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## AIM

Our department, Health Information Management Services ('HIMS') is relying on vendor's scanning services for the conversion of paper medical records to digital medical records for all scanning projects.

We aim to create a new scope of work for HIMS and save costs by becoming vendor-independent in the near future.

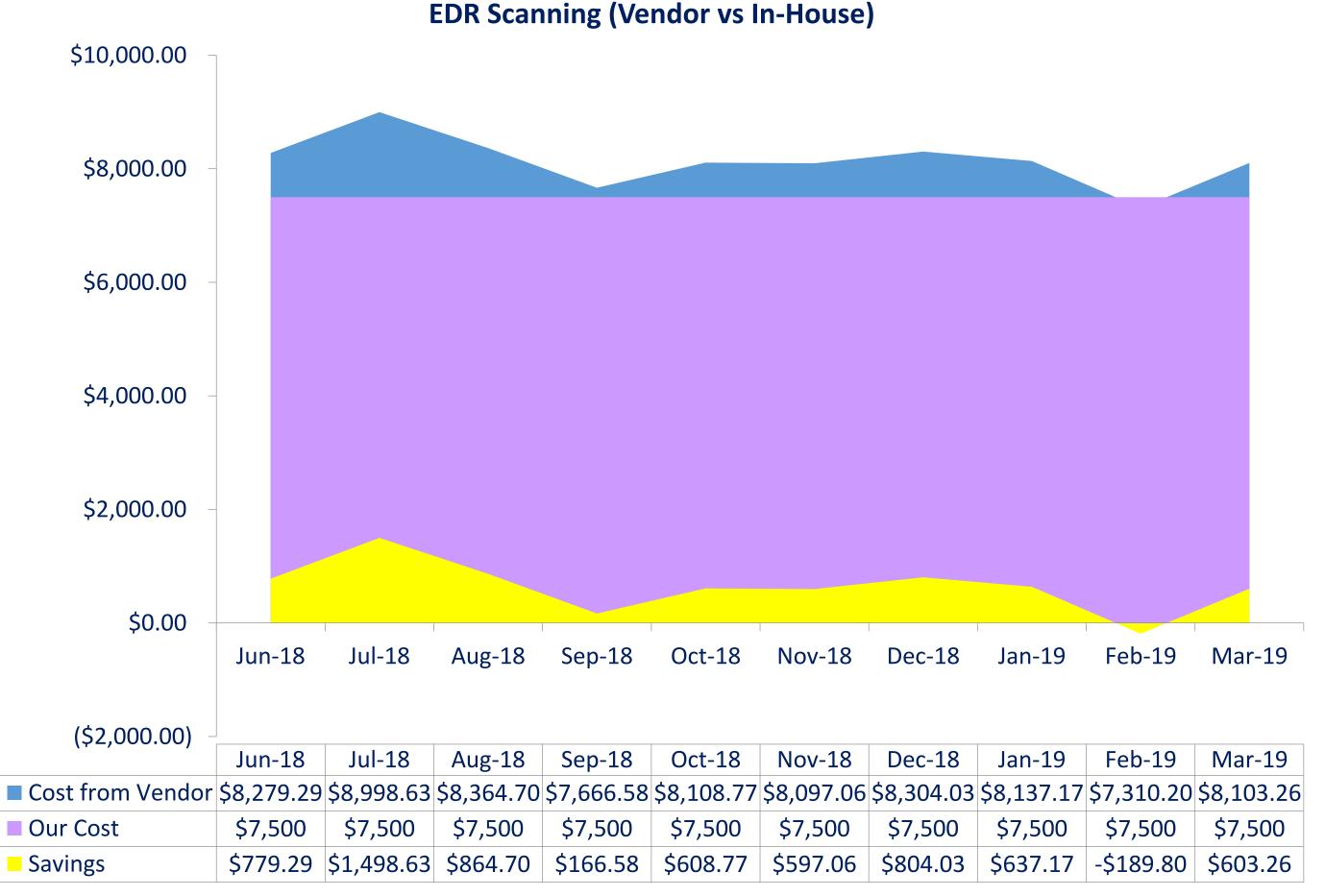


## METHODOLOGY

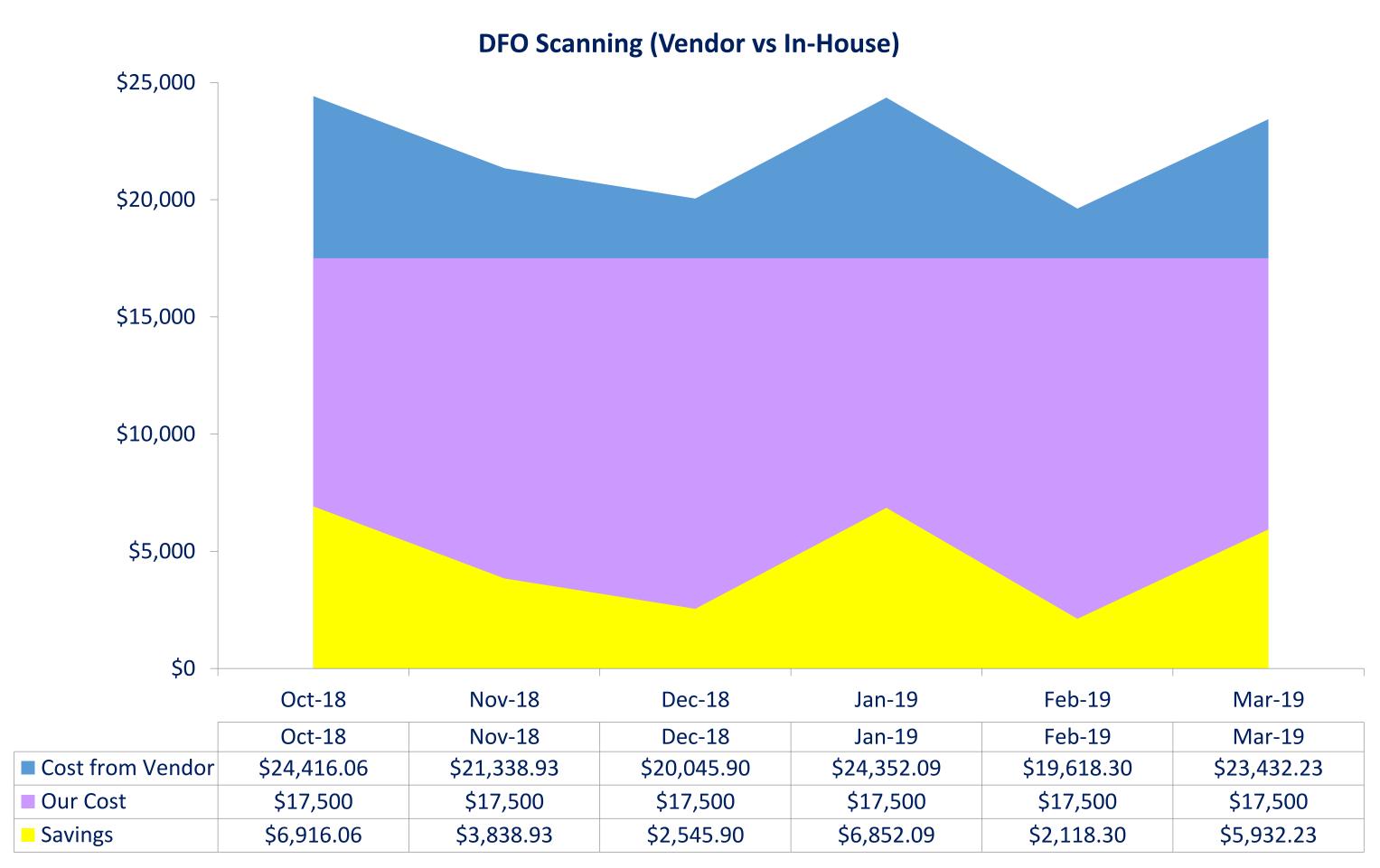
- Negotiated with vendor to train the trainers on the scanning processes
- Created a training road map for our existing staffs
- Built up our staffs' capabilities to undertake a new scope of work
- Cross-trained our staffs for different scanning projects to optimize manpower needs and provision of coverage for each other
- Introduced in-house scanning done by HIMS staffs, took over the following scanning projects from vendor progressively:
  - ► Phase 1 in June 2018: Emergency Department Records ('EDR')
  - Phase 2 in October 2018: Dayforward Outpatient ('DFO')

## RESULT

Achieved the following savings as a result of taking over EDR and DFO scanning projects completely from vendor:







DFO Scanning: \$28,203.51 (cost savings for 6 months)

## CONCLUSION

Since the introduction of in-house scanning, we have:

- Saved costs; and
- Created a new scope of work for HIMS allowing our senior staffs to acquire new knowledge, coinciding with our organisation's belief of developing and growing its human capital and the nation's support of lifelong learning

HIMS will roll out Phases 3 and 4 in the near future to take over all scanning projects such as Dayforward Inpatient, active old Outpatient and Inpatient notes from vendor completely.