WORKSHEET #4: OPERATIONAL CHECKLIST

Use this checklist to identify tasks to be performed in assessing readiness, planning, selecting, implementing, maintaining and gaining benefits with adoption of an EHR. An estimated time requirement is supplied, although this varies significantly for each practice, and later for the vendor selected. Record your anticipated start and end dates, and adjust as necessary throughout the project.

Step	Task	Tools available in dEHRm	Staff person responsible	Estimated time	Start date	End date
Assessment	Get practice educated about EHR through discussion of "Why an EHR" at initial meeting.	Why acquire an EHR system Table J: Rational for EHR acquisition		Two months/ one year.		
	Use Web-based vendor demos to acquaint practice members with an EHR (**Note:** When signing up for a Web-based demo, use a commercial email address rather than name of practice to reduce early vendor calls).					
	Conduct readiness assessment to determine when the practice will go forward with EHR planning.	EHR attitudes and beliefs survey				
		Management and leadership analysis tool				
		Operational checklist				
		Technical evaluation				
		Computer skills assessment				
		Meaningful use assessment				
Planning	Organize project.	Project management responsibilities		Three to six months.		
	Consider using a migration path to achieve EHR in a staged manner.	Consider a migration path to EHR. Table M: Migration path				
	Develop and use a communications plan.	Communications planning tool				
	Conduct goal setting to identify specific, measurable goals and establish expectations for meeting those goals.	Set goals and establish expectations for achievement key clinical processes tool				
	Initiate change management through a strategy of staff engagement by assessing current workflows, identifying current data collection processes and reporting requirements, describing chart conversion needs, and addressing HIPAA and other legal/regulatory requirements.	Workflow and process-mapping workflow questionnaire				
		Chart conversion				
		HIPAA and other legal/ regulatory requirements				
	Develop a cost/benefit analysis that addresses total cost of ownership (TCO), ROI and value proposition.	Business case for EHR worksheet				
	Obtain approval to proceed to vendor selection.					

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Selection	Introduce code of conduct for EHR vendor selection to ensure objectivity in acquisition process.	Understand the marketplace		One to three months		
	Understand the marketplace for EHR products and identify vendors to send RFP.					
	Develop and distribute request for proposal (RFP).	Request for proposal template		One month		
	Identify key differentiators for evaluating EHR proposals.	Vendor analysis tool				
	Review RFP responses.			One month		
	Perform additional due diligence on selected vendors.	Demonstration plan		One to three months		
		Site visit plan				
		Reference check plan				
	Identify vendor(s) of choice and obtain approval to negotiate contract.	(Continue to use vendor analysis tool above)				
	Negotiate conduct with primary vendor of choice.	Negotiate an Effective Contract		One month		
	Secure financing.	Identify Financing Sources		One month		
	Obtain approval to sign contract.			One month		
Implementation	Harmonize practice's plans for implementation with vendor's implementation plan.	Implementation and training. Table R: Common implementation problems and solutions		One to three months[1]		
	Plan to document issues during implementation to ensure resolution.	Issues management				
		Issues log				
		Change control				
	Obtain training for super users					
	Complete vendor "workbooks" for table build.	Change control		One to two months[2]		

[1] Harmonization of implementation plans should not take more than a few days, however, many vendors take one to three months to get a practice on its implementation schedule.

[2] Vendor "workbooks," which may go by other names, are tools vendors supply practices to record information about their practice for pre-loading into the EHR. These workbooks capture, for example, lists of clinicians, their identification numbers and credentialing information; fax numbers of local pharmacies; appointment scheduling rules; list of orderable items; and many other details. Again, completion of these workbooks should not take very long, however, time must be allotted for staff in the practice to compile this information. This notation is made to observe that the timeliness of the implementation is not exclusively dependent upon the vendor; the practice has many responsibilities as well.

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Step	Task	Tools available in dEHRm	Staff person responsible	Estimated time	Start date	End date
Implementation	Install hardware, software, network and data storage capabilities.			One to three months[3]		
	Review templates, clinical decision support rules and report formats					
	Map revised workflows and processes to reflect EHR capabilities	Workflow and process mapping				
	Develop test plan and test scripts or scenarios for testing	Testing plan tool				
	Conduct "system build," modifying templates, rules and reports to fit practice needs					
	Build and test interfaces					
	Conduct unit and system testing					
	Document changes in workflow and processes, policies and procedures, and job descriptions					
	Begin chart conversion	(see chart conversion tool above)		One month[4]		
	Plan rollout	Rollout strategy				
	Train end users	Training plan tool				
	Rehearse go-live	Go-live checklist				
	Go live.					
Maintenance	Acceptance testing.	Acceptance testing checklist including meaningful use readiness.		One to three months[5]		
	Perform software patching and upgrading as applicable to maintain integrity of system and compliance with maintenance agreement.			Ongoing (at least annually)		
	Continuously address user preferences, changes in clinical practice, and other requirements by making appropriate modifications to EHR.					
	Perform hardware upgrades and maintenance as required.					
	Test backup and disaster recovery plans periodically.					

Step	Task	Tools available in dEHRm	Staff person responsible	Estimated time	Start date	End date
Benefits	Perform benefits realization to celebrate successes and take corrective action as necessary to improve adoption and outcomes.	Benefits realization		One to six months post go-live		
	Contribute data for external reporting.			Ongoing		
	Monitor quality improvements, patient safety, care management, and make modifications to EHR, policies, processes as applicable.					
	Participate in health information exchange (HIE) initiatives (where available) across the continuum of care.					

[3] Time required to install equipment is relatively short, but again, must be scheduled into the practice timeline. It is also important to be aware of the differences in hardware requirements of vendor products. Some vendors will short-change the requirements for hardware to make a quick sale of their software, only for the practice to find later that the hardware is insufficient to fully support the product's use. This may be especially true for dermatologists because of the bandwidth and storage requirements for large numbers of drawings and other images. Even EHR products that may not require more than normal capacity may exceed their minimal requirements when used by dermatologists in comparison to family practitioners or other specialists.

[4] Chart conversion is a task that should be planned early, and then carried out "just in time" for roll out. The more paper charts that can be prepared in advance for chart conversion the easier and more effective chart conversion will be. Further discussion is provided with the Chart Conversion tool.

[5] Acceptance testing is actually not a "test" in the formal sense of the word, but a process anywhere from 1 to 3 months after go-live that ensures the practice is actually using the system as intended. This process should trigger the final payment to the vendor, although many vendors will attempt to negotiate a final payment on go-live. Further discussion is provided with the Contract Checklist tool.