Patient Preferred Practices

Shared Medical Record

Module 3 of 5

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For Additional Information:
[www.planetree.org](http://www.planetree.org)
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The Patient Voice

Planetree’s work to advance patient-centered care is grounded in the voices, stories and insights of patients and family members who serve as our guides in charting a course to a more patient-centered future for our industry. These voices are captured largely through focus groups facilitated by Planetree team members across the United States and internationally, in which we invite individuals with recent experiences in the healthcare system to weigh in on what went well and what could have been improved.

Over the past two decades of conducting these focus groups, consistent themes have emerged about how patients define a quality healthcare experience. These themes have informed the development of the Planetree methodology for patient-centered care implementation, the criteria for the Patient-Centered Designation Program, and the identification of patient-preferred practices, i.e. field-tested practices that respond to how patients have expressed they want their care delivered.

Among these patient-preferred practices is the shared medical record.

What Patients Have to Say about the Shared Medical Record

In Planetree focus groups, patients routinely express a desire to review this information, not in the hope of “catching” their clinicians in an error as some professionals may fear, but because they want to better understand test results, how their body is reacting to treatments and what they can do to best take care of themselves.

“Shared medical record: Refers to the patients’ ability to access their real-time, in-progress personal health information during a care episode, e.g. during a hospitalization and/or treatment.”

“Reviewing the chart with someone put me at ease.”

“‘When my father was in I asked to see the record. It helped me understand the plan of care a little better. It helped me advocate for him better.’”

“‘That is so important because you want a certain level of control. When they do bring you information to read about your treatment it really adds to your level of confidence.’”

“My doctor showed me everything...My white blood count was an issue which makes me open to infection. Every day they brought my count to me so I could see it. I knew that had to get better for me to go home.’”
Patients who reviewed their doctors’ notes reporting feeling more in control of their care.


< 5% of doctors reported longer visits when they opened their notes to patients.


71% of consumers say they should be able to update their electronic health records, such as with their personal medical history or medication side effects.

Ten Reasons the Shared Medical Record is an Essential Component of a Patient-Centered Approach to Care

1. **Patients want it.** A 2013 survey of 1,000 U.S. patients found that 4 of 5 patients (82%) say being able to access their medical records is important, and 41% would consider switching doctors to gain access to their health records.¹ This survey is consistent with Planetree focus group findings that highlight patients’ interest in being able to see their medical record.

2. **It demystifies healthcare.** As an ongoing record of the patient’s health history, medical conditions, test results, treatment plans, medication lists and wellness goals, sharing the medical record openly with patients and family members demystifies the health care experience.

3. **It supports patients’ and family members’ engagement** as active members of their own care team by serving as a real-time teaching tool about the patient’s current health status and prognosis, how they are responding to interventions, treatment options, any concerns, and what needs to occur for their treatment plan to yield optimal results. A collaborative review of the record, with the patient supported in understanding its contents by a healthcare professional, opens up the lines of communication between patients and providers and may be just the prompt a patient needs to ask a question that has been on his mind or to notify caregivers of a change in his condition.

4. **It promotes quality and safety** by providing opportunities for patients to correct any inaccuracies or omissions, such as allergies or oversights in the medication list.

5. **It powerfully conveys patient-provider partnership** by breaking down an invisible barrier that has perpetuated a patriarchal model of care in which healthcare professionals have been the sole arbiters of determining what, when and how much information to impart to the patient about their health and treatment plan. Patients who know they can request to see their record at any time are reassured that no information is being withheld from them.

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6. **It promotes shared decision making.** Inviting patients to access their real time personal health information with the same degree of timeliness afforded their professional caregivers is a way of asserting their important role as a member of the care team who will be actively involved in treatment planning and decision-making.

7. **It enhances patient satisfaction.** In a study of four Planetree hospitals that implemented a shared medical record policy, patients who were invited to access their real-time chart (whether they opted to do so or not) rated their hospital stay more highly than those not informed of the opportunity to do so.²

8. **It promotes continuity and coordination of care** across healthcare settings and episodes of care by equipping the patient and their loved ones with a greater depth of knowledge and understanding of their healthcare needs and history, enabling them to better bridge communication and coordination gaps that may occur between providers, which is especially important for patients managing multiple chronic conditions.

