

The BJH Journey to the Paperless Record

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Benefits of an EHR

- Saves time for clinicians in accessing information
- Provides efficiency when managing patient information
- Enables Workflow changes to routine processes.
- Provides complete access to patient information
- Simplifies patient care
- Drives rapid physician utilization
- Supports regulatory changes & increasing documentation
- Provides basis for decision support
- Eliminates costly paper storage

EHR PROGRESSION

Paper → Hybrid → Electronic

The transformation process will cover three states:

- The current state of the paper health record
- The transition state, a hybrid system where both paper health records and electronic health records exist
- The future state of a fully electronic health record

Current functions to become streamlined, reinvented or discarded:

- Analysis
- Abstracting
- Assembly
- Vital records
- Coding
- Data quality and integrity
- Data reporting
- Denial Management
- Documentation training
- Forms design
- Chart completion
- MPI maintenance
- Release of information
- Charge master maintenance
- Revenue cycle management

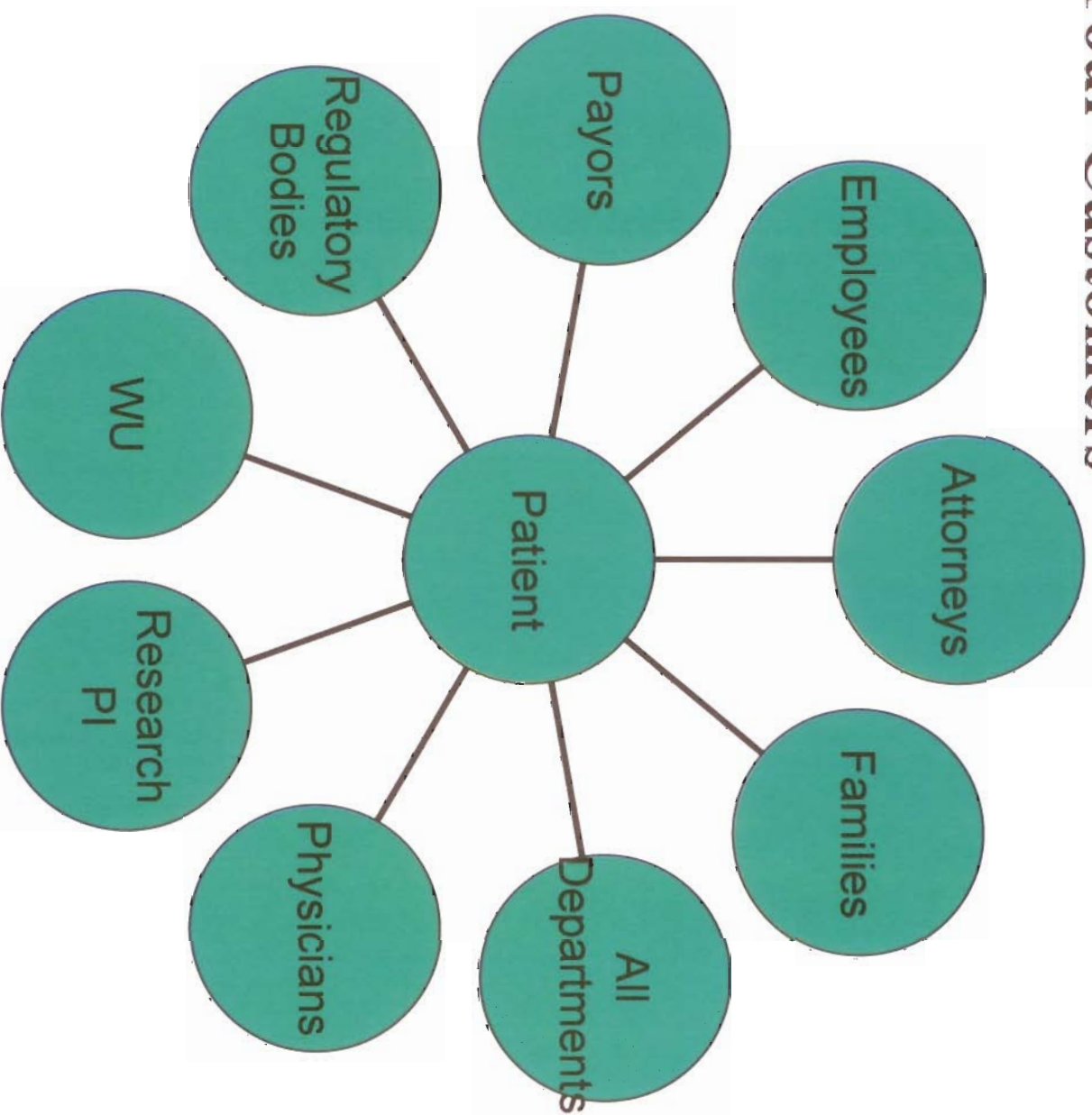
EHR PROGRESSION

- **5 major issues of the EHR:**
 - Retention and Durability
 - Storage
 - Signature
 - Accuracy of Entries
 - Transmission Integrity

