Staff Training for Electronic Health Record Systems

You have invested significant time and money into the purchase and implementation of your new EHR system. Now it is important to take the time to ensure all the staff is effectively trained on both the new system and their changed work processes and procedures. Effective training will provide all practice staff with the maximum level of system understanding to effectively perform their work using the new system, and provide an opportunity for them to gain confidence and proficiency. The result will be a smoother transition for all involved, including your patients.

The following outlines some tips for gaining maximum value and results from your initial EHR system training and positioning your practice for success with future training requirements.

1. Choose Effective Training Personnel

In most vendor contracts, some vendor training responsibilities are included and a fee for this training has been included in the EHR system purchase agreement. While vendor-supplied trainers are usually very experienced in training personnel in the use of the EHR application they support, they are unfamiliar with the current processes within your practice and your specific plans for using the features of the EHR system once implementation is completed. It is, therefore, highly recommended that your practice supplement the training support provided by the vendor with your own staff resources to help tailor the training program specifically for your practice environment.

Selecting the right individual(s) to support training is important since, once involved with the initial training by the vendor, these individuals will become the best resource for on-going training of new personnel joining your practice over time and update training for existing personnel when new system upgrades and changes are made. Unless you are fortunate enough to have an experienced trainer already within your staff, you will be wise to select an individual (or several individuals to assure back up) with excellent communication and support skills and invest the time and expense in having them thoroughly trained by the vendor. Once trained, the designated practice trainer(s) will also be excellent resources for assisting with configuration and testing tasks during implementation.

2. Set Up Training Facilities

For effective EHR system use, hands-on training is essential. Since much of the training for your staff will be provided in group settings by job and system functions, a training area with multiple computers (or other input devices) will be needed to support the simultaneous access to training examples by individual students in each class. Setting up a location either within or near your facility with sufficient equipment necessary to accommodate group classes will take time. The training facility should be sufficiently away from day-to-day clinic operations to ensure instruction will not be impaired by work-related interruptions. Keeping travel/driving time to a minimum will help support easier training of all staff members, but often finding a convenient location is a challenge. Work with your vendor to determine the maximum class sizes by topic and plan your training area accordingly.

An effective training room may need to include network capabilities for web connectivity for one or more computers. It will definitely need to be equipped with an overhead projector, white boards and flip charts.

3. Develop Training Materials

The vendor will already have a large quantity of training materials that are tried and tested. These materials usually include class content outlines, proficiency tests, student guides, course evaluation forms and reference guides. Many systems also include on-line training modules via the vendor website. While these materials are comprehensive and address all the many features and functions of the EHR system, they do not address the specific system setup parameters, templates, workflows, and other software settings and definitions that you have designed to make the system work best for your unique practice needs. Your own practice-designated trainer(s) will need to work with the vendor trainers to customize the training materials and examples to closely resemble your intended structure and use of the system. Additionally, the courses and agendas should include discussions of the specific policies and procedures your practice has chosen to use related to the system functions being taught (e.g., your defined mandatory template elements, mnemonics and screen flows, your security rules, etc.). User manuals and quick reference guides should all be tailored to address your specific EHR system design, configuration, policies, and procedures to make them fully useful to system users.

4. Coordinate Training Schedules for Maximum Gain

It is important to schedule training as close to Go-Live as feasible to ensure understanding is fresh in the minds of staff as they begin using the new EHR system. If there appears to be a likelihood of Go-Live delay due to other problems, it is best to postpone training accordingly. If, however, the delay occurs after training has been completed, it may be necessary to schedule and conduct refresher courses before the actual Go Live date.

Initial user training for all staff members can be difficult to schedule with employee work schedule restrictions and daily work loads. Training schedules will take thoughtful planning and coordination and may involve limiting patient schedules to support training within the work day or overtime arrangements. Class times can be expected to average four hours in duration each and, therefore, are not easily accommodated nor are they fully effective after a full work day.

Lastly, it is very important that staff involved in the training sessions is not interrupted by work functions while they are learning the new system. Scheduling sessions should include consideration for available coverage within the practice unless training outside business hours is possible.

5. Conduct User Training

Training sessions should be grouped by job functions, and staff in each session should only be trained for those aspects of the EHR application needed for their jobs. Cross training and additional system skills can be addressed later, once individuals are proficient with the system for their regular job responsibilities.

All students in the class should have full access to a computer terminal for the "hands-on" portions of the training program and receive their own individual sets of training materials and guides, allowing them to take notes and highlight areas they feel appropriate.

Proficiency tests given at the end of a class will help ascertain whether the students have achieved the basic skills required to effectively use the application. The tests serve to reinforce key points of instruction and may help to identify areas where instruction was incomplete or unclear. Test results will point out where individual one-on-one assistance should be targeted.

6. Provide On-Going and Remedial Training

Your practice will need to plan ahead for ongoing and remedial training needs. Preparing a standard training program for new employees, specific to their job functions, and covering both EHR system usage and policies and procedures relevant to their jobs, will make orientation faster and more productive. On-the-job training for computer skills should be discouraged. Bad habits and incorrect information often get passed along when formal training is bypassed.

Remedial training should be tailored to a specific issue or problem area. This will save time and will avoid implying "punishment" for the trainee.

Minor changes and additions to the application can often be addressed with written instructions and/or CBT training. Additional face-to-face classes will need to be scheduled when major application changes are made by the vendor in a new release of the software or when your practice is rolling out new EHR functions for system users.

Emphasis on supportive training for your practice staff will help to ensure their confidence, proficiency and EHR system success.