
Walk In Policy

Purpose:

Create and organize a professional walk in system with regular schedule

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

POLICY

I. **Policy Statement**

All walk-ins should be seen to the best of our availability. In order for us to be able to see all patients without causing disruption to flow.

II. **Procedure**

- **We take walk in's until 1 pm unless there is a slot available in the afternoon to offer patient.**
- **There is absolutely no double booking a provider with the exception of Dr. Nunez from 2-2:45 pm.**

The reception team should review schedule for availability, then review the provider workflow at the time to verify we are able to accommodate patient at time of arrival.

- If not available slots, patient can be placed on the walk in schedule until a no show or cancellation occur to place patient in first available provider's schedule.
- All walk in's should be informed of approximate wait time and which provider they will see.

Appointment policy

Purpose:

Create and organize a professional appointment flow system

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

POLICY

I. **Policy Statement**

All appointments should be seen in a timely manner for exceptional quality care.

II. **Procedure**

As provider is only scheduled one patient per slot to provider quality care.

- The reception team should review schedule for availability and schedule patient with date and time of preference if available or next agreed upon date and time.
- Reception team must confirm provider patients is scheduled with and time of appointment
- For confirmation purposes, we should confirm the phone numbers on file over phone.
 - We take walk in's until 1 pm unless there is a slot available in the afternoon to offer patient.
 - There is absolutely no double booking a provider with the exception of Dr. Nunez from 2-2:45 pm.

Newborn policy

Purpose:

How to schedule and handle the process of Newborns with insurances in an efficient manner to avoid non reimbursements

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

POLICY

Policy Statement How to schedule and handle the process of Newborns with insurances in an efficient manner to avoid non reimbursements

I. Procedure

- Schedule appointment according to appointment policy.
 - Inform parent to contact insurance and inform they have given birth and child's primary information.
 - When parent arrives to office, Front desk must inquire did parent update insurance company of patient's birth and demographic information
 - Note on spreadsheet and notes in patient hub the status of update as per parent information.
 - When patient follows up in one month well visit, if parent has not updated insurance, inform parent to call insurance to change PCP and update status prior to entry of clinician
 - Also inform parent they can receive a bill if in case insurance does not reimburse, Have parent sign a non-payment sheet or have biller inform parent of signing the form.
- ❖ **We will not refuse the patient if they did not update insurance yet we will have them sign a non-payment sheet in case we are not reimbursed by insurance, the parent is aware they are responsible.**

PCP change policy

Purpose:

To ensure we are primary care physician on insurances that require PCP

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

POLICY

Policy Statement

To avoid denial in payment for HMO patients we are required to be the primary care physician on insurance card, we must verify eligibility at every visit to ensure we are PCP

Procedure

- Schedule appointment according to appointment policy.
- Inform parent to contact insurance due to requirement and assign our provider as PCP and obtain a name of representative or confirmation number of call.
- When parent arrives to office, Front desk must inquire did parent update provider.
- Note on spreadsheet and notes in patient hub the status of update as per parent information.

If the parent did not change PCP, they must call prior to entry on cell phone and begin the change. Front desk can allow triage to begin vitals yet inform parent they must give information as soon as they finish the call.

- ❖ **We will not refuse the patient if they did not update insurance and insurance is closed, we will have them sign a non-payment sheet in case we are not reimbursed by insurance, the parent is aware they are responsible.**

Piercing Policy

Purpose:

To provide medical ear piercing in a safer and cleaner environment to avoid infection and offer the full benefits of medical ear piercing,

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Dr. Denise Nunez

POLICY

I. Policy Statement

To supply the most sanitary and pleasant ear piercing experience

II. Procedure of Ear Piercing

While this is a paid by cash service we still require certain policies followed to ensure safety and to provide effective quality care.

Plastic earrings will be a fee of \$80 and the titanium will be a fee of \$100.