9. **It promotes an environment conducive to healing.** The atmosphere of trust, transparency and partnership created through a shared medical record can help to diminish patients’ fears of the unknown, mitigate concerns about what is being withheld from them, and help them to retain a feeling of autonomy and control, all of which serve to reduce anxiety and stress, and contribute to a more healing environment.

10. **It’s a patient right.** The federal Health Insurance Portability and Accountability Act (HIPAA) of 1996 explicitly states that “patients must be able to see and get copies of their record and request amendments.”

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Components of a Shared Medical Record Policy

- It affords patients access to their real-time information at the point of care. This distinguishes the shared medical record from the minimum requirements for access to information stipulated by HIPAA and Stage 2 Meaningful Use which focus on patients’ ability to access their medical information after a care episode.

- It maximizes patients’ access to their personal health information, with limitations to full access the exception to the rule.

- It includes provisions for how patients will be supported in understanding the record, generally through having the patient accompanied by a healthcare professional who will explain any unknown terms, clarify misunderstandings and answer questions that arise.

- It protects the confidentiality of patients’ personal health information by establishing processes by which the patient controls who is able to access the record.

- It provides avenues for patients to correct inaccuracies and/or omissions, as well as to contribute progress notes.
Shared Medical Record Quality Checking Tool

Sharing the open medical record is a powerful driver of patient and family engagement. However, this does not occur merely through the existence of a policy. Motivating patients and families to seek out and use relevant information as they actively participate in their care requires not only a change in the patient, but a change to the processes and expectations of organizations – in particular around how we view and how we use the medical record.

This 10-question Quality Checking Tool was developed by Planetree to support organizations in assessing the quality of their shared medical record policy and execution of the practice, and to help identify opportunities for strengthening the ways you partner with patients and family members to maximize access to information and patient and family engagement in their care.

To tabulate your rating:

- Give yourself 2 points for each “YES” statement.
- Give yourself 1 point for each “PARTIALLY IMPLEMENTED” statement

Use the scoring legend on page 9 to convert your score into a set of recommendations.
A policy has been approved facilitating patients’ access to their real-time, in-progress medical record during hospitalization and/or treatment.

A process is in place by which the patient is able to specify family members, or others involved in their care, who may also review the open medical record.

Patients (and family members, as appropriate) are proactively informed of this policy and the processes for accessing their open medical record. Systems for informing patients of their ability to review the record extend beyond notification on admission and a mention in the patient handbook.

Processes are in place to support patients (and family members, as appropriate) in understanding the information in the record.

Processes are in place for modifying the patient record based on the amendments and/or corrections made during the patient’s review of the record.

Patients have the ability to contribute their own progress notes to the record (or an addendum to the record).

An effective process is in place for sharing the patients’ notes and comments with all members of the care team.

A multidisciplinary team, inclusive of medical staff, nursing leadership and frontline staff, was involved in the development of the shared medical record policy, processes and the companion communication materials.

Patients and family members were involved in the development of the shared medical record policy, processes and the companion communication materials.

A system is in place to evaluate the impact of sharing the open medical record with patients (and family members, as appropriate).

