead personnel the responsibility to evaluate and monitor for:

1. Accuracy.
2. Consistency.
3. Uniformity of data collected, recorded, coded.
4. Statistical reporting systems, including daily census and abstracting of medical statistical data.
5. Timeliness/promptness.

B. The HRS supervisor or designee shall evaluate the following work functions with a focus on the critical events that represent problems or opportunities for improvement.

1. Coding/indexing/abstracting of inpatient information.
2. Census reporting.
3. Transcription.
4. Retrieval/delivery/refiling of patient records.
5. Availability of patient health records.
6. Patient access to his information.
7. Confidentiality of patient information.
 - a. Release of information.
 - b. Subpoena.
 - c. Other release and access.
8. Statistical reporting.

C. Health record staff shall:

1. Use screening criteria based on licensing and accrediting agency standards to identify possible problems in the documentation/giving of patient care.
 - a. Minimum standards outlined in regulations or statutes.
 - b. Established quality performance levels based on departmental experience or consensus used to evaluate, monitor, and determine if a problem or an opportunity to improve the services exists.

2. Use the following measurement techniques to assess the quantitative features of each function:
 - a. Training.
 - b. Observation.
 - c. Repetition.
 - d. Worksheet tallies.
 - e. Surveys of users of services.
3. Perform continuous evaluation and monitoring activities of work functions.
4. Ensure data collection includes the use of:
 - a. Problem statement, statement of expectation for which monitoring has been established.
 - b. Data source.
 - c. Methodology, including the sample size, responsibility.
 - d. Frequency, time frame.
 - e. Quality indicators, and performance thresholds.
 - f. Summary.
5. Analyze and evaluate all data, each process, including outcome, threshold, data collection, methodology.
 - a. Identify patterns.
 - b. Determine etiology/cause.
 - c. Analyze deviations.
6. Implement action plans to resolve identified problems.
 - a. Action plans include one or more of the following:
 1. Organizational chart.
 2. Job descriptions.
 3. Equipment.
 4. Systems.
 5. Training.
 6. Responsibility for implementation and monitoring.
 7. Time frame for expected changes to occur.
 8. Prepare reports that include:
 - a. Assessments/conclusions made after an evaluation of the findings against the threshold set for each quality indicator.
 - b. Any problems identified.
 - c. Probable reasons for findings below the threshold, if any.
 - d. Effectiveness of remedial actions.
 - e. Date and signature.
 9. Perform an annual review of the Quality Management written plan.