Paper and Electronic Forms Management
Resource Patient Management System

RPMS | EHR
Electronic Health Record

Superior Health Information Management
Now and for the Future

Presenters

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Objective

- Identify best practice procedure for forms approval
- Develop a forms inventory and manage control log
- Establish a forms contingency plan
- Discuss how to manage the RPMS template inventory and log
- Perform quality monitoring of TIU templates
- Questions and Answers

Forms Program Structure

Headquarters

Area Office

Service Unit
Forms Committee/
HIM Committee
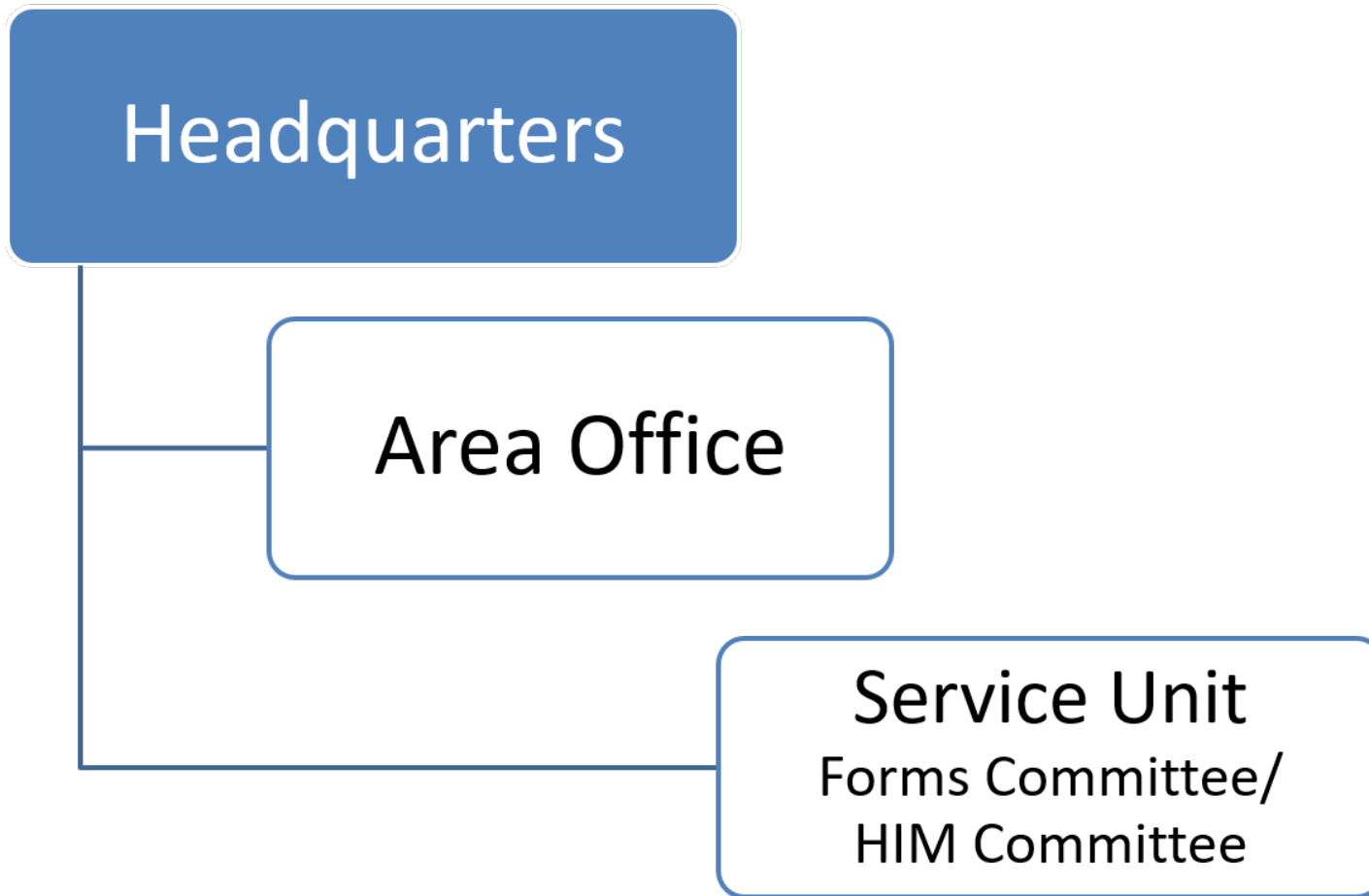
Approval Process at Headquarters

