

Introduction:

Lana Fox



Dreams



Reality

Learning Objectives:

60 min session

1. Define & discuss documentation systems
2. Understand regulations & guidelines for compliance
3. Learn best practices for teaching with an EMR

Goals:

To have two takeaways



Action Item



Helpful Information

LET'S GO!

Picture current process:

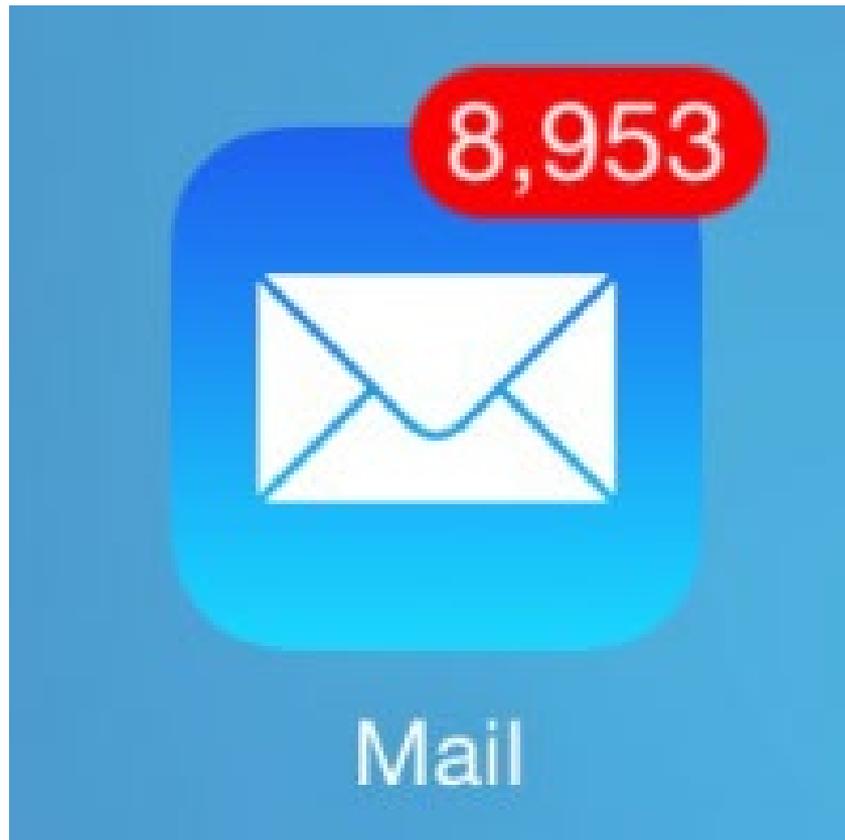
Documentation & communication



Where do you store client information?



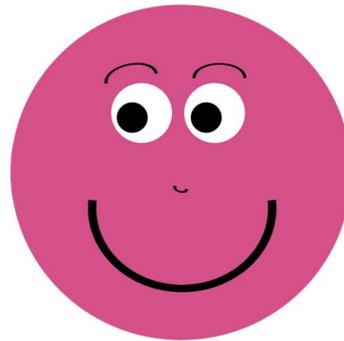
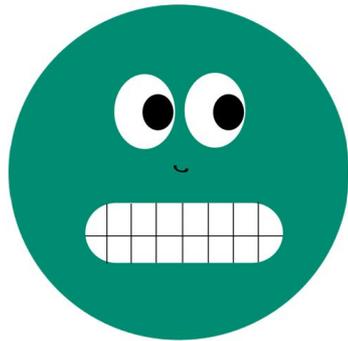
How do students communicate with you?



How do you edit student work?



**What feeling do you get
when you think about your
documentation system?**



Objective #1:

Define and discuss documentation systems being used

Use pen & paper for documentation



Edit student de-identified notes/reports on Word documents

The screenshot shows the Microsoft Word interface with the 'Review' tab selected. The ribbon includes options for 'Track Changes', 'Accept', 'Reject', 'Previous', and 'Next'. The 'Next' button is circled in red. The document text is shown with various tracked changes, including deletions and insertions. A red circle highlights the phrase 'Alex's head lift' in the first paragraph. On the right side, there are two comment boxes: 'Comment [MAD2]: Marked b/c I if/how you changed the money matter might need to tweak here..3' and 'Comment [MAD3]: No new knife clothes?'.

