Implementing Point of Care Scanning to Achieve HIMSS Stage 7 Certification

Clinical Informatics

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Background

- In 2015, the network transitioned inpatient and ambulatory care areas to one fully-integrated EHR
- Clinical informatics staff noted an opportunity to advance care delivery by implementing point-of-care (POC) scanning of paper records into the EHR
- A near paperless healthcare environment uses technology to
 - Optimize patient outcomes
 - Share information accurately & easily
 - Promote safety and efficiency (Nathan, 2015)
- Project goals:
 - Adopt best practice to manage patient care in a modern digital record
 - Attain highest level on the Electronic Medical Record Adoption Model (EMRAM)
 - Seek Healthcare Information and Management Systems Society (HIMSS) 7 certification

Objective

Detail pragmatic strategies to implement POC scanning as a tactic in the journey to achieve HIMSS Stage 7 certification.



Methods

• Gather interdisciplinary team members: health information management (HIM), clinical informatics (CI), nursing directors, nurse educators, administrative, & information technology (IT) staff

 Discuss project materials and processes Identify responsibilities

Map educational and roll-out strategies

Deploy and test equipment

• Educate staff members (electronic platforms, guidelines, vendor on-site education)

Provide at-your-fingertip support

Troubleshoot in real-time/evaluate processes

Revise tactics as needed

Outcomes

- Clinically relevant information was easily accessible within 24 hours of creation
- May, 2017 site visit and HIMSS Stage 7 designation

Key Tools for Success

Plan

- Dashboards & analytics in care settings
- Predictive clinical scoring
- Monthly HIM analytical reporting
- Health information exchange
- Data sharing with community care providers

Lessons Learned

- Transitioning to a paperless environment was a cultural change
- A few forms needed to remain at the bedside
- Communication to all disciplines is crucial

Conclusion

Modern software tools, embedded clinical knowledge and teams experienced in defining and leading change can create significant improvements in clinical workflow optimizing available healthcare technology.

References:

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