

HOW TO TRANSITION FROM ONE EHR SYSTEM TO ANOTHER



Implementing a new EHR system affects the workflows, daily responsibilities, and capabilities of your entire organization.

In this three-part series, master transitioning to a new EHR system and get the greatest yield out of your EHR's potential.

By: Katie Lynch, CAHIMS | Dustin Miranda, CSSBB | Echo Miranda, NCP

PART I

Set yourself up for EHR success.



Technology rules our world. In most cases, it is a blessing. Advances in EHR systems have allowed healthcare providers to maximize efficiency, bridge gaps in communication with other providers, track valuable health metrics and outcomes, and so much more.

However, if your healthcare organization is considering switching from one EHR system to another, or if you simply are not getting the most out of your current EHR, then tinkering with this sort of sophisticated technology can feel daunting.

Given the high rate of IT project failures, it is no wonder that so many healthcare organizations put off implementing a stronger EHR system to the last minute.

At John Lynch & Associates, we do not see a new EHR implementation project as just an IT project. Rather, such an endeavor is clinical, executive, and granular at the same time.

Implementing a new EHR system affects the workflows, daily responsibilities, and capabilities of your entire organization. That is precisely why we have created a thorough process for ensuring you get the greatest yield out of your EHR's amazing potential.

The idea of using a new, more robust EHR system can be exciting, which is why many healthcare organizations understandably jump right into the implementation phase.



However, I caution you against using the “learn as we go method.”

After 20 years of working with healthcare providers, my team and I have seen time and time again how the organizations that take the time to plan the operation thoroughly have the most success at and after go-live.

When you first begin your planning phase, there are several things to consider, such as project scoping, financial costs, creating a timeline, risk activity, objectives and deliverables.

First take a look at the current state of your healthcare organization. Even the most high-performing organizations have a few areas of improvement that can be folded into the new EHR implementation project.

At John Lynch & Associates, we start each new project with a full valuation of your organization using our Organizational Health Assessment. We have also created a condensed version for you to use on your own. You can access the assessment [here](#).

We also use scoping tools with the C-Suite and physicians as well as the entire staff to get everyone’s input on the strengths and weaknesses of the organization prior to be-



ginning the project. Doing so allows us to protect the organization’s strengths and buff out any rough edges elsewhere.

Know your Requirements

Next, we dive into the operational requirements to ensure that the EHR system we implement is going to be able to support the organization in meeting and reporting on any requirements.

When considering what your requirements for operation, patient care, and outcomes are, remember to consider your contractual requirements, service bare minimum requirements, reporting requirements, and patient satisfaction goals.

With these criteria noted, we are able to create the framework of the new EHR system and workflows that will be established in the implementation phase. From there, we can add additional features or tools that will benefit the internal processes and maximize performance and efficiency.

Communication

During such a large-scale project as implementing a new EHR system, there will inevitably be several voices and opinions to con-

sider.

One of my favorite things about working with healthcare organizations is seeing how the smallest procedural details at the administrative or practice management level affect the major decisions made at the executive level. Much like a tiny grain of sand becomes a pearl, the most minute workflow tasks can affect the larger picture and overall health of an entire organization.

Therefore, it is absolutely critical to consider everyone’s input during the planning stage of implementing a new EHR system. At John Lynch & Associates, we take special care during our onsite discovery to collect input and feedback from members at all levels of the organization, as well as stakeholders.

Additionally, we recommend taking the time to create a communication structure or plan for team members to utilize throughout the project duration. While many teams may assume they know how they will communicate with one another, each individual may operate under a different assumption. Making the communication tools and procedures explicit from the start can save hours upon hours of valuable time.

Then we move on to sorting out the top pri-

orities for using the new EHR system. It is not uncommon for key decision makers in a healthcare organization to agree that a new EHR system is needed, but to disagree on how it will be used. This conundrum is natural and conversations need to be had to iron out the details to ensure the complete well-being of the organization is considered.

Clarify Roles

The next step is to clarify who will be doing what during the EHR implementation, training, and post-go-live phases. This is an opportunity to utilize the strengths of the unique individuals within your organization and delegate specific tasks and subprojects to department leaders.

By establishing a clear blueprint of responsibilities, communication can flow smoothly from individuals who are at face level with any issues that arise all the way up to project managers and decision-makers.

Clarifying roles also ensures there is little to no confusion with regard to next steps and responsibilities as the project begins, which – in turn – leads to improved morale and positive outcomes.

Anticipate Risk & Roadblocks

Finally, with your requirements listed, communication chains flowing, and roles established, you can move on to anticipating risks and roadblocks for the project. Doing so allows you and your team to put safeguards in place and ensure the entire implementation process thoroughly addresses all of the organization's needs ahead of time.

