

Who Will Make the Final Decision for the EHR Content at Your Facility?

As healthcare facilities and providers are implementing and expanding the use of electronic health record (EHR) systems, the critical need for a formal EHR governance structure is becoming increasingly apparent. Most healthcare entities are in transition from paper records to electronic systems and living with a hybrid record. The policies that governed health information management for paper records (i.e. record completion, correction/ amendment of records, release of information) must be transformed into guiding principles that effectively govern electronic data.

The EHR is a compilation of diverse and often disparate electronic systems that produce health record content. Almost universally, the EHR is a combination of content that enters the EHR via an electronic scanning system as well as content that is discrete, structured data, such as laboratory values, coded data, medication dosages, template-driven documentation, etc. In addition to these traditional aspects of health records, electronic systems often include information from email messages, presentations, electronic images, databases, and other 'new' sources of health information. Understanding the source of each component of the EHR is a first critical step in beginning to develop policies and procedures to ensure data integrity, appropriate access, reliable record content, and compliance with legislative, regulatory, and internal mandates. Achieving and reporting meaningful use metrics are more easily accomplished through effective governance of EHR content.

To ensure effective governance, a multidisciplinary group must be empowered and responsible as THE decision-making body for the EHR. This group is the logical evolution of the traditional Medical Record / Health Record Committee. The EHR Governance Committee should report and be accountable directly to the executive board of the healthcare entity. Members should consist of individuals who document in the EHR and use the information for patient care and those who are responsible for record content to meet legal, compliance, and regulatory requirements.

Some Of The Key Members Would Be

- Director of Health Information Management
- Chief Information Officer
- Director of Nursing or Nursing Informatics
- Chief Compliance Officer
- Director of Risk Management / Legal Counsel
- Director of Quality
- Physician Leaders (from major clinical areas)
- Administration

Subcommittees can be formed to address particular aspects of EHR governance:

Policy Committee: develops/reviews policies for documentation requirements, electronic form/template content, retention, compliance, and maintenance of the legal health record

Provider Documentation Compliance: monitors and reports compliance with JCAHO standards, CMS and other regulatory reporting, and compliance with internal policies, such as 'copy and paste'

Migration: develops plans and policies for implementation of various aspects of EHR as it evolves as well as decommissioning of old systems; education of user groups.

Good governance of an EHR system is essential in achieving the vast benefits that are inherent in EHRs. Ensuring that the multitudes of data elements and pieces of the EHR are reliable, accessible, manageable, retrievable, and destroyable in a completely safe and quality-controlled fashion is daunting, but it is absolutely necessary. Health information is THE key resource for quality patient care, patient safety, and effective, efficient healthcare entities.

Quality Healthcare through Quality Information