

PRESIDENT'S REPORT

On March 11, 1991, a letter was circulated to all members of the Association. Since that time, the Executive and Chairpersons of the various committees have held a Teleconference to discuss issues and concerns of the Association.

Plans are now in full swing for our Annual Meeting, which will be held October 2nd & 3rd, 1991 at the Holiday Inn, St. John's. If you have any suggestions for topics please ensure that these are passed on to Jean Arsenault at the Health Sciences Centre, St. John's.

Representatives from the Canadian Health Record Association and the Hospital Medical Records Institute have requested the opportunity to attend and speak at our Annual Meeting. Invitations will be extended to both parties.

The Release of Information Committee have met, established Terms of Reference and completed a hospital survey to determine present policy. Committee members are now in the process of setting up guidelines for release of information.

A second Teleconference has been scheduled for the first week of May. At that time the Terms of Reference for the Professional Review Committee will be addressed.

Our primary objective as an Executive this year will be to establish more specific Terms of Reference for our committees.

To date we have not received any input with respect to problems experienced with HMRI. The next User Group Meeting is scheduled for Halifax in June. Please get your comments to me as soon as possible.

We now have an opportunity to have our concerns expressed; please don't let this pass by without having your say!

Cathie Wicks, President
Newfoundland and Labrador
Health Record Association

HEALTH RECORD TECHNICIAN PROGRAM

In January 1991, the Eastern Community College struck a committee to pursue the development and implementation of a program for Health Record Technicians. Three members of the NLHRA were asked to participate on the committee. They are Sharon Penney, Janeway Child Health Centre; Joyce Strathie, Bonavista Peninsula Health Care Complex; and Faye Drodge, Dr. G.B. Cross Memorial Hospital.

To date, the committee has reviewed HRT programs from other institutions across Canada, put together a tentative program curriculum and reviewed criteria for both instructors and students.

The approach taken for the program is based on the Adult Learning Model in which the traditional classroom is replaced by a simulated office environment. The individual student progresses at his/her own rate with the instructor serving as coach or supervisor. Practical work experience will also be provided in a Hospital Medical Record Department.

The program will be offered at a campus of the Eastern Community College. Acceptance of students is planned for January 1992. Approval of this program will be sought from both CHRA and government and graduating students will qualify to challenge the CHRA national exam.

EDITORIAL

The late-breaking news last fall was that health care in the province was going to have to tighten its belt and many of us waited in worried anticipation of what that was going to mean to us. Well, now we know! Frozen budgets, frozen salaries, cutbacks in staffing and equipment, and yet, the mandate to provide the same level of service, and indeed in some areas such as Outpatient Services, increased service!

How do we cope with this? Morale is down; stress is up. Staff are taking on extra work without increased compensation; managers are balancing increased workloads with decreased staffing and funding.

Education and relief appear to be targeted for decreased funding, yet to provide the best service we can we need to be constantly upgrading and improving our skills and maintaining adequate staffing levels within our departments. How are we going to provide the necessary support to patient care areas if our departments are understaffed and out of touch? Is anyone else frustrated?

Faye Drodge
Medical Records Manager
Dr. G.B. Cross Memorial Hospital

DID YOU KNOW.....?

The Canadian Health Record Association has mandated that any Health Record Technician who has not been either an 'active' or 'inactive' member of the CHRA for a period of five years, and who now wishes to become a member, will have to do the HRT program over again. This does not mean just rewrite the certification exam, but rather take the entire one year course again.

This information was discovered when a practicing HRT from St. Clare's Mercy Hospital spoke with the CHRA regarding re-joining the organization. The CHRA will review an individual request for

exemption from this ruling, but this is a process requiring time and effort, with no guarantee of success.

The need to have qualified personnel working in any Health Record Department is not disputed, but an HRT working in a large teaching hospital with a variety of services and an automated environment has more relevant experience than a member who has remained inactive (but who has paid her dues) for five years.

L. Wilson
Health Record Technician
St. Clare's Mercy Hospital

THE JANEWAY EXPERIENCE TO CHECK OR NOT TO CHECK

This article is in response to an earlier submission by Sandra Cotton in the October 1990 issue of the NLHRA NEWSLETTER which outlined a possible alternative to detailed quantitative analysis.

