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| TEXAS TECH UNIVERSITY HEALTH SCINCES CENTER  SCHOOL OF MEDICNE  PYSCHIATRY DEPARTMENT  POLICY AND PROCEDURE | REVIEW NO.  2. | NUMBER:  PI 2 |
| PREPARED BY: APPROVED BY:  Kary Blair Terry McMahon, M. D. | ORIGINAL  APPROVAL DATE:  OCTOBER 2002 | MOST RECENT REVIEW  APPROVAL 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. | | |