9 Keys for EHR Implementation Success

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Introduction

Introducing an electronic health record (EHR) into your agency or program is an adventurous journey with many challenges. Choosing a software vendor who will be a worthy co-pilot makes the difference between those challenges becoming roadblocks and disasters, or simply being small obstacles along the way that are easily overcome.

You know it’s vital preparation for a long road trip to give your car a checkup and pack the essentials; it’s just as important to your success in implementing your EHR to prepare ahead for your voyage.
The first key you’ll need for your EHR journey is a guide to terminology. When traveling to a place where another language is used, smart travelers pack a language dictionary in order to communicate well and follow the signs. The same principle applies when you are purchasing software based on a standardized terminology.

Like French, Spanish, or any other language, standardized terminologies have their own vocabulary and rules. It is essential that all of your line staff and supervisors learn and practice applying your new terminology as part of your training process.

Your software vendor should include training in the terminology underlying the clinical portions of the EHR. Expect to spend time learning the application and taxonomy and how they work together. Don’t count on “winging it”! Otherwise, just like the hapless traveler who can’t understand the road signs, your journey will be a bumpy one indeed.

One example of a standardized terminology is The Omaha System, “a research-based, comprehensive practice and documentation standardized taxonomy designed to describe client care... and includes an assessment component (Problem Classification Scheme), a care plan/services component (Intervention Scheme), and an evaluation component (Problem Rating for Outcomes).” Welcome Page. (2017, May 23). Retrieved from The Omaha System: http://omahasystem.org/index.html
Having good tires makes all the difference in your traction on the road, especially when encountering wind or rain during a journey. It is just as important to prepare for resistance from staff who don’t want to change their documentation practices. There will be resistance, even when the perfect system is introduced! Devise strategies in advance to eliminate or minimize reasons for resistance.

Common reasons for resistance:

1. Lack of buy-in from key players (this is a big one)
2. Lack of comfort using computers (ask your software vendor for a list of basic computer competencies staff will need)
3. Lack of clear instructions or guidelines
4. Unrealistic expectations regarding productivity during the transition to a new system (conscientious staff who pride themselves on their output frequently have difficulty coping with a temporary drop in productivity)
5. Unrealistic expectations regarding time required to learn and customize software to meet your program’s unique documentation needs.
6. Not enough practice time
7. Lack of regular feedback
A GPS is essential when traveling to new places. The generic software user guide on data entry, etc. that your vendor should provide you is only a starting point. You will want to develop your own agency guidelines to address your agency-specific or program-specific documentation needs (such as HIPAA practices or policies regarding correction of charting errors).

Involve staff in this process, especially when taking new guidelines for a “test drive”. Don't forget to involve your clerical staff in developing guidelines and let staff know that there will be new routes along the way (guideline revisions).

“Be careful not to drag the process on so long that you lose momentum and enthusiasm.”

Chapter 4
Trip Itinerary: Implementation schedule

Just as you have certain destinations or mileposts planned for your road trip, you need a trip itinerary for your EHR journey. Allow enough time for practice and feedback before launching your new EHR system, but be careful not to drag the process out so long that you lose momentum and enthusiasm.

Talk to other agencies who use the same software as well as your vendor to help you develop a reasonable itinerary. Consider “rolling go live” dates; perhaps one group can start using the EHR before others to work out any issues that did not come up during training.

Above all, be flexible. Your schedule/itinerary will change as you go along!
Chapter 5

Drivers Training: Practical application

You wouldn’t drive on a journey without having completed a driver’s training course and getting your driver’s license.

Neither should you and your staff jump into implementing a new product without ample time for training and practice with your new software and its underlying standardized terminology.

The Course

All staff (clerks, supervisors, clinicians, aides) need to have scheduled time set aside for both individual and group practice. Champ Software has found that this is often the key to a successful implementation. If you don’t schedule practice times, other tasks always come up and staff will not practice enough. Keep in mind, you don’t want them to still be practicing with your EHR using your real clients after going live; you want staff ready and prepared.

