

SULLIVAN COUNTY PUBLIC HEALTH SERVICES

<p><u>POLICY:</u> UTILIZATION REVIEW AND PEER REVIEW WILL BE CONDUCTED A MINIMUM OF 4-8 TIMES/YEAR.</p> <p><u>PURPOSE:</u> To provide guidelines for critiquing home health care utilization and appropriateness of care and services provided.</p> <p><u>RESPONSIBLE PARTY:</u> Director of Patient Services, QI Coordinator</p>	<p>Original Approval: 9/99</p> <p>Reviewed: 9/99</p> <p>Revised: 4/03</p> <p>Revised:</p>
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EQUIPMENT:

- Patient clinical records
- Review forms

PROCEDURE:

1. Review of minimum of 10% of Agency's current census as of 12/31. Both active and discharged records will be reviewed.
2. Records are reviewed for appropriateness of plan of care, quantity of services, and compliance with acceptable standards of practice. Paraprofessional content is reviewed by a Registered Nurse.
3. All nurses will participate in Peer Review meetings (minimum of 2/RN/year) which will be co-chaired by the QI nurse and/or Director of Patient Services.
4. Co-chairs will be responsible to schedule meetings and select records for review.
5. The Director, or designee, is responsible for coordinating review activity.
 - a) Staff members are assigned random records for review within a specified time-frame and provided with worksheets to document findings.
 - b) Confidentiality of records is maintained.
 - c) Worksheets are reviewed by QI Program Coordinator.
 - d) RNs will be notified in writing on findings and given 10 working days to make corrections.
 - e) SPHNs will be advised of RN and recommendations made for corrections. Significant or recurrent issues are directed for appropriate action.
- 6) Aggregate information is formulated into a report by the QI Coordinator and forwards it to the Director of Patient Services and the QI Committee.
- 7) Annual/quarterly report will be submitted to the Professional Advisory Board with discussion and recommendation on organizational plan for action, if appropriate.