**TABULATE YOUR SCORE: 2 POINTS FOR EVERY “YES”; 1 POINT FOR EVERY “PARTIALLY IMPLEMENTED”**
### If you scored

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<tr>
<th>Points</th>
<th>Is this your current state?</th>
<th>Next Steps</th>
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<td>15-20</td>
<td>Well done! It appears your organization's shared medical record policy is supported by actionable practices that are effectively making use of the medical record as a tool for driving patient and family engagement in their care.</td>
<td>Consider how you may further establish patient ownership of their medical record and how it can be even further leveraged as a shared decision-making tool. Beyond maximizing access, review what standardized information the record itself contains. Does it reflect what patients and family members would consider to be the most important knowledge their care team needs to have to deliver optimal care? Partner with patients and family members to examine strategies for incorporating patients’ preferences, values and goals into the record in a more formal way. If not already doing so, now is also the time to extend this commitment to empowering patients and family members through access to their personal health information beyond specific care episodes. Leverage your experience with sharing the record during hospitalization and/or treatment to maximize patients’ use of a patient portal between care episodes. See <a href="#">Strategies for Sustainability</a> for additional next steps.</td>
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<td>8-14</td>
<td>It appears there are opportunities to move beyond the initial steps of implementing shared medical records to the more advanced work of establishing a cohesive set of structures, processes, and practices that collectively make the shared medical policy jump off the page and into active practice within your organization.</td>
<td>The steps outlined here are designed to guide your organization in making the shift from allowing to encouraging patients to review their open record, and from making the record available to making it accessible and understandable. See the <a href="#">sample policy</a> for a real-life example of a policy that supports this cultural shift. Complete some time-limited shared medical records audits to identify those units where the practice is most well-established. Collect data to ascertain the consistency with which patients are offered the ability to view their record, the avenues for making these offers and the uptake, i.e. number of patients who participate in a record review and the number of patients who contribute their own progress notes. Use this data to narrow in on what communication strategies prove to be most effective in conveying to patients not only their ability to access their record, but also the ample benefits of doing so. If you have adopted an electronic medical record and are struggling with the mechanics of sharing it, work with your vendor to develop a printer-friendly summary sheet that can be shared with patients. Involve patients and family members in identifying what information they would want included.</td>
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<td>&lt; 8</td>
<td>It appears that your organization is underutilizing the medical record as a patient education and patient and family engagement tool.</td>
<td>Implementation of standardized processes and a formal policy for sharing the open medical record during hospitalization and/or treatment should be made a priority. To start, recruit a small multidisciplinary team to lead the charge of developing the policy and procedures. Invite members of your patient and family partnership council to participate in these early development efforts as well. Follow the <a href="#">step-by-step implementation plan</a> in this workbook to guide the work of this newly formed team.</td>
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# Shared Medical Records Implementation Plan

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<th>STEP 1</th>
<th>Do your research.</th>
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<td>Read up on other organizations’ efforts to implement shared medical record policies. Listen to the Planetree Patient-Preferred Practice webinar on the topic. If you are a Planetree member, mine the sample policies available through My Planetree (myplanetree.org). Consult with your patient and family partnership council to explore your patients’ interest in having access to their medical record.</td>
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<th>STEP 2</th>
<th>Educate staff and physicians.</th>
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<td>Drawing on this primer and the research you completed in Step One, provide education to staff and physicians about why sharing the medical record is an important component of a patient-centered approach to care, as well as the evidence for how sharing the record drives improved outcomes and patient satisfaction. Even more powerful is when academic literature is complemented by the voices of patients, which can connect healthcare professionals at a very personal level to why this initiative is an important undertaking. For a powerful video of a family member sharing her perspective, go to <a href="http://www.youtube.com/watch?v=msBYOYYeHPw">http://www.youtube.com/watch?v=msBYOYYeHPw</a>.</td>
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<th>STEP 3</th>
<th>Form a multidisciplinary task force.</th>
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<td>Identify physician and nursing champions who will lead the charge toward adoption of shared medical records. In addition to the physician and nursing champions, key contributors to the implementation team are representatives from IT, patient education, communications, and your patient and family partnership council. This team will take the lead on staff education, development of policies and procedures, and evaluation.</td>
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<th>STEP 4</th>
<th>Conduct a small scale test of change.</th>
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<td>Identify a specific area(s) that is willing to pilot proactively sharing the medical record for a specified period of time. <em>Before the pilot</em>, collect baseline data from the unit(s), including patient and staff satisfaction, readmission rates and other relevant quality outcomes. Test out processes for integrating responding to patient requests, capturing corrections and comments, and monitoring for consistency of the practice into your workflow. It may also be useful to capture data on the kinds of information patients specifically seek out when requesting to see their record to share with other departments as part of future education efforts. Collect post-pilot data on the same metrics identified above to measure the impact of the change. Interview patients, families and staff during this period to obtain qualitative feedback. Document perceptions and lessons learned for educational purposes.</td>
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<td>STEP 5</td>
<td>Establish a time frame for house-wide implementation and finalize the shared medical record policy.</td>
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<td>Use the experience of the pilot area(s) to refine the practice, develop appropriate policies, and educate other departments.</td>
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<td>Use newsletters, communication boards, etc. to publicize feedback from patients and families about how being able to access their real-time personal health information benefitted them.</td>
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<th>STEP 6</th>
<th>Develop communication materials and rounding protocols to proactively promote access to the medical record directly to patients and families</th>
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<td>Be sure to partner with patients and families on the development of these materials to ensure the messaging is meaningful to them.</td>
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<th>STEP 7</th>
<th>Publicly recognize your champions for their participation as change makers.</th>
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<td>Recognition of staff who step out on a limb to support these patient-centered practices is important for acknowledgment and empowerment of staff to embrace and lead other patient-centered initiatives.</td>
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<th>STEP 8</th>
<th>Monitor and measure to hardwire the practice.</th>
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<td>Identify both process and outcomes measures you can use to monitor the effectiveness of strategies for promoting the shared medical record.</td>
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<td>Approaches for doing so include adding a rounding question to ascertain patients’ awareness of their ability to review their record and customizing a question(s) on patient experience surveys that examines patients’ experiences and attitudes about access to their medical record.</td>
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Looking for more support in implementing shared medical records?
Planetree offers a range of on-site coaching and training opportunities to support your organization in implementing patient and family engagement strategies. Our Experience Advisors will partner with you to develop and implement a customized implementation plan. For more information, contact Jim Kinsey, Planetree’s Director of Member Experience, at 203-732-1365 or jkinsey@planetree.org.
Sample Policy

