|  |  |  |
| --- | --- | --- |
| TEXAS TECH UNIVERSITY HEALTH SCINCES CENTERSCHOOL OF MEDICNE PYSCHIATRY DEPARTMENTPOLICY AND PROCEDURE | REVIEW NO.2. | NUMBER:PI 2 |
| PREPARED BY: APPROVED BY:Kary Blair Terry McMahon, M. D. | ORIGINALAPPROVAL DATE:OCTOBER 2002 | MOST RECENT REVIEWAPPROVAL DATE:DECEMBER 4, 2018 |
| TITLE:**Chart Auditing** | PAGE:1of 1 |
| **A. GENERAL STATEMENT OF POLICY:**Statement of Purpose: To standardize and improve documentation of patient care and monitor progress through  regular chart audits.**B. SCOPE:** This policy covers Psychiatry.**C.** **ADMINISTRATION & PROCEDURE:** **1.** A trained reviewer will audit a random sample of at least 10 charts per month, to include a minimum of 1 for  each provider. A goal of 95% compliance has been set by the Administrative Team. **2.** The treatment plan, psychiatric evaluation form, and progress notes are each audited according to set criteria  (See attached Chart Audit Form) **3.** All incoming providers are trained by a designated faculty psychiatrist and the chief resident in the proper  documentation of care, including clear description of problem, treatment planning, and response to  interventions. **4.** All Chart Audit Forms will be distributed to the Administrative Team including the Department Chair and to all  providers. Any provider who does not consistently reach the goal of 95% compliance on the chart audits will be  notified of deficiencies and reeducated on documentation guidelines.D. **DISTURBUTION:** This policy shall be distributed to Psychiatry. |