- HQ Program submit proposal to HQ Forms Manager
- Question: Did the draft form get reviewed by the Area Office and Service Units
- Form reviewed by HQ Forms Committee: HIM, Privacy, Records Management, Office General Counsel, and others
- Committee comments (if any)
- Form is assigned number and creation date – entered into form inventory log
- Form return to program for final editing – fillable and 508 compliant
- Final form filed in own folder

Approval Process at Area Office and Service Unit

- Form reviewed by appropriate offices/committee: HIM, privacy, nursing, quality, etc.

- Establish forms inventory log – use one numbering system for facility

- Each form to have a form number and version date (month and year)

- Establish a forms filing system – paper or electronic

- Use HHS Form 398 to document forms actions (creation, updates and deletions)

- Do not create own forms action record

Additional Items to Consider

- How often should forms be reviewed/updated?
- How a form may be applied for local, Area or National use?
- Which forms are considered for OMB review and approval?
- Form Design – Logos, designs or decorative artwork
- Copyright forms from external organizations
- IHS Forms Policy – Indian Health Manual, Part 5, Chapter 24

Establish a Forms Contingency Plan

- Why have a contingency plan?
  - Computer Downtime
  - Disasters/Emergency
- Types of Disasters/Emergency
  - Earthquake
  - Flood
  - Fire
  - Tornado
  - Hurricane
  - Influx of patients in ER/multiple car accident

Establish a Forms Contingency Plan (cont.)

- IHS – HIM Chapter, section Medico-legal Aspect of Health Record 3-3.12,

  Disaster Recovery Plan 3-3.12H

  Area Disaster Recovery Services 3-3.12I

  Continuity of Operations Plan 3-3.12J

  Area Incident Management Staff 3-3.12K

- Other reference: *AHIMA Disaster Planning and Recovery Toolkit*

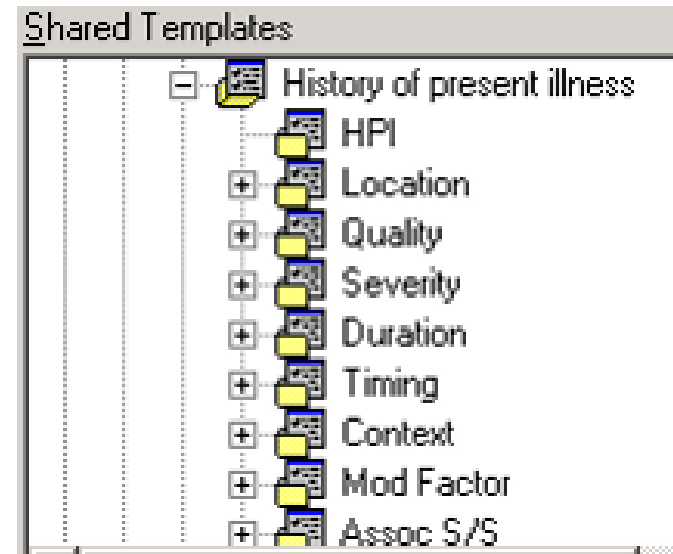# Text Integration Utility (TIU) Note Templates

- Used for collection, presentation, and organization of clinical data elements

- Tool that can be used when documenting the patient visit

- There are advantages and disadvantages

Note Template Usage

- Progress Notes
- Quick orders that have free-text fields (e.g., comments)
- Generic orders containing word processing fields
- Consult reasons for request
- Discharge summaries
- Reminder dialogs

Advantages of Note Templates

- Great tool

- Speeds up the documentation process

- Guides documentation (i.e., laterality, specificity, anatomic sites, etc.)

- Standardized data capture

- Facilitates retrieval

Shared Templates

- History of present illness
  - HPI
  - Location
  - Quality
  - Severity
  - Duration
  - Timing
  - Context
  - Mod Factor
  - Assoc S/S

Disadvantages of Note Templates

- Does not provide room for nuances
- May not always support good documentation
- Can encourage over-documentation

Appearance of Note Templates

- It is possible to create Note Templates that look good for:
- Text **entry**
- Text **output**
- It is not always possible to create a Note Template that does **both**

Note Template Design

- The following considerations should be applied:

- Test usability

- Don't include code sets (ICD-10-CM, CPT, HCPCS, etc.)

