JOB DESCRIPTION

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| 1. **JOB IDENTIFICATION**
 |
| Job Title: | Clinical Coding Clerk (Ayr and Crosshouse Hospitals) |
| Responsible to :  | Head of Health Records Services |
| Department(s): | Health Records |
| Directorate: | Acute Services |
| Job Reference: | HR61 |
| No of Job Holders: |  |
| Last Update (insert date): | February 2016 |

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| **2. JOB PURPOSE** |
| To extract clinical data from patients’ caserecords and clinical summaries, encode, compile and validate Scottish Morbidity Records for submission to Information and Statistics Division. |

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| **3. DIMENSIONS** |
|  | **Ayr, Biggart & East Ayrshire** | **Crosshouse** | **Ayrshire Maternity Unit** |
| No of Beds | 607 | 626 | 56 |
| No of Discharges | 40,569 | 48,776 | 6,121 |
| Out-Patient Clinic Attendances | 205,260 | 235,857 | 7,818 |
| * New attendances
 | 58,545 | 66,335 | 2,446 |
| * Review attendances
 | 146,715 | 169,522 | 5,372 |
| Accident & Emergency Attendances | 44,926 | 73,978 | N/A |
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| Staff in Post | 118 | 179 | 23 |

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| **4. ORGANISATIONAL CHART** |
| Please see attached. |

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| **5. ROLE OF DEPARTMENT** |
| The aim of the Health Records Service is to ensure that procedures are in place to bring together the Health Professional and accurate, relevant patient documentation at the correct time and place to support patient care. Clinical data is now held within a variety of mediums and the department is at the forefront, harnessing the potential of the various computer systems both administrative and clinical to support delivery of optimal clinical care fit for today’s modern Health Service.**The service comprises of 6 main elements:*** Control and maintenance of patient appointment systems
* Initiation, retention safe-keeping and production of patients’ records
* Registration and recording of all patient encounters
* Compilation, validation and submission of all Scottish Morbidity Records and statistical returns
* Provision of administration service to respond to data requests made under the relevant “Acts”
* Provision of clerical, administrative and reception services to support clinicians in the delivery of clinical care
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| **6. KEY RESULT AREAS** |
| * To facilitate creation of Scottish Morbidity Records by extracting and recording patient demographic, administrative and clinical data.
* To extract complex clinical data from patients’ caserecords and discharge summaries in order to allocate diagnostic codes for inclusion in Scottish Morbidity Records.
* Assign International Statistical Classification of Diseases and Related Health Problems, 10th Edition (ICD10) and Office of Population Census and Surveys Classification of Surgical Operations and Procedures (Version 4.7) (OPCS4.7) code numbers to diagnostic and procedural terms to National Standards.
* To enable accurate recording of data by collating missing source material, e.g. missing discharge letter or histology reports prior to commencement of coding process.
* To validate and submit Scottish Morbidity Records to Information and Statistics Division ISD, Edinburgh for inclusion within the National files.
* To record data in accordance with ISD conventions and coding rules and ensure coding books are maintained and updated on a regular basis.
* To provide the hospital with accurate patient related information by the constant and continual retrieval, input and amendment of data through TrakCare Patient Administration systems.
* To complete SMR data returns within 6 weeks from discharge by searching for and obtaining caserecords, which are currently in circulation around the hospital, and attending other hospitals.
* To undertake personal development to ensure skills are updated and maintained.
* Demonstrates own duties to new or less experienced coding officers to ensure standardisation of approach and best practice.
* To retrieve caserecords for ongoing audits and undertake ad-hoc statistical report requests to facilitate informed decision making.
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| **7. EQUIPMENT AND MACHINERY** |
| * Personal Computer
* Photocopier
* Fax
* Bar Code Scanning and reading devices
* Shredding Machine
* Telephone system
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| **7b. SYSTEMS** |
| * Postholder uses the Patient Management, Clinical Portal and encoding systems to abstract diagnosis, co-morbidities and procedural terms. The Postholder amends deletes and adds data according to the policies and procedures which are defined within the department.
* Postholder uses “WoodWard” Simple Code in order to select appropriate diagnostic and procedural codes to input into the Scottish Morbidity Record.
* Maintains manual health records filing system.
* In-patient scheduling
* Out-patient scheduling
* Abstracting
* Chart Tracking
* Admissions Functions
* MPI (Master Patient Index)
* Microsoft office suite
* Clinical Portal
* E-Viewer
* EPR for Mental Health
* Hepma Pharmacy System
* Unisoft System
* Scottish Birth Record
* Sigma Maternity System
* Symphony ED system
* CHI 24
* Electronic Results Reporting on TrakCare
* Hospital Intranet
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| **8. ASSIGNMENT AND REVIEW OF WORK** |
| Much of the work is demand led and generated through the admission and discharge of patients from hospital in patient and day case facilities. The patient administration system identifies all patients who have outstanding, uncompleted SMR data sets. Each coding clerk is responsible for a segment of work which may involve one, several or all specialties within the hospital. The Clinical Coding and Standards Manager and two Senior Clinical Coders within the section allocate specific duties, agreeing cover and division of workload to accommodate staffing numbers/planned leave etc. Clinical Coding staff requires being able to work on their own initiative and as part of the Coding team. Staff openly discusses various cases and share experience and expertise in order to achieve optimum effect. ISD clinical coding guidelines and conventions are available within the section and the Senior Clinical Coder is readily available to answer more complex issues or escalate the query to the Terminology Advisory Service for advice/clarification. |