Appetite - Surfeit for the Senses EDIT 4-18-13 - Microsoft Word

File Home Insert Page Layout References Mailings Review View

ABC Spelling & Grammar Proofing

Translate Language Language

New Comment Comments

Track Changes

Final: Show Markup Show Markup Reviewing Pane

Accept Reject Previous Next

Compare Block Restr Authors Editor

Compare Protect

A chirp from his pocket made Alex's head lift lift his head and, he He pulled his phone out, grinning down at the message that his new smartphone display brought to him displayed on his new smart phone.

Wish I could be there too, see you tonight?

Alex tapped a quick *definitely* as his response, pocketed his phone and keys, and grabbed his knife kit on the way out.

Despite his attempts at convincing himself, ~~compared to how his life had been before, that not much had changed, the truth was that~~ everything had changed. Dieter had ended the moratorium on Alex's access to Koch family money, even going so far as to apologize for the oversight, clapping Alex on the back and laughing that he hadn't realized how ~~low-poorly~~ line chefs, even sous chefs, were paid. Alex and Nik were officially dating, and Alex had a place of his own. He hadn't splurged on many extra frills, knowing most of his time would still be sunk into the restaurant, but he'd made sure to get a top of the line television ... and the best bed on the market, long enough for Alex's lanky height, and more than large enough for two).

The empty spaces cried out for Nik's presence, and Alex was looking forward to bringing ~~Nik-him~~ over. Nik had seen the place before, of course, but that had been prior to escrow, ~~when the walls were bare and the rooms devoid of anything resembling a home. That morning, the last piece of furniture had been delivered~~ The last of the furniture had been delivered that morning, and Alex couldn't wait for that night. He'd slept on the couch the night before, waiting for his brand new bed, the bed for which Alex had been eagerly waiting, and he could not wait for Nik to finally see it and banish the last of the emptiness.

The past few weeks had been far too busy for the both of them, and Alex begrudged the lack of Nik kisses in his life. He was looking forward to claiming his full share that evening.

Comment [MAD2]: Marked b/c I if/how you changed the money matter might need to tweak here..3

Comment [MAD3]: No new knife clothes?

Upload documents to university approved file storage



Use an EMR



Electronic Medical Records (EMRs)
were first introduced in 1972

By the 2000's laptops became more common and the need for EMRs became more evident



In 2010 the Patient Protection & Affordable Care Act was signed



In 2019 why doesn't everyone have an EMR?

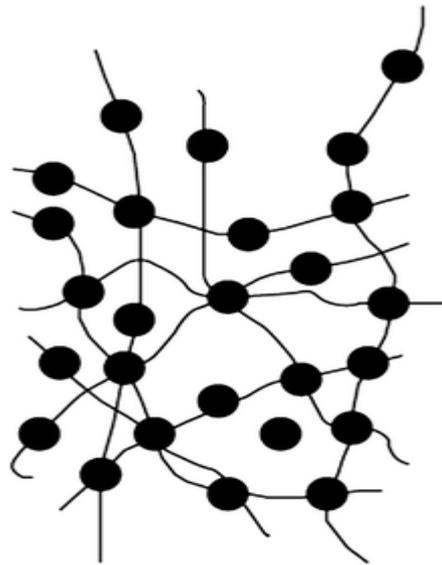


Problem:

Not specialized enough



Expensive



Complex



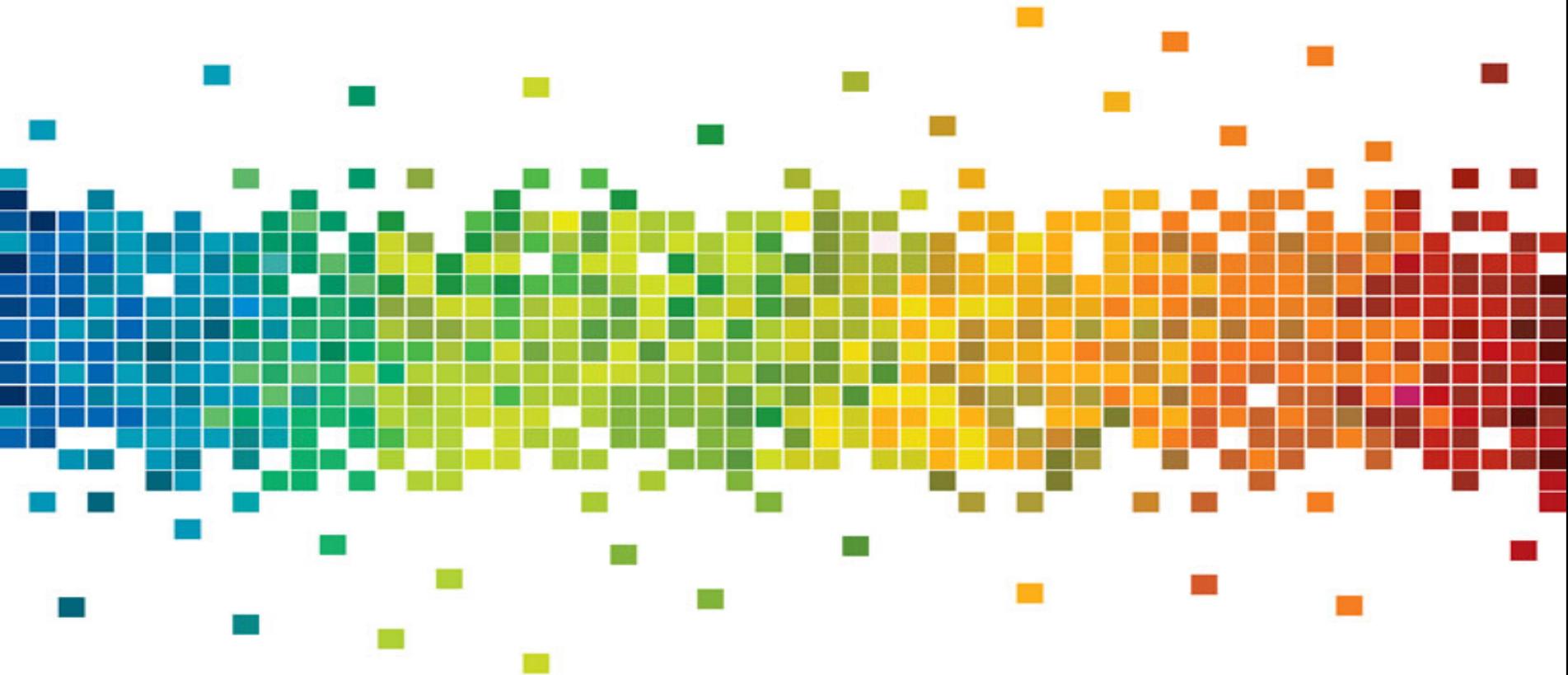
Wrong Tools

Dream:

Imagine your EMR



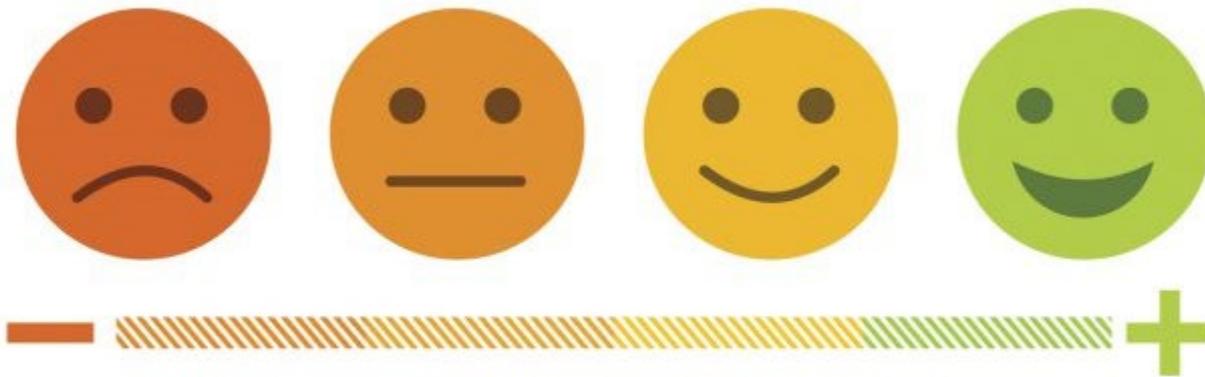
What would it look like?



How would you improve collaboration?



How would it make you feel?



What features would you include?



