



Policies, Procedures, and Practices to Consider for Hybrid Record and EHR

In order to most effectively implement a hybrid or EHR system, it is important to consider policies, procedures and practices related to the use of the system *prior to* moving forward with the implementation. A hybrid record is one that includes both paper and electronic documents. The following is a list of considerations that should be addressed prior to an EHR implementation.

- 1. Definition of the Designated Record Set/Legal Health Record**
 - a. Define portion of EHR that are record set vs. administrative
 - b. If hybrid – define which are paper and which are electronic

- 2. Authentication of Entries**
 - a. Electronic Signature
 - b. Digitalized Signatures
 - c. Computer Key

- 3. Documentation Principles**
 - a. Timeliness
 - b. Late Entries
 - c. Corrections, Errors, Amendments
 - d. Version Management
 - e. Downtime documentation process
 - f. Cut, Copy, Paste features – allowed?
 - g. Managing data from outside sources
 - h. Decision Support – pop-ups/ alerts
 - i. Informed Consent – how is it documented?

- 4. Hybrid Record** – Notice in active hard copy record re: existence of electronic data

- 5. Access**
 - a. Define access – same as the paper record
 - b. Role based access
 - c. Physician access
 - d. Surveyor access
 - e. Resident/Legal party access
 - f. Temporary access process
 - g. Remote access – is it allowed, if so, define

- 6. Printing**
 - a. When printing can/should occur
 - i. Record requests
 - ii. Surveyor request
 - b. Who may print
 - c. Destruction of printed copies used for reference

- 7. Disclosure**
 - a. Define disclosure – same principles as paper record
 - b. Electronic Release of information (as opposed to printing and releasing) - Is it allowed and if so, process
 - c. Hybrid record – assuring records are disclosed appropriately (not out of sight – out of mind)



8. Storage

- a. Retention
- b. Archiving/ Access, Availability
- c. Purging
- d. Security

9. Disaster Planning

- a. Backup
- b. Recovery
- c. Emergency mode operations
- d. Critical information access during emergencies – i.e. current physician orders (may need paper method for critical documentation support for emergencies)

10. HIPAA Audit Trails

11. Quality Assurance/ Auditing (content)

12. Scanning

- a. Management of original documents if scanning used
- b. Timeliness of scanning

13. Training

- a. Assessment of user computer skills
- b. Implementation plan
- c. Ongoing training for turnover