POLICY:
Good Samaritan Hospital allows patients access to review their open medical records. If the patient agrees or when given the opportunity, does not object, patient’s families, friends or others involved in the patient’s care may also review the patient’s open medical record.

PURPOSE:
To provide the opportunity for patients, patient’s families, friends or others involved in the patient’s care to review the patient’s open medical records and become informed about the medical condition. This policy is offered in the spirit of trust between patients and staff members. In addition, the medical record is an important source of information, which can contribute to the patient’s understanding of his/her disease process and course of treatment, and foster additional dialogue with staff and physicians.

DEFINITIONS:
1. Open Medical Record is a record in progress, during hospitalization and/or treatment. Once the patient has been discharged from care, the Medical Record is considered closed. All requests for information on Closed Medical Records are to be referred to the Health Information Management Department.

PROCEDURE:
1. Upon admission to Good Samaritan Hospital the patient, and/or patient’s families, friends or others involved in the patient’s care are informed about the opportunity to review the patient’s open medical record, if the patient agrees or when given the opportunity, does not object. Information about this opportunity is included in the Guest Information Guide.

2. If a patient, patient’s families, friends or others involved in the patient’s care would like access to the patient’s open medical record, a representative of the health care team (nurse or provider) will be present to assist and answer questions related to the medical record.

3. If the patient or legal representative request an amendment to his/her medical record, the nurse or provider will contact HIM to consult on the appropriate request forms (GSH policy 20-00-07). The reviewer may not write directly on, amend or cross out any existing documents within the original record.

4. Access to a patient’s open medical record may be denied if the patient information contained in the record can cause substantial and identifiable harm to the patient (i.e. abuse cases, psychiatric evaluations, etc.). In this instance a provider may give a summary to the patient. In situations where a medical diagnosis has been made but not communicated to the patient/family by the physician, access to the open medical record may be delayed until the diagnosis has been discussed.

5. When patient requests to see documentation stored electronically (i.e. nurses notes, care plan, vital signs, etc.), a nurse may assist patient to view this information on the computer.

6. If the patient, patient’s family, friends or others involved in the patient’s care request printed information from the open medical record, the patient or legal representative must sign an “Authorization for Release of Information”. This form will be placed in the patient’s medical record.

7. Requests for closed medical records will be referred to the health Information Management Department.

(Reprinted with permission from Good Samaritan Hospital, Kearney, Nebraska)
Strategies for Sustainability

Monitoring for consistent practice is an essential component of any organization’s shared medical records implementation plan. Doing so thwarts off complacency and promotes consistent practice unit-to-unit, shift-to-shift, caregiver-to-caregiver. Below are some suggestions to support you in hardwiring the practice.

Data Collection
Develop a system for collecting and analyzing monitoring data, such as a simple spreadsheet or database that will enable you to track shared medical review offers, participation, opt-outs, and potentially information sought out by patients requesting to review their record.

Unit Huddles
Periodically conduct huddles with all unit staff to discuss their experiences with sharing the medical record, both what has gone well and what has been a challenge. Solicit their ideas for how the process could be improved.

Periodic Observation
Having a nursing leader periodically observe the processes of notifying patients of their ability to review their medical record and for sharing that information could be useful in uncovering barriers and/or inconsistencies in messaging and implementation. Provide feedback to individual staff members who appear to be struggling with implementation.

