

CHAPTER 2

Health Record Staff Orientation and Development

I. POLICY

A viable orientation, in-service training and on-the-job training staff development program shall meet the initial and ongoing educational and training needs of health record staff. HRS staff shall receive the basic orientation program provided by In-Service Training and shall participate in the ongoing In-Service Training program. HRS staff shall receive in-service training on standardized health record system policies and procedures. HRS staff shall receive formalized on-the-job training in the skills needed to perform their duties at their optimum performance level.

HRS staff shall receive training in injury prevention, contagious diseases, employee assistance programs, sexual harassment, affirmative action, over-familiarity, upward mobility, disaster preparedness, and fire safety. HRS staff shall receive cross training in health record system functions. HRS staff shall be permitted to participate in upward mobility training opportunities to enhance their skills and job performance.

II. PROCEDURE

- A. The HRS Supervisor shall assess training needs of his/her employees, and
- B. Provide employees with formalized on-the-job training structures for improvement in health record activities to acquire or enhance knowledge or skills. This training shall include:
 1. Introduction to the primary purpose of the Health Record System.
 2. Importance of current, correct, and accurate records.
 3. Necessity for readily available patient records and information.
 4. Maintenance of confidentiality of patient health-related information.
 - a) Patient's rights.
 - b) Release of confidential information:
 - (1) Access to information by only authorized persons.
 - (2) Process of release of information in specific and general circumstances.
 - (3) Access to information by the patient.
 5. File maintenance activities and responsibilities:
 - a) Unit health record (UHR) system.
 - b) Record locator/record-tracking system.
 - c) Transfer and receipt of patient UHRs.
 - d) Loose filing.
 - e) Integrity of file system.
 6. Equipment maintenance and usage:

- a) Computers, typewriters, word processors.
 - b) Duplication equipment.
 - c) Facsimile.
 - d) Embosser/Addressograph.
 - e) Dictation equipment
7. Processing of UHRs:
- a) Encoding of diseases and procedures.
 - b) Reporting to Health Care Cost Utilization Project and other agencies.
 - c) Qualitative analysis functions.
 - d) Quality assurance program.
 - e) Medical transcription and processing.