Northern Light Health

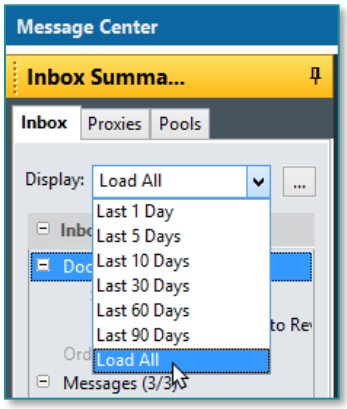
From the Office of Clinical Informatics

Message Center
Handle Document Deficiencies

February 23, 2022

Documents, whether dictated or created electronically, should be signed by all contributing providers in near real-time to ensure accurate information is available in the patient record and to avoid deficiencies (unsigned/incomplete documents aged greater than 30 days). Northern Light Health Information Management (HIM) provides Medical Leadership at each Member Organization a Weekly Document Deficiencies Report that provides a snapshot of all missing and unsigned documents aged greater than 30 days. This flyer reviews the workflows for finding "old" documents and Documents to Dictate notices. Also addressed, are some frequently encountered questions relating to the folder structure and why certain items appear where they do.

Pull all Unsigned Documents into View



The default lookback interval is 30 days. There are several other options in the **Display:** dropdown menu; however, when addressing document deficiencies, choose **Load All** (if available).

If **Load All** is not available, click the **ellipsis button** ... to the right of the Display drop-down field and use the calendar to set the lookback timeframe to whatever is needed to pull in the oldest document in question.

Locate Documents in the Folders

When working on older items, it's important to know that documents and notices may appear in different folders, depending on how they were generated and by whom. Providers should know that older items will appear in both, the Inbox and Work Items sections.

➢ **Inbox Items**

- **Documents** contain transcribed and/or scanned documents for signature by the provider, co-signature by the provider for a Resident or Mid-Level Provider, or documents to review.
  - **Sign** contains transcribed and/or scanned documents awaiting the provider's signature.
  - **Forwarded Documents to Sign** contains documents from care team members requiring signature from the supervising physician.

IMPORTANT: **Notes completed by Residents and Mid-Level Providers (where applicable) need a signature by the Supervising Physician before the document shows as complete. These documents must also be signed by the original author. Sometimes, the Supervising Physician will sign, but the originator will have only saved the document.**

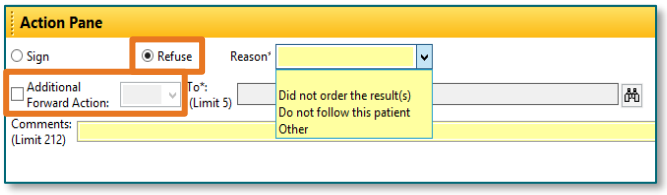
  - **Forwarded Documents to Review** contains documents for review only. These documents cannot be legally signed and are informational only.

➢ **Work Items**

- **Saved Documents** contains saved documents to **finalize** and **sign**.

  IMPORTANT: Saved Dynamic Documents and PowerNotes will appear in this folder.

- **Documents to Dictate** contains notices sent by HIM upon chart review if a note is needed.
  - The name of this folder is misleading. HIM reviews the chart for dictated and electronic notes and a notice sent to this folder means only that a note is missing. The note may be completed using whichever method is appropriate (e.g., dictation, Dynamic Document, PowerNote).
  - When a **Documents to Dictate** notice is received, check the **Saved Documents** folder before starting a new note from scratch.
  - If using Dynamic Documentation/PowerNote to complete the requested documentation:
    - Complete and sign the note, ensuring the date of service and FIN are correct.
  - If using Telephone Dictation to complete the requested documentation:
    - The Document to Dictate notice will be removed once the transcription has been signed. No further action is needed, other than signing the transcribed document when it arrives in the Inbox.
  - If the document is not appropriately attributed to the provider:
    - If not responsible for the dictation, **Forward** it to the correct provider, if known, or **Refuse** the notice. Enter any known details into the Comments.



Deficiency Report Reminders

Deficiency Reports are reports pulled by Northern Light Health Information Management (HIM) and represent a snapshot in time of any notes not completed.

- Notes not completed and signed by the provider.
- Notes not co-signed by the Supervising Provider.
- Notes originating from a Resident or Mid-Level Provider sent for signature to the Supervising Provider, but not signed by the originating provider.