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Using Chart Review in your CQI Program

Part 3: Targeted Chart Audits

This is the third installment in a three-part series about chart review. The first installment discussed Routine Chart Review, while the second installment covered Case and Transfer Reviews. Both can be found by visiting www.birthcenteraccreditation.org/category/newsletter

Targeted Chart Audits

Identification of trends and outliers in routine chart reviews or case reviews may show the need for a targeted chart audit to gather more information about the concern-

ing issue. This is the most focused type of review and is reserved for those situations in which more detail is needed to identify the etiology and actions needed for specific deficiencies. It is also sometimes required by CABC to evaluate staff compliance with a P&P that has been revised. Targeted audits are not only for clinical issues; they can be useful for administrative issues, such as concerns about billing or collections, compliance with financial P&P's, or timely appointments for initial prenatal visits. Target chart audits are easy, though somewhat time-intensive, to do and can provide information that is very useful in addressing issues in quality and/or documentation. They are an important aspect of a robust CQI program.

How to plan and conduct a targeted chart audit:

Define the specific topic for review.

For example, "In our routine chart reviews, we have noticed a trend of maternal postpartum vital signs not being documented according to our P&P."

Develop a list of specific data elements that will be audited, such as:

- * Time of maternal postpartum vital signs
- * Which vital signs were done?
- * Were there any indications for increased frequency of vital signs and, if so, were they done more often?
- * Name of staff providing the postpartum care, including students or doulas
- * Any unusual circumstances, such as the newborn requiring increased monitoring, large number of visitors, more than one client in birth center, difficulties with initiating breastfeeding, etc.

Identify the target level of compliance desired.

For instance, decide how many charts you want to have maternal postpartum vital signs done according to P&P. This could be as high as 100% depending upon the potential impact on safety involved in the topic being reviewed. It will almost never be less than 85%.

Plan for selection of charts to be reviewed, such as:

- * All births in the past month
- * Random sample for births in the past 4 months
- * All births since the P&P was revised

Assign a staff member to the audit and set a deadline for completion.

All staff should learn how to do audits, including non-clinical staff.

Conduct the audit and report results to staff.

It is helpful to use an audit template to assure consistent collection and reporting across audits. Sample audit templates are available from CABC upon request.

Determine any need for further action.

This is especially critical when the target compliance rate is unmet. i.e.:

- * Staff education.
- * Revision of EHR template to better capture required data elements or to provide reminders for needed documentation.
- * Revision of P&P. Sometimes a target isn't met because the P&P is inappropriate. For example, maternal vital signs more frequently than indicated by CABC requirements or national guidelines.
- * Address with individual staff member(s) who accounts for the majority of charts that failed the audit.
- * Review literature or national guidelines to provide support for keeping or revising the P&P.
- * Evaluate effectiveness of actions taken by conducting a follow-up audit.

Have an idea for a future newsletter topic? Let us know!

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