

# Business Process Requirements Review Template

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## Introduction

The purpose of the Business Process Requirements Review is to identify key functional areas unique to the operations of a clinic and areas of potential change in clinic processes due to the implementation of an electronic medical record (EMR). The following report summarizes the findings of the review.

Clinic Name: \_\_\_\_\_

Date: \_\_\_\_\_

## Business Process Requirements Review Meeting Participants

Participant	Role

## Clinic Requirements

### Patient Registration and Attachment

- Current business processes
- Attachment rules
- Standard use of discrete fields
- Validation of information

#### *Requisitions, Templates and Forms Required*

- List required (specify volumes where appropriate)

### Scheduling Appointments, Resources, Staff

- Do you use any special tools to manage staff or physician scheduling?
- If yes, were they developed/used by an individual, the clinic or the primary care network (PCN)?
- Recalls
- Internal alerts
- Wait list

### Referrals and Consults

- Current business processes
- Templates, auto populated with files, specialist information, automatic signature (specify volumes)

#### *Requisitions, Templates and Forms Required*

- List required (specify volumes where appropriate)

### Assessment and Treatment

- Current business processes (SOAP, EMR, paper)
  - Special charting needs
  - Alerts/reminders for recall, retesting, foot care, etc.
  - Is there concurrent access to a patient record by different healthcare providers in the group?
  - Is there a need or desire to access a consolidated view of the patient to support patient care where the record has been contributed to by providers in various locations across the group?
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- Does the clinic use medical devices which are or which it intends to integrate with the EMR?
- Access to the EMR (office, home, hospital, patient home, remote, other)?

#### *Requisitions, Templates and Forms Required*

- List requisitions required (specify volumes where appropriate)
- Patient handouts
- Medical illustration tools: who developed them?
- List forms required including auto-populated forms such as WCB, specialized services

#### **Ordering and Receiving DI/Labs**

- Current business processes
- Electronic receipt
- Review process, tasking assignment, attach to EMR
- Trending analysis to support decision making (graphs)
- Order sets
- Utilization of Netcare

#### *Requisitions, Templates and Forms Required*

- List required including auto-populated forms for the commonly used diagnostic requests (specify volumes where appropriate)

#### **Medication Management**

- Current medication management business processes
- Use of PIN
- Triplicates
- Medication List management
- User defined medication scripts
- Special graphing (e.g., INR vs. Coumadin graphs)
- Alerts for allergies, intolerances, contraindications
- Non-conforming prescriptions (e.g., compounds, orthotics)

#### *Requisitions, Templates and Forms Required*

- List required including auto-populated forms for the commonly used diagnostic requests (specify volumes where appropriate)

#### **Care Planning and Patient Care Process**

- Current practice
- Does the clinic use any special tools in the EMR to assist with care planning (e.g., monitor overdue appointments)
- What templates are currently in use for this activity?
- To what extent does the clinic need to share your patient information with other allied health professionals?

#### *Requisitions, Templates and Forms Required*

- List required (specify volumes where appropriate)

#### **Operations Management**

##### **Billing**

- Current practice, specialized tools

- Service codes entered into the EMR by physician, drop down menus of frequently used codes
- Diagnosis entered and EMR associates it with proper billing code
- System flags for special billing (additional time, special charges)
- Review billing patterns to predict resource needs

### Security

- Current practice
- User-based access to EMR, grouped by functional role, context based access (based on location, time, functional area)

### Privacy

- Current policy in place?
- Assign account privileges, monitor access, use audit function

### Health Information Management

- Where is patient registration currently stored: paper, electronic, EMR?
- If EMR, does the clinic use discrete fields, check for duplicates, verify information, deactivate old files?

### Health Workforce Planning

- Current practice, e.g., plan without an EMR, use EMR to list resources, use EMR for staff planning, forecast future demand
- Does the clinic plan to offer different services or use different types of care providers in the near future?

### Equipment and Facilities Management

- Book rooms, equipment in advance? Use EMR or paper?

### Information Technology

- Super user: who will be the 'point person' in the clinic regarding EMR questions?
- Additional network requirements: Online patient education, Telehealth, streaming patient information requirement for any preliminary site assessments the vendor may conduct.

### Information Management

- Does the clinic currently use external email and/or have a patient portal for patient check in?
- Does the clinic have other data and applications that are not part of the current physician office system?
- Is there a requirement to do local printing when the user is accessing remotely?
- Is there access to Alberta Netcare Portal from the clinic network?

### Task Management

- How does clinic deal with phone messages, tasking recalls, internal and external clinic communication?

## Population Health Process

### Preventative Screening

- Handouts (paper, EMR)
- Alerts, schedule reminders
- Does the clinic use an EMR to review health status of patient population and tailor prevention programs?

### Evaluation, Identification and Monitoring

- Does the clinic use any special tools to manage evaluations, identification and monitoring of patient populations?
- Does the clinic share reports with the PCN or use for research purposes?

### Key Considerations

Key considerations should be included in the report, especially regarding known key functional risks and business process flow changes:

- Business process changes
  - Desired data input method, for example, laptops or voice dictation
  - Electronic faxing capabilities including prescriptions (specify volumes)
  - Increased ability to receive diagnostic test results
  - Ability to do referrals electronically or check a wait list
  - Better clinic communication and task management
  - Improved monitoring of population health or recalls
  - Ability to submit requisitions electronically or book an operating room in the hospital
  - Remote access
- Key functional areas
  - Remote access
  - Faxing and scanning (specify volumes)
  - Wireless connectivity
  - Billing
  - Labs
  - Demographics
  - Orphaned physicians
  - Outgoing EMR system

### Disclaimer

The information in this fact sheet is provided for education and guidance only and is not intended to replace expert advice. Physicians are responsible for making informed decisions to meet their medical-legal obligations.

### Document History

Version	Author(s)	Date	Changes