For example, due to the complex nature of medical reimbursement and health plan reporting requirements, reporting issues are common in healthcare organizations. With that in mind, you can anticipate challenges that may arise in the future and implement the tools you and your staff will need to conquer those challenges when they present themselves.

Setting up risk meetings or activities to constantly assess potential risks and roadblocks can help you and your team stay on track throughout the duration of your EHR implementation. Risks and roadblocks are a natural part of any large-scale process; discussing the potential for these at key intervals can save you time and resources.

Ready to tackle the next phase of transitioning to a new EHR system? Let's get started!





Promoting interoperability.

PART 2

When most people think about switching to a new EHR system, they usually think of long hours fiddling with software, beta testing, then launching the tool for the whole organization to use.

Well, there is far more to it than that.

Once you have done your due diligence in the planning phase of a new EHR implementation, the next phase is readying your new EHR system for meaningful use (aka, promoting interoperability).

The whole purpose of EHR technology is to maximize the efficiency and effectiveness of healthcare services. EHRs allow healthcare providers to serve patients better, keep them

safer, provide them with more education, and achieve greater health outcomes as we all work collaboratively in the same direction.

To achieve that overarching purpose, our consultants at John Lynch & Associates take very specific, deliberate actions when implementing a new EHR system for our clients.

Here is a glimpse into some of the most important factors to consider when executing your next EHR implementation.

Master Your EHR Map

Ideally, if you are ready to dive into building your new EHR system for meaningful use (now known as promoting interoperability), you have already done an organization-wide needs analysis. You have detailed your requirements, talked with all of your staff members from the check-in desk to the executive offices, and you have a clear picture of what





your system needs to look like to support your organization in a successful operation.

Now, it is time to map those needs to your new EHR system. By creating a list of all of your organization's data and reporting needs, you can establish your EHR system to capture all of the relevant data and none of the irrelevant filler.

From there, you can begin to map your team's workflows with the goal of allowing everyone to practice to the top of their licenses. Practicing to the top of one's license means you are maximizing each team member's skill set by assigning as many tasks as possible to each individual, starting from the lowest license requirement. This also prevents your organization from paying high-cost providers to do work that lower-cost staff members can do.

For example, begin by considering all of the tasks a practice administrator can complete and build your workflow around that skill set. Next, consider what must be completed by a nurse or nurse practitioner and assign all tasks within that licensed skill set to that team member. Finally, what must be completed by a physician? Assign all of those tasks to the highest licensed member of your team. Structuring your EHR workflows in this way allows you to maximize the time of your most qualified team members.

Meaningful Use Requires Effective Training

Meaningful use, also known as promoting interoperability, means utilizing your EHR systems in a way that fits organically with the



workflows of your organization. Rather than using an EHR system out-of-the-box and trying to conform your operation to a generic template, EHR systems can be customized to suit your needs, your workflows, and your reporting requirements.

Once you have established your EHR workflows, you can begin developing training for your entire organization.

Keep in mind that individuals will require different training depending on the roles they fill within the organization.

Start by compartmentalizing each of your organization's roles into one of these three categories:



Business: This includes roles that are responsible for patient scheduling, reimbursement, and reporting.



Clinical: This includes medically-relevant data collection that must be completed by nurses and physicians.



HelpDesk: Your organization's IT department and any other individuals who will provide support for the business and clinical staff members.

With your roles categorized, you can begin to determine which training elements will be relevant to each role within your organization. The next step, then, is training your team.

One of the biggest risks to the success of an IT project is not allocating enough time for training. However, it is one of the most common phases of an EHR implementation to be cut when time is limited.

During training, key staff members – including physicians – are out of the office, which means productivity may suffer. However,

your organization would be wise to suffer a relatively minor setback in productivity to allow all staff members to be thoroughly trained rather than suffer major long-term setbacks in productivity, record accuracy, and more later due to improper use of the new EHR system.

The importance of proper EHR user training cannot be overstated. One research study examined the unintended consequences of implementing a new computer-based data system and found that organizations are likely to suffer from increased medical errors due to a lack of sufficient end-user training.

Research shows that retention and comprehension are dramatically improved if training is spread out over the course of several days. Attempting to cram as much training as possible into one eight-hour work day yields ineffective results. Learning an entirely new EHR system and mastering it for meaningful use and maximum productivity takes time – time that will earn back its value over and over for years to come.

In fact, a study published in the AMIA Annual Symposium Proceedings Archive found that an intensive three-day off-site physician training program greatly improved the self-per-

ceived efficiency of using a new EHR system.

