

**Submission Id: 4633**

**Title**

*Evaluation of an Electronic Health Record Change Communication Program*

**Priority 1 (Research Category)**

Healthcare informatics

**Presenters**

Rose Gunn, MA, Gordon Barker, MS, Rachel Gold, PhD, MPH, Zoe Larson, MS, Stacie Carney, MD, April Lee, MPH

**Abstract**

Context: Electronic health record (EHR) systems are regularly updated and revised to provide new functionalities to support care delivery, yet frequent changes could lead to EHR users overlooking potentially helpful improvements. Prior research on best practices for EHR change communications and how they can be integrated into existing workflows is limited, yielding a knowledge gap on how different approaches impact the adoption of new or revised EHR tools. Objective: To evaluate user perceptions of revisions made to a change communication program of an EHR shared by a national network of community-based health care organizations. Study Design and Analysis: Qualitative evaluation involving semi-structured interviews. Transcripts were analyzed thematically, informed by the Integrated Technology Implementation Model framework. Setting: Community-based health care organizations from the multi-state OCHIN network. Population Studied: Health center staff and EHR change subject matter experts from OCHIN. Intervention/Instrument: EHR change communications program. Outcomes Measures: EHR change implementation and adoption. Results: Participants characterized the new change communication program as involving processes that enable communication to different users about changes made to the EHR. Health center staff were satisfied overall with the content and conduits by which EHR changes are communicated (e.g., being provided multiple opportunities to learn about the changes and their impacts, change management support, and their customization toward role type). Reported barriers were related to knowledge gaps of available tools to support implementation, and the frequency of the EHR changes themselves. Clinic staff participants reported feeling overwhelmed by the frequency of EHR modifications, which made it difficult to prepare for changes and their integration into clinic workflows. Conclusions: In this setting, existing EHR change communication approaches are effective, but tension remains between the need for continual EHR updates and barriers that health center staff face in frequently adopting and implementing such changes. Future work should focus on refining this timing and further assessment of the support required to implement necessary EHR changes in a manner that does not burden clinical teams.