Rethinking the Decision to Replace Your EHR
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RETHINKING THE DECISION TO REPLACE YOUR EHR
Supplemental Tool: EHR Satisfaction Survey

I. Demographic Information
1. Role at the practice (please check the appropriate box):
   - [ ] Physician.
   - [ ] Midlevel provider (nurse practitioner, physician assistant).
   - [ ] Clinical staff (nurse, medical assistant).
   - [ ] Other.
2. How long have you used the EHR? _____ Years _____ Months

II. EHR Overview
3. The training provided prepared me to perform my duties using the EHR in my practice.
   - [ ] Strongly agree.
   - [ ] Agree.
   - [ ] Disagree.
   - [ ] Strongly disagree.
   - [ ] Not applicable.
4. I would appreciate the opportunity for additional training on the EHR.
   - [ ] Strongly agree.
   - [ ] Agree.
   - [ ] Disagree.
   - [ ] Strongly disagree.
5. Following the initial EHR implementation at my practice, my personal productivity has now returned to normal.
   - [ ] Strongly agree.
   - [ ] Agree.
   - [ ] Disagree.
   - [ ] Strongly disagree.
6. Using the EHR increases the quality and accuracy of my work.
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.

7. I believe I am operating “at the top of my licensure” when using the EHR.
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.

8. Overall, I am happy with the EHR implementation.
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.

III. EHR Usability and Usefulness

9. I feel confident navigating and documenting in the EHR while seeing patients.
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.

10. I am able to easily locate the appropriate template content to complete my documentation.
    □ Strongly agree.
    □ Agree.
    □ Disagree.
    □ Strongly disagree.

11. I feel confident navigating and documenting in the EHR to complete activities not directly related to patient office visits.
    □ Strongly agree.
    □ Agree.
    □ Disagree.
    □ Strongly disagree.
12. I am able to effectively leverage the tasking functionality within the EHR.
   - [ ] Strongly agree.
   - [ ] Agree.
   - [ ] Disagree.
   - [ ] Strongly disagree.
   - [ ] Not applicable.

13. I understand how to electronically review and respond to my patient’s ancillary and diagnostic testing results (e.g., lab and radiology reports).
   - [ ] Strongly agree.
   - [ ] Agree.
   - [ ] Disagree.
   - [ ] Strongly disagree.
   - [ ] Not applicable.

14. All of my patient’s previous testing results are stored in a manner that allows me to easily review prior results, identify trends, and determine a plan of care.
   - [ ] Strongly agree.
   - [ ] Agree.
   - [ ] Disagree.
   - [ ] Strongly disagree.
   - [ ] Not applicable.

15. All of the information I need to assess a patient’s condition(s) and determine the appropriate plan of care is available within the EHR.
   - [ ] Strongly agree.
   - [ ] Agree.
   - [ ] Disagree.
   - [ ] Strongly disagree.

16. I understand and utilize the medication reconciliation work flow with each patient encounter.
   - [ ] Strongly agree.
   - [ ] Agree.
   - [ ] Disagree.
   - [ ] Strongly disagree.
   - [ ] Not applicable.
17. I am able to quickly search for, select, and enter/update my patient’s medication(s).
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.
   □ Not applicable.

18. With the exception of Schedule II drugs, I am able to electronically prescribe all of my patient’s medications with ease.
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.
   □ Not applicable.

19. I find the electronic refill request work flow through the tasking module useful.
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.
   □ Not applicable.

20. The EHR provides useful tools for disease management and/or preventive medicine (for example, diagnosis-specific prompts, alerts, and patient education materials).
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.

21. I am able to utilize disease- and/or specialty-specific content for the majority of my documentation needs, as opposed to generic templates and free text.
   □ Strongly agree.
   □ Agree.
   □ Disagree.
   □ Strongly disagree.
22. The following best describes my documentation patterns in the EHR while seeing patients:

☐ I complete all of my documentation while in the exam room with the patient.
☐ I complete a portion of my documentation while in the exam room with the patient.
☐ I do not document in the EHR while in the exam room with the patient.
☐ I do not complete my documentation of patient care in the EHR (I dictate or use handwritten notes instead).

23. I primarily use the following method of data input:

☐ Point and click using EHR templates.
☐ Type everything using free text.
☐ Use a combination of point and click and free-text typing.
☐ Use voice recognition, with direct input into the EHR.
☐ Use dictation, with subsequent entry into the EHR (manually or via interface).
☐ Handwrite everything; it is scanned into the system at a later date.
☐ Handwrite everything; nothing is scanned into the system.

24. All of my orders for patient care are documented in the EHR.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.
☐ Not applicable.

25. My most frequent orders for my patient’s plan of care are easily found within my visit work flow.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.
☐ Not applicable.
26. I am able to complete most of my patient encounter documentation within the same day of seeing the patient.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.
☐ Not applicable.

27. My documentation is as complete and accurate as it was on paper/using dictation.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.

28. Upon reviewing my visit documentation, I find that the EHR consistently calculates an appropriate evaluation and management code level for the encounter.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.

29. The appropriate CPT codes for in-house diagnostic testing and procedures are available for review and submission at the conclusion of the patient encounter.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.
☐ Not applicable.

30. I believe the EHR has helped improve the quality of care for my patients.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.
☐ Not applicable.
31. The following statement describes my primary concern regarding using an EHR:

☐ Using an EHR slows me down, and I cannot see the number of patients that I would like to in a day.

☐ Using an EHR slows me down; while I can see the number of patients that I would like to in a day, I have to spend several additional hours per day/week completing my documentation.

☐ The documentation provided by the EHR is inadequate to support my requirements for a complete and comprehensive medical record that supports referrals and/or consultations.

☐ I am not comfortable using a computer, especially in front of my patients.

☐ Many of my clinical colleagues are unable to use a computer well enough to utilize the EHR and are not interested in learning or able to learn.

☐ I find the EHR to be useful to my practice, and I have no concerns about using it.

☐ Other:

32. List up to three features of the EHR that you feel enhance your practice’s efficiency and/or improve patient care.

33. List up to three features in the EHR that are causing frequent problems, confusion, or work stoppage for you.

34. Please describe your overall experience with the EHR and related suggestions for enhancement.

IV. EHR Support

35. The hardware and network supporting the EHR is reliable both in terms of availability (“uptime”) and speed.

☐ Strongly agree.

☐ Agree.

☐ Disagree.

☐ Strongly disagree.

36. I feel the device(s) used to access the EHR at the practice enables an efficient work flow.

☐ Strongly agree.

☐ Agree.

☐ Disagree.

☐ Strongly disagree.
37. I know who the operational leaders are within my organization who will make sure that the EHR is designed and used to improve the health of our patients, enhance the experience of our patients, and/or reduce costs.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.

38. I have colleagues within my organization who I know and respect who have effectively adopted the EHR and can help me make practical changes to the way I use the system and my work flows.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.

39. I have colleagues within my organization who are technically savvy and participate in EHR design decisions.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.

40. IT Support is responsive at my organization.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.

41. My organization has the right number and types of IT resources to support me in my use of the EHR.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.
42. I can easily get help when I am having a problem using the EHR.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.

43. When I need help using the EHR, I primarily rely on:

☐ Colleagues in my clinic who are proficient with the system.
☐ Designated superusers within the clinic(s).
☐ The IT department.
☐ Management/leadership.
☐ Other – please comment:

44. I understand how to submit functional enhancement requests relating to the EHR that I believe will assist me in my work flow and documentation needs for patient care.

☐ Strongly agree.
☐ Agree.
☐ Disagree.
☐ Strongly disagree.