What would make your
EMR amazing?



My first CAPCSD:

Figure out if there was a need



10-15 people at breakout session

Our first customers:

Helped us to design our current platform



WESTERN
ILLINOIS
UNIVERSITY



ROCKY MOUNTAIN
UNIVERSITY *of*
HEALTH PROFESSIONS

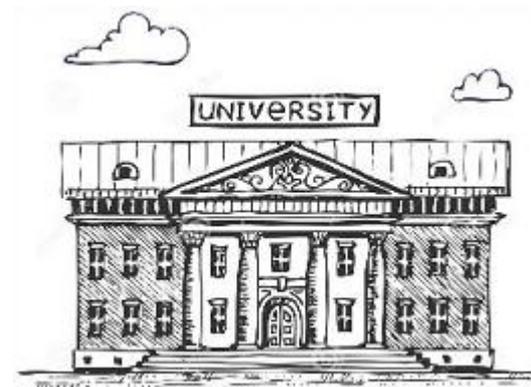
Product:

Transitioned our tool

Private Practice



University



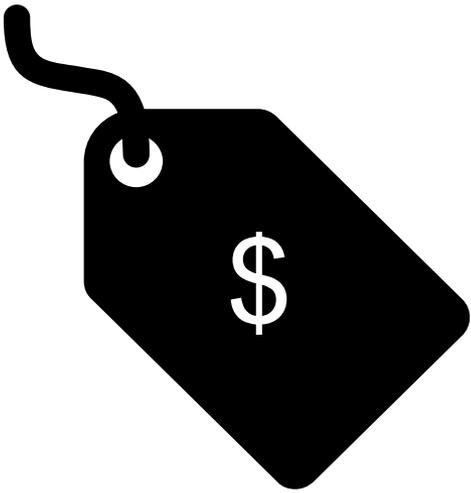
2017-2019:

Demos with 86 universities

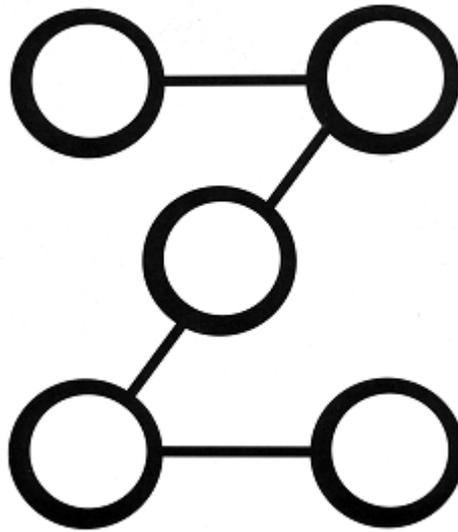


Solution:

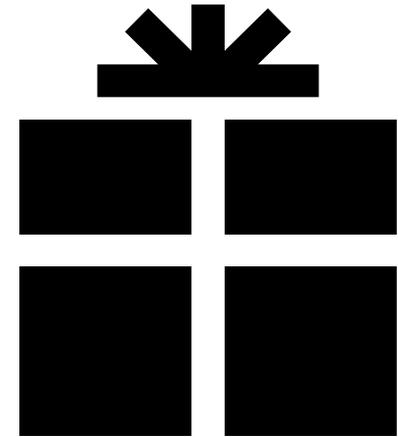
Web platform for clinics



Affordable



Clear Process



Right Tools

Objective #2:

Understand regulations and
guidelines for compliance

Choose an EMR

Make sure to compare apples to apples



≠



Implementing an EMR:

Define an timeline



1. Faculty on board
2. IT/Security
3. Legal
4. Training

Four main categories:

Protect protected health information (PHI)



HIPAA
Security Rule



HIPAA
Privacy Rule



HIPAA
Enforcement Rule



HIPAA Breach
Notification Rule

Objective #3:

