Perceptions of Electronic Health Records' Effects on Staffing, Workflow, & Productivity in Community Health Centers

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OBJECTIVE

Significant Federal investments have motivated many community health centers (CHCs) to implement electronic health records (EHRs) in recent years. Because CHCs are known to use flexible and innovative staffing models, their uptake of EHRs creates a unique opportunity to study how new technology intersects with staffing changes to influence care delivery. The goals of the project are to understand how CHCs' implementation of EHRs has changed staffing models, staff roles, and workflow, and the mechanisms by which EHRs influence staff productivity and coordination between providers and quality of care.

DATA

We conducted telephone interviews with 17 staff members at 6 CHCs to understand their perceptions of how EHRs influence staff roles and workflow; productivity; and coordination and quality of care. We audio recorded the interviews with participants' permission, transcribed the recordings, and imported the transcripts into ATLAS.ti for coding and thematic analysis.

RESULTS

Informants reported that EHR implementation led to changes in staffing, including hiring new staff members—mostly clinical support and information technology staff—as well as expanding roles for existing staff members. EHRs also improved coordination within CHCs, but sharing patient information with outside providers remained a significant challenge. Informants generally viewed EHRs as enhancing quality of care, but they found that navigation challenges, frequent updates and using EHRs to track UDS and Meaningful Use quality indicators combined to reduce productivity.

CONCLUSIONS

As their use of EHRs grows, CHCs are finding creative ways to adapt staff roles and models to use them to improve coordination and quality of care. HRSA could continue to support CHCs in using EHRs for quality reporting by regularly convening CHC administrators and providers to give feedback to EHR vendors and regulators. Given ongoing reported challenges with productivity after EHR implementation, it will also be important to continue to monitor productivity trends at CHCs as they adopt new technologies and care models.

Key Words: health IT, productivity, staffing