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Job Title: Practice Manager Reports: Doctor responsible for Human Resources Purpose of work: Performs several aspects of [your clinic name] report, including payroll, accounting supervision, assistance to physicians in developing and maintaining the budget, financial reporting, banking, cash flow etc. It serves as the main point of contact between eight MOAs and six doctors on matters relating to payment, benefits and hours worked and human resources decision-making, in line with policies put in place by doctors. Coordination of the moas performance review process. Coordination of staff and recruitment of new doctors, orientation and training. Recommendation, planning and implementation of revisions to the remuneration structure. Ensuring compliance with applicable human resources files. Development, recommendation approval and maintenance of staff hours and holiday plans. Advising doctors on finance, human resources and other administrative matters. Other related obligations as appropriate. Hours and location: Works up to 20 hours a week at [the name of your clinic] and/or her own place of business. It is also available by email and phone to staff to answer questions during clinic hours (measly allocate 1 hour a week to deal with out-of-office communication). Medical Office Assistant Reports: Doctor Responsible for Human Resources (rotates every six months) Purpose of the job: To support [your clinic name] doctors in clinic surgeries and in providing patient care. All work should be delivered to the standards and procedures set out in [your clinic name] and procedure manual or otherwise required by [YOUR CLINIC NAME] doctors. Duties: Coordinates patient care through clinic-check in, preparation, escorts to the examination room, and preparation of a test or treatment room for the next patient. It answers questions by phone and in a personally useful, respectful and effective way. He runs faxes. It maintains the plan of planned activities and manages withdrawals. It stores an electronic health record, including a patient graph. Ensures that the test rooms are properly stocked and ensures that they are ready for the next patient. Ensures patient confidentiality. Cleans and sterilizes materials and documents the findings of the patient's record. It carries out multi-payer billing procedures (SMEs, ICBC, WCB, etc.) and collects and collects uninsured fees where necessary. Orders and receives kitchens, offices and medical supplies. Where appropriate, it shall carry out all other related clinical, administrative or specific tasks. General skills and abilities: works well in a team environment. Good written and verbal communication skills. Computer knowledge, including Internet usage, electronic health record, and MS Office software. accuracy. He can solve problems. He's got good judgment. Clinical skills and competences: skills: and apply the bpTRU monitor. Prepare patients and set up a rehearsal room for complete physical, including pap set up. Prepare children's patients for testing in the well. Use and remove the Holter monitor, explain Holter's diary to patients, and send Holter to Westheart Cardiology. Accurately measure the patient's height and weight (including infants). Control the autoclave. Perform and record results for various laboratory tests performed at the clinic, such as urine analysis and occult stool tests. Basic certificate of heart life support. Show a sample list of delivery locations [sample] Download sample employee performance plan form > List of delivery locations [sample] Download sample list of delivery locations > Uninsure plan fees Access to the most current physicians bc fee guidelines. Current since April 2014. This table is a demonstration of the schedule of fees used by a clinic that does not use bcma fee guidelines. Insert the clinic rate and add lines for additional fee entries. Fee Plan for Uninjured Services Clinic Standard Rate Clinical Services Complete Physical Exam Office Visit Missed Appointments - Regular Appointments - Subcutaneous or Muscular (Injection Only) Forms and Notes Insurance Form - Long Insurance Form - Short Occupational Fitness Assessment Form (Outside Canada Post) Other different forms or notes of physical fitness exams for schools, camps, etc. Sick note Medical Examination and Report – Patient General Insurance Exam Medical Legal Simple Form/Letter on Patient's Condition Medico-Legal Letter/Form (Short, Factual) Medico-Legal Report (includes Symptoms, History, Records, Diagnosis, Treatment, results, and current condition) Review of EMR records (15 min) Copying per page (first 10 pages) Copying to the page (each additional page of 10 pages) Telephone advice (in 15 minutes) Renewal of the prescription by telephone (on call) General form of explicit consent [sample] This brief form must be completed and signed before providing health information to any third party, including other doctors, relatives of health care professionals (physiotherapists, chiropractors, etc.) and for all medical-legal requirements. All points in brackets should be adjusted for the purposes of the application. DATE: I, (patient name) consent (doctor's name) disclosure of relevant parts or summary of my medical record (to whom published) in order (add purpose). (Patient signature) [NAME OF YOUR CLINIC] EMR Contingency Downtime Plan Coordinator (DTC): Name the person/group responsible for managing these plans. Storage location: A list of physical or digital location copies of this plan. Effective Date: List the date this plan was found by Next Review Date: A list of the dates on which this schedule should undergo review and update. Purpose and scope This contingency plan is used to maintain continuity of and business functions before, during, after the emr downtime