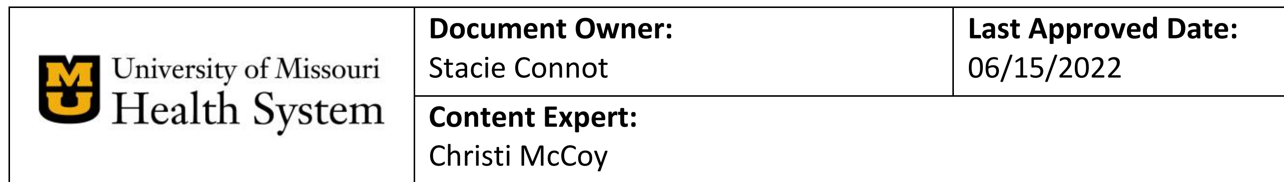
Title: Graduate Medical Education - House Staff Compliance With Timely Completion of Records - Policy



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I. Policy Statement

a. The purpose of this statement is to outline a process and set requirements concerning timely completion of the professional responsibilities of residents relating to electronic medical records (EMR).

b. This policy is important because resident must be held accountable for the completion of professional responsibilities concerning EMR, ensuring the continuity of safe patient care as well as for regulatory purposes. It is an Accreditation Council for Graduate Medical Education (ACGME) requirement for institutional and program accreditation that residents maintain comprehensive and timely medical records as part of the Professionalism and Interpersonal & Communication Skills competencies.

II. Definitions

a. Not Applicable.

III. Process/Content

a. The resident must complete all elements of the EMRs for which they are responsible within fifteen (15) days of patient discharge.

b. Such items for completion include:

   i. Signing of the history and physical
   ii. Discharge summary
   iii. Operative notes, and verbal orders

   Failure to do so may result in negative evaluations citing failure to meet proficiency in the core competencies of Professionalism and Interpersonal & Communication Skills.

c. For residents who have repeated negative evaluations concerning timely completion of EMR, all requests for verification of affiliation or education during that resident's search for employment will include a response indicating that

evaluations during residency training indicate that the resident has demonstrated issues identified with lack of timely EMR completion.

d. Department specific methods may be used to ensure compliance with this policy. For programs choosing to develop a different process than that prescribed within this policy, approval of the plan shall be sought from the Graduate Medical Education Committee (GMEC) before implementation

e. All residents will have, via their EMR inbox, immediate notification of and access to all EMR items requiring their completion and signature. In addition, the Medical Records Department will assure multiple notifications to the resident of the items requiring signature by using the following steps:

    i. All unsigned documents will remain visible in a user's EMR inbox until they are either signed or appropriately refused and forwarded back to Medical Records.

    ii. Every Tuesday, Medical Records staff members will e-mail to each department lists of deficiencies that are older than seven (7) days for notification to physicians.

    iii. Every Tuesday, via e-mail, the Medical Records Document Completion supervisor will also notify department chairs, department administrators, and residency program directors of all EMR items that are delinquent at least fifteen (15) days or older and that require dictation.

f. Once a week, Medical Records staff will send a listing of all delinquent record items to the residency program directors for final notification to the appropriate residents. This will include all unsigned items that are twenty-one (21) days post-discharge.

g. At this point, following notification by the program directors, the resident will be expected to complete the records within ten (10) business days.

h. As these weekly reports continue to be provided, the program directors are encouraged to use the following steps with residents who have delinquent items reported:

    i. Verbal Counseling: For the first occurrence, the program director will meet with the resident to detail the concern, including the date of the event. The resident's explanation will be heard and documented.

    ii. Letter of Formal Counseling: For the second occurrence, the program director will inform the resident of the delinquency incident, document the details of the concern in a formal letter of counseling, and then meet with the resident to discuss the event and expectations for resolution.

i. If the resident has additional incidents, or shows persistent deficiency in the ability to meet these Professionalism and Interpersonal & Communication Skills

proficiencies or other core competencies, the program director may determine the need to engage disciplinary steps as determined by the program and may result in actions such as program-level remediation and subsequent formal probation.

IV. Attachments

a. Medical Staff – Rules and Regulations of the Medical Staff

V. References, Regulatory References, Related Documents, or Links

a. Not Applicable.