Front Desk:

- 1) Front Desk is to have patient pay prior to entering back area
- 2) Front desk should inform parent they will not be in the room during the procedure
- 3) Give consent to parent to review and sign, scan into record
- 4) Have parent pick earring of choice, write on consent top corner choice and give to triage.
- 5) Inform Assisting MA that there is a patient for piercing

Triage:

MA assisting provider must initial consent that they are MA assisting

- 6) Obtain blood pressure/ heart rate/ pulse oximetry for patient.
(Height and weight not needed)
- 7) Place child in room 19 for procedure
- 8) Inform Medical Provider assistant that they have a patient
- 9) Assistant can prep room
- 10) Provider will enter and pierce ears, give post care instructions
- 11) Medical providers assistant can schedule with patient a 2 week follow up just to ensure piercing site is healing correctly.
(1) Follow up is part of piercing fee already included.

MQ11 Form policy

Purpose:

To fill for Home health aide or special services needed for insurance to grant services.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

POLICY

Policy Statement

To avoid termination of services we must comply with insurance regulations and fill out this required form for services.

Procedure

- In order to fill form for patient, they must have been seen in the last 30 days at office.
 - If they have not been seen, schedule an appointment accordingly and reason place is MQ11 form fill
 - If patient, has been seen in a month, have parent request a form request and follow the form policy rule.
- Send to insurance company or agency if we have needed information. If we do not, give form to parent to give to their case worker.

Attendance for Specialties policy

Purpose:

Divino Nino Pediatrics Specialists strive to provide each patient with the highest quality of care while attempting to accommodate the client's schedule to their convenience.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

Policy Statement

Divino Nino Pediatrics Specialists strive to provide each patient with the highest quality of care while attempting to accommodate the client's schedule to their convenience.

Therefore, we provide reserved time slots for each patient in order to minimize their waiting and assure continuity of their treatment.

Their consistent attendance of the planned treatment is fundamental to reaching desired treatment goal.

Procedure:

- If patient is more than 15 minutes late, they will not be seen by provider for appointment and will have to reschedule at front desk
- If client reschedules more than twice in a row, services will be terminated and they will need to be given a referral to seek care in another facility
- If client NO SHOW's 3 times or more, all of their remaining appointments will be cancelled and services will be terminated and they will need to be given a referral to seek care in another facility
- Cancellations must occur 24 hours in advance.
- For patients that services are terminated create a telephone encounter after client is informed of services termination and note in encounter that the client is non-compliant.

Form policy

Purpose:

To fill form for clients in an efficient manner

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

Policy of how forms are processed from beginning to end:

From Front desk to Form Associate:

1. Parent comes in or calls to request a form
2. Front desk associate gives mom request form to fill or if it is a call, we fill out request form
 - o Request form has date received, patient's info, which form is being requested and how the parent wishes to obtain when completed.
 - o If called, a telephone encounter is opened and assigned to form individual.
3. It is scanned and placed in patient documents in record
4. All forms requested are placed on form log
5. Original is then placed in green folder (Forms Pending folder) at front desk for the form associate to fill

Form Associate to form completed

1. Form associate takes green folder when she comes in
2. She fills forms according to date order
3. She does physical exam forms and WIC forms through the Citywide Immunization registry (CIR)
 - a. All forms completed through CIR are uploaded directly in patient chart; ensure to stamp form prior to sending to parent.
4. She logs all forms filled on log sheet
5. She stamps all forms and emails to parent, attach all completed forms in record
6. At times, may place form in completion folder for scanning and placing for pick up

Front Desk Associate to Parent:

1. Obtain forms from the completion folder
2. They process forms out by preference of parent during request
 - a. If to be emailed, they must scan again into record to email to parent

- b. If to be picked up, they place in envelope with child's name and date the corner of envelope and place in draw at front desk for pick up.

*The goal is to email all form requests to eliminate forms holding in office. For clients without email we will place a spick up in office.

Conversing policy

Purpose:

We, at Divino Nino Pediatrics, pride ourselves on exceptional customer service. Part of customer service is understanding different beliefs and cultures. Certain conversations for HIPPA and individual beliefs should be avoided.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

Policy Statement

We, at Divino Nino Pediatrics, pride ourselves on exceptional customer service. Part of customer service is understanding different beliefs and cultures.

