Seven Opportunities for Stronger Info Governance
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Conflict of Interest

Rita Bowen, MA, RHIA, CHPS, SSGB and Maria A. Muscarella, RHIA

Have no real or apparent conflicts of interest to report.
Learning Objectives

• Analyze recent industry reports, research findings and real-world provider experiences related to information governance practices in the healthcare industry including AHIMA's core model for health information governance and stewardship

• Identify twelve steps to begin an information governance program within healthcare provider organizations

• Recognize seven new ways to bolster information integrity including stronger data dictionaries, data mapping, problem identification and information use across locations and care teams

• Illustrate the ramifications of poor quality data on provider trust, patient care, reimbursement, quality, safety and e-discovery compliance.

• Recognize the steps Newark Beth Israel Medical Center's process improvement teams took to incorporate information governance initiatives throughout their EHR implementation process.
Overview

• Understanding Information Governance (IG)
• Value of Information Today/Understanding Industry Reports
• Twelve Steps to begin an IG program
• Seven Ways to Bolster Information Integrity
• Risks of Miss-Managed Information
• Recommendations on Beginning an IG Program
• Opportunities for Information Governance
• Key Points to Achieve Information Governance
Values of Information/Data Today

• Benefits of a strong information governance program:
  • Greater staff efficiency
  • Better quality and patient safety
  • Return on investment for EHRs
  • Identification of additional data opportunities
    • i.e., Registry Information
  • Others
Information Governance Today

• Benchmarking Survey Highlights
  • Information governance programs are less prevalent and less mature in healthcare organizations than is warranted
  • Most organizations have not yet established a comprehensive strategy for information governance
  • The information governance framework and its foundational components call for strengthening and expansion
  • Information lifecycle management practices related to core functions require improvement
## Benchmarking Survey Results

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<td>Ability to preserve only relevant information in response to a legal hold regardless of information type</td>
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Twelve Steps to begin an IG Program

1. Create a vision to drive change
2. Obtain buy in from organization management and compliance
3. Convene a multidisciplinary steering committee
4. Consider all functions of the information life cycle
5. Conduct an assessment
6. Use the transformational HIM Model
7. Identify the data flow
8. Use what you learn from the current state assessments to bolster conversations about the need to change
9. Leverage Improvements aligned with changes already underway
10. Develop measures and metrics
11. Develop a time frame
12. Take an incremental approach
Connect the Dots – Seven Ways to Bolster Information Integrity

1. Information Integrity

2. Data definitions
   - Structure for clinical content (including smart text)
   - Quality check points
   - Auditing processes
   - Consistent data models
Risks of Information: Miss-Management To:

• Patient

• Clinician

• Bottom line

• Population Health
The Challenge

• Transitioning from a Paper Record to a Hybrid and/or an full EMR record

• Identifying “new” issues

• Information Governance – Establishing an awareness on the importance and purpose of Information Governance

• Implementing an Information Governance Program
Pros & Cons of an EMR

Pros
• Legibility

Cons
• Legibility
New Perspectives

- True
  - Hospital-wide processes change with implementation of EMR
  - Workflow revisions required
  - P&Ps must be updated to reflect the “electronic world”

- False
  - The EMR will solve all of the problems that were present in the “Paper record world”
    - Delinquent Records
    - Access to information / data
    - Quality documentation
    - Patient Safety
Loss of Control – Resulting Issues

- Standardized, approved forms
  - Personalized templates
- Free text
- Incorrect Patient / Account selection
- Copy & Paste
- Workflow
- Data entry
- Entry completion, i.e., saved but not signed
Loss of Control – Resulting Issues

• Drop down data selection
  • Phone orders

• Records doubling, tripling in size

• Data Import - Duplicate data throughout the record, i.e., vital signs, lab results, radiology, etc.

• Multiple interfaces
System Level Information Governance

Primary responsibilities:

• Ensure systems are functioning

• Establish a system-wide Standardization & Change Control committee

• Update systems based upon regulations and user issues/recommendations

• Oversee “User specific” system-level teams
Information Governance Challenges

- Leadership Buy-in/Support
- Proof of Need for Information Governance
- Education – Multi-disciplinary
- Planning
- Monitoring
- Enforcement
- Improvement measurement
IG - Where to Begin

• Build awareness on the importance of IG and the direct impact of IG on the advancement of organizational goals

• Illustrate how IG supports top goals for the facility

• Designate senior sponsorship for an IG program

• Identify a strong, enthusiastic, well-respected champion

AHIMA Benchmarking White Paper: 2014 Information Governance in Healthcare
Planning

• Data Collection

• Begin with traditional Clinical Pertinence tools to assess the quality and pertinence of the documentation

• Collate all data findings into a comprehensive document which provides:
  • A current state assessment
  • Its impact on the organization-wide goals
  • Plan for IG Program
Implementation of The IG Program

• HIM – Data Steward

• Multi-Disciplinary team

• Develop an IG Program charter
  • Mission statement
  • IG Program Purpose
  • Goals
    • Data monitoring & improvement
    • P&P development
    • Enforcement

• Marketing
Monitoring

• Education

• Revisions within the EMR to facilitate improvement in documentation:
  • Standardized templates
  • Screen changes

• Follow-up reviews/reports to measure improvement or lack thereof

• Trend issues
  • Specific clinicians / Users
  • System
Findings

- Copy and Paste
- Selection of Incorrect Patient Account Number
- Working in an “Electronic World” with a “Paper Mentality”
- Hospital specific rules for workflow in the EMR
  - Countersignatures
- EMR data dictionary
  - Discharge Summary vs. Discharge Process
- User readiness
Reporting Structure

- Performance Improvement Committee
- Executive Sponsor
- Medical Staff Leadership
- Senior Leadership
Lessons Learned

• Learning never ends

• HIM must be INVOLVED from the beginning
  • Scope of knowledge regarding documentation and workflow must be present from inception

• You don’t know what you don’t know until it happens

• The oversight of EMR information differs significantly from the paper record
Three Key Points

• To achieve the full benefits of information governance, AHIMA believes the following must be addressed:

1. An accountability framework and decision rights to ensure the effective use of information, enterprise-wide

2. The defined processes, skills, and tools to manage information, throughout its entire lifecycle, as a critical business asset

3. The essential standards, rules, and guidelines for functioning in an increasingly electronic environment
Conclusions

• This is an ongoing work in progress

• Extraordinary opportunity for non-clinicians to impact patient safety and quality

• Information Governance provides a vehicle for all members of the team to participate in data integrity and improvement

• It is not easy – but it is most definitely worth the efforts involved!
Questions
References


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