

## Top EHR implementation tips

Many practices rush into implementing electronic health record (EHR) systems and other forms of health information technology (IT). With federal incentives now in place, it is especially important for practices to slow down, plan and be strategic about their decisions. Prolonged productivity loss or abandoning a system is the last thing any practice can afford. You and your practice can avoid popular missteps by following a few fundamental rules of thumb.

- 1. Plan.** Planning is key. Implementing an EHR is large undertaking for any practice, and your success depends upon how diligently you plan. Begin by appointing a project champion, or maybe two—one physician and one administrator—followed by a project team. The team should represent leaders who will manage and have ownership of the project. The team should meet regularly and outline each stage of the preparation, selection, implementation, deployment and optimization of the EHR.
- 2. Focus on people and change management.** Getting the whole practice on board is key to your success. IT-related projects, no matter the industry, have a high failure rate<sup>1</sup> that is largely due to poor change management. Remember, an EHR system will likely change the roles and duties for every staff person, which, in turn, can lead to fear and anxiety. Change of this magnitude changes the culture of the practice. So it's important for the project champion(s) and project team to address staff concerns openly. All staff must feel his or her feedback is important and that the change is in the best interest of the practice and its patients.
- 3. Communicate.** Communicating the business case for change will help the staff see the reasons for the change. It's best to have a written vision statement. You must prove to the staff that the EHR system represents an improvement over your current paper process. Keep constant communication with staff throughout the project. Continue to identify the perceptions and sources of resistance. Spend more time working with staff members who are less comfortable with technology. They might just end up being superusers!
- 4. Select the right system.** Many EHR options exist today. Some systems are more robust, others offer more limited functionality. Keep in mind that to be eligible for the current federal incentives for EHR adoption, you must use "Certified EHR technology as defined by the Department of Health and Human Services. Certified EHR technology may come in the form of a "complete EHR" or a combination of "EHR modules." [Find certified EHR technology here.](#) EHR systems can also be accessed differently. Some systems are installed on a server in your practice; other systems are hosted by application service providers and accessed via the Internet. The key is to identify which system best fits your needs. You may only need basic functionality; anything else may be distracting or go unused. You may also opt to have someone else maintain and upgrade the EHR. This can save you a large upfront investment, and you won't need IT resources to maintain the system.
- 5. Visit practices.** If at all possible, visit a practice that uses the EHR system you are considering. This will give you a far better idea how the system will work in a real practice than a vendor's demonstration.
- 6. Document workflows/processes.** Before you can implement an EHR system, you must understand how your entire practice operates. Consider such things as patient flows for different types of visits, point-of-care documentation, in-office communication and document management (e.g., dealing with paper information you receive from other sources). After documenting these processes, you can begin to plan for new processes with the EHR. Once the system is in place, you can modify and finalize your processes.
- 7. Determine data conversion method.** Moving data from the paper chart into the EHR is major concern for many practices. Determine a process to get information from paper charts pre-loaded into the EHR. Remember, before you go live, you will need to load demographic data for all patients from your practice management system (or billing service). Most practices will also enter certain basic data into the EHR for about 20 percent of patients—most typically

<sup>1</sup> Lewis, Bob. (2003). "The 70-percent failure," InfoWorld.

those with chronic illnesses, those with an upcoming visit, and those with a history of several visits in the past year. Preload these patients' active problem and medication lists and their allergies. Some practices also add data from the most recent diagnostic studies (e.g., ECGs, mammograms, colonoscopies). Create a checklist of each item to ensure that all items have been collected and entered into the EHR.

- 8. Train and re-train.** One-day training will not yield the type of system use you need. Staff will need training before “go live” and after. Taking on smaller pieces of technology may help make your staff's transition easier. There is nothing wrong with training staff to use the computer, then the practice management system, electronic prescribing and other small applications, and finally the EHR.
- 9. Avoid too much customization.** A thorough system selection process should get you close to choosing a system you can use without modification. While it's tempting to think you need customization, it will invariably cost you time and money. Instead, focus more on learning the system as it is designed and on selecting from the options provided.