Learn best practices for teaching
with an EMR

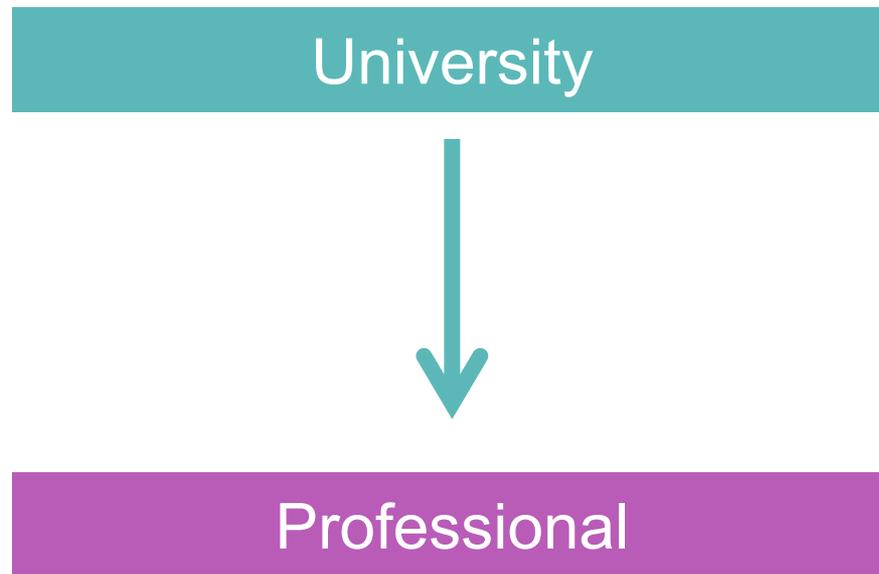
Preparing students:

4/5 therapists use EMRs



Preparing students:

Confidence for workplace transition



Preparing students: Real-world learning



ClinicNote

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-  Reports/Evals
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-  Teaching Tools

Electronic Medical Record for
Speech Pathologists &
Audiologists in
private practice &
university clinics.

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Tools for Teaching:

Think back



Tools for Teaching:

User Restrictions

 Edit User ✕

Allowed IPs

Permissions Select All / Select None

Permission	Enabled
Billing	<input type="checkbox"/>
Schedule	<input checked="" type="checkbox"/>
Notes	<input checked="" type="checkbox"/>
Delete	<input type="checkbox"/>
Upload Files	<input checked="" type="checkbox"/>
Folders	<input checked="" type="checkbox"/>
Contact Notes	<input checked="" type="checkbox"/>

Restrict to Specific Patients

Permitted Patients

Select All / Select None

Name	Therapist	Last Seen	Select
Andrews, Amelia	Jon Gilbert		<input checked="" type="checkbox"/>
Baboian, Tristan	Calvin Greenfeld		<input type="checkbox"/>
Green, Maxwell	Isabelle Lehman		<input checked="" type="checkbox"/>
Laino, Lauren	Jon Gilbert		<input type="checkbox"/>

Tools for Teaching:

To-do List

7 Todos

- ⚠ 3/29/2019, SOAP Note, Amelia Andrews**
- 3/26/2019, Base template, Amelia Andrews
- 3/25/2019, SOAP Note, Ben Ruskin
- 3/25/2019, SOAP Note, Amelia Andrews
- 2/5/2019, Adult Intake Form, Amelia Andrews
- 1/18/2019, Speech and Language Initial Evaluation, Amelia Andrews
- 1/18/2019, Base template, Amelia Andrews

[Complete All Todos](#) 

[Save & Create/Update Claim](#) [View PDF](#) [Save Note](#) [Submit](#)

E-Sign Your Note

Draw your signature using your mouse or touch screen.



Name of Signer

Title

[Use Saved Signature](#) [Reset Signature](#) [Cancel](#) [Accept Signature](#)

Tools for Teaching:

Add real Dx & CPT codes

Diagnosis and CPT [Collapse All](#)

	Code	Description		
Diagnosis	F48.2	Pseudobulbar affect		
CPT Code	92626	Evaluation of auditory rehabilitation status, first hour	MOD	Units
		Draft - Work in Progress	<input type="text"/>	<input type="text" value="1"/>
				
	+ Add New CPT Code			
Diagnosis	F70	Mild intellectual disabilities		
CPT Code	G8983	Body pos D/C status	MOD	Units
		Draft - Work in Progress	<input type="text"/>	<input type="text" value="1"/>
				
	+ Add New CPT Code			
	+ Add New Diagnosis			

Tools for Teaching:

Track changes & edits

Edit Note Show Past Notes Hide History/Comments Show Snippets Track Changes

History Comments + Add Comment

Subjective

L.F 03/30/19 12:53am
Highlighted "today.": Write in a piece of information related to why the patient was late.
+ More

L.F 03/30/19 12:54am
Made Changes: Added "She seemed distracted during her session and very tired."
- Less

Reject Show Accept

Completed by Student
 Completed by Supervisor

Reply

Combined Objective Comment

L.F 03/30/19 12:55am

+ Add New Long Term Goal

Previous Plan

Subjective

Amelia was late today. She seemed distracted during her session and very tired.