It’s important to have a software vendor who will provide you with a training database and training modules (preferably all online and accessible from any computer at any time). Your job is to schedule individual and group practice times and check that all staff are following through. A project manager or mentor should be available, in person or by phone. Remember to practice documenting all types of contacts for all types of clients that your program follows. Ask your software vendor for case study examples and build your own.
Chapter 5

Drivers Training: Practical application (continued)

The Instructors

Shared ownership is very important! You accomplish this by creating an implementation team. Your implementation team will be your “driving instructors” for the course, and should be made up of new staff and seasoned staff, and include inexperienced clinicians as well as experienced clinicians. Pull in staff who are enthusiastic about the project, as well as some task-oriented members and some people-oriented members. Consider adding one or two “resisters,” to anticipate issues that may come up, as well as someone with a quality assurance, and preferably, an outcome-based quality-improvement (OBQI) perspective. Ask your software vendor for team-building hints.
Nothing strikes fear into the hearts of staff more than the term “audit”. But just as vehicle inspections can reveal car problems that can be easily repaired before becoming bigger issues, chart audits can demonstrate where staff need additional training and identify problem areas.

Present chart audits (or you could call them chart reviews) as a positive key learning tool for everyone. Make it fun. Have staff print out sample charts from your training database and exchange them at a staff meeting. Supervisors should review them as well.

Audit forms should include checklists regarding your standardized terminology, computer and software competency, and agency-specific content (you want to be sure that key information for billing, etc. is not being missed). Ask your software vendor for a sample audit form that you can use.
Relief Drivers: The team

Being the only driver on an extensive journey is exhausting, which is why bringing along some friends to take over when a break is needed can be such a great plan.

Supervisors

Having supervisors in your corner during a transition keeps you from becoming exhausted. However, if your supervisors don’t feel good about the change or if they don’t take the time necessary to learn and promote the system, staff will pick up on that. As project leaders, you and they need to be able to convey your enthusiasm and vision! Get supervisors on board.

- Have them talk with outside supervisors who have “been there”
- Show them lots of examples of positive aspects of your new system (such as outcome reports)
- Ask your software vendor for sample reports and case studies to share
- Make sure that they fully participate in practice sessions, entering visits, etc.
- Tell your staff to ask supervisors questions first, rather than waiting for the information to be presented. That helps encourage your supervisors to learn the language and software better themselves and save your phone from ringing as much!

Focus Groups

Focus groups are solution-oriented line staff that meet regularly with project leaders, both during and after implementation of your system. They are particularly helpful in agencies spread over a large geographical area. Focus group membership should rotate and include staff from every supervisory role, program, or geographical area as well as those who are good communicators.

They are responsible for relaying information to and from individual staff meetings, and meeting regularly with project team leaders to discuss solutions to issues that have come up. Manage the tone of those meetings. They should be solution sessions, not complaint sessions.
It's always terrible to find yourself many miles from a rest stop when you are hungry or need a break from driving. That's why it's important to chart out your rest stops ahead of time. Plan on regular updates and in-services at least quarterly.

Share the vision! Your Focus Group members should take on increasing responsibility for presenting material. Review items that have come up since your last meeting such as guideline revisions, chart audit results, etc. and keep it upbeat! Remember, snacks are a must!

A basic necessity of road trip survival is to have a number to call for roadside assistance if you get a flat tire or have car trouble. Staff need to know who to call when they need help. Make sure that they know who to call for what type of problem: language question, data entry question, IT question, etc. Ask them to check with their supervisors first, then project leaders.

And who do you call for help? Your software vendor should always have support staff available during business hours (be sure to ask about this). Your software vendor should also be able to refer you to other agencies with similar program needs.

As always, network, network, network! Check out the Helpful Links & Resources section at the end of this book.

“Your software vendor should also be able to refer you to other agencies with similar program needs.”
Helpful Links:

http://omahasystem.org
The Omaha System is a research-based, standardized clinical documentation language designed to meet the needs of community health nurses and other community based health providers, as well as schools of nursing. It includes all three components of care (diagnoses, interventions, and outcomes) and was specifically designed to facilitate the statistical analysis of data.

http://omahasystemmn.org/
The Omaha System Community of Practice offers hundreds of care plans and pathways that other agencies have created and have donated for use. Use these care plans and pathways as-is or modify them to meet your needs. (Note the addition of “mn” to the URL.)

http://www.himss.org/
The Healthcare Information and Management Systems Society (HIMSS) is an organization aimed at providing global leadership for the optimal use of information technology (IT) and management systems for the betterment of healthcare. Basic information about the EHR and related subjects can be found under the “resource library” tab on the homepage.

http://www.nursingworld.org/OJIN
The Online Journal of Nursing is a free peer-reviewed publication that provides a forum for discussion of the issues inherent in current topics of interest to nurses and other healthcare professionals, including electronic health records.

References:


Champ Software's electronic health record solution is built to meet the unique needs of public health agencies. Proven in more than 130 public health departments across the U.S., the solution helps public health officials accomplish their mission to deliver high quality care to their communities.

“We believe in public health.”

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