



## VISN 20

### STANDARD OPERATING PROCEDURE (SOP)

#### SCHEDULING AUDITS

1. **PURPOSE:** Per VHA Directive 2010-027, VA Outpatient Scheduling Processes and Procedures, facilities are to ensure completion of a standardized yearly scheduler audit of the timeliness and appropriateness of scheduling actions and the accuracy of desired dates using a VISN-approved process. This Network Standard Operating Procedure (SOP) outlines the process for meeting the annual scheduling audit requirement.
2. **POLICY:** Facilities are required to create and maintain a Master List of all staff members (schedulers and their supervisors) that have any VistA scheduling option that may be used for scheduling patients. The facility must ensure successful completion of VHA Scheduler Training by all individuals on the Master List and also have annual refresher training to maintain access to the scheduling options. Using VISN-approved processes and procedures, the facility must also ensure completion of a standardized yearly scheduler audit. The audit includes timeliness and appropriateness of scheduling actions, and accuracy of the desired date. Deficiency in competency and performance is identified and appropriately addressed.
3. **RESPONSIBILITY:**
  - a. The VISN 20 Business Implementation Manager (or Designee) will ensure compliance with the 'Scheduled Appointment Auditing Requirements' as indicated in **Attachment A**.
  - b. The Medical Center Director (or Designee) is responsible for the implementation of this VISN policy and ensuring compliance with the **"Scheduled Appointment Auditing Requirements"** as indicated in **Attachment A**. Each facility will have an SOP identifying who will complete the required yearly audits and who will be completing the Inter-Rater Reliability.
4. **PROCEDURES:** Facility supervisors/audits will follow the **"Procedure for Auditing Scheduled Appointments"** as outlined in **Attachment B**.
5. **REFERENCE:** VHA Directive 2010-027, VA Outpatient Scheduling Processes and Procedures, dated June 9, 2010.
6. **FOLLOW-UP RESPONSIBILITY:** VISN 20 Business Implementation Manager (BIM)
7. **AUTOMATIC REVIEW:** December 31, 2016

A handwritten signature in black ink, appearing to read "L. H. Carroll".

Lawrence H. Carroll  
Network Director, VISN 20

**SCHEDULED APPOINTMENT AUDITING REQUIREMENTS**

1. Each facility will identify staff that will conduct the audits for their facility.

A minimum of 10 appointments a year per scheduler must be audited by the scheduling supervisor of the scheduler. Scheduling supervisors are ultimately responsible for all follow-up actions.

**EXEMPTIONS:**

- a. Schedulers that make only same day appointments in areas such as the Emergency Department or Urgent Care are exempt from the audits. (If these schedulers cover other areas that do not meet any exemption criteria, they must be audited.)
- b. Schedulers that make Compensation and Pension appointments only. (If these schedulers cover other areas that do not meet any exemption criteria, they must be audited.)
- c. Schedulers that make appointments in non-count clinics. (If these schedulers cover other areas that do not meet any exemption criteria, they must be audited.)
- d. All schedulers regardless of exemptions noted above in the structured audits, are required to have a scheduling performance standard. As such, scheduling reviews must be completed to assess performance and ensure accuracy, appropriate process and adherence to VHA scheduling business rules during their rating year.

**NOTE: The Count Clinic requirement does not include: non-VA care paid through VistA Fee; procedures performed in the operating room and recorded in the VistA Surgery Software; instances where encounters are generated based on unscheduled telecommunication; and occasions of service, such as clinical laboratory, radiology studies, and tests that are automatically loaded to the PCE database. An exception from the requirement of using VistA Scheduling software is also extended to providers and programs such as Care Coordination Home Telehealth when encounters are generated based on unscheduled communication.**

2. When errors are identified, supervisors will track the scheduler that made the error, whether the error was corrected, and any follow-up action, such as training, as a result of the error.
3. HAS or Business Office will compile a consolidated report of scheduling audit from results for all services on a yearly basis using the SAT auditing tool reports and send to the Executive Leadership or designee at their facility for review.
4. Each facility will conduct Inter-Rater Reliability (IRR), or auditing the auditor, once a year to be due September 30 of that Fiscal Year (FY).
  - a. Each facility will identify the staff that will conduct the IRR. Each facility will audit 10% of expected audits. To ensure scheduling practices are consistent across the facility, results will be reported to Executive Leadership or designee.

If it is determined that an auditor is not completing the audit appropriately, the following actions will occur:

- a. Auditor will be retrained by Scheduling Management staff
- b. Auditor will 're-audit' appointment from the previous quarter
- c. IRR will be conducted on the 're-audit' to ensure compliance

**PROCEDURE FOR AUDITING SCHEDULED APPOINTMENTS**

1. Click on the 'Audit' icon at the top of the Supervisory Appointment Tools (SAT) Suite site.
2. The 'Audit Parameters' will be set as follows:
  - a. StaPc: (Select your facility number)
  - b. Service Group: (Select Service Group to be audited)
  - c. Supervisor Group: (Select appropriate Supervisor Group)
  - d. Scheduler: (Select Scheduler name)
  - e. Audit Type: (Select 'Custom' – when 'Custom' is selected, additional fields appear.)
  - f. Sample Size (1-25): *caution, the number of audits that you enter will have to be completed before you can move on. Example: if you enter in 100 at one time, you will have to complete 100 audits before you can exit out of the audit program. Suggestion is to do no more than 5 at a time.*
  - g. Non-Clinic Count Flags: ('yes' or 'no' depending on the scheduler and the type of clinics that the appointments are scheduled into.)
  - h. Start Date: (Enter the first day of the quarter)
  - i. End Date: (Enter the last day of the quarter)
  - j. Sample Size: (the same number you entered at the first 'Sample Size' will be displayed.)
  - k. Desired Date Different From Actual: (Enter -9999 and 9999)
3. Click the 'Submit' button. This will open a new window and show you the first appointment randomly selected to be audited.
4. In Appointment management, select the appropriate patient appointment to be audited by typing "ep" (expand entry) into the VistA appointment management screen, then type the number of the appointment you want to audit and press "ENTER".
5. In the Appointment Demographics screen, make sure that the OTHER field was entered correctly by the scheduler (i.e., reason for appointment, desired date, or any other information required by your section), then press "ENTER" again.
6. This screen, the Appointment Event Log, will show you the day the appointment was made, if the appointment was cancelled by patient, or if it was cancelled by a clinic. Press "ENTER" again.
7. The next screen, Clinic Wait Time Information, will show you the desired date that was entered by the scheduler and whether the appointment was marked by the scheduler as "NEXT AVAILABLE" or "NOT NEXT AVAILABLE."
8. Check for appointment scheduling errors. Select the appropriate audit result in the 'Audit Result' drop down menu.
9. Click 'Submit Audit' and continue until all appointments have been audited.