

EMR AS A TOOL TO SUPPORT STRATEGY.

Introduction

This paper was drafted by the team that developed the **Essentia** EMR over the last two years. The purpose of this paper is to share some of the thinking behind the development and to raise some issues that we believe are critical when an organization is thinking through how they want an EMR to fit into their business strategy. Making the decision about what kind of an EMR most appropriately matches the future needs of an organization is incredibly difficult. It appears that most organizations don't really get what they had hoped for, as it is most typical that the purchasers of EMR products are dissatisfied with what they have chosen.

Our hope by writing this "white paper" is that we can shed some light on many of the complexities and choices inherent in developing, and making the most out of such a software product. The team that developed this product included development staff and the President of LWSI, along with clinical, IT, Medical Record, HIPPA, a CFO, a CEO and support staff from three Mental Health Centers from across the country. By faithfully meeting together in weekly webcast meetings and in quarterly two-day retreats, we believe that we have "bridged the gap" between software developers and the clinical needs of providers, and jointly developed a product that can greatly enhance organizational performance.

What does an EMR entail?

The term EMR (Electronic Medical Record) or EHR (Electronic Health Record) is most often used in a rather non-specific manner. Use of the term would seem to imply that there is a set of specified functions and capabilities that a given piece of software would need to contain to be labeled an EMR. Yet, this is not the case. EMR products vary widely and therefore when a provider considers the purchase of this type of software, it is imperative that the provider carefully consider the functionality desired by the provider organization. For many organizations, the selection of an EMR product is one of the most critical decisions it can make, as the tool can either strongly support or hinder the provider's strategic initiatives.

Below is a non-exhaustive list of capabilities that EMR products may or may not contain. These capabilities were the kind of issues that the Essentia development team wrestled with as the Essentia EMR was crafted. Our goal at the outset was to develop a state of the art product that could be used to greatly enhance the effectiveness of providers, and provide accountability and cost savings at every level of our agencies.

Related to clinical information, all EMR products provide at least some of the following benefits. Highly sophisticated products provide most, if not all of these functions. As an organization clarifies the benefits they desire from an EMR, the following functions should be considered.

Our Strategy

The goal at the outset was to develop a state of the art product that could accomplish several overarching goals. Our strategy included development of an Electronic Medical Record that could:

- *Be used to greatly enhance the effectiveness of providers through greater access to information*
- *Improve treatment effectiveness through use of technological aid in assessment, diagnostic, and treatment planning processes*
- *Improve documentation while at the same time increasing efficiency in completing the required documentation*
- *Provide a clear audit trail that links treatment needs and services with medical necessity and billing*
- *Accomplish these overarching goals in an attractive, user friendly format*

The capabilities listed below are a non-exhaustive list of features that were the kind of capabilities the development team sought to produce as the **Essentia** EMR was crafted. We believe we have made advancement toward accomplishing these goals through an Electronic Medical Record that will:

- *Promote easy and immediate access to clinical information. (This assumes that the organization has the processes and/or discipline to ensure that the appropriate information is entered in a timely manner.)*
- *Reduce the amount of time needed for clinical staff to generate the assessment and treatment plan.*
- *Reduce the amount of time needed for updating treatment plan reviews, annual assessments, etc., at scheduled intervals.*
- *Automatically initiate (trigger) the process to update documents at the required time intervals or defined by services rendered.*
- *Provide a quick and flexible process to update assessments and treatment plans when new information warrants a change.*

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- Offer flexibility so assessments can be done in a highly structured manner or in a free form manner. (Recognize however, that if the assessment is done free form, much of the following capability is not possible. Information included as data can be easily retrieved and searched, sorted, reported on, graphed, etc. Information entered as free text can only be viewed.)
- Allow for individualized refinement of client information. Information is “certified” when necessary based upon the requirements set by the provider organization.
- Provide for consumer input into assessment questions through either a kiosk in the lobby or over the Internet. That information is then immediately available for staff to review in the medical record, thus reducing the clinical time needed for assessment.
- Use a “branching” strategy on the assessment so that only appropriate questions are asked of each consumer, based upon the answer to previous questions. (e.g. Addictions questions or gambling questions are only asked of those people who have a positive response to a screening question. Gender or age-related questions are only asked of the appropriate persons.)
- Auto-populate initial (draft) problems, goals and interventions onto the treatment plan from the issues identified in the assessment. (Also allow for other, free text goals, objectives and interventions.)
- In addition to suggested treatment plan elements, provide for evidence-based practices or practice guidelines as determined by the provider organization.
- Ensure that the assessment, treatment plans and progress notes are well integrated and support medical necessity. (By building the EMR on a relational data base, changes to one aspect of the record mandate/populate change in related documents. With this strategy, different parts of the record can not get disconnected or become incongruent. e.g. A treatment plan can not contain problems that are not identified in the assessment.)
- Auto-populate the progress note with the problem, goals and interventions to be addressed during that session.
- Provide suggested diagnostic categories to consider, based upon the symptoms identified in the assessment. In this process, specify the diagnostic criteria that have been identified. Alert staff immediately to issues of concern for clients who are on their caseload.
- Automatically generate customized reports based on compiling data elements.
- This kind of report would typically be sent to referral sources.

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- *Standardize and automate the release of information process.*
- *Integrate the EMR with scheduling.*
- *Link the progress note with the billing document such that billing can not take place without a note.*
- *Promote outcome measurement through scaling/rating capabilities at either the problem, objective or intervention level. Auto-generate graphs to display progress.*
- *Capture the status of all information at any point in time so it can be subjected to audit.*
- *Trigger timely, required documents and identify problem documentation for follow up by supervisors.*
- *Route documents for review and certification.*
- *Provide access from any location where a person can get to the Internet.*
- *Allow Internet access by consumer to various parts of the EMR if provider desires.*
- *Provide highly sophisticated security measures, defining who within an organization can see, or manipulate any data element.*
- *Through a portal strategy, configure the desk tops of different staff in such a way to maximize their efficiency. (Desktops are highly customizable. Clinician and other staff can work off of a desktop that makes available most of their basic work information. Additional details are quickly and directly accessed.)*
- *Configure the EMR system differently, based on the needs and desires of each organization while still maintaining and growing a standards based system.*
- *Be HIPAA compliant and provide legally acceptable electronic signatures by both clinicians and clients.*
- *Be totally integrated with the scheduling function and the billing function.*

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The above list is not exhaustive, but does give an overview of some of the features entailed with the various products which are called Electronic Medical Records. Some products on the market today are for the most part, simply document templates that are stored on the computer. Those systems provide some of the first few features on the list above, but little else. They have often been built upon an older architecture, and are rather like a Model T with lots of new bells and whistles. Underneath, they are still a Model T. Perhaps the most important decision that guided the development of the **Essentia** product was the realization that for an EMR to be a highly effective tool for the future, it needed to be based upon a powerful relational data base. Simply a compilation of various documents with some time saving functions was not enough.

The team which developed the **Essentia** EMR did so because we could not find a product on the market which included all the features in the list above. We concluded that those features were very important as behavioral health providers move into a future where; improved efficiency is critical, increased scrutiny is certain, and sophisticated technology could help us provide better care.

- White Paper written by:

*Paul Wilson, Executive Director
Park Center Inc. - Fort Wayne, IN*