patientlink®
Better Patient Connection · Better Data Collection

Case Study

Using Tools to Improve Workflow, Reduce Data Entry Costs, and Standardize Data for Reporting: A Case Study of INTEGRIS Health's Use of PatientLink®

PatientLink® Removing the Barriers to Enter and Access Patient Information

Client Profile

- 9 hospitals and care facilities in Oklahoma
- 9,000 employees
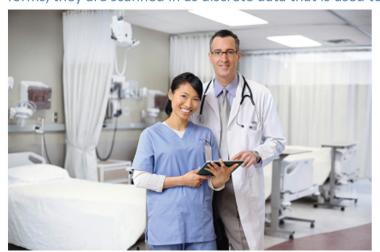- 2,500 physicians

Outcomes

- Reduced transcription costs
- Saving up to 15 minutes of data entry time per patient
- Successfully attesting for Meaningful Use
- Improving care quality measurement

"In terms of attesting for Meaningful Use, PatientLink is a real game changer," Livingston said. **"Before, we were running scripts and looking in four or five places to find the information that we need. Now it's much simpler to get the information out. I know we're much more accurate with our documentation and it's easier to find the information we need."** Dr. Livingston said.

A by-product of using the PatientLink forms is that it allowed IPS [INTEGRIS Physician Services] to standardize clinical terminology among all of its practices, which has helped with quality reporting. **"We have a common, standard vocabulary for the chart across our enterprise and we can put exactly the right term in exactly the right place in order to data mine,"** Livingston said.

The PatientLink® Scanning solution provides coded forms for patients to fill out. The forms look similar to the "fill-in-the-bubble" forms that are used for standardized tests, such as the ACT or SAT. Once patients complete the forms, they are scanned in as discrete data that is used to populate specific fields within the EHR. Scanning the front and back of the form takes less than two seconds, and eliminates 10 to 15 minutes of manual data entry time.

"Providers and staff have been thrilled with PatientLink®. It speeds their rooming of a patient and allows the nurse to focus on the clinical questions and interacting with the patients that sometimes gets missed when she has to enter reams of information," Livingston said. **"It has allowed the nurses to 'visit' with the patients, get to know them personally, and look them in the eye – instead of turning their back to them to face a computer."**