Training is so critical to patient care that physicians ask for more training in order to ensure they are able to perform to their fullest competencies within a new EHR system.

At John Lynch & Associates, our goal is to optimize your operation, workflows, and productivity, which is why we take the training of your staff so seriously and have developed systems for maximizing the efficiency of your staff's training.

Test, Test, and Test Again

While your organization's team members are being trained on the new EHR system, it can be extremely beneficial to utilize real-world scenarios to simultaneously test your new EHR systems and to ensure correct meaningful use of the tool.

One way to achieve this is by using mock go-live events. For example, you may assign one physician each day to test the new EHR tool with two patients. Using a real case within your new EHR system can allow you to see if there are any issues with user acceptance of the new tool, workflows, or data migration validation.

The mock go-live exercise can also provide an opportunity to test billing and reporting procedures, as well. If any issues arise, they will be limited to very few records that are clearly identifiable and the problems can be put through troubleshooting procedures immediately.



Super Users to the Rescue

Finally, one of my team's favorite ways to strengthen an EHR implementation project is to establish super users within each department.

Super users are individuals who have received more training or have more experience with the new EHR tool and who can provide ongoing support to peers in real time as soon as issues or questions arise.

A 2012 study found that physician users of a new EHR system are likely to turn to clinician

peers, also known as physician champions, 78% of the time when in need of help with the new tool.

Inevitably, hiccups will happen in the daily use of any EHR. Super users and physician champions are there to help their teammates adapt to the new system and provide in-action training for users who need additional support.

PART 3



Post-go-live: The real work begins.

-  **You planned for a successful EHR implementation.**
-  **You set up your systems and trained your users.**
-  **You reached your go-live date!**

Now What?

In most cases, now is when the real work begins. While the first two phases of a successful EHR implementation are major endeavors, post-go-live is when the rubber hits the road – and you better hold on tight.

To keep your entire organization focused and headed down the right road, a strategic post-go-live plan is a must. During your post-go-live phase, your entire organization is adapting to the new EHR system, your help desk team is getting a flood of support tickets on a daily basis, and you have mountains of data to analyze to figure out where your system needs improving.

Now is the time to buckle up and dig in so you and your team can measure success metrics and make all of the necessary final tweaks needed to ensure the health of your organization moving forward. Here is how.





Patient Satisfaction Is Priority #1

First things first. Once you transition to a new EHR system, there are bound to be bumps along the road. That is OK! In fact, it is a natural part of the process.

However, many healthcare organizations expect themselves to be able to seamlessly switch from an outdated EHR to an entirely new system without patients noticing any ripples.

Start by being realistic with your expectations and honest with your patients. By informing your patients that you are in the process of implementing a new electronic health record system and that you appreciate their patience and understanding, you can dramatically improve patient satisfaction while also collecting valuable information that will allow you to optimize your new EHR system.

Communicate openly with your patients and let them know that if they have any trouble accessing their information online or interacting with your new EHR system (such as in a patient portal or accessing educational resources), they should let you know right away. Inform your patients that the new system will improve the quality of care they are receiving and that you value their partnership in ensuring everyone has a wonderful experience at your facility.

While many healthcare organizations prefer to send out mass emails to patients, remember that personalized communication is often the most effective. Post notices in your lobby or hand out brochures detailing the changes and how it will affect your patients. Most importantly, always ask for their valued feedback.

Anticipate Issues

Whenever an organization makes a significant shift in internal processes and operations, there are bound to be issues. Common post-go-live problems include lapses in understanding the training that was provided, forgetting minor steps in a long workflow, or resorting back to old practices.

All of these issues are common and can be rectified by providing your staff with adequate training and resources to help them acclimate to the new EHR system.

