

**PURPOSE**

To establish timely parameters for all medical record information.

**POLICY**

The Agency will ensure timely provision of care to meet patient's needs in compliance with all federal and state laws and regulations.

**PROCEDURE**

- I. All Agency staff, and physician/physician office staff as appropriate, will be oriented to the following parameters:
  - A. Initial nursing assessment visit by the RN will be completed within forty-eight (48) hours after receipt of the physician's referral for hospice care, unless the physician, patient, or representative requests otherwise.
  - B. Initial POC will be established prior to the initiation of services and signed prior to billing.
  - C. The IDT, in consultation with the attending physician, will complete the Comprehensive Health Assessment no later than five (5) calendar days after the start of hospice care. The Assessment is updated at least every fifteen (15) days or as changes occur.
  - D. The IDT POC will be developed within fifteen (15) days of the start of care, and updated at least every fifteen (15) days.
  - E. Admission paperwork is completed within two (2) days of admission to the Agency.
  - F. All clinical and progress notes will be written the day service is rendered.
  - G. Daily progress notes are turned in twice a week.

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- H. Supplemental verbal orders may be obtained before care is provided and are written within twenty-four (24) hours of receiving the orders. Orders will be signed by the physician within sixty (60) days.
  - I. Physician signatures are obtained on the IDT Plan of Care at the interdisciplinary team meeting.
  - J. Documentation for the medical records of discharged patients is completed within thirty (30) days of the discharge, either from a single discipline or the Agency.
  - K. An Admission Medical Record is assembled by the seventh working day after admission.
- II. A tracking system will be implemented to track all physician orders.
- III. All medical record information will be incorporated into the patient's medical record within fourteen (14) business days of providing service.
- IV. The Agency's quality assessment performance improvement activities may monitor effectiveness of the medical records parameters and will reevaluate the parameters if negative trends are identified.