

Alabama Board of Medical Examiners

Quality Assurance for Collaborative and Registration Agreements with Certified Registered Nurse Midwives, Certified Registered Nurse Practitioners, and Physician Assistants



Quality Assurance

Each collaborative and supervisory agreement must specify a plan for quality assurance management with defined quality outcome measures for evaluation of the clinical practice of the Advanced Practice Provider (APP).

The physician and APP must establish the criteria by which the physician will be reviewing the records of the APP.

There is no set percentage or number of patient records that should be reviewed, but it must be a meaningful sample of patients the APP has seen.



QA should be a “look back”

At the end of a quarter, the physician and APP decide what criteria to review, and a meaningful sample of the APP's patient records for that quarter is chosen.



Who retrieves the data?

A person other than the physician or APP, who can knowledgeably review the records for the chosen criteria, may formulate a report for the physician and APP to discuss, along with any patient records that may need improvement.



Documentation

The physician and APP must document their QA reviews and cite any findings, conclusions, and recommendations for change. There must be a patient identifier on the documented QA reviews.

Meaningful Sample

- Review a meaningful sample of charts against selected outcome indicators with documentation using a patient identifier.

Readily Retrievable

- There should be a quarterly meeting to review the QA data.
- QA data should be readily retrievable.

Data

- Data can be pulled by anyone with an understanding of the criteria.

Chart Review is not QA

- Chart review does not constitute QA review.
- Review of charts is a clinical decision between practitioners.
- The Board's rules do not require a specific percentage of charts to be reviewed by the supervising or collaborating physician.

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