- Use patient data objects as appropriate

- Document details Example:

Testing Usability

HIM's Role in Note Template Management

- Good understanding of TIU Note Templates
- Assist with Note Template Development Requirements of indentation
  - Punctuation
  - Capitalization
  - Headers
  - Verification of spelling terms
  - Usage of abbreviations
  - Review for proper grammar and word tense
- Management of Note Templates
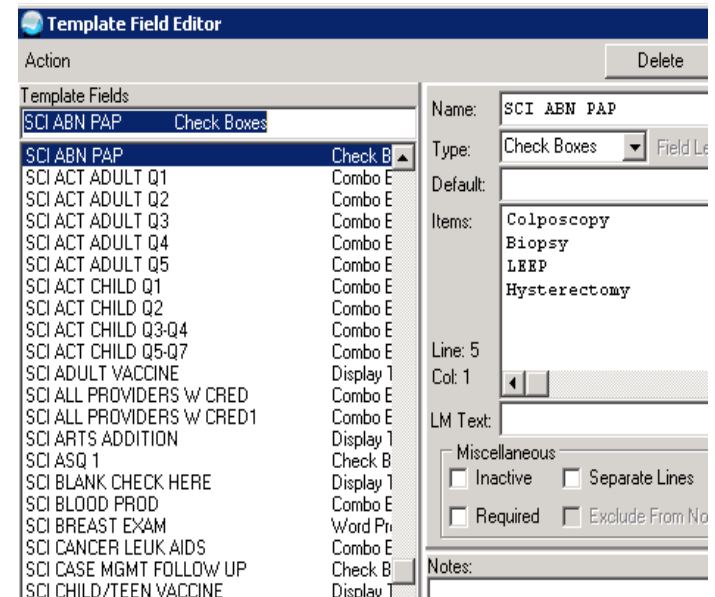
Note Template Management

Recommended practices:

- Annual review of all active note templates

- Review active note templates **after** EHR and/or TIU patch updates

- Request Form for Note Template

- Checklist for Note Template Review

Who Can Edit Shared Note Templates?

- Clinical Coordinator User Class
- Not controlled by Business Rules or RPMS Keys
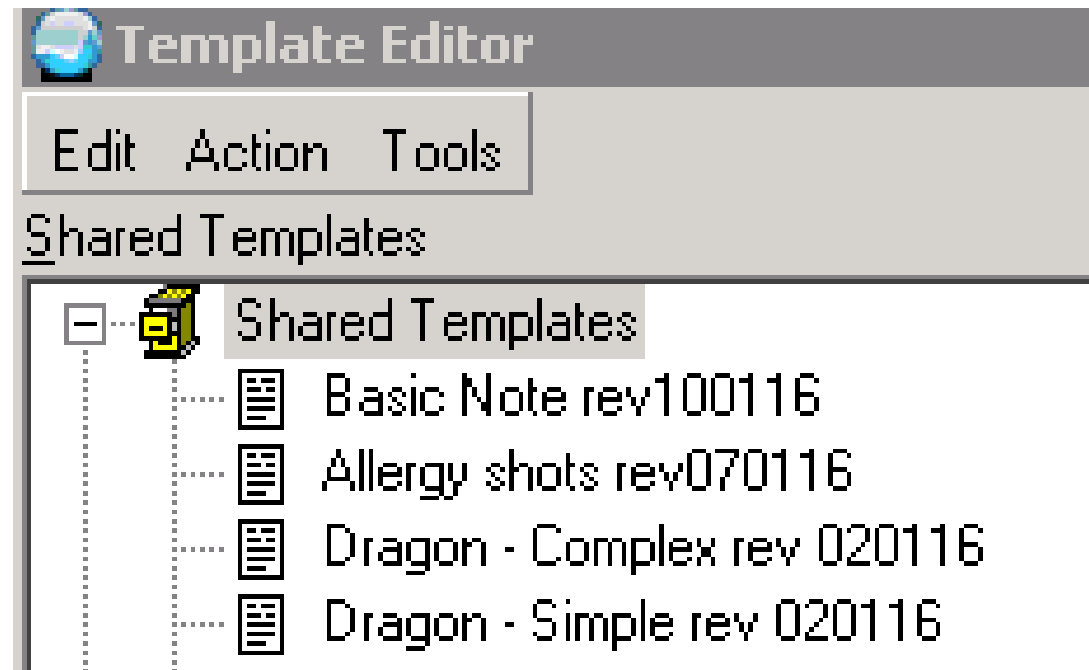
HIM's Role in Training

