

PRACTICE MANAGEMENT TECHNOLOGY

Drive your practice into the modern era

Joined-up management processes will help practices run a tighter ship, explains

Peter Connor
(right)



THE SHOCKING news that private practices are losing thousands of pounds due to the poor state of their business support systems (front page, *Independent Practitioner Today*, November 2010) must have made uncomfortable reading for many independent practitioners.

If practices do not respond to phone calls quickly and politely, surely this begs the question as to how effectively the practice is being managed overall?

Independent practitioners need to move into the 21st century and take firm control of their practices to maximise performance. Key to this will be for doctors to take advantage of the many tools that are available to help them join up their business processes and maximise efficiencies.

So where to start? A decent practice management system will immediately take you to the next level of efficiency by integrating your business processes. There are several systems on the market – some are advertised in this magazine – and they all carry out similar functions.

Practice management systems

In essence, a practice management system is a single piece of software that will help you manage all your practice processes in one place. The more advanced ones are web-based and some involve installing software on your computer.

All of them make life considerably easier for specialists, medical secretaries and practice managers by managing all the business functions required in a busy practice – from creating clinical records to managing documents, raising invoices and tracking payment.

Your practice management system should move you from an



Our November edition reported the results of an incognito phone survey

old-fashioned paper-based practice based on bulky files of letters, faxes, lists and labels to a computer-based, paper-light practice, fully geared up for maximum efficiency.

Electronic billing

As well as creating invoices, your practice management system may also provide the option to submit electronic bills for insured patients direct to the insurers.

Without a doubt, when it comes to maximising practice efficiency, electronic billing is an option that cannot be ignored. There is an enormous reduction in the

amount of time spent by practices on getting invoices out and payments in.

Bills arrive at the insurers more quickly with consequently faster settlement; queries can be highlighted and resolved more speedily. The subsequent improvement in a practice's cash flow can be significant.

For example, the UK's private healthcare electronic billing network, operated by Healthcode, provides an independent clearing service for the main private health insurers, linking hospitals and consultants with the insurers

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YOUR PRACTICE MANAGEMENT SYSTEM SHOULD:

- Create patient information records – containing clinical notes, appointments, billing and correspondence history
- Manage the practice diary – including appointments, clinic and theatre sessions and waiting lists
- Manage patient billing – raising invoices for both insurers and self-pay patients
- Provide accounting statistics and reports – producing statements, reconciliation, debtor and year-end reports
- Provide a document management system – for appointment letters, shortfall and debt reminder letters, statements and invoices

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through a secure payment system. With extremely high security standards demanded of the system, the network provides encryption to online banking standards to ensure secure data transfer and storage.

Data security

The issue of data security is no longer the sole preserve of banks and insurers. It is essential that all parties handling patient data – specialists, GPs and their practice staff – are aware of the consequences of losing sensitive patient information.

Independent practitioners with sloppy or unreliable practice systems are undoubtedly running a higher risk of losing data. NHS organisations are often in the firing line for losing sensitive personal data. How long will it be before the Information Commissioner's Office (ICO) turns its fire on the private healthcare sector?

DATA SECURITY ESSENTIALS

■ **Strong password protection**

Use at least eight characters in your password with a combination of letters, punctuation, symbols and numbers. The greater the variety of characters the better, so use the entire keyboard, not just the letters and characters you use or see most often. Do not use family or pet names or birthdays. Change your password frequently and, of course, never share it with anyone.

■ **Limit access to data**

Ensure patient data is only available to staff members who need it to carry out their work.

■ **High encryption of data in transit**

Data on portable devices (USB sticks, CDs, laptops) should be encrypted so that the data is useless if lost.

■ **Consider using a professional data exchange service**

Data is stored securely and transmitted via a secure encrypted connection

Too many risks are being taken too often, from consultants placing patient information on an unencrypted memory stick and transferring it to their home computer for work at the weekend, to private GP practices sending or

receiving patient identifiable data by fax or email.

Portable data devices such as USB memory sticks and laptops must be encrypted. Only secure systems should be used to transfer patient data. Standard, unen-

rypted email is inherently insecure and should never be used for the transmission of any confidential information.