In the medical field, there is a thin line in how open we can be when conversing with or in front of patients as we represent the company we are employed by and our words can be changed or used against the company.

Procedure:

It is prohibited to discuss the following topics regarding religion, world news, social media, politics even personal matters while in the facility at any time.

These conversations should be had while out of the office.

There will be a zero tolerance to this policy as we do not know who can be offended or feel disrespected by overhearing a conversation amongst employees.

Referral policy

Purpose:

To track and follow up on patients referred to external specialists and facilities by ensuring patient obtains appointment date with specialist, note in referral record and obtain consult report from specialist. To document non-compliant patients to lessen provider liability.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

Policy Statement

To track and follow up on patients referred to external specialists and facilities by ensuring patient obtains appointment date with specialist, note in referral record and obtain consult report from specialist. To document non-compliant patients to lessen provider liability.

Procedure Referrals

Process of referrals as per DOH standards to ensure quality care and ensure patient compliance.

Process within office:

- Medical Doctor creates referral during office visit
- Assign referral to Referral, DNP
- MD will escort patient to check out and inform team member of referral requested
- Check out department will work from the referral log in
- Check out member will copy and paste required paragraph onto referral
- Print referral for patient and give with specialty sheet for parent to make appointment

Follow up by Reception Team:

- Follow up on referral will be done by calling parent to inquire on scheduled appointment date
- A telephone encounter will be created of tracking process of referral
- Place in telephone encounter the status of information by time stamping and placing whether contacted parent or left message for parent
 - If parent is contacted up to 3 times and still has not scheduled the appointment place in telephone encounter note that parent is non-compliant; Note in referral note section as well

- If the parent made an appointment, place on referral in referral date the date of the appointment and in note section document the provider the patient is going to see with the telephone number
- After appointment date, follow up should be made to specialist if no consult is received within a week so we may follow up with provider if needed to obtain consult.

❖ **Always time stamp in each section for documentation purposes**

Telephone Encounter policy

Purpose:

To ensure all conversation with clients are documented for documentation purposes. To ensure all staff members and providers are aware of communication to refer to if needed.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front Desk, Pediatricians, Medical Assistants

Revised by:

M. Chantel O'Brien

Policy Statement

To document all calls or requests made by client, provider or parent of client and to ensure we document all communication into record

Procedure

- Create a telephone encounter for all requests or forms of communication with client needed
- Place note in message and time stamp received, assign to appropriate provider or team member.
 - All members on team should verify telephone encounters daily to ensure we do not have any that require immediate attention
- Time stamp into encounter and note what transpired or status of request, communication between client or insurance company depending on reason of telephone encounter.
- When encounter is completed address it so it locks into record

All telephone encounters must be closed within 24 hours, for those that require more time the Telephone encounter must be time stamped every other day with an update to status.

Quality care and Patient Safety

Purpose:

Recognize that patient safety as an essential component of quality pediatric health care for infants, children, and adolescents at Divino Nino Pediatrics (DNP). DNP encourages all staff to consider thoughtfully the environment in which they deliver health care services and to implement practices that decrease a patient's risk of injury or harm during the delivery of care.

Additional Authority:

Denise Nunez, Medical Director
Freddy Nunez, Office Director

Responsible Party:

Management Department, front Desk Department, Billing Department, Lab department, triage department

POLICY

- I. At Divino Nino Pediatrics we promote safe, patient-centered care
- II. Professional continuing education by all licensed professionals to maintain familiarity with current regulations, technology, and clinical practices.
- III. Compliance with federal laws such as HIPAA to protect patients against misuse of information identifiable to them.
- IV. Compliance and recognition of the importance of infection control policies, procedures, and practices in pediatric health care settings in order to prevent disease transmission from patient to care provider, from care provider to patient, and from patient to patient.
- V. Routine inspection of physical facility in regards to patient safety. This would include development of office emergency and fire safety protocols and routine inspection and maintenance of clinical equipment.
- VI. Recognition that informed consent by the parent is essential in the delivery of health care and effective relationship/communication practices can help avoid problems and adverse events.
- VII. Accuracy of patient identification with the use of at least two patient identifiers, such as name and date of birth, when providing care, treatment, or services.
- VIII. Standardizing abbreviations, acronyms, and symbols throughout the record is recommended.
- IX. An accurate, comprehensive, and up-to-date medical history including medications and allergy list to ensure patient safety during each visit
- X. Standardization and consistency of processes within the practice.

