With the EHR, a little coaching goes a long way

By Lia Novotny | July 16, 2019

The electronic health record (EHR) is often cited as the cause of myriad physician woes, from burnout to after-hours work to the looming physician shortage.

It's true that EHR systems should continue to evolve to better meet the everyday needs of physicians, says Kevin Ban, chief medical officer at athenahealth. "There's a call to action for EHRs to be more about workflow and clinical practice guidelines and less about billing," Ban says.

But in the short term, might a little EHR coaching go a long way toward easing physician frustration? Ongoing research by athenahealth, including a 2018 survey of nearly 1,400 physicians, suggests just that.

In-depth interviews with select survey respondents indicate that targeted, individualized EHR coaching at the time of launch is one of the best ways to overcome the administrative burden on physicians and better align the EHR with clinical practice.

To have the biggest impact, such coaching should take advantage of built-in tools provided by the best EHRs, like templates and order sets, combined with an understanding of individual physicians' workflow needs.

Here are five successful tactics for EHR coaching:

1. Make EHR training part of physician onboarding

New providers spend three days with the pair, completing online training modules, learning templates, and asking in real time any questions that come up as they actually use the EHR. Additionally, each provider shadows an EHR "superuser" to learn more tricks of the trade.

Training varies depending on the provider, according to Beebe's IS team. For example, when training an internist recently, the team spent half a day just working on the templates we have built to make sure they hit everything for Medicare

wellness exams to give the provider a thorough understanding of the requirements.

At AdventHealth, a multistate health system with nearly 5,000 physicians, new providers attend a standardized one-day training session covering navigation, workflows, documentation requirements, registration for electronic prescriptions for controlled substances, and more. Afterward, a trainer spends two to three days in person with each clinician as they go about their workdays to provide real-time support. According to Amber Grubbs, AdventHealth's manager of training and development, "everything EHR-related that they are going to need to be successful when they start seeing patients happens in training."

2. Recruit a top-notch team of superusers

Often it is helpful to identify an EHR champion in each location, someone who is the go-to person for EHR questions. The best practices of these superusers should be documented and incorporated into the educational materials provided to all EHR users.

AdventHealth has identified close to 800 superusers; these are practice staff who volunteer to serve as the first point of contact for EHR-related questions and training within their practice. They are thoroughly trained and supported – and their managers have to sign off on the time this will take and adjust their other responsibilities accordingly. There is at least one superuser per practice, in addition to the practice manager. Grubbs stresses that they view superusers as "an extension of us. [They] are the first point of contact out there in the practices."

On monthly calls, superusers share questions that they are hearing, issues they are seeing, or anything clinicians seem to be struggling with. Trainers can share specific solutions as well as explaining any changes or enhancements that have been made.

Twice a year, superusers attend a day-long training where they work through written information and hands-on activities and games to refresh their skills and make sure they can make use of any new features in the EHR. Then the superusers are given tools to go back and share what they learned with their internal teams.

3. Customize templates to mirror existing workflows

Practices should identify common patterns of EHR usage and use templates to streamline these workflows. After onboarding, the optimization team at Beebe provides one-on-one support for an additional week, helping each new provider customize their templates. The most important thing is to incorporate physician feedback to understand individual needs and use cases, the team says.

AdventHealth strives to standardize as much as possible while making sure to map the right templates to the right specialties. "That way the providers didn't have that huge, big drop down [menu] the first day that they go into [the EHR]," says Julie Schnitker, physician systems clinical liaison at AdventHealth. "We do it for them, and it's a real time-saver."

Custom template requests go to a committee that evaluates them, determines the benefit, and, if approved, tries to find a way to make it work for more than just a single specialty. This avoids the proliferation of duplicative custom templates, while still ensuring that providers get the tools they need.

4. Proactively identify providers who need coaching

Infrastructure needs to be in place for providers to get help even long after they've started. AdventHealth looks at provider performance on its core quality metrics to see who could improve their performance. And they run a report on after-hours EHR usage to see who needs additional support – the goal is less than an hour per day per provider. "If they are spending all this additional time in the EHR after-hours," says Grubbs "then we know it's someone we need to work with to figure out how to help them be more efficient."

The training team may make a special trip, or they may highlight these providers in the regular rounding they do at practices to identify and alleviate any EHR struggles.

5. Avoid a 'set it and forget it' mentality

Working with their EHR vendors, practices should set up a continuous support model to address ongoing questions about the EHR – and be sure to include physicians in that discussion. "Clinicians should have just as loud of a voice as the CFO and the CEO," says Ban. "If vendors knew what doctors were demanding, they would make it. They would build that, instead of just worrying about getting billing right."

Inside the organization, it's critical to continually revisit workflows, updating templates and training to reflect the way providers actually practice. "We will soon implement a monthly clinician meeting that is all about the EHR," says the Beebe IS team. "We work on getting the templates more aligned with providers' needs while still meeting the goals the organization sets in terms of quality data."

Individualized support

The goal is to provide individualized coaching to support each provider's individual practice style. This kind of coaching can increase physician EHR competency and decrease administrative burden, while still standardizing quality and outcomes data. Studies show this kind of targeted training can result in physicians utilizing 80% of an EHR's functionality.

This requires that resources be dedicated to training and coaching around EHR usage, and ongoing individualized support. As Grubbs says, "We try to remove the burden from the providers as much as possible, and let them be doctors."

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