25% efficiency gains through rapid cycles of provider education and personalization based on data for...

- Five regionally separated hospitals
- Multiple surgical/specialty centers
- Dozens of freestanding medical clinics

"By making recommendations staff could immediately adopt and implement, strong, trustworthy relationships quickly formed."

- Alex Atkinson, Principal Epic Consultant

The Challenge

Having deployed Epic Community Connect to a regional network of hospitals and clinics, an organization came to Healthcare Triangle, Inc. (HTI) to address growing provider frustrations and inefficiencies. The affiliates had been up on Epic for 12-18 months, and most resided in rural locations, disconnected from core assistance & support.

Furthermore, historically high provider turnover in these communities meant that if unaddressed, growing frustrations with Epic could mean the loss of additional clinical resources, downturns in patient service volume, and a loss of significant revenue.

The Solution

Elite resources from HTI's Epic team were brought in to help, and with their breadth of experience across Acute, Specialty, and Ambulatory settings, were able to immediately answer questions and impart education, tips, tricks, & advice. Working both with the organization's Epic team and directly with the affiliate staff, HTI shadowed workflows, reviewed system data from Epic's Provider Efficiency Profile and user access logs, and tailored plans for each area or staff member accordingly.

By making recommendations staff could immediately adopt/ implement, relationships built on trust formed quickly. With a firm foundation then, individualized action and improvement plans informed by data were initiated.

The aim of those plans was to:

- Improve Epic competencies
- Increase utilization of key features
- Further system personalization

In the clinics, this meant 2-4 hours of dedicated time per provider. In the hospital and specialty service areas, improvements were targeted across the Epic modules and staff with the most to gain, notably OpTime, ASAP, Grand Central, Orders & Documentation.
Results

In Epic, prioritizing the extra effort around advanced education and configuration makes all the difference. Most organizations implement and educate to about an 80% threshold, because that’s what’s relatively easy to do. It’s the last 20% though, the attention to detail, extra awareness, and individual/site-specific personalization that proves to be most valuable. By going the extra mile, HTI helped staff at this organization achieve levels of efficiency they had never experienced before.

In clinic, providers demonstrated on average a 25% reduction in time spent at the computer and with Epic. Working directly with staff also helped improve clinical operations. Managers, administrators, & informaticists at each site were for the first time able to completely understand and evaluate concerns and difficulties. Items such as Referral and Registration patterns, ED, Laboratory, & Radiology coordination, and Decision Support factors which had become barriers, began to reshape the way staff operated and communicated. For the first time ever, staff saw their IT solutions, Epic and community support staff, and operational goals in alignment.

Epic Insights: Efficiency for Community Connect MDs
Primary Focal Points Included:

- **Inbasket** – Clean-up, Quick Actions, Quick Notes
- **Notes** – Smartphrase & SmartLink Creation, NoteWriter Macros, Pre-charting Templates, Dragon
- **Orders** – Order/Smart Set Personalization, Panel Creation, Preference List Clean-up and Optimization
- **Charges** – Education, Preference List Clean-up, Automation
- **Personalization** – Epic Activities, Problem List, Workflow Navigation, Dashboards & Reports, Click & Scroll Reduction

Conclusion

Many of the individuals we ultimately worked with had voiced resistance to putting in additional hours allocated to "training". However, after the HTI engagement was complete, 100% of providers surveyed indicated that the time with expert resources was time well spent and they were better off than before.

Furthermore, while focused on the awareness and personalization of Epic’s key tools and functions, staff had found improvements to scheduling and patient throughput efficiency, the speed and accuracy at which information was entered and reviewed, and even came away with aspirations to track certain populations to see if direct patient outcomes would be improving as well. The sum of work had turned out to be much more valuable that simply the individual items tackled.