# Monitoring Missing and Unsigned Notes in Ambulatory Psychiatry

#### The Problem

Timely and complete documentation facilitates patient care and strengthens decision- making. In June 2013, BIDMC updated its ambulatory documentation policy requiring all notes be completed and signed within 7 calendar days after the outpatient visit. Although the Psychiatry Department currently runs regular reports to identify unsigned and missing notes, these reports are run separately making it difficult to track whether notes are completed and signed in a timely fashion.

#### Aim/Goal

Our goals for this project were to

- Create a system to integrate both missing and unsigned ambulatory visit notes
- Automate that report
- Decrease the number of ambulatory notes designated missing or unsigned more than 7 calendar days after the date of service.

### The Team

Denise Doucette, Finance Manager Rohn Friedman, MD, Vice Chair Stephenie Loux, MS, Quality Improvement Data Analyst Pamela Peck, PsyD, Clinical Director

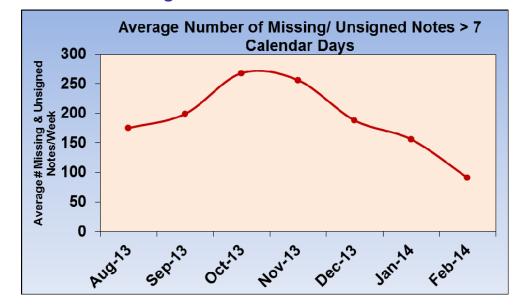
#### The Interventions

Medical Center

- > Run weekly CCC OMRVN report for Psychiatry's HMFP and Training Clinics
- > Create automated summary and individual provider reports with missing/unsigned notes categorized as <7, 7 to 13, and 14 or more days after visit
- Distribute individual reports to clinicians and summary report to Clinical Director
- Provide clinicians with assistance in resolving errors in missing notes report
- > Monthly data summary for Departmental Management Report
- Contact those with missing/unsigned notes > 14 days past due and schedule an appointment with Chief of Psychiatry as per BIDMC policy

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# The Results/Progress to Date



#### Lessons Learned

- ➤ While the majority of providers have few notes >7 days, a small number of providers have high numbers of incomplete notes. The Clinical Director is working to identify the causes to help staff eliminate the backlog of missing and unsigned notes.
- Notes awaiting co-signature do not show up in the current reports

# Next Steps/What Should Happen Next

- > Develop individual plans with providers who have high numbers of missing and unsigned notes > 7 calendar days past the date of service.
- > Examine the feasibility of adding notes awaiting attending cosignature