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| **9. DECISIONS AND JUDGEMENTS** |
| The Postholder participates in section meetings and assists with the formulation and refinement of departmental policies and procedures.The Postholder makes judgement on patient demographic data and retrieves from various sources any missing information that is vital to accurately code a patient’s record. e.g., Histology/pathology reports, postcodes, General Practitioners. |

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| **10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB** |
| To extract comprehensive diagnostic and operative data from the clinical content of the discharge summary and caserecord folder, translating this accurately into the most appropriate code using ICD10 and OPCS4.7. Often co-morbidities and operative complications are not listed clearly within the structured diagnosis and operation terms which the clinician has summarised in the clinical discharge letter (immediate or full), the clinical coder requires to read through various documents within the record to glean this information.The Office of Population, Census and Surveys Classification of Surgical Operations and Procedures (OPCS4) was last updated on April 2014; as a result this has not kept up with modern surgical techniques. It is therefore not always possible for the Clinical Coder to find an exact match and under these circumstances they require to seek advice from Medical staff, other colleagues and the Terminology Advisory Service in order to be able to allocate the most appropriate code number.To be able to decipher clinicians handwriting.In order to comply with the Performance Assessment Framework (PAF) SMR data requires to be submitted within a 6 week timescale. The section continually strives to achieve this. |

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| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| WHO | METHOD | NATURE |
| Consultants / Nursing Staff | Face to face, by telephone | General coding queries |
| Other Clerical Officers  | Face to face, by telephone | Coding/general enquiries and request of caserecord |
| Ward Clerkess | Face to face, telephone | Obtaining caserecords and missing investigation results |
| Medical Secretaries | Face to face, by telephone, in writing | Coding and general enquires and retrieval of caserecords |
| Information Services/ Clinical Effectiveness and Infection Control | Face to face, telephone | Clarification of codes and results |
| Practitioner Services Division | By telephone | Queries relating to patients. |
| Register Deaths | Electronic | Informing of deaths  |
| General Public | Face to Face | Enquiries |
| Other Hospitals | Telephone | Coding queries and return of records |
| Laboratory/Radiology Departments | By telephone, face to face | To obtain investigation results |

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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| PHYSICAL EFFORT/SKILLSManual Handling of heavy caserecords, lifting, bending and stretchingKeyboard SkillsLifting, packing, unpacking bundles of caserecordsPushing heavy trolliesSitting for long periods of time using VDUMENTAL EFFORT/SKILLSTo source information from relevant documentation.Need for prolonged concentration for data accuracy.Focused to meet targets and deadlines Effective CommunicationMulti-taskingProblem SolvingRetaining knowledge of coding conventions Proficient in use of Patient Administration and Encoding SystemsAbility to decipher handwritingThe ability to concentrate in a noisy working environmentFrequent interruptions both face to face and by telephoneStaff require to be able to prioritise tasksEMOTIONAL EFFORT/SKILLSCoping with demands of the jobExposure to disturbing photographsReading distressing materialCompletion of workload to deadlineMaintaining confidentiality and anonymity concerning relatives, friends and colleagues who may have attended as day cases or in-patientsENVIRONMENTAL DEMANDSExposure to anxious individuals (occasional)Exposure to verbal aggression (occasional)Exposure to dusty environment (caserecord filing systems, shredding)Exposure to warm working environment (daily)Risk of infection from contact with ward areas.  |

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| **13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRE TO DO THE JOB** |
| * A good all round knowledge of Health Records Departments procedures and their contribution to the delivery of health care (minimum 2 years)
* Good all round knowledge of the Patient Management System functions, particularly the admission process and functions
* Understanding of the structure and content of the International Statistical Classification of Diseases and Health Problems (10th Revision) and Office of Population, Census and Surveys Procedural Classification (4.7 Revision)
* Knowledge of medical terminology, anatomical and physiological terms acquired through workbased training and experience.
* ECDL or equivalent
* Good communication and interpersonal skills
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| **14. JOB DESCRIPTION AGREEMENT**A separate job description will need to be signed off by each jobholder to whom the job description applies.Job Holder’s Signature: Date:Head of Department Signature: Date: |

Postholder

Senior Clinical Coder

Coding and Standards Manager

Head of Integrated Health Records Services