

Peer-led EHR training saves physicians' scarcest resource: time

JUN 8, 2018

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Implementation of the EHR has altered the patient-physician dynamic, quickly becoming the cumbersome third wheel. And while Kaiser Permanente has among the best systems, physicians repeatedly listed EHRs as among the highest stressors in group surveys. To overcome this, Southern California Permanente Medical Group (SCPMG) implemented peer-led training.

Physicians at SCPMG were having relationship problems with the KP HealthConnect, which negatively impacted the patient-physician relationship, as well as doctors' well-being and joy. To repair this relationship, a group of expert physicians, trainers and support staff were sponsored to create an educational program called Kaiser Permanente HealthConnect Essentials (KP HCE). This course was designed to maximize the effectiveness of the group's biggest resource: the physician.

Peer-led training helps physicians gain the skills they need, allows best practices to easily spread across specialties, improves quality, efficiency and readability of documentation, sends a clear message of support, and restores time back to doctors. In only three years, more than four thousand physicians have completed KP HCE with over 96 percent recommending the voluntary training to their own peers.



"It is an investment in your people," said Dawn Clark, MD, an ob-gyn at SCPMG. "Not only do the

folks love it, believe it saves them time and makes them better, but they truly appreciate the investment of the organization in them as human beings.”

When physicians were asked if the training equipped them with critical skills that can be used in their daily operations, virtually all agreed. And nearly all felt it was a productive use of their time.

“The results are remarkable and seem to be sustaining as the program matures with exit surveys of participants giving similar reviews,” said Ken Robinson, MD, an emergency medicine physician at SCPMG.

More than 80 percent of physicians also feel that they will save four to five minutes per hour in new efficiencies after taking the course, which equates to about 40 minutes a day. Here is how peer-led training helps Southern California Permanente Medical Group give time back to physicians and improve efficiency.

Use only peer-based training

When physicians were using the KP HealthConnect, issues arose because of additional time requirements for use compared to completion on paper. Physicians also had difficulty with the system’s complexity with only about 30 percent retention of classroom training material. To overcome this, SCPMG used only peer-based training.

“This is, after all, relationship training and physicians are more likely to retain information taught by people they know or trust,” said Dr. Robinson.

Each attendee enjoys learning from their peers and feels that the course adheres to both basic and advanced HealthConnect users. And because the physician trainer fully understands the workflows and demands their colleagues might encounter, which improves learning opportunities.

3 days devoted to training

Each session is designed to provide three days of protected educational time with no patient responsibilities. Physicians attending these sessions receive continuing medical education credit—up to 26 hours depending on the specialty and curriculum.

“The time is used for learning, building new tools and maximizing system efficiency to ensure that when providers go back to clinic they can immediately start using what they have learned,” said Dr. Clark. “The protected time HCE is regularly cited in surveys as the best CME ever experienced in a

career, among other accolades.”

Providing protected time away from the clinic schedule helps to either learn skills for new physicians or break maladaptive imprints from legacy users of the system.

Find the super users

One myth to providing peer-based training is that trainers are hard to find, said Dr. Clark. However, these super users exist in every organization. Physician trainers are chosen by their specialty peers, often self-identified as super users or champions, and are paid for their time at the HCE course.

Many might also think that once physician trainers are found, they won't have time to lead. Physician trainers find a way to be at each session, every time, said Dr. Robinson. And while cost is also a variable, SCPMG has found the benefits far surpass the cost with improved efficiency and skills that translate to physician well-being and better care delivery.

The AMA's STEPS Forward™ collection offers free online modules that help physicians and system leaders improve well-being, including learning about the organizational changes that lead to physician satisfaction and improving resiliency. That includes modules on EHR implementation, in-basket management and team documentation.

Several modules have been developed from the generous grant funding of the federal Transforming Clinical Practices Initiative (TCPI), an effort designed to help clinicians achieve large-scale health transformation through TCPI's Practice Transformation Networks.

The AMA, in collaboration with TCPI, is providing technical assistance and peer-level support by way of STEPS Forward resources to enrolled practices. The AMA is also engaging the national physician community in health care transformation through network projects, change packages, success stories and training modules.