

On the Leading Edge in Long-term Care

Save to myBoK

by Kevin Heubusch, editor-in-chief

Margie White started out as a nursing assistant in acute care. A brochure for AHIMA's independent study program introduced her to HIM. She completed the program and applied for a job as medical record clerk in a long-term care facility.

And she kept going. White earned her RHIA, and at the same time she became nursing home administrator, which required a nine-month training program. "The main reason I became a nursing home administrator was to help give more clout to the RHIA," she explains.

Now White, MS, NHA, RHIA, CPHQ, is director of HIM and assistant administrator at Columbus Colony Elderly Care in Westerville, OH. The nonprofit organization is the only long-term care facility in the country for the deaf, by the deaf. It is operated by the Ohio School for the Deaf Alumni Association. White joined the 150-bed facility in 2000.

In addition to her official titles, White touches many other things. On the day we spoke she was standing in as the admissions director. Earlier in the day she had been reviewing paint colors for freshening up a room.

Outside the facility, White serves as chair of the special interest council for OHIMA. She is participating in the Ohio Health Information Security and Privacy Collaboration project, and she is onboard for Ohio's state-level RHIO efforts.

LTC's IT Challenges

Long-term care's biggest hurdle in joining health information exchange efforts is adopting health IT, White says. Financing the systems is typically the biggest challenge.

But there are other challenges in connecting with acute care facilities. The data sets are different (LTC has used the Minimum Data Set since 1998), and long-term care generally lags in adopting IT.

But if it can surmount these challenges, the benefits are there. "We have residents who have been here six, seven, eight years," White says of her facility. "They have primary care physicians; they may go to the hospital for an acute episode of pneumonia. They can benefit from [health information exchange]."

There's even benefit to a resident visiting the facility temporarily to receive physical therapy, White notes. "We did things for them that belong in that record. It would be great if that information went with them."

In addition to improving continuity of care, White believes that health IT could lead to better compliance, better facility ratings, and a greater sense of professionalism. And times are changing—consumers may expect that long-term care facilities be just as tech savvy as any other facility.

"It's headed that way," White says. "We baby boomers are going to expect it."

Launching an Electronic Record

White knows the benefits of health IT firsthand. Columbus Colony launched an EHR system in fall 2007, with White as the project manager. The system incorporates financial and clinical data, medication ordering, and remote access for physicians. She expects to be sending patient data to hospital emergency rooms soon.

The facility was poised for health IT after years of spadework by White. When the funds became available, it acted. "My administrator and I have worked together for years, and we've been talking and planning it forever," she says.

“I’m fortunate,” White says. “It’s been a great experience. You’re on call 24/7, but I’m excited about it and having a great time as well.”

White likes working in long-term care, which she notes can be as intense as acute care. Every day is a different day, she says, a different challenge. “I have resident contact. I am out and about, and that’s nice.”

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