- XI.** A policies and procedures manual, with ongoing review and revision, could help increase employee awareness and decrease the likelihood of untoward events.

Created by: Denise Nunez, MD FAAP

Minor's Consent Policy

Purpose:

The legal ability of minors to consent to a range of sensitive health care services including sexual and reproductive healthcare.

Additional Authority:

Divina Lopez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front desk
Medical Assistants

POLICY

Policy Statement To ensure we are providing proper care to patients who are considered minors (over the age of 12 yrs. but under 18 yrs.) who are seeking healthcare without consent from an adult.

- I. **Contraceptive Services:** Patient over the age of 12 years may seek medical care without involving their parents.
- II. **STI Services:** Patient over the age of 12 years may seek medical care without involving their parents
- III. **Medical Care for a Child:** Allow all minor parents to consent to medical care for their child.

Policy on Drug Testing of Minors

Purpose:

To ensure we provide quality healthcare to minors

Additional Authority:

Divina Lopez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

MA and Physicians

POLICY

I. Policy Statement

The AAP advises against involuntarily drug testing adolescents.

II. Drug Testing:

- Drug testing may be done with consent of the minor.
- Drug testing maybe done at the request of the parent only if the minor consents to having the testing done.
- The AAP recommends that pediatricians discuss who will receive results with adolescents and their parents before ordering a drug test to avoid discrepancy.

Visitation Policy

Purpose:

To minimize the visitors to the back of the clinic in order to keep the patient flow as effective as possible.

Additional Authority:

Denise Nunez, CEO
Divina Lopez, Medical Director

Responsible Party:

Management Department, front Desk Department, Lab department, triage depart

POLICY

- I. At Divino Nino Pediatrics, we promote a safe, patient-centered care and would like to ensure that patient are seen on a timely manner.
- II. Please limit the visitors to 1-2 adults per patient only, recommend one adult
- III. Siblings who are attending the visit but are not being seen should wait in the waiting room but also should be accompanied by an adult
- IV. Please notify the parents when making appointment of the new visitation policy

Policy for Minors seeking healthcare without adult present

Purpose:

To ensure we provide quality healthcare to minors with no adult present for the visit

Additional Authority:

Divina Lopez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Front desk, Mainly Check in Associate

POLICY

I. Policy Statement

To ensure proper healthcare is provided for minors with no adult present for the visit.

II. Minors may be seen in the office with no adult present when:

- A letter has been provided by a parent granting visits without parent present. The letter must be made up and signed by the parent.
- If there is no letter in the chart then a phone call may be made to the parent to confirm that they are aware that the minor is in the office and grants permission over the phone. In this case please document that you spoke to the parent and details of the conversation.
- EXCEPTION to rule:
 - Minor does not need consent for a visit when the concern is of a sensitive healthcare concern for example: sexual or reproductive, mental health or treatment for alcohol or drug abuse.
(See Policy DNP002)

HIPPA Compliance in Response to Medical Record Requests

Purpose:

To ensure no HIPPA violations occur upon request for medical information from another provider.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Receptionists, Medical Assistants

Revised By:

M. Chantel O'Brien

POLICY

I. **Policy Statement**

All physicians requesting medical record, unless the patient was referred to them by Divino Nino Pediatrics, must send a HIPPA form filled out by parent. Otherwise medical record will not be sent.

Medical Record Release:

Medical Records are official documents. HIPPA must be followed to the strictest guidelines pertaining to their release.

