Finally – you’ve made a decision on purchasing or replacing electronic health records software. Postpone the sigh of relief until you’ve tackled the next challenge – implementation.

This article is Part II of a two-part series. Last month we identified six common challenges and suggested ways to address them. This month we offer chronological tips for successful implementation.

**Step 1: Set the stage with a positive message.** Change is hard. Start the implementation process with a clear explanation of ways in which the new software can help patients receive better care and the practice work more efficiently. Explain the steps that will occur, the timeframe and the distribution of responsibilities. Address the most important question that your staff will ask: “How can we work on software implementation while continuing to focus on day-to-day responsibilities?”

**Vendor responsibilities:** How will the vendor help the practice? Expect the vendor to provide content knowledge about software features, use, design and configuration. Vendors also manage the target timeframes, always looking toward a mutually agreed-upon go-live date. Vendors also can provide content from other practices in the same specialty. Consider that content as a starting point for practice-specific customization. With respect to training, vendors start with the point person and offer training – both onsite and web-based – to others as well. Finally, and most important, the vendor provides support for testing and go-live.

**Practice responsibilities:** Read the agreement carefully. Make sure you understand all the terms so you can hold the vendor to its legal commitments. For example, some agreements call for an upfront payment prior to implementation and go-live, with the expectation that the practice will pay the balance following successful go-live that is acceptable to both parties.

If the practice has chosen electronic health records (EHR) software from one vendor and uses a practice management system (PMS) offered by a different vendor, an important practice responsibility is making sure the interface between the two systems works smoothly. Even if two vendors have already established working relationships, the practice needs to understand how information flows back and forth from one application to another.

Here’s an example. Many dermatologists purchase dermatology-specific software for their EHR. They choose a different vendor for their practice management system. The practice must be clear on the way in which the systems work together. The same would be true of a patient portal, if the practice purchased that application from another vendor. How does everything work together?

The practice is also responsible for conversion from either paper or from another...
EHR system. Although vendors vary in their approaches to customization, each practice will also have the opportunity to help build the system.

**Step 4: Get off on the right foot with a good “kick-off” meeting.** All vendors schedule a “kick-off” meeting to initiate the implementation process. Make sure the right people within the practice are part of this call and ask many questions.

**Step 5: Manage the delivery of hardware and software.** Some practices purchase hardware, as well as software, from the EHR vendor. If that’s your plan, make sure you receive the correct number of items. Get vendor help for setup of an onsite server or connectivity to a remote server or cloud. Regardless of your choice for backup, test connectivity and navigation before moving forward in the implementation process.

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