event occurs and fits into the clinic's overarching emergency plan. Once completed, this checklist will help ensure access to patient information in the EMR for pre-booked patients, identify downtime operations processes and develop plans for post-downtime data entry to maintain continuity of patient records in the EMR. Steps to track The following steps are listed in this document: Identify the main tasks for downtime Identify any contacts that may be required for downtime Check the Contingency Checklist For contingency times Complete contingency plan for each business critical function Frequently check copy of EMR Business Continuity (BCC) and record this checklist for all downtime events Step 1: Identify and mark the tasks listed below. the following points in mind: Each Member will have to know its role and responsibilities with regard to the plan, including who will coordinate and support downtime activities before, during and after they occur. Each Member assigned to a coordination or support task shall be familiar with primary technology, administration and clinical workflow processes that require protection during short- or long-term downtime events. Role Name/Position Contact Information DTC Alternative DTC Technical Representative (s) (Local IT) Step 2: Identify downtime contacts for all clinical and IT service providers Role Contact Information EMR Supplier Helpdesk Utility Company e.g. BC Hydro TELUS Landlord Gas Company eg FortisBC Life Labs Hospital Imaging Services Hospital Imaging Serv Continuity Copy (BCC) provides a read-only copy of the patient's cumulative profile that is scheduled to meet with a doctor within a few days. BCC provide nightly patient removal charts for patients who have scheduled an appointment within a specified number of days from the current day. Patient charts are downloaded in an encrypted format that can only be opened using the clinic's EMR application. It is recommended that you set a monthly reminder to review the contingency plan. After reviewing the checklist, the DTC should carry out all necessary reviews and inform all clinic staff and doctors. Step 4: The following table is a suggested way to record unforeseen events for each major business function, outlining what they will do as an emergency option. The clinic is recommended to review its business and ensure that these functions are available manually if the clinic could not access their EMR application (e.g. laboratory requisition manually fill in the doctor). If necessary, attach all other documents, templates or checklists to support your DTC plan to help with future revisions including (e.g. Community emergency plans, a list of people you can contact when the clinic is down, etc.). These important business features and related actions listed in action #4 in the section titled Downtime Immediate Response Critical Business Features Actions (below are options/suggestions only) Access to BCC If part of the downtime solution is a wireless Internet connection to EMR applications through this Receive solution New Laboratory and DI Departments Alert Lab and DI to Fax or Call Urgent Results Patient Access Schedule Use a blank paper schedule and manually enroll patient information in the Schedule Blank meeting forms and billing slips should be available as a temporary medical record To begin the manual process for patient phone calls. Patients can be called back once the system is back to assign appointment times Access forms for the patient and health care providers Paper forms should be available in the field of patient care, where documentation takes place Copies or information provided on the Encounter form to enter the EMR after downtime Practice should ensure prescription pads are available for downtime event Kópi or information provided on the Encounter form to enter the EMR after downtime Phone dictation may be available Manual recording devices can be used if no alternative, use paper recording system For stat orders, the test can be ordered, made and documented on paper forms Made copies or information provided in the Encounter form to enter emr after downtime Forms should be available for billing code documents once the system in batch day-to-day step 5: Frequently check the BCC and DTC checklist: Check BCC monthly (e.g. it's downloading the right amount of data) Practice Fire Drill (testing plan) at least once a year and run a simulated test to assess readiness review DTC checklist as needed (i.e. whenever there are new operational or personnel changes affecting the coordination of the plan) Step 6: Record all downtime events In case you need a link back to downtime specifics it is highly recommended to document key points related to downtime. (E.g. power outage, loss of access to your EMR, Frequent intermittent intrusion of access to your EMR, occasional but regular disruptions to access to your EMR, local area network, or computer failures) DTC Ticket # Start Date / Time Details / Status (timeline estimate) End date / Downtime Standby checklist Pre-downtime (Before downtime event occurs), e.g. Date Last Completed Action 1 – If your clinic primarily pre-book visits patients, create a monthly task that reminds you to check the BCC and report any deficiencies to your EMR supplier. Action 2 - Review the DTC schedule and checklist annually, making any necessary changes, and inform all clinic staff and physicians of any changes. Action 3 - Keep a copy of the DTC plan and checklist away from your computer. Action 4 - Check the status and location of backups of manual consumables - Rx pads, day sheets, meeting sheets, etc., downtime immediate response (During downtime event) Completed Action 1 - Assess downtime event and report your situation to your EMR vendor. Get a ticket # as needed. Estimate when the problem will be resolved. Request