If parent comes into office or calls:

- Front desk must inform patient a medical record release must be signed for full or partial record release
 - Immunization can be given with no charge. Copy of results at time of visit may also be given with no charge.
- On release, patient must specify to whom release will be sent to and specify date needed for Medical Record personnel can ensure they will send by appropriate time.
 - If patient wants record for themselves, for the first time record can be given to patient free of charge. Anytime afterwards, patient will be charged a .75 cents charge per sheet.
 - If for an attorney, .75 cents will be charged per page.
 - For another provider records are sent with no charge.
- If record release from attorney's office received,

- Medical Record personnel can send fee slip informing attorney of charge, once payment is received, record may be sent.
- Medical Record personnel should note in notes of patient hub that fee slip sent and record sent date.
- Release signed by patient should be scanned into record.
- If record release is sent from another office, record can be reviewed by Medical Record personnel and released accordingly.

**Medical Record Department handles all medical record request accordingly and if calls come ask inquiring about a record, Front desk can contact medical record department to inquire of status.*

Medical records are currently handled by Medical Record personnel (within check out department) and take a time span of 2-3 weeks, if a call comes regarding status you can inform of time frame if the caller is persistent see note above.

** Medical records cannot be released if required notes are not signed off by provider.*

In this case, the list of patient names with needed dates that are given by insurance company are to be given to specified provider for completion.

Medical Record Release for Record Review:

- Front desk should inform insurance company to send information needed to Billing manager by fax.
- Front desk can also take representatives name and number for Biller to call to set up needed arrangements.
- Record Reviews should be scheduled with in a 2-3 week time frame that allows biller to print records and provider to complete incomplete notes.
 - For record reviews is recommended chart is reviewed thoroughly.
 - All visits should have a note signed by provider. Testing is not needed for record reviews, only notes or consults notes in specified date range noted on request.

Hiring Policy

Purpose:

To ensure all new hires understand the purpose of Divino Nino Policies and their job description.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

HR department, upper management

POLICY

Hiring Process

Divino Nino Pediatrics objective is to hire individuals with a true passion for the medical field wishing to obtain a position in a company with the opportunity of growth and the drive to give outstanding customer service to an underserved area.

Internal: We will hold two interviews for hire.

- The office manager will stream through the bulk of resumes and interview those qualified for open position.
- HR manager or CEO will hold second interview
- Best candidate will obtain position.

As part of process to qualify for position, we can do a work trial of 2 days. The 2 day period is a non-paid period.

If upper management chooses to have trial for more days, they will have to ensure payment of \$9-\$10 an hour for 6 hours each day.

This will allow us to see who fits with the personnel of the dept.

After trial date, candidate is given Tony Robbins evaluation prior to hire determination.

****Depending on position or person of hired will determine if Tony Robbins eval necessary***

Once determination is made and candidate has been informed and given start date. We will send a Welcome letter explaining their next steps.

A letter will be emailed to candidate explaining to them start date, time and location. Position hired for and job description. We will give the job description twice. This ensures they are aware of what they are held accountable for prior to beginning employment with Divino Nino Pediatrics.

The letter is like a welcome to the company letter (see attached letter)

First day is orientation day.

Orientation day will consist of giving the employee all internal forms that need to be filled to begin employment, along with any forms required for benefits within company. Employee's picture will be taken for ID at this time.

- Candidates will be given office policies, clinic policies and employee manual.
- Candidates will be placed to watch webinars on customer service.
- At end of each, video they will take a small quiz.
- This allows us to go over if there are any weaknesses immediately recognized.
- Candidates will review with office manager/HR the main highlighted policies of their department.

During orientation, currently office manager will sit with all new hires on the same day, in future events HR will handle orientation.

After 1 day of orientation. This is still to be determined. They will be given date of full employment and time to report in. On day of report in, employee will report to supervisor of department.

Supervisor of department will have on report date, given to them by CEO/HR ID, temporary time click, ECW and desktop log ins. Supervisor will give mini tour to employee. Ensure login work correctly. Will assign employee to location in department to begin work.

- If employee did a trial period, this process should be easier as they will have an idea what is done.
- If employee did not receive a trial period, they are to shadow a current employee for 2-3 days to learn the internal workings of their department.

This will ensure all Divino Nino employees begin employment on the right path to success within the company.