- Proper initial education, monitoring, and training

- Review medical records for accuracy and compliance

- Provide ongoing education based on review

Text Integration Utility (TIU) Note Titles

- Accurately label information for effective documentation and retrieval.

- Share meaningful titles across systems for future exchange of notes.

- Create searchable, retrievable, comparable, and computable data.

Standardization note titles facilitate the retrieval of specific patient information. Issues regarding note title standardization are part of the health record review function. NOTE: As nomenclature evolves, note titles will be standardized. Proliferation of note titles makes retrieval difficult and cumbersome. April 15, 2004 VHA HANDBOOK 1907.1

Document Definition Terminology

Term	Definition
Class	A group of groups which may contain one or more CLASSESS or DOCUMENT CLASSES. For example: Progress Notes, Discharge Summary, and History and Physical Examinations.
Document Class	A grouping which may contain one or more TITLES; for example: Medical Service Notes, Nursing Service Note, Surgical Service Notes.
Title	A single entity at the lowest level. For example: Endocrinology Note, OPC/Psychology, Primary Care Note, etc.
Boilerplate Text	Template-like blocks of text that use OBJECTS and embedded text to allow quick creation of notes.
Component	A reusable block of text that is predefined for a specific purpose, such as a SOAP component (Subjective, Objective, Assessment, Plan).
Object	A predefined placeholder that allows patient-specific text to be inserted into a document when a user enter a TIU document. Objects are names representing executable M code, which may be "embedded" in the Default Text of either a component or a document, to produce an effect (e.g., the Object "Patient AGE" may be involved to insert the value of the patient's age at an arbitrary location within a document).

Best Practices for Note Titles

- Keep titles short
- Single words work best
- Do not put "Note" in the title of the Note
- Each word in the title becomes listed as a key word
- Vista Imaging
- Electronic Signature Pads for patient/clinician signature

Active Note Titles and Mapping

- **RPMS Active Title Clean up Report**
  - Annual review of Active Note Titles
  - Review note titles after TIU patch updates
  - Request Form for Note Titles
- **RPMS Title Mapping Utilities Menu**
  - All current Note Titles mapped after TIU version 2.0 patch 1011 September 2014
  - **New Note Titles need to be mapped**
    - Keep it simple
      - *RPMS EHR Main Configuration Menu –TIU Menu for Medical Record –TIU Maintenance Menu
      - *LOINC: Logical Observation Identifiers Names and Codes

What else can Note Titles do…

- The Postings Button in RPMS EHR displays information when Note Titles under the Clinical Warning Document Class are used for Crisis Notes, Directive Notes and Clinical Warnings
  - List of Postings: A = Allergies Present
  - C = Crisis Note Present
  - D = Directive Note Present
  - F = Patient Record Flag Present
  - W = Clinical Warning Note Present

Favorite Note Titles

- Clinical Staff can set up favorite note titles
  - Default Note Title
  - RPMS EHR –Tools –Options –Notes – Document Titles

Best Practice at
Northern New Mexico Medical Center

1. Forms and templates need to be approved by the HIM Committee. It is noted which paper documents the template will replace on the internal service unit forms Log.

2. Process for template approval includes the HIM Director, the HIM CAC, Coding Supervisor or Clinical Document Improvement (CDI) specialist to ensure all components are present.

3. A printed copy of the template is submitted (using a DEMO patient) to the HIM Committee for review to ensure all components print up accordingly (such as radio buttons, drop down, etc.).

4. As part of the EHR Contingency Plan, each nursing unit and clinic maintain a master paper copy of templates for back up.

Resources

- How physicians can ensure context in the medical record http://www.amednews.com/article/20130819/business/130819962/5

- EHR National TIU Note Templates https://www.ihs.gov/ehr/nationaltiutemplates/

Questions & Discussion