



## **EHR Implementation Checklist**

### **Establishment of Project Team**

- Physician champion(s)
- Project manager
- IT/EHR Lead
- Super User
- Workflow Coordinator

### **Development of Project Plan**

- Scope document
- Implementation schedule/timeline
- Roles and responsibilities
- Change management process
- Issue tracking and management process

### **Communications**

- Setup regularly scheduled meeting with EHR vendor implementation staff
- Provide your practice staff regular updates
- Post implementation timeline in break room and mark overall progress
- Utilize newsletters, email, etc. to address specific topics or issues

### **Mapping of Critical Practice Workflows**

- Identify problem areas and bottlenecks
- Re-map practice workflows based on incorporation of EHR

### **Handling of Existing Data**

- Identify key information and documents that need to be in system
- Develop plan for entering them into system
- Develop plan for handling new, outside documents and information

### **Training**

- Assess PC and keyboarding skills of staff
- Establish plan for developing staff's PC and keyboarding skills
- Have vendor conduct general overview of system for all staff prior to formal training
- Conduct multi hands-on, task oriented sessions tailored to staff responsibilities
- Identify "super users" and ensure they receive additional training sessions
- Allow staff on-the-job learning time to familiarize themselves with system
- Develop appropriate education material, such as cheat sheets, quick reference cards, diagrams of new workflows

### **System Testing**

- Conduct unit testing (i.e., single module)
- Conduct integration testing (i.e., interaction between two or more modules)
- Conduct interface testing (i.e., interaction between systems)
- Conduct system stress or load testing
- Ensure testing plans cover different scenarios and situations

### **Contingency Planning**

- Develop disaster recovery plan
- Test ability to restore system from backups prior to go-live
- Ensure system backup plan in place and running
- Arrange for regularly scheduled pick up and off-site storage of backups

### **Go-Live Planning**

- Determine amount physicians' schedules will be reduced (if any)
- Determine rollout approach:
  - Incremental vs. 'big bang'
  - All physicians vs. physician champions
  - All practice locations vs. select ones
- Allow time during day for providers to "catch up"
  - Mid-morning and mid-afternoon buffers, or
  - Extra minutes per visit
- Ensure sufficient resources available to support staff and physicians
- Make sure staff and physicians know who they can go to for assistance
- Inform third parties and other vendors, e.g., labs, transcription, etc. of go-live date so they're prepared to provide additional support
- Plan for what to do if things go really wrong
  - Identify situations or points where go-live needs to be stopped
  - Decide what to do if that happens, e.g., go back to paper processes
- Schedule midday "huddle" to evaluate progress
- Schedule end-of-day debrief to identify and address issues
- Bring food, patience, and sense of humor
- Plan to celebrate!