

Health Information Compliance Alert

EHR: 8 Tips for Successfully Adopting a New EHR

For best results, provide follow up training sessions.

Looking to switch out your EHR? If so, you're not alone.

In 2015, the number of clinicians replacing their EHRs increased 59 percent from the previous year, according to research conducted by **Software Advice**, a Gartner company. Nearly one-quarter of replacement EHR buyers surveyed said their current EHR was "cumbersome and faulty." User complaints sound all-too-familiar: "takes tons of clicks to get through," "is not intuitive," and "keeps crashing," to name just a few.

Before you rush to replace your EHR, you need to take a good, hard look at what's wrong with your old one, cautions **Heather Haugen**, a **University of Colorado** Health Informatics professor and presenter at HIMSS 2016.

If you've decided you just can't make your old EHR work for your organization and you need a new one, take these steps to ensure the adoption is successful, Haugen recommends:

1. Don't leave the whole thing to 'the IT person.' Leaders from all over the organization — especially clinical leaders — should spearhead the adoption effort. No one is really surprised by this theory, Haugen says, but they often ignore it in practice.

2. Traditional training methods are ineffective and insufficient. If the only training plan you have is to herd together your clinicians and staff and cram 450 things about the new EHR into their heads during a long training "event," you will fail, Haugen warned attendees at HIMSS 2016.

Warning: Clinicians are great learners — that's how they got through school and that's how they thrive in a rapidly changing health care world. But even the best learner can't master a new EHR in one long, poorly conducted training session. And because clinicians are used to being good learners, they will assume an EHR is crap if they encounter challenges as they use it. You will lose clinician buy-in if you don't plan training carefully, Haugen says.

Here are four training strategies for you and your vendor to try:

- Focus the initial training session on the essential elements your clinicians and staff need to go live, and customize that training to different roles in your practice. You can train on the advanced stuff later.
- If your vendor offers to shadow your staff with trainers during implementation, take them up on the offer. Vendors can help you identify "super users" in your health care organization who are picking up the new EHR well — folks you can use as peer-to-peer trainers following implementation.
- Make sure your EHR learners "drive" at the keyboard or tablet a lot during training. "The brain is a terrible storage mechanism," Haugen explains. "Muscle memory is key."
- Reinforce initial training with short 5-10 training huddles after implementation. Focus these trainings on features people are "missing" as they use the new EHR. Clinicians are competitive and they tend to focus better if you alert them to what they're missing and show them a better way, Haugen says.

3. Make sure you look at metrics during adoption to understand what's working well and correct what's not working well. Metrics can include proficiency assessments, clinical outcomes, quality and safety, financial outcomes, productivity, and cost of ownership and maintenance, Haugen says. Define your metrics for success before implementation and outline an assessment schedule that you follow, she recommends. After go-live, everyone is going to be too tired to remember or care about those metrics, she warns.

4. Understand what Haugen calls "the tyranny of time." At some point during adoption, user proficiency with your



EHR will peak, and then will slowly decline over time and as the vendor upgrades and people lose familiarity with those upgrades. Make sure that leaders in your organization are familiar with upgrades and that you have a program to train your staff on the changes.