The Medical Record and Audit Committee became interested in the concept of a 'Blanket Statement' in February 1989. The Janeway had been experiencing serious problems due to an unacceptable number of incomplete admissions. At the time the the 'blanket statement' appeared to be the answer in order to avoid restrictive quantitative analysis.

A three-part preliminary Discharge Letter was drafted which was to be completed upon patient discharge by the Housestaff or Attending Physician. The form included a 'blanket statement' which was to be completed by the Attending Physician.

The form included patient demographics, a summary of the case, diagnoses and procedures and the Medical Staff responsible for the case. Copies were to be given to the parent to be given to the Family or Referring Physician and to the Attending Physician. The original remained on the

chart and was to provide documentation which would assist Medical Records in completion procedures.

TO CHECK OR NOT TO CHECK - UPDATE

Approval was sought and granted re: the proposed form and 'blanket statement' from Administration, the Medical Advisory Committee and the Medical Staff as a whole.

A target date for implementation was July 1, 1989. The forms were ordered and In-service was held for the units, Housestaff and Medical Staff re: use of the form. The analysis procedure was revised to accommodate the statement. There remained six sections of the admission that were checked for completeness, in conjunction with the 'blanket statement'. These included the H & P Exam, Final Discharge Summary, Death Certificate/Permission for Autopsy/Note, Consultation Report, Operative Report, Physicians Transfer/Acceptance Orders.

In September 1989, the Medical Record Staff were instructed to discontinue the use of the 'blanket statement'. The Medical Record Department and the Audit Committee had registered numerous complaints from the Medical Staff re: the 'statement'. The majority of physicians felt that they should not be expected to take responsibility for the entire record, especially if other specialties had been involved with the patient care.

The Preliminary Discharge Letter remains in use to date, but the 'Blanket Statement' was abolished, even though it had been endorsed throughout the entire process. Just as a note, the Preliminary Discharge Letter is presently being incorporated into the Admission/Separation form in order to eliminate duplication and an extra form on each admission.

Sharon Penney
Director of Health Records
Janeway Child Health Centre

In the last NLHRA NEWSLETTER, I noted that in an increasing number of facilities in central and western Canada, the 'checking' for chart deficiencies has been discontinued. I have since discovered that, in Quebec, provincial legislation dictates that 'checking' not be performed (with the exception of the attending physician's signature on the face sheet and the presence of a discharge summary). This radical change was the result of lobbying by the provincial association, Association Quebecoise des Archivistes Medicales, supported by the provincial Medical Association and legal counsel. As explained to me by the Executive Secretary of AQAM, the rationale for the change was twofold - physicians should be responsible for documentation related to their patients and counsel opinion that documentation done after the fact has a 'questionable' legality.

Initially there were some problems experienced in that physicians would forget to do an operative report or a progress note, etc. However, the Medical Association initiated an audit process to address these concerns. Health Records personnel are not involved in these audits, unless they choose to be.

I have requested a copy of the legislation and any supporting documentation which they may have; once I have received this, I will share it with you. I am still soliciting YOUR opinion on this issue. Please write, phone or FAX to me your concerns, ideas, etc.

Sandra Cotton
Director-Health Records
St. Clare's Mercy Hospital

COMING EVENTS

CHRA Annual Conference
Health Information Management
Mastery in the '90s
Halifax, NS
91 06 11-14

ATTENTION ALL MEMBERS!

Attached are entries for an association
Logo that have been received as well as a
ballot form. Please indicate your choice
on the form and forward it to:

Cathie Wicks
Director of Health Records
Central Nfld. Regional Health Centre
Union Street
Grand Falls, NF
A2A 2E1

The winning entry will be announced in the
next issue.

Please send your comments and ideas for
the NEWSLETTER to one of the following:

Faye Drodge
Medical Records Manager
The Dr. G.B. Cross Memorial Hospital
P.O. Box 1300
Clareville, AOE 1J0

Cindy A. Smith
Director of Health Records & Registration
Burin Peninsula Health Care Centre
P.O. Box 340
Burin, AOE 1EO

Madonna Yetman
Health Records Department
S.A. Grace General Hospital
LeMarchant Road
St. John,s, NF
A1E 1P9

* DO YO HAVE SOMETHING YOU'D LIKE TO *
* SEE IN PRINT? --SEND IT ALONG *
* FOR THE OCTOBER ISSUE. THIS IS YOUR *
* NEWSLETTER - TAKE ADVANTAGE OF IT! *