It is worth noting that the ICO has recently imposed its first monetary penalties for serious data protection breaches.

The first penalty of £100,000 was issued to Hertfordshire County Council for two serious incidents where employees faxed highly sensitive personal information to the wrong recipients.

The second fine of £60,000 was imposed on an employment services company for the loss of an unencrypted laptop containing personal information relating to 24,000 people. It is not hard to imagine how similar incidents could take place within a medical practice.

To the future

There are some potentially exciting developments that could transform the way in which inde-



How long will it be before the Information Commissioner's Office turns its fire on the private sector?



pendent practitioners run their practices. Developing a system that can help specialists increase GP referrals is just one example.

To make accurate, informed referral decisions, GPs require information. They all have their own networks of consultants and specialists for some private referrals, but they are going to need more than this in today's fast-evolving private health sector.

Patients have different requirements and priorities and, increasingly, expect their GP to have accurate, up-to-date information about the different treatment options available to them.

For example, is the consultant recognised by the patient's insurance company? Is the consultant available at a time to suit the patient in the hospital of his or her choice?

The answer lies in the development of a global Directory of Services based on common standards. In essence, this would allow GPs to refer by postcode, specialty, hospital and appointments available, but in a common language and terminology consistent across the healthcare sector.

Undoubtedly, a global Directory of Services would smooth the way for patients and, for well-organised consultants, the impact on the bottom line would only be positive.

The million-dollar question is whether or not the private medical sector has the will to raise the bar and develop some common standards to the benefit of everyone involved. The danger is an ingrained culture within private practice that could prevent progress beyond the systems currently in place.

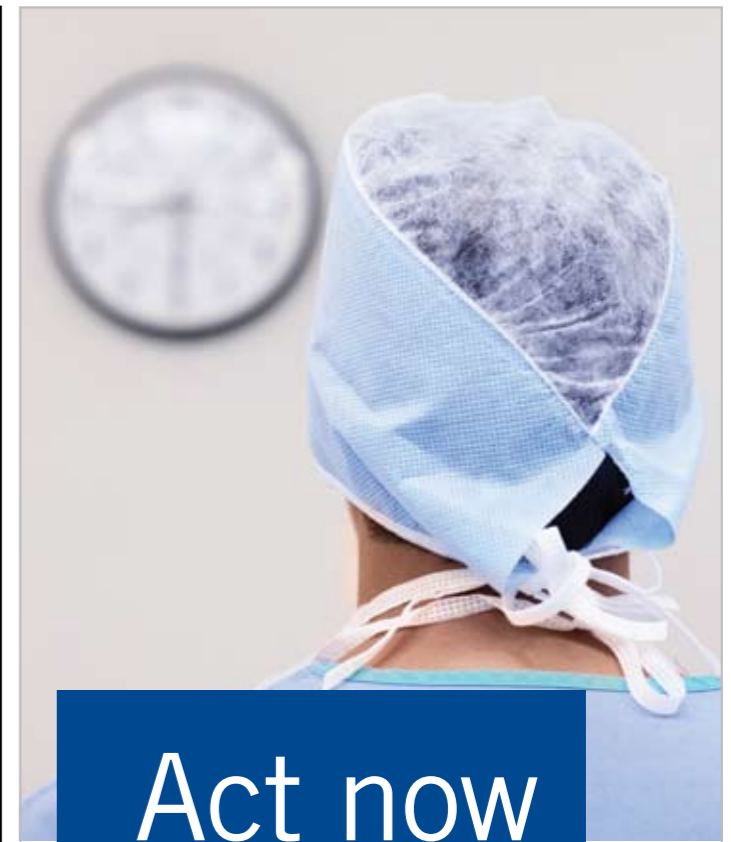
So, is there room in the private health sector for increased efficiency and joined-up processes? There definitely is and there are plenty of tools out there to help independent practitioners transform their business systems.

Research the options available and, when you have made your choices, invest in the time needed to really understand how the systems can work to best advantage for you, your practice team and, ultimately, your bottom line. ■

Peter Connor is a director of Healthcare, providers of online practice management and billing software



Standard, unencrypted email is inherently insecure and should never be used for the transmission of any confidential information



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