a timeline of the call for status updates. Record the start time and details of the downtime event in a simple log. Action 2 – Alert all clinic staff and physicians to downtime events and ongoing conditions. Action 4 – Implement any critical continuity of care or administrative working practices in order to maintain patient safety and business continuity. (according to step 4) Action 5 — Coordination of operational contingency actions. For example, use Bcc or any manual processes, if applicable. Post-Downtime (Recovery Stage) Completed Action 1 – Notify all employees, physicians and external stakeholders that you are restoring normal operation. Action 2 - Coordinate the recovery, sorting, and re-entry of all paper information collected during a downtime event. Action 3 – In your journal, record your downtime event. Action 3 – In your journal, record your downtime event. Action 3 – In your journal, record your downtime event. Action 3 – In your journal, record your downtime event. Action 3 – In your journal, record your downtime event. (Before downtime event occurs), e.g. monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients, create a monthly date last completed action 1 – If your clinic primarily pre-book visits to patients. changes, and inform all clinic staff and physicians of any changes. Action 3 - Keep a copy of the DTC plan and checklist away from your computer. Action 4 - Check the status and location of backups of manual consumables - Rx pads, day sheets, meeting sheets, etc., downtime immediate response (During downtime event) Completed Action 1 - Assess downtime event and report your situation to your EMR vendor. Get a ticket # as needed. Estimate when the problem will be resolved. Request a timeline of the call for status updates. Record the start time and details of the downtime event in a simple log. Action 2 - all clinic staff and physicians on downtime events and ongoing condition. Action 3 - Communication to external stakeholders, local IT, IT, service providers (e.g. Action 4 - Implement any critical continuity of care or administrative working practices in order to maintain patient safety and business continuity. (according to step 4) Action 5 -Coordination of operational contingency actions. For example, use Bcc or any manual processes, if applicable. Post-Downtime (Recovery Stage) Completed Action 1 – Notify all employees, physicians and external stakeholders that you are restoring normal operation. Action 2 - Coordinate the recovery, sorting, and reentry of all paper information collected during a downtime event. Action 3 – In your journal, record your downtime 'End Time' with event details and find out how effectively your downtime contingency plan worked. EMR Quick Guide and Shortcuts This section is to provide useful information about your EMR clinic system. A quick 2-3 page reference guide for the most important and well used aspect of EMR is useful here. You can also refer to a more thorough EMR guide, if available. Some useful ideas that include are: keyboard shortcuts instructions for frequently used processes (new patients, making appointments, etc.) messages/email/faxes, etc. ordering billing tests cheatsheet explanation toolbar for you EMR system patient code of conduct [example] [YOUR CLINIC NAME] takes pride in providing a professional environment. To assist in this endeavor, it asks staff, doctors and patients to adhere to this code of conduct. Policy components: Mutual respect [NAME OF YOUR CLINIC] respects the time, rights and privacy of your patients to recognise and respect the time, rights and privacy of both doctors and staff. At the time of the meeting in general, [YOUR CLINIC NAME] tries to see patients on time. To ensure that this policy can apply to all patients, patients, patients, staff and physicians are asked to be timely and ready for appointments. Harassment Free Environment [NAME OF YOUR CLINIC] provides an environment for your patients and staff. Absolutely no conduct considered harassment will be tolerated at the clinic by anyone. This includes, but is not limited to, offensive jokes, signs, words, cartoons, images, posters, email, jokes or statements, pranks, intimidation, physical assault. Missed appointment fees [YOUR CLINIC NAME] require 24 hours in advance notice of cancellation of the appointment. We'll charge you for missed appointments. Our fee is [\$x] Opening and closing checklist Start of day Unlock door Disarm alarm Allocate exam room doctors Turn on music to Start coffee maker Unload dishwasher Daily Check mail Check vaccine delivery Empty 'Out' baskets in doctor's office boxes (11am) and 4pm) Patient reminder Create MSP claims submission End of day Room Check - Empty patients whether exam rooms stored Ensure Moa and rehearsal room tables are clean. (No patient information, Rx pads, etc.) Charts pulled the next day Chart room locked Check, whether narcotics locked Music off Confirm oncall doctor with paging service Phones set to 'Night' Lights off Alarm set lock door dishwasher to test room Prep Clear counters, sinks, beds and floors Check your computer checked out cloth dress in laundry Change paper on beds Ensure tissue towel delivery is stored Weekly (Friday) Ensure emergency kits stocked with PAP Partners recalls [your clinic NAME] This chapter describes how the clinic works with other stakeholder groups to be defined in each practice. This is an example. Visit Specialists Facility Conditions of Use Specialists Reservations Appointment Health Office Conditions of Work Total Hospice Conditions of Work Total Hospice Referral Procedures Physiotherapists Names and conditions of work associates Conditions of work with midwives Names and conditions of work Total Pharmacies Names and conditions of co-pilorimage work

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