As an independent non-profit corporation, The Carolinas Center for Medical Excellence (CCME) will provide leadership, education and services to promote improvement in the quality and cost effectiveness of health care.

Implementing Your EHR
Webinar Schedule

- Optimizing your EHR for Quality Improvement – March 23 and 26
Session Objectives

• Apply best practices for system implementation
• Evaluate staffing needs for the EHR implementation
• Embed meaningful use criteria into the build of the EHR
• Understand the relationship between documentation and clinical reporting
• Host a successful EHR go-live event
Why Promote EHR/ HIE?

Effective EHR/HIE Implementation will:

• Improve patient quality of care
• Prevent medical errors
• Reduce health care costs
• Increase administrative efficiencies
• Decrease paperwork
• Expand access to affordable care
EHR Adoption Steps

- Pre-work
- Assessment
- Planning
- EHR system selection
- *EHR system implementation*
- EHR post implementation evaluation
- Clinical system improvement
EHR Adoption Step 5
System Implementation
EHR Implementation Steps

• Finalize implementation work plan
• Implementation kickoff
• Hardware and software delivery
• Scanning and backloading charts
• System build
• Testing
• Training
• Go Live
• Turn over to EHR vendor support
Step 1
Finalize Work Plan
Evaluation of Vendor Work Plan

Who does what

- Determine vendor tasks
- Determine practice tasks
- Ensure all anticipated tasks are included
- Confirm overall implementation timeline
- Affirm implementation approach (big bang or phased)
Vendor Tasks - Application

- Provide content knowledge about the use, design and configuration requirements
- Support clinical system application specialist during the implementation
- Provide education on product features
- Advise on availability target time frames
- Provide support for testing and activation
- Provide assistance for content development
Vendor Tasks - Training

- Develops training material specific to installation
- Provides on site training, deployment, and support services
- Design, gather information on and develop course materials
- Conduct training needs analysis
Vendor Tasks - Training

• Develop course materials and other documentation and use e-learning technologies to support user in self-help efforts
• Create training programs for internal and external education
• Note: During EHR Selection ask for a copy of User Manual and sample course materials
Vendor Tasks - Integration

- Provides knowledge/guidance on interfaces
- Programs maps and coding for interface
- Supports vendor application specialist during the implementation
- Advises on availability target time frames
- Provides support for testing and live
Your Tasks

- Overall project management
- Project compliance with contract
- Manage implementation team
- Define project goals/metrics for measurement
- Monitor overall project progress and milestones
- Monitor project budget from a cost and time perspective
Your Tasks

- Communicate with your staff, stakeholders
- Coordinate staff schedules for training, tasks
- Determine workflows
- Decision making on system set up
- System testing
- Ensuring tasks are complete
- Go live planning
Shared Tasks

- Scheduling hardware/software delivery
- Implementation planning
- Coordinating testing
- Coordinating training
- Some implementation activities
- Coordinate development projects
- Coordinate integration projects
Step 2
Implementation Kickoff
What is a Kickoff Meeting?

Meeting between vendor principle parties and customer principle parties to discuss the implementation, expectations and deliverables.
What is a Signoff?

Your vendor may require you to “signoff” on certain things throughout the implementation such as the workplan, system build, testing, training or productive use of the system. By “signing off”, you are acknowledging your acceptance, agreement or satisfaction with the item or task.
Signoff! Workplan

Review these before signoff

- Overall dates for implementation
- Onsite support dates
- Are dates sequential? Are they realistic?
- Resource allocation
- Required tasks for conversions, interfaces, etc
- Required tasks for build, testing, training
Step 3
Hardware and Software Delivery
Hardware/Software delivery?

• If purchasing hardware from the vendor, the hardware will be delivered to your site and the vendor may be onsite for set up.
• Your vendor may be onsite to set up servers and load EHR software
• If ASP or hosted, your vendor will arrange for connectivity to remote server
• Software delivery must occur before you can backload/scan charts!
Signoff! Hardware/Software Delivery

Review these things before signoff:

• Did you receive what was contractually stated? Quantity of items, specification of items?

• Can you connect to the remote system?

• Can you access the EHR software?

• Does the EHR application navigate as expected and with no server errors?
Step 4
Scanning and Backloading
Backloading and Scanning Key Considerations

- Which paper charts will be scanned? All charts? Active charts?
- What order will the charts be scanned?
- Which parts of the charts will be scanned?
- Will indexing be used?
- Which parts will be manually backloaded?
- Who will scan? Backload? And When?
Planning Consideration

Before you can begin backloading and scanning, you need to have some core pieces of your EHR built such as allergy lists, medications, providers, problem lists, etc.
Step 5
System Building
What is System Building?

- the process of customizing drop down boxes and pick lists with your practice specific information
- Adding practice specific information (providers, payers, local pharmacies, etc)
- entering system default settings
- adding users, giving user permissions
- customizing templates, etc.
What is the Process?

- Depending on your vendor, building may be a practice responsibility or a vendor responsibility. This should be stated in your contract and on the workplan.
- Either way, it is helpful if your practice implementation team has received EHR application training *before building or making decisions*.
What is the Process?

The Vendor should:

• conduct analysis of your practice and workflows to determine the best way to build your system to suit your needs.
• Gather information for conversions or interfaces (if contracted)
• Educate you on building best practices and guide you through the process
What is the Process?