Patient complaint Policy

Purpose:

To ensure patient's or parents do not leave office unsatisfied or irate.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Receptionists, Medical Assistants

Revised By:

M. Chantel O'Brien

POLICY

I. **Policy Statement**

Divino Nino Pediatrics prides itself in exceptional customer service yet there are times a client is upset and wishes to place a complaint, at these times please refer client to office manager or CEO of company.

Procdedure:

- All patients with a complaint; should be directed to the office manager.
- If Manager not in office and patient wants someone at that moment, Staff can allow the patient to speak with Mr. Freddy Nunez who is CFO of the practice or Dr. Nunez, the CEO, whom ever is in office at time of complaint.
- If patient wishes to remain anonymous, please direct them to send an email to admin@dncorporate.com

Allowed Paid Absence per Month

Purpose:

To avoid abuse of paid absence

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien Office Manager

Created By:

Emoni Lewis

Responsible Party:

All Staff Members

POLICY

I. **Policy Statement**

Staff members will only be allowed one paid absence per month. If a staff member calls-out unexpectedly, this will be considered an absence. This is not to be confused with personal/vacation days.

II. **Procedure**

- 1) You must call to speak to the office manager at least 2hrs before your shift
- 2) The HR manager must approve your request before being eligible for a paid absence
- 3) If this request is denied, you will not receive payment for said absence

III. **Side Note**

- 1) If a staff member requires a specific day off, he/she may negotiate and switch with another staff member within the same department if that person isn't already scheduled. You must notify HR through HR for Health of day off request and note who will cover. HR will notify office manager of information in request.

****Personal/Vacation Days must be requested at least 2 weeks in advance**

Referral process of scanning documents

Purpose:

Where to scan documents into chart for retrieval

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Pediatricians, Medical Assistants; Front Desk; Billing

POLICY

I. Policy Statement

All scanned documents should be placed in certain folders allowing the retrieval of documents to be more efficient and easier to inquire when needed.

II. Procedure of where to scan documents:

Form:	Scan into:
1. Physical Exam Forms filled	Patient documents
2. CIR	Misc folder
3. Vision/Hearing forms	P/E Drawings
4. Custody Documents	Chart Documents
5. Radiology tests (XRAYS, MRI's, CT Scans)	Xray folder
6. Lab work	Lab folder
7. Billing letters	Billing Folder
8. Orders sent from DME or HHA	Patient documents folder
9. All documents from within DNP	Patient Docs
10. All documents from outside of DNP	Chart Docs

Custody Protocol

Purpose:

To follow HIPPA of patient's confidentiality and ensuring information not shared with unauthorized individuals.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

All DNP Staff

POLICY

I. Policy Statement

There are times the actual parent is not raising the child, to avoid giving information to an unauthorized party we must obtain custody paperwork for chart

II. Procedure of Custody forms

When a patient comes in for first visit we should obtain copy of identification of individual bringing child for verification purposes.

- If individual is the parent, a copy of identification of parent should be placed with registration in file.
 - If individual bringing child is not the parent yet parent has custody, we need a signed letter from parent granting access for other individual to bring child on that date.
 - If parent wishes for a particular individual to always bring child, have parent sign permission granted form and place in record.
- If individual bringing child is not the parent yet claims custody of child, they must bring any forms that state they have custody of child, whether it be temporary or full.
- If the individual is a parent who wishes other parent to not be allowed access to record, place an alert with said information.
 - Even parents who do not wish to share information will have to give us custody papers or not place the secondary parent on registration form to avoid error of released information.
- All papers/forms pertaining to custody should be scanned into the chart documents in patient's record.

- Even parents who do not wish to share information will have to give us custody papers or not place the secondary parent on registration form to avoid error of released information.

Alert Policy

Purpose:

Alerts are placed so we may be aware of an issue, concern, request or needed information for that particular client.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Medical Assistants

POLICY

I. Policy Statement

Any patient that we need information or has certain needed concerns/issues we place an alert so we communicate with all in office.

