

Primary Care Information Project (PCIP)
Post-Electronic Health Record Implementation: Survey of Providers

New York City Department of Health and Mental Hygiene, New York NY

This is a questionnaire designed to be completed by physicians in an ambulatory setting. The tool includes questions to assess user's satisfaction of electronic health records.

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PCIP Post-EHR Implementation Survey of Providers

The New York City Department of Health and Mental Hygiene (DOHMH), in collaboration with Columbia University, is conducting a survey of provider satisfaction with their Electronic Health Record (EHR) systems. You are being asked to participate in this survey because your opinions on the functioning of the EHR system are important to us.

Please return your completed survey in the enclosed return envelope.

If you have any questions, please contact: Armine Lulejian, at alulejia@health.nyc.gov or call (212) 788-5680.

Thank you for your time and feedback.

Prov.ID#: LICENSE NUMBER

The following statements ask about the accuracy and timeliness of the information you retrieve from the EHR system.

For each statement, please state how often you think the following is true regarding the EHR system:

	Never/ Almost Never	Some Of The Time	About Half The Time	Most Of The Time	Always/ Almost Always
The instructions and prompts are helpful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting data files in and out of the system is not easy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If this EHR stops, it is not easy to restart it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I sometimes wonder if I'm using the right command.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The speed of the EHR is fast enough.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This software seems to disrupt the way I normally like to arrange my work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The organization of the menus or information lists seems quite logical.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is relatively easy to move from one part of a task to another.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is easy to forget how to do things with this EHR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The EHR occasionally behaves in a way which can't be understood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is easy to see at a glance what the options are at each stage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have to look for assistance most times when I use the EHR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often can you count on the EHR to be up and available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often is the EHR subject to frequent problems and crashes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often are you satisfied with the EHR system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often is the system successful?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For each statement, please state how often you think the following is true regarding the EHR system:

	Never/ Almost Never	Some Of The Time	About Half Of The Time	Most Of The Time	Always/ Almost Always
The EHR provides me with all the information I need to take care of the patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The EHR screens include a lot of extra information that I don't need.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is inaccurate information in the EHR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The information displayed is relevant to patient care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The system lets me quickly find the information I need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The EHR provides information that is up-to-date.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The information in the EHR is presented in a useful format	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The information in the system includes the level of detail that I need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The information in the EHR seems to disappear or change unpredictably	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The information in the Help menu is useful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you communicate with staff from any other organizations (besides your own) that are implementing an EHR?

- Yes → Please fill in the box below
 No → Skip to the next set of questions

Please write the names of the organizations you communicate with on the lines below. Name of Organization:	Would you say that you communicate: (choose one)		Would you say you mostly: (choose one)		
	Less Than Once A Month	More Than Once A Month	Provide Information	Receive Information	Exchange Information About Equally
a.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The following questions ask your opinion about how the EHR has affected the following tasks.

Please check "NA / Don't know" if you have never used the EHR for that task.

Compared to previous routines, how has the EHR changed the performance of the following tasks?	Much More Difficult	Slightly More Difficult	No Change	Slightly Easier	Much Easier	NA/ Don't Know
Documentation						
Documenting physical exams	<input type="checkbox"/>					
Documenting histories	<input type="checkbox"/>					
Documenting allergies	<input type="checkbox"/>					
Documenting CPT and ICD-9 codes for billing purposes	<input type="checkbox"/>					
Keeping problem lists updated	<input type="checkbox"/>					
Keeping medication lists updated	<input type="checkbox"/>					
Task and Workflow Management						
Ordering laboratory and radiology tests	<input type="checkbox"/>					
Reviewing laboratory and radiology tests	<input type="checkbox"/>					
Writing prescriptions	<input type="checkbox"/>					
Renewing prescriptions	<input type="checkbox"/>					
Monitoring medication safety at the point of prescribing (e.g., drug-allergy, drug-drug interactions)	<input type="checkbox"/>					
Monitoring patient medication adherence	<input type="checkbox"/>					
Communicating referral information to sub-specialists	<input type="checkbox"/>					
Reviewing referral information from sub-specialists	<input type="checkbox"/>					
Preventive Care and Panel Management						
Ordering appropriate preventive care services (e.g., mammograms or flu shots) during the visit	<input type="checkbox"/>					
Making a list of patients based on diagnosis or history	<input type="checkbox"/>					
Contacting patients to remind them of care for which they are due (i.e., postcards, phone calls, emails)	<input type="checkbox"/>					
Assisting patients in self-management activities (e.g., goal setting, patient education)	<input type="checkbox"/>					

How strongly do you agree or disagree with the following statements regarding the EHR?	Completely Agree	Generally Agree	Generally Disagree	Completely Disagree	Don't Know
Using the EHR in my job has enabled me to accomplish tasks more quickly	<input type="checkbox"/>				
I have to work longer hours to see the same number of patients with the EHR	<input type="checkbox"/>				
Using the EHR has enhanced my effectiveness in my job	<input type="checkbox"/>