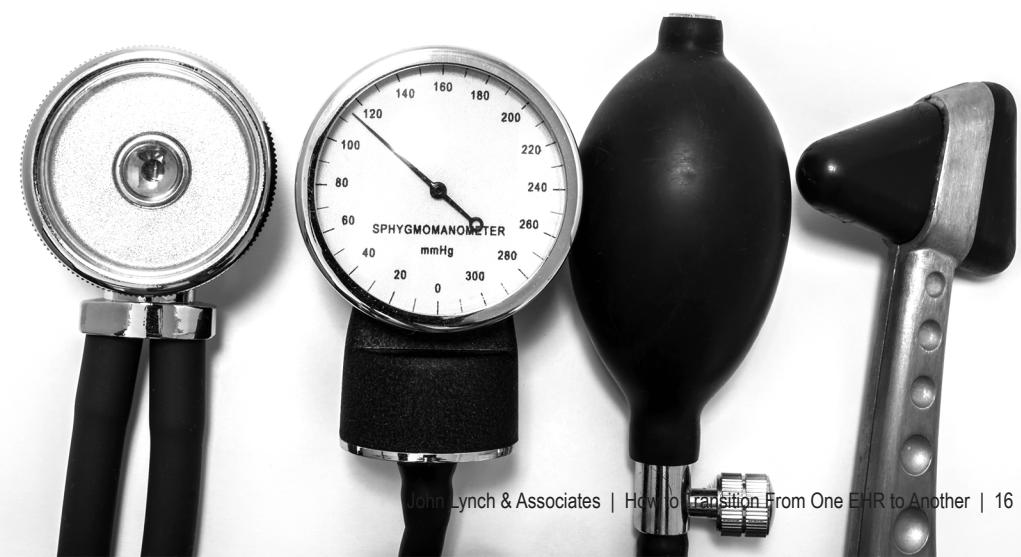
During this time, it is important to follow the needs of your staff. At John Lynch & Associates, we frequently create custom training resources for our clients during the post-go-live phase. Each organization is unique and will inevitably have unique challenges. By

creating custom training resources for your organization, you can show your administrative staff and clinicians that you are listening to them and supporting them while everyone grows together.

Establish Safety Nets

Another way to follow the needs of your organization is to support your help desk staff. Your help desk will be receiving a massive influx of requests. Ask your help desk team what the most common questions are that they are receiving.

Then, designate one person on the help desk to create a single resource – such as a PDF or a web page – that answers those most common questions and can be distributed throughout the organization. These Fre-



quent Asked Questions (FAQs) resources are proven to free up valuable time for your help desk, educate users, and provide an amazing sense of competence internally.

During the post-go-live phase, theory finally becomes practice. Your IT department and help desk staff will likely receive a number of questions that they had not thought of before implementing the new EHR system. Remember that this is part of the growing process and no one can anticipate every single hurdle before jumping into such a large project.

Oftentimes, staff members can become overwhelmed or discouraged during this phase when they receive far more support tickets than they had anticipated. However, you can help keep everyone focused and rowing the boat in the same direction. Encourage your help desk staff to tackle one project at a time with the common objective of fine-tuning the system and supporting the organization's staff.

Additionally, speak with your IT staff about the importance of open and timely communication. It is common for staff to feel frustrated about dealing with particular issues and questions a few weeks post-go-live because those same issues either were not addressed or not updated with the latest status. Even a



simple remark like, "Thank you for pointing this out. We are working on finding a fix" can make employees feel confident that their concerns have been heard and will be addressed.

Many organizations are surprised by how much work is still left to do after the new EHR

tool has been implemented. At John Lynch & Associates, we routinely provide our clients with full-time post-go-live care for 30, 60, or 90 days, depending on the size and needs of the organization. We also offer a "health check" at key milestones to ensure everything is still going smoothly or to address new issues that have presented after continuous use of the tool.

Keep in mind that the post-go-live phase is an ongoing project. Rather than slogging forward with feelings of uncertainty or overwhelm, it is a better use of your time and investment to ask for help to quickly identify and solve post-go-live struggles. By giving it the time and attention it needs, you will be ensuring the health of your organization well into the future.

Dedication to Constant Improvement

One of the best ways to keep your organization's focus on growth and constant improvement is by looking at the analytics of your EHR data. Your organization's IT department may be well equipped to handle this operation, or you may need to invest in an additional tool to maximize the effectiveness of your new EHR system.



At John Lynch & Associates, we use a process mining intelligence tool that encompasses all of an organization's systems (not just EHRs) from the front end to back end of their office. Our process allows us to create a real-time picture of any bottlenecks, gaps in service, and efficiency of processes within any system.

We are also able to set up alerts within the system to flag any anomalies in the established workflows. Using these tools, we are able to help our clients optimize their processes and services to maximize patient satisfaction and physician productivity so we can all work toward achieving positive health outcomes together.

Are you ready to dive into the exciting, fast-paced world of post-go-live care? Or does your healthcare organization need some extra help to optimize your systems and reach your full potential? Contact us to find out how we can help you make the most of your new EHR system.

As always, we invite you to connect with us at 623.980.8018, ask about the tools we use with our clients, or access our Organizational Health Assessment [here](#) to start your journey toward a more effective healthcare organization.



Consulting Excellence. Advancing Healthcare.

[in](#) [f](#) [t](#) [o](#) johnlynchandassociates.com | 623.980.8018

Pr27:17