Driving Decisions with Data: In an EHR Implementation, Ensuring Data Integrity Is High on the To-do List

by Anne Zender, MA

“It’s important to have a network of colleagues at different organizations -- to have people you can call and ask, ‘How are you doing this?’” — Julie Bryant

Back in the late 1980s and early 1990s when Julie Bryant, RHIA, was in college, she started to hear the buzz about computerized medical records. Now she’s making them happen. As director of information services and medical records and privacy executive at Northwestern Memorial Hospital in Chicago, Bryant has taken a lead role in the implementation of an electronic health record (EHR).

“I’ve always had an interest in technology,” says Bryant. “[The EHR] is what we’ve talked about as a profession, as an industry. To see it happening with such success is exciting.”

Northwestern has been rolling out its EHR in phases, Bryant says. This year it has completed implementation of medication administration, computerized physician order entry, and physician documentation modules. There’s more to come, including bar coding, handheld devices, and more clinical documentation rollouts in additional departments. For her part, Bryant supervises coding, transcription, customer service, and information systems managers who handle the technical environment of the electronic record and enterprise-wide imaging.

A Natural Progression

Bryant came to Northwestern in 1997 as a systems coordinator. In 2001 the director of the medical record department retired, and she stepped in as interim director. Her role “just kept expanding,” she says, and new responsibilities continue to be added. In addition to aspects related to the EHR, new responsibilities have included privacy in recent years as the organization prepared for HIPAA.

Despite the rapid growth of her job’s scope, Bryant says she had a strong HIM foundation that made the transitions feel natural. “I learned as I went along, over time. I had a good basic understanding and I read, I investigated, I taught myself things. From a management and management of medical records aspect, [the job] doesn’t feel that different,” she says.

Her HIM skills have also come in handy when it comes to addressing issues such as data quality. As the EHR implementation has progressed, Bryant says she’s come to understand the importance of ensuring data quality. Data need to be of the highest quality to drive clinical decision making. “The data integrity and quality issues are key as we talk about integrating clinical decision support into the electronic environment,” she says. “We can leverage technology to provide better information as we deliver care.” She says HIM professionals interested in data integrity and quality issues should sharpen their “basic analytic skills. That’s something we as HIM professionals have been well trained in. We are trained to analyze data, regardless of what form it’s in.”

A Big Initiative, a Juggling Act
With so many areas of responsibility, Bryant finds that her major challenge is keeping “all the balls in the air.” The implementation itself, she says, has been “a massive undertaking,” although she acknowledges she is fortunate to have leadership and buy-in from the organization and management. “Just as we finish one aspect, there’s another to start working on.”

In addition, she says, there’s the rest of the department functions to keep running smoothly. “It’s an everyday challenge, bridging the gap between paper and the electronic world, as well as the privacy responsibilities. It all ties together, but they are still separate worlds. As more of the record now becomes electronic, my next challenge will be to manage the convergence of these worlds.”

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