Division of Oncology

Background:

Our institution implemented a new EMR system, EPIC, in June 2018. Given the scope of the project, the transition involved implementing many new procedures and practices that were developed without input from Oncology Research Management. Information was updated frequently, since many decisions were not finalized until several weeks prior to Go-Live. The EPIC staff provided system training, but they did not cover any job-specific instruction or speak to the Division's policies and procedures. To complicate things further, our staff consists over 180 members in varying roles requiring different levels and degrees of training and preparation for Go-Live.

In order to maximize staff education, we supplemented the EPIC provided training with 4 mandatory in-person sessions for research coordinators prior to Go-Live, 3 optional in-person training sessions hosted after Go-Live, created 25 tip sheets that were stored for quick review, and identified 18 staff as SuperUsers to assist with in-person support. Given the unique opportunity presented by the transition, we wanted to learn what tools were most helpful to help guide training sessions surrounding significant change in the future.

On a scale of 0-100, how often do you access the following resources?

Ask a teammate	81
Ask the Education & Training Team	81
Ask a supervisor	77
Ask a member of the clinical team	76
Search Outlook mailbox for an email about the topic	74
Ask an EPIC Super User	73
Reference a "cheat sheet" you made for yourself	61
Look for a Tip Sheet within the EPIC Learning Home Screen	54
Look for Tools on the shared drive	54

EPIC Transitions: How to Prepare Staff for Enterprise Wide Change

Kristi Williams, Elizabeth Menne, RN, BSN, OCN, Emily Hawkins, MS, CCRP

What was most helpful preparation?

Attend Oncology sponsored training sessions led by the	
Education and Training Team	40.78%
Using the EPIC "Playground" on your own	15.53%
Attend the EPIC sponsored training sessions	14.56%
Other	9.71%
Work with your team in trainings led by your supervisor	7.77%
Reviewing online EPIC modules in Learn@Work	4.85%
Nothing was helpful	4.85%
Blank response	1.94%

Goals:

- Identify preferred methods of communication surrounding institutional change
- Identify what end users found most helpful in navigating transition
- Identify preferred tools for communication and training
- Assess staff perceptions of change and their preferred style of notification

Methods:

We sent a 10 question survey to all staff 3 months post Go-Live to better understand their experience during Go-Live and the months leading up to it. We surveyed what was most helpful, their preferred learning style, and what resources they knew were available to them.

Participants were asked about their awareness of resources including various staff roles (clinic, education, peer, supervisor), tools developed by the EPIC team, and tools developed by our education program. Questions also explored where staff look for information (email inbox, shared drives, leaning dashboards).

Staff were also asked what resources they used and what resources they would like to have developed for other significant changes in the future.



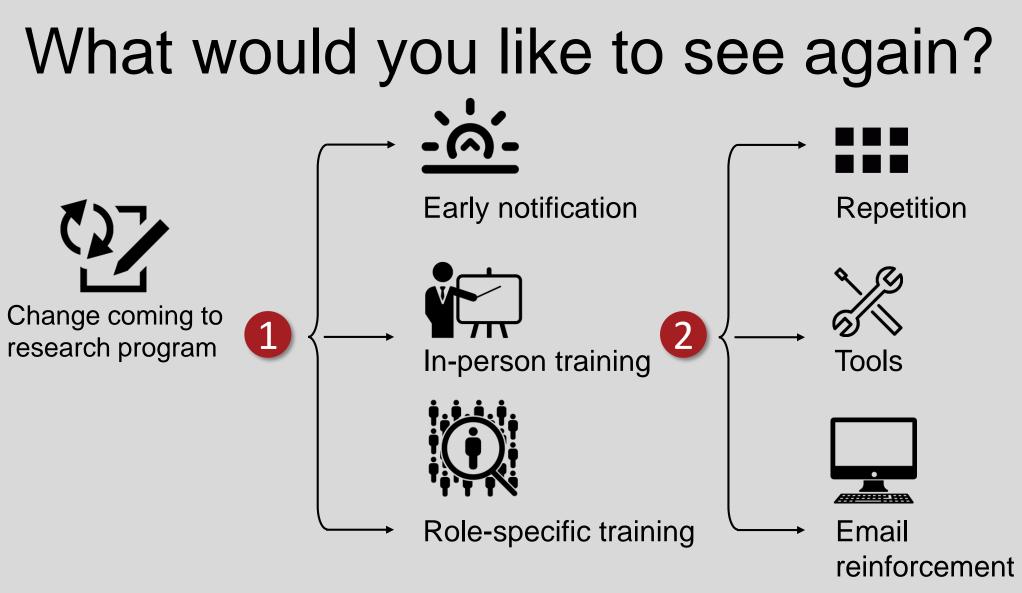
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- 40.8% attend Oncology sponsored training sessions led by the Education and Training Team
- Most helpful thing they did to prepare for EPIC implementation:
- When coordinators were unsure how to navigate something, they found the most helpful resources to be their teammates and the Education and Training Team

- When asked what they wished could have gone differently to help them prepare for Go-Live, 59.4% requested more job-specific, inperson training
- coordinators requested an emailed tip sheet
- When asked how coordinators prefer to receive information, 53.8% of

Future directions:





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Outcomes:

Large overall themes throughout the data were that staff appreciated being notified of procedural changes in advance and they found jobspecific training provided by our internal Education & Training Team to be the most effective way of communicating information. While staff requested that information be shared via email or work instructions, they realistically are more likely to consult a person than a set of work instructions. This points to the importance of investing effort in job specific in-person education as opposed to relying on tools or tip sheets.