EMR Implementation Issues

Healthcare providers across the country recognize the benefits of electronic medical records (EMR) to improve care, reduce costs, and improve efficiency. But as physicians we also know the challenges of keeping up with information technology. The Healthcare Information and Management Systems Society (HIMSS) developed some suggestions to help you successfully implement an EMR product.

Develop an Implementation Budget

Practices often underestimate the amount of work required to prepare an EMR product to go live. Early in the implementation process, it is important to accurately assess the amount of work that needs to be done vs. your available resources. Small clinics that are lean to begin with will either work a lot of weekends or spend a lot of money hiring extra help. Making it half way to your goal with a drained bank account is a horrible place to be. Plan ahead and budget carefully.

Create a Project Plan to Guide Your Process

If you're a large clinic, your vendor will likely provide you with a project plan to guide your process. If you're a small clinic, you also should ask the vendor for a project plan. Implementations can be complex. There are many tasks to complete, and many different people are assigned to complete them. A good project plan will outline expectations, establish deadlines, and clearly assign responsibility for completing implementation tasks.

Assign an Internal Project Manager

Whether you have one doctor or 50 in your practice, your vendor's project manager needs only one person to coordinate implementation activities in your office. This will help streamline the process, eliminate confusion, and increase efficiency. The importance of having a single point person cannot be overstated. If you don't have someone in your clinic who can assume this role, consider hiring a project manager on short-term contract or budgeting consulting dollars to complete this task.

Develop a Paper Chart Strategy

Early in the life of your project, you will make a critical decision about what to do with your existing paper charts. Some practices scan everything so they can shred the charts and avoid storage costs. (Note: Laws on the destruction of medical records vary from state to state. Destruction of medical records should be performed only in accordance with appropriate state laws under the direction of practice owners/executives and legal counsel.)

Others may choose to scan nothing or chose critical documents to load into the electronic record. Carefully consider the pros and cons with Physician Champion guidance (see below).

Buy as Much Training as You Can Afford

Substantial training is required for implementation success. The vendor's trainers know their EMR product better than anyone. If you are a big clinic, use the "train the trainer" approach: pay the vendor to train a small number of your staff as "super users." These staff members can then train the rest of your clinical staff. If you're a small clinic, don't skimp – invite the entire staff to participate.

Vendors tend to have different training methods. Many will ask you to complete self-guided study modules online or via CD before the trainer even shows up. Vendors also will provide training manuals (often one set per license). These materials make handy references for when you get stuck or need to troubleshoot a problem. However, most clinics achieve maximum knowledge transfer from live sessions with a trainer.

Be Prepared to Do the Work

Many clinics are surprised at the amount of work required to prepare an EMR product to go live. It is common for practices to review the amount of implementation and training dollars in the purchase schedule and assume that the vendor will do the implementation work for them. Actually, the clinic is simply purchasing training from the vendor to teach clinic personnel how to do the configuration work themselves. The clinic will be responsible for completing time-consuming tasks such as naming common lab tests, re-naming ICD-9 and CPT codes to match the clinic's current super bill, creating short lists or quick-pick lists of favorites, and customizing or personalizing common visits to match your style of practice. Allow a reasonable amount of time to complete this work between scheduled training sessions. Otherwise, you will slow down the process or cost yourself more money by canceling training sessions on short notice.

Designate a Physician Champion

Many of configuration and implementation tasks can be assigned to non-physicians within the practice to speed up the project and protect your time. Physician oversight, however, is absolutely required! The physician staff must not relinquish decision-making responsibilities or they will not be happy with the final product. Physician leadership throughout your implementation is essential to your practice's success.

Develop a Project Team

Your project manager should assemble an internal EMR committee who meet regularly to make key decisions and keep the project moving. Key members include: Physician Champion, clinical staff, and medical records, billing, and IT administrators.

Study Workflow

Workflow is the way your clinic conducts its daily business. Electronic tools like EMR devices can help simplify workflow and improve patient care. Sometimes, decisions that affect workflow are made in the interest of ease, time, or staffing concerns but do not adhere to best practices for patient care. Make sure you, the physician, maintain oversight when studying workflow in your organization.

Make Good Hardware Decisions

The hardware you choose to use at the point of care is important. Outdated, slow, or sub-standard (low memory) devices will cause extreme frustration in the long run. Always follow the "recommended" (not "minimum standard") guidelines when purchasing hardware. Acclimate yourself with new hardware devices before using it in the exam room with a patient. If you plan to use anything portable, like a tablet, take it home and explore the different features. This way, you are comfortable with the new device before you ever bring it into a clinical setting.

Be Patient

Remember, a clinic doesn't become paperless overnight. It is a process that takes time. Make sure your goals are realistic. Many clinics choose to aim for a "paper light" status and move toward "paperless" gradually. It is wise to phase-in changes over time. The providers in your clinic will certainly feel (and probably be) less productive at first. Be patient and give everyone time to adjust. Do what you need to do to achieve your "go live" status. Don't worry about leaving some tasks for Phase Two. Tasks such as connecting multiple lab interfaces or designing patient portals can be implemented six months to a year after your initial go-live.

Assess Your Progress

After you're past the initial learning curve and back to full productivity, look for ways to increase productivity with your EMR. Don't be afraid to customize your templates, add short-lists, default common responses or use template-based documentation to replace even more transcription. There are many ways to use your EMR to improve quality of care for your patients, as well as boost your bottom line. Reassess your health information strategy annually, and make sure you continue to be a clinical and technical leader.