Objective

+ Add New Quantitative Data Field

Combine Objective Comments

1) **Data Field #1:** Will sequence a story or activity that includes 3 parts

New Value	<input type="text"/>	Enter formulas in New Value by preceding with =
Previous Value	0.19	On 03/27/2019 Chart

2) **Data Field #2:** The student will retell a story with visual cues (e.g. sequence cards) including problem and solution.

New Value	<input type="text"/>	Enter formulas in New Value by preceding with =
Previous Value	0.82	On 01/31/2019 Chart

3) **Data Field #3:** Will state a sequence of event/procedure.

Save & Create/Update Claim View PDF Save Note Submit

Tools for Teaching: Customized Reports

Review Your Report

Comment:

Short term Goal 1: The student will retell a story with visual cues (e.g. sequence cards) including problem and solution.

Data Field 1: The student will retell a story with visual cues (e.g. sequence cards) including problem and solution.

Date	Value
11/16/18	0.33
12/16/18	0.68
01/16/19	0.81

E-Sign Report... + Add Another Signature... Cancel Save Report Submit

Tools for Teaching:

Platform for all clinical documentation

Browser: <https://staging.clinicnote.com/Clinician#>

Apps Sign In Sign In - Gust

Lana Fox

New Client New Note Contact Notes

Appointments Today

5

Fri 3/29

Time	Appointment
8:00 AM	
9:00 AM	Maxwell G., Ben R., Kathleen F., Jon G. / Caroline S., Jon G.
10:00 AM	Tristan B., Natalie S.
11:00 AM	Mae F., Lana F., Kathleen F., Isabelle L., Rachel N., Natalie S.
12:00 PM	
1:00 PM	Mae F., Lana F., Kathleen F., Jon G., Isabelle L., Rachel N.
2:00 PM	
3:00 PM	
4:00 PM	
5:00 PM	
6:00 PM	

Todos

2

Enter a new Todo...

- 3/29/2019, SOAP Note, Amelia Andrews
- 3/26/2019, Base template, Amelia Andrews

Complete All Todos

Clients

View Client List

Reporting

Generate a Report

Goals

Manage Client Goals

File Vault

View Facility Files

Forms

3

Start a Form

Billing

Open Billing Module

Snippet Editor

View Snippets

Admin

View Admin Panel



Who has the first question?

Lana Fox, President
lane@clinicnote.com
319-430-2656

Goals:

What were your two takeaways?



Action Item



Helpful Information

Visit us in booth 34!



Lana Fox, President

lane@clinicnote.com

319-430-2656

Works Cited

<https://dashboard.healthit.gov/quickstats/quickstats.php>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5171496/>

<https://www.healthcarelaw-blog.com/the-electronic-medical-records-emr-mandate/>

<https://www.truevault.com/blog/how-do-i-become-hipaa-compliant.html>



EMR Implementation Timeline

Blue = EMR's responsibility Purple = University responsibility

10-30 Days

- Verbal “Yes, we would like to use EMR.”
 - Ideal semester start date: Summer, Fall or Spring
 - Split by semester and cohort
 - # of Students
 - # of Supervisors/Instructors
 - # of Office Personnel
 - Name & Address to use on contract
- IT Introduction: EMR sends packet of security documentation.
- Legal Introduction: EMR sends a preliminary contract for review.

30-60 Days

- Send completed security document back to university.
- Legal department: Send edits/changes to the contract.
- Send edited contract to Lawyer for review. (typically this is exchanged 1-2 times)
- University starts compiling evaluations, progress reports, lesson plans, etc. in Word document format or PDF.

2-5 Days

- Final Legal document is signed by EMR and sent to University.
- University signs contract & sends EMR a copy.
- EMR creates university dashboard & starts making templates for evals, reports, lesson plans, etc.

Schedule Training

- Attend a 1 hour faculty training online & start using dashboard.
- Schedule online student training for the next semester.