Driving Forces

- Quality and Safety Initiatives
 - Increasing Med errors
 - 44,000-98,000 pts die from med errors yearly
 - Med errors are the 8th leading cause of death
- Frustrated Clinicians
- Increasing regulatory demands on accessible and timely, complete patient information
- New technologies available
- Need for remote access- remote coders, home based physicians, changing workforce

Know Your Customers



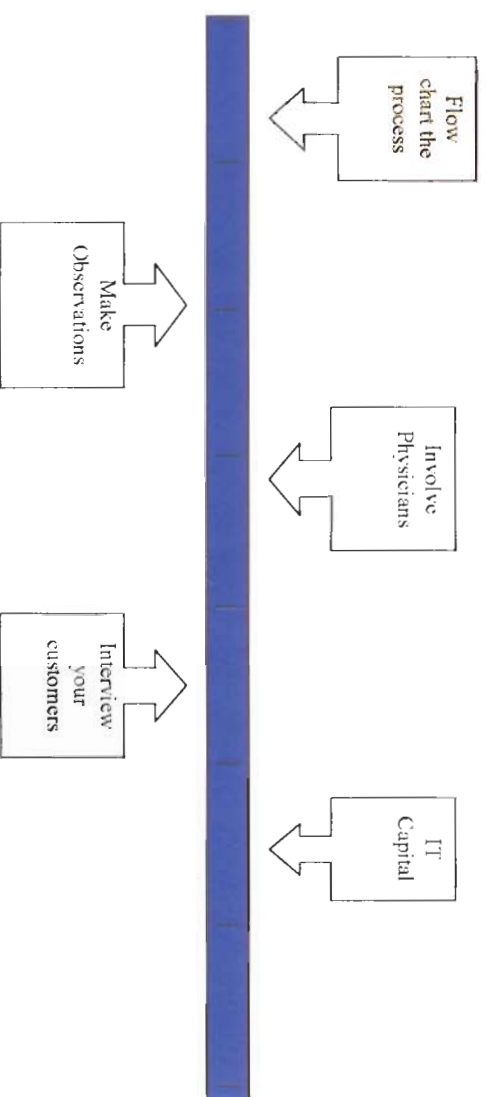
Data Sources

- MD Offices
- Clinics
- Ambulatory Care Centers
- Inpatients
- Outpatients
- Emergency Room