II. Procedure of Alert

- Alerts are placed due to information needed or a preference of client and so forth. When alerts are placed for need information, it is the task of the front desk to obtain information and address alert by removing it.
- If an alert is placed with a concern/issue, Staff should read and follow directions of alert.
- If an alert is placed with a questions or to obtain info we cannot obtain. Employees should place a response to said alert with the date and their initials. This allows proper communication within office.
- All alerts should be removed once addressed so it does not cause confusion and allows the managerial team to see that they are being acknowledged.

No-Show Policy

Purpose:

No-Shows are appointment that did not show. We should always call to reschedule.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Medical Assistants

POLICY

I. Policy Statement

No-Shows are appointment that did not show. We should always maintain quality care to do so contacting no-shows to reschedule visits ensures quality care from being missed.

II. Procedure of No-Shows

1. All No-shows should be contacted to reschedule.
 - When calling No-Shows to reschedule, employee should open a telephone encounter and document call, reason of call, and status of call in encounter.
 - If unable to contact the parent then leave a message, place details in encounter and keep assigned to yourself.
 - Contact the patient up to 3 calls to reschedule, after 3 attempts mail a missed appointment letter so we document our efforts to contact.
 - After letter sent document in encounter and address the telephone encounter.
2. If able to contact after 1st attempt change visit status to rescheduled and give new appointment, place appointment given in encounter and address encounter.

Incident report Policy

Purpose:

Incident reports are to document all issues, errors or concerns within the facility.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Medical Assistants

POLICY

I. Policy Statement

Incident reports allow us to document errors/issues/concerns to properly ensure we never have such incident occur another time or to ensure we know how to handle situation when it arises at any time.

II. Procedure of Incident Reports

- Go to forms in google drive
- Go to share drive
- Go to incident folder and choose blank incident report
- Fill in areas that apply to incident
- Save on drive and email to Administrative Assistant; Admin Assistant will forward to upper management.
- Any incident reports that exist, upper management will address them in weekly meetings and develop action plans

Emergency Protocol Policy

Purpose:

To ensure all emergencies are handled immediately

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Medical Assistants

POLICY

I. Policy Statement

To ensure all emergencies are handled properly and in a correct/documented format

II. Procedure of Emergencies

- Due to emergencies being unexpected they can happen at any time.
- If an emergency occurs: Inform Office Manager directly.
- Office Manager will handle emergency depending on case. She will also notify Clinic and Medical Directors of emergency to ensure it is being handled accordingly.
- Emergencies are handled case by case.
- If it is an emergency that we must stop all flow, we will make a code Mickey announcement on loud speaker. This informs full office, we have a very critical emergency and all available hands should come to lab area to see where they are needed.
- When a code Mickey is placed no further patients are brought into back office, all doors are closed and all staff personnel should be in dept awaiting further instructions.

Uniform Policy

Purpose:

To create a look of uniformity within the office.

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Medical Assistants

POLICY

I. Policy Statement

Uniforms allow a look of professionalism and uniformity to an office setting.
Creating a look of structure for outside individuals.

II. Uniform Rule:

- **Medical Assistants:**
 - Must wear scrubs of Navy blue bottom, light blue top, Navy blue jacket.
- **Front Desk**
 - Must wear professional clothing of Navy blue or black slacks
 - Business appropriate blouse
 - Blazer Always
- **NOT Allowed to wear**
 - Jeans
 - Jeggings
 - T-shirts
 - Inappropriate clothing such as revealing, see through, written language on clothes

Refusal of treatment

Purpose:

When a parent refuses treatment of a medical procedure

Additional Authority:

Denise Nunez, Medical Director
M. Chantel O'Brien, Office Manager

Responsible Party:

Medical Assistants

POLICY

I. Policy Statement

When parents refuse medical advice for treatment or procedure

I. Procedure of refusal forms

Any patient that refuses providers treatment given; must sign a Refusal of Treatment Form.

***Form located at front desk when needed.**

- *This form is basically informing patient that they understand the risk and benefits of treatment yet they still refuse treatment.*
- After the patient signs, the consent should be signed into Chart documents in the patients record