Implementing a New EMR. How Should We Train the Staff?

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Background

- Transitioning from an existing EMR to a new system can be a daunting task for nurses. Effective user training is essential to alleviate nurses' stress and increase their knowledge of new EMR (Vehko, et al, 2019)

- Virtual live training (VLT) was provided by the EMR vendor. Feedback following the VLT revealed a need for additional training, and that training be tailored to the nurses' roles and responsibilities.

- Educational content that is pertinent to the clinical needs of the nursing staff is better understood and recalled than non-specific content (Lopez, Omizo & Whealin, 2018).

- Given this need, EMR Super Users developed an in-person training initiative to supplement the VLT.

> **P: Perioperative Nursing Staff**
>
> **I: In-person Training**
>
> **C: Virtual Live Training (VLT)**
>
> **O: Improved confidence in Role Specific Charting**
>
> **T: EMR Go Live Day**

Methods

- This was a quality improvement project.

- Feedback surveys were conducted following both the VLT and in-person training to evaluate nurses' readiness to document patient care in the new EMR. The post-training surveys each yielded 40 responses.

- Nurses' were asked about their level of confidence using the new EMR, and if content from each training session met their role specific needs

Results

- Of the 40 perioperative nurses surveyed following in-person training, 92.5% (n=37) felt more confident documenting patient care in the new EMR, versus 15% (n=6) following the VLT.

Confidence in Documenting Patient Care After Virtual and In-person Training
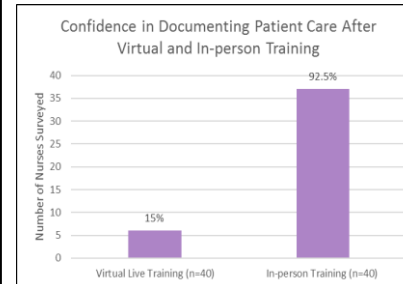
- Furthermore, 92.5% of nurses (n=37) reported that in-person training was more specific to their roles and responsibilities than the VLT.

Percentage of Perioperative Nurses who Stated Training was Role Specific

- Virtual Training (n=40) - In-person Training (n=40)
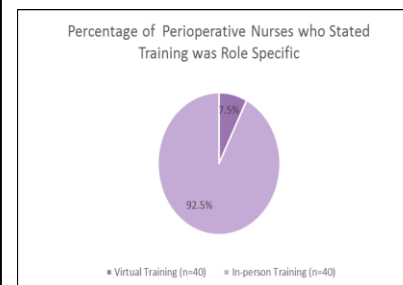
Discussion

- The nursing staff felt more confident in their documentation after the supplemented in-person training.

- Using in-person, role specific training to support the VLT has shown to be an effective training strategy for transitioning to a new EMR.

- Future recommendations include providing nurses with in-person, role specific training to increase their learning and overall confidence in charting.

- Limitations of this study include a small sample size and an inconsistent population of nurses surveyed. Follow up studies should survey the same exact population of nurses post-VLT and in-person training.

References

Vehko, T., Hypponen, H., Heponiemi, T. et al (2019). Experienced time pressure and stress: electronic health records usability and information technology competence play a role. *BMC Med Inform Decis Mak.* 19.pp.160

Lopez, C., Omizo, R. and Whealin, J. (2018). Impact of a tailored training on advanced electronic medical records use for providers in a Veterans Health Administration Medical System. *JAMIA Open*, [online] 1(2), pp.142-146.