
New Document Management System Delivers Immediate Administrative and Clinical Benefits at Hamilton Health Sciences

Myrna Francis, PhD

Hamilton Health Sciences (HHS) operates five hospitals and a cancer centre that serve the 468,000 citizens of the city of Hamilton and the more than two million residents of Central-South Ontario. As with many hospitals, the bulk of patient records at HHS are still being generated in paper form – 10 million pages per year, in fact, and climbing! In response to significant administrative and clinical problems caused by the growing mountain of patient records, HHS decided to implement an electronic document management system.

The Sovera Health Information Management Solution from CGI was chosen as the single consolidated medical records solution for the online storage and retrieval of patient health records across all HHS facilities. All new patient records created are now scanned and stored as electronic documents accessible online anywhere and anytime by authorized staff, eliminating any further need to store paper records.

“With security, availability, reliability and auditability all architected into the system, this electronic information now constitutes the long-term, legal health record for each patient,” explains Mark Farrow, director of Information and Communications Technologies at HHS. He adds, “It also helps us with regulatory compliance, including Ontario’s Personal Health Information Protection Act (PHIPA) regarding health record privacy and security.”

On the administrative side, medical records departments at each of the HHS facilities that were bursting at the seams are now being collapsed, and valuable hospital real estate is being turned to good use – in one case providing a location for a new, state-of-the-art neuromuscular clinic. Records staff that were having trouble keeping up with the rising tide of filing and retrieval work can now focus on higher-value work such as coding and indexing, and managing any exceptions arising out of the new records-scanning process.

Of even greater importance, however, are the improvements in clinical operations. Previously, a patient could have multiple records at multiple HHS sites, for example. Reviewing the patient’s complete medical history often meant requisitioning charts from other sites, resulting in delays that could potentially impact a physician’s ability to give timely diagnosis and care, or, at the very least, duplicate tests being ordered. With the new Sovera system, there is only one patient record, which is quickly and easily accessed by the physician online – no waiting and no more competition with other clinicians trying to retrieve the same charts. This is not only saving HHS money by eliminating

duplicated effort, it is also enabling physicians to make more efficient use of their time, and even to review and update charts from the comfort of their own home.

Many clinical areas are benefiting from having online access to electronic patient records. In the emergency department, for example, where staff relied heavily on a hard-copy logbook to know if a patient seeking attention had been there the day before and had drugs prescribed, a patient’s online chart now quickly indicates if the patient has been at this or any other HHS emergency department before. This gives clinicians a way to better manage care delivery for frequent visitors, and a means of identifying potential drug abusers in order to engage them in dialogue.

Previously, a patient could have multiple records at multiple HHS sites ... With the new Sovera system, there is only one patient record, which is quickly and easily accessed by the physician online.

With patient records now accessible online, HHS’s Mortality Review team members can review hospital deaths more quickly and are better able to make recommendations that can improve healthcare delivery at HHS. Previously, the chart reviews had to be done by team members sequentially. Now, they can all go online and review the same patient records concurrently; and with access to a consolidated view of the complete care provided to the patient enterprise-wide, they have a better chance of discovering precipitating factors that may have contributed to the death.

“Easy access to more-complete patient information enables faster, more-informed decision-making, which, in turn, is allowing us to deliver better, safer care,” claims Mary Bedek, manager of Health Records and the chief privacy officer at HHS.

About the Author

Myrna Francis, PhD, is the vice-president of global marketing for the health industry at CGI, one of the world’s largest independent information technology (IT) and business process services firms. Ms. Francis leads the development of CGI’s healthcare business strategy and its approach to supporting the IT and eHealth needs of government health departments and healthcare providers.