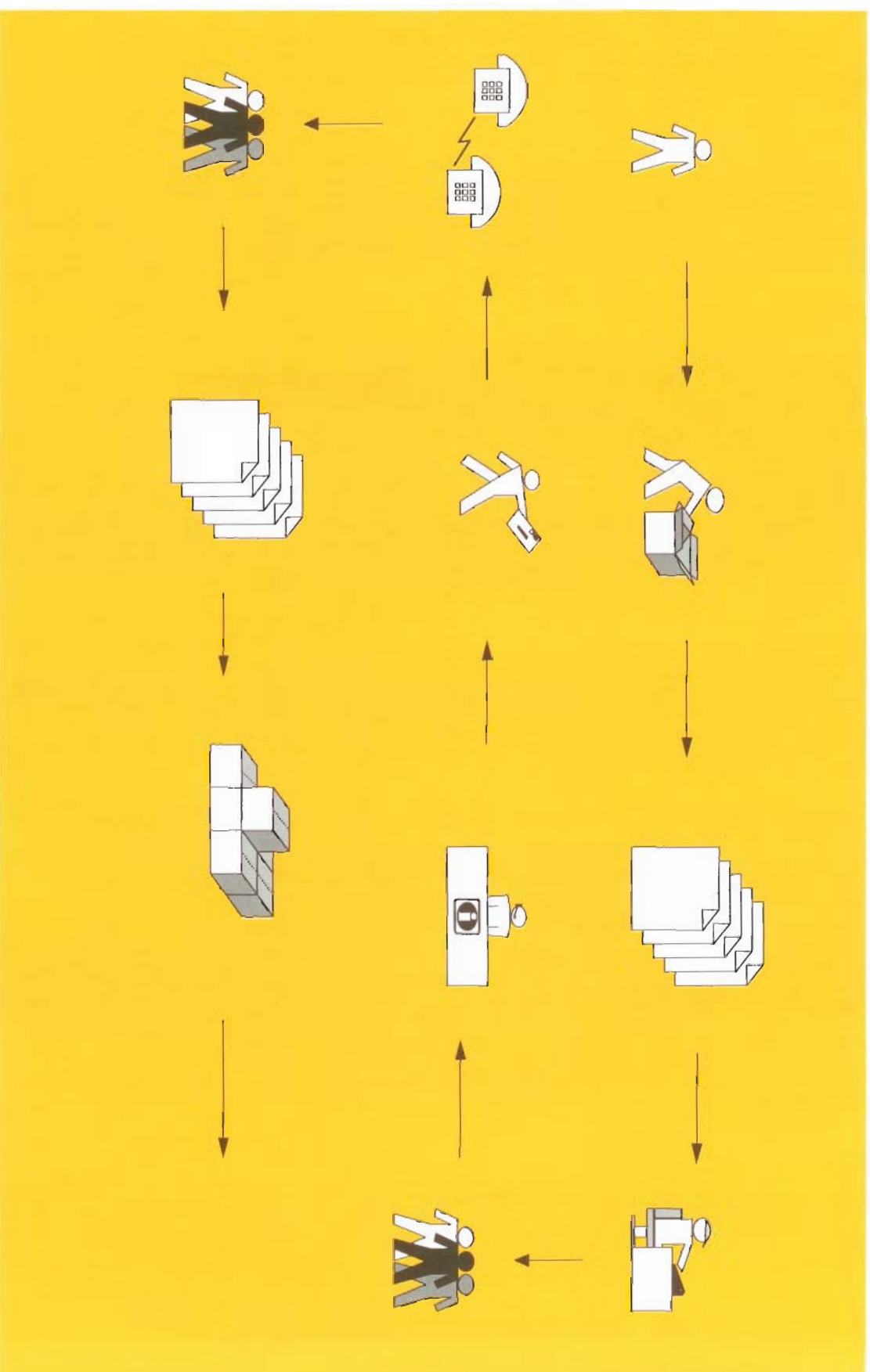
How Do You Start?

- Flow Chart the Process
- Observations
- Involve Physicians
- Interview your customers
- IT Capital



Process Flow:

UNDERSTANDING WHAT YOU HAVE



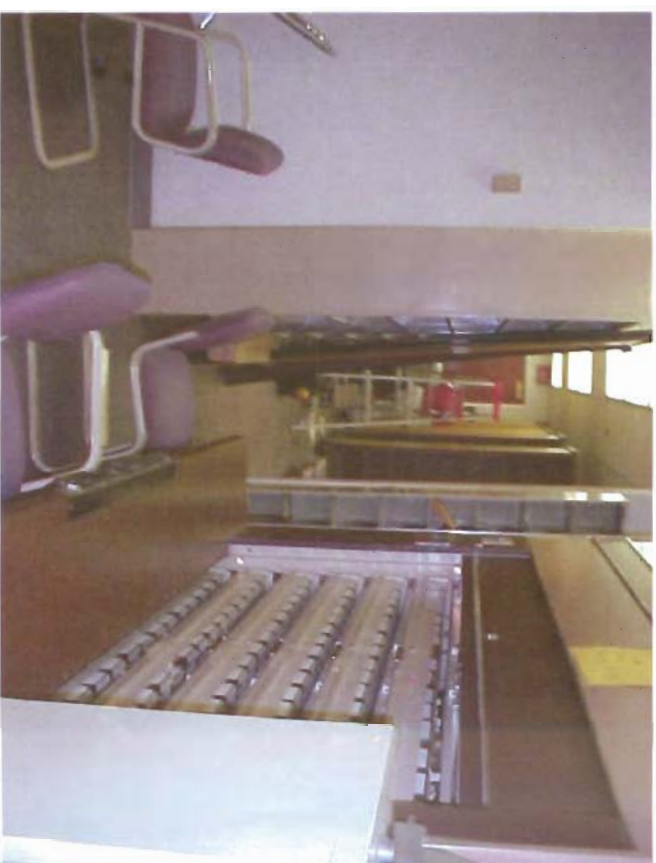
Observations: Paper Everywhere



Observations: Outdated Equipment

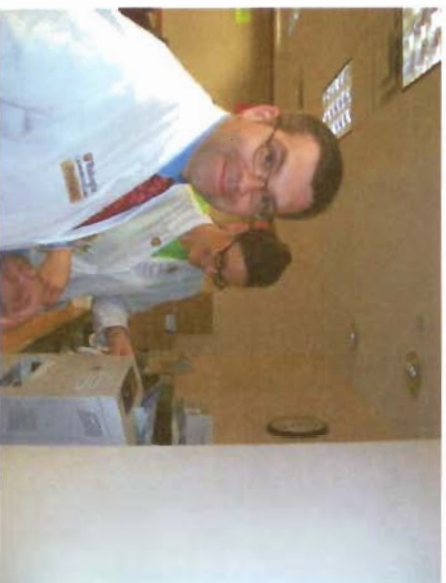


**Orange
Chart Files**



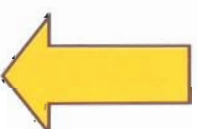
**MICROFILM
Cabinets**

Physician Involvement



Change Management

- Hardcopy vs Online View
- “The Need to Know”
- Research vs Clinical views
- HIM vs MD Views
- Downtime creates an unsafe clinical world
- Workflow- process changes



Hardware



- Scanners



- PC's at desk

- Wireless Carts

- PC for Physician

- Wall units

- PC for Care giver

- PDA's

- PC for Case Coordinator

- Tablets



- Printers

- PC's in room

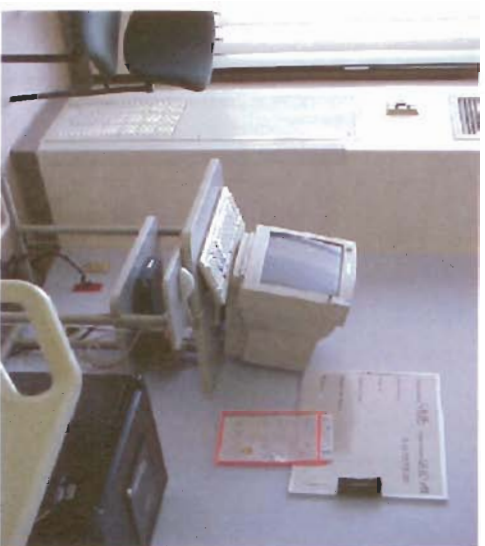
- Carts with Drawers



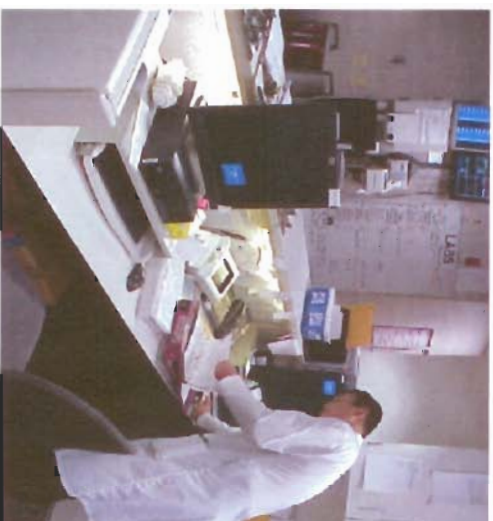
Device Strategy



Wall Unit



Bedside Computer



Central Station



Wireless cart

Caring for the Cart

How to Care for your Wireless Cart



- When not in use, keep the wireless cart plugged into one of the red outlets so that it stays charged. Recharging a wireless cart can take up to 8 hours.



QUESTIONS?

Call 362-4700 (Help Desk)

Plugging in your Wireless Cart

- To plug in the wireless cart, pull out the cord and ensure the tension is set so that it is not trying to retract.



- To set the tension, quickly pull the cord out about 3 feet and release. If set properly, the cord should not retract on its own. Then plug it in. To retract the cord, simply reverse the process.



Obstacles/Challenges

- Costs
- No identified STANDARDS
- Increasing regulatory requirements for documentation
- Increasing medication errors
- No “one-size-fits-all” vendor product
- Discreet data versus text images
- Equipment/access needs
- Scanning solutions
- Disconnect with external agencies in providing records (online vs Manual)
- HIPAA Security



READINESS FOR CHANGE

“Successful change leaders set the direction, get the right people involved, get the vision right, and motivate people throughout the organization to overcome their inertia or their fears of taking action.”

-John Kotter

BJH: Path To EHR

