

Healthcare AI, Documentation capture

# What you need to know about KLAS best practices for EHR optimization

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How much training time you spend – not necessarily how much money overall – is the top predictor of EHR success.

A recent KLAS report on EHR optimization best practices singled out three make-or-break keys to success among healthcare organizations: education, personalization and culture.

The report – issued last month – is an effort by KLAS' Arch Collaborative to turn the tide of EHR frustration. Of the more than 7,600 physicians surveyed, 43% reported overall dissatisfaction with their experience – a number that has remained steady in recent years.

The story of their dissatisfaction is not as simple as “too many clicks.” Rather, researchers found that physician unhappiness stemmed from a perception of having lost control over the care they were trained to deliver, as well as a perception that they cannot improve their current situation, [the report](#) said.

The research identified three areas as crucial to how successful an organization was rated in EHR optimization. Let's examine these a bit more closely:

1. **Education:** Initial training is the top predictor of EHR user success, and a bad start is extraordinarily difficult to overcome. The effects of poor initial training remain with users for years after they come live, the report said. Organizations that required physicians to spend at least six hours training had significantly better satisfaction than those that didn't. Incorporating EHR training into departmental meetings was determined to be one of the most effective training methods. Ongoing training is the key – as the survey found no

correlation between years of experience with an EHR and physician satisfaction.

2. **Personalization:** Use of personalization settings has a dramatic effect on improving user experience, yet fewer than half of the personalization options that users have available are actually used. Personalization settings that help users get data out of the EHR improved satisfaction more than settings that helped users get data into it.
3. **Culture:** Successful organizations have built a culture of IT service and user empowerment. Organizations that showed sincere efforts to listen and resolve clinician challenges were rated more highly. Clinicians reporting significant amounts of after-hours charting report much lower EHR satisfaction. The least satisfied specialties continue to be allergy/immunology, ophthalmology, and otorhinolaryngology. Engaging these specialties with efficient workflows is crucial.

Interestingly, spending a higher percentage of operating budget on IT showed almost no increase on average in satisfaction, and higher IT support staff-to-physician ratios also had minimal effect on user experience. With smaller project teams after go-live, and declining budgets as ACA subsidies dry up, health systems need more efficient improvements to deliver ROI.

## How can you improve EHR effectiveness?

There are many opportunities for re-engagement to [improve EHR setup and adjust workflows](#). These may include when new features or third-party upgrades are added, or new organizations – such as large specialties groups – join a healthcare system.

Such improvements can deliver significant ROI, including reductions in daily and weekly click counts, and the need to complete charts outside of the clinic or hospital after hours. Increasing clinician efficiency allows for more consults and referrals to be seen during each clinic panel.

Evaluating use, re-configuring screens and tools, and doing one-on-one training will have significant returns for organizations – and lead to a more thriving and content clinical staff.

**Tags:** [Electronic health record \(EHR\)](#), [KLAS Research](#)