Working without a Paper Net: A Year after Opening, St. Clare's Converts a "Backup Plan" File Room

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by Chris Dimick

There was no file room in this HIM department. Not a single paper record to be found.
Stepping into Saint Clare's Hospital for the first time, Kaye Connor was walking into uncharted ground. Anticipation mingled with fear as the hospital's new health information services director tried to get her bearings. Her background managing an electronic record system was blank.

But she wasn't alone.

"I remember saying to the president of our company…'I don't have experience with an electronic record,'" Connor, RHIT, recalls. "And she replied to me, 'None of us have.' So that gave me this kind of sense of relief."

When Saint Clare's Hospital in Weston, WI, opened in October 2005, Connor had never worked with a live, comprehensive EHR system. Finding her place was at first a challenge, but Connor says the experience of opening a new facility with an EHR was an exciting career opportunity.

After the discussion with her hospital group's president, Connor's fears turned to excitement. This paperless department was nice, she thought.

"It was a revelation that we truly are making history as we go here," she says. "There just aren't a lot of 100-percent digital hospitals."

Bending Some Knowledge to Fit

Starting fresh in a new hospital enhanced the HIM department staff's willingness to embrace the electronic record, Connor says.

"We didn't have history that we had to overcome," she says. "There was no one to say, 'We've done it this way for 10 years and it has worked, so why do we need to change it?'"

At first glance, Connor's 20 years of experience in the HIM profession seemed to go out the window. But soon she realized HIM principles were no different in the digital world.

Once she was familiar with the electronic processes, Connor says her past HIM experience flowed well into the new system. She needed to bend some of her knowledge to fit, but that didn't faze her. She focused on the HIM fundamentals.

Some things just took getting used to. For example, the electronic system offered less opportunity for one-to-one contact with physicians. Connor makes an extra effort to build good working relationships, such as attending clinician department meetings.

There also was less running around with a handful of paper. Charts didn't need to be filed, but they did need to be checked concurrently for deficiencies. Figuring out how to do that and manage other electronic applications was vital.
"I found myself going over in my head what I knew the operations to be in a paper world," she says. "My tools are different, but I still have to get that job done."

Stepping into the System

Connor arrived after the system was designed, so her first tasks were to get aligned with the hospital's vision, study the blueprint, and understand how the systems worked. For six months before the first patient entered the facility, Connor tested the EHR processes.

She did help design and fine-tune aspects of the system after implementation, such as a format for the hospital's many standardized forms. She also observed the system's ability to support HIM regulatory and compliance issues, down to whether coders could actually code off the electronic chart.

All the hospital's patients weren't going to arrive at the same time, so "we knew we'd have time to build slowly, figure out where our issues were, what needed to be corrected," she says.

Two years after opening, Connor still gets surprises. Every day she learns more about the electronic system. Her department is still figuring out the best way to correct record entries that need changes. Exactly what data constitutes the facility's legal record is still being discussed.

"It Was Going to Work"

No one at St. Clare's was certain how the new paperless record system would work.

As a contingency, hospital planners included a small file room that could be used as a "last-ditch, backup plan" to store paper records if needed, Connor says. But the room was never used, and about a year later the area was absorbed as office space for another department.

The electronic record had proved it could succeed. It had to succeed—failure was not an option, Connor says. "I just don't think we [in HIM] were going to allow it to not work," she says. "We did not consider, 'What if this doesn't work?' We didn't even entertain that option. It was going to work, and we had to figure out how it was going to work."

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