Check-Ins with Medical Executive Committee
Maintain open lines of communication with the medical staff about their experiences with sharing the medical record. Keeping this dialogue going will not only alert you to challenges in implementation and barriers to participation that need to be addressed, but will also uncover powerful stories of impact that can be shared to strengthen the organization’s commitment to the practice. These check-ins should also include reports on impact as demonstrated through improvements in quality data being monitored.

Leadership rounding
Have leaders inquire of staff about their experiences with sharing the medical record during leadership rounds. Ask about how they’ve seen the initiative benefit patients and families, what challenges they’ve encountered, and how proactively encouraging patients and family members to review the record as has affected their own work flow and care delivery processes. It is important to incorporate these types of questions into leadership rounds during the initial implementation process, but it is also worthwhile for organizations with established shared
medical record policies and procedures to use this strategy to ensure that practice remains alive and well within the organization.

**Patient rounding**
Patient rounds provide an opportunity for real-time feedback on the effectiveness of communication mechanisms about the shared medical record. When rounding on patients, ask them if they were offered the opportunity to review their medical record. If yes, explore whether they opted in to do so, and why or why not. If no, ask if they would be interested in having a nurse review the record with them.
Additional Resources:

**Planetree Patient-Preferred Practice Primer Shared Medical Record Webinar**


**Additional Patient-Preferred Practice Primers available through Planetree:**

- Patient-Directed Visiting
- Care Partners
- Bedside Shift Report
- Patient and Family Partnership Councils and Beyond: Solutions for Making Good on the Promise of Partnering with Patients

**Patient-Centered Care Improvement Guide**

- A free download available at [www.patient-centeredcare.org](http://www.patient-centeredcare.org)

**Long-Term Care Improvement Guide**

- A free download available at [www.residentcenteredcare.org](http://www.residentcenteredcare.org)

**The Putting Patients First Field Guide: Global Lessons in Designing and Implementing Patient-Centered Care**

- Available to purchase at the Planetree Storefront at [www.planetree.org](http://www.planetree.org)
Reputation
Planetree, Inc. is a mission based not-for-profit organization that partners with healthcare organizations around the world and across the care continuum to transform how care is delivered. Powered by focus groups with more than 50,000 patients, families, and staff, and over 35 years of experience working with healthcare organizations, Planetree is uniquely positioned to represent the patient voice and advance how professional caregivers engage with patients and families. Guided by a foundation in 10 components of patient-centered care, Planetree informs policy at a national level, aligns strategies at a system level, guides implementation of care delivery practices at an organizational level, and facilitates compassionate human interactions at a deeply personal level. Our philosophical conviction that patient-centered care is the “right thing to do” is supported by a structured process that enables sustainable change.

Approach
A very common adage asserts that where there’s a will, there’s a way. If only good intentions were enough to achieve a patient-centered healthcare system, but experience has proven time and time again that desire alone does not generate change. Planetree provides the pathway to change, a structured methodology for

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<th>The Planetree Approach: A Roadmap to Patient-Centered Care</th>
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humanizing, personalizing and demystifying the patient experience, customized to your organization’s culture and needs. Informed by the stories and insights of patients, long-term care residents, family members and healthcare professionals, the Planetree approach guides organizations in making patient-centered care the centerpiece of a cohesive strategy that accelerates quality improvement and positions your organization to create change that will last through:

- Development of infrastructures to support change
- Implementation of patient-preferred practices
- Transformation of organizational culture.

Solutions
To achieve this, Planetree offers a range of solutions, including on-site assessments and staff development, virtual training, speaking engagements and immersion programs to steer organizations toward a patient-centered future. Fundamental to our approach is the belief that connecting staff with the purpose of their work, and educating them with new skills in a supportive, empowering environment unleashes their potential as effective change agents. Our menu of coaching, education and experiential offerings focuses on:

- Discovering the most powerful levers of change in an organization
- Activating caregivers to problem solve and create change
- Advancing these efforts in the spirit of continuous quality improvement, and
- Innovating to raise the bar for what patients, families and caregivers can expect from a patient-centered healthcare experience.

Planetree provides an unparalleled opportunity to tailor a set of solutions that will advance any organization’s culture change effort.

For more information on coaching and training available to support you in implementing shared medical records or developing your patient-centered culture, visit www.planetree.org or contact Jim Kinsey, Planetree’s Director of Member Experience, at 203-732-1365 or jkinsey@planetree.org.