The Practice should:

- Share information you have already learned from your workflow analysis and needs assessments
- Gather all forms that are currently used. These will be a source of information for the build and also remind you of your system needs
- Have staff/space allocated for building tasks
Common System Build Items

- Problem Lists (ICD-9-CM) (User/Clinic Preferred)
- Medication Lists (User/Clinic Preferred)
- Allergy Lists
- Orders Lists (CPT-4, HCPCS)
- Vital Signs
- Health Maintenance (Disease Management and Wellness)
Common System Build Items

- External Providers/Specialties
- Pharmacies
- Forms (Authorizations and Consents)
- Image types and subtypes (Scanned images)
- Health Plans
- Laboratories
Common System Build Items

- Templates, review of systems, chief complaint, physical exam, medical history
- Provider UPIN, NPI, SureScripts ID, etc.
- Use permissions/privileges
- Practice demographic and payer information
Signoff! System Build

Review these items before signoff:

• If your vendor was responsible for building, check quick picks, drop downs and templates for completeness

• Check provider identifiers for accuracy

• Ensure complete ICD-9, CPT, drug formularies, pharmacy lists, patient education libraries and other databases were delivered

• Check permissions and rights
Step 6
Testing
Testing your EHR

- A solid testing plan includes application, integrated and “walk-through” testing.

- Start an issues log to document any issues you encounter during testing. Track the date of the error, notes on the error, who discovered the error and interaction with vendor support including the ticket number.
Application Testing

• Purpose is to ensure that every function within the EHR works properly.

• Use test scripts to help you test the system. Test scripts are documented scenarios with expected outcomes that will guide you through testing the EHR.
Integrated Testing

• The purpose of integrated testing is to test your interfaces with outside systems (i.e., your practice management system, labs, hospitals, radiology or pharmacies).

• Your vendor should help you with integrated testing and supply test scenarios. You will want to test sending and receiving information through your interface.
“Walk Through” Testing

• The purpose of walk through testing is to test new workflows, system logistics, and new policies and procedures
• Ideally, the walk-through is conducted a week or so before you plan to be live on the EHR.
Walk Through Testing Process

- Have a staff member pose as a patient and literally walk through the entire patient visit from start to finish.
- Keep notes on workflow changes so policies and procedures can be updated and distributed to all staff.
Walk Through Testing Process

- Look for holes in your process or handoffs that are not smooth.
- Is the clinical flow awkward?
- Are there any processes that need to be changed?
- Can every aspect of the patient visit be documented within the EHR?
Review these items before signoff:

- Are application, integrated and walk through testing complete?
- Have testing results been reviewed?
- Have identified issues been resolved?
Step 7
Training
Practice Training Needs

- System administrator training for EHR set-up
- End user application training (train the trainer or individual user training)
- Provider training for using the EHR in the exam room
- System maintenance training for backups, disaster recovery, etc.
System Administrator Training

- Preferably complete before system build and decision making.
- Education on how to set up the EHR to suit the needs of the practice, default settings, relationships between tables, user permissions, documenting to ensure ability to run clinical quality report measures, enabling e-rx, scanning, etc.
End User Training--Train the Trainer

Pros:
• Creates super users within your practice who can train other staff
• Super users can train the staff on EHR based policies and procedures

Cons:
• Relying on “super users” to thoroughly learn material and train others
• Super user must have time to train others
End User Training--Individual User

Pros:
- Everyone can be trained at once
- Every user gets the same quality of education
- Don’t need dedicated trainer

Cons:
- Can prevent development of super users
- Can be more expensive for vendor to train all
- How will follow-up/additional training be offered?
System Maintenance Training--Backups

Full System Backup Components:

• all clinical data (database)
• the EHR application
• hardware configuration, operating system, server configurations and any other applications required for the EHR application to function properly
Incremental Backup Components:

- clinical patient data and application data that have been added/modified since the last backup
- can be created quickly because they are only capturing the changes to the system
System Maintenance--Disaster Recovery

- Plan should include the exact steps that need to be taken to complete a full system recovery
- Should be practiced until your entire team is comfortable completing them
- Should also include downtime procedures (have paper copies of flow sheets and clinical forms)
HIPAA Requirement—Technical Safeguards

HIPPA requires health plans, healthcare clearinghouses, and healthcare providers that maintain or transmit health information electronically to provide reasonable and appropriate administrative, technical, and physical safeguards to ensure the integrity and confidentiality of the information by protecting it against any reasonably anticipated threats or hazards to its security, integrity, unauthorized use, disclosure and a contingency plan documenting the healthcare provider’s plan for data backup, disaster recovery, and emergency mode of operations.
Signoff! Training

Review these items before signoff:

- Was system admin and end user training completed per the plan?
- Has staff been trained on backups, disaster recovery, etc?
- Are physicians comfortable with using PC’s in the exam room?
Step 8
System Go Live
10 Tips for Successful Go Live

1. Modify appointment schedules to allow for the learning curve
2. Ensure staff are thoroughly trained on new EHR policies and procedures
3. Check connectivity to EHR and ensure all staff can log on
4. Check printers and faxes
5. Test documents that will be printed
10 Tips for Successful Go Live

6. Form the go-live support team and ensure they know policies and procedures
7. Communicate escalation procedures to all staff
8. Have a point person to make critical system changes on the fly.
9. Ask staff to arrive 30 minutes early on live day
10. Create signs advise patients of the EHR implementation and request patience
What is “Turn Over to Support”?

At the end of the implementation when all issues have been resolved, the vendor implementation team will turn the customer over to the vendor support team. Turn over to support marks the end of the vendor implementation phase and beginning of the vendor support phase.
Signoff! Live and Turn over to Support

Review these items before signoff:
- Have implementation issues been resolved?
- Are providers able to use the system?
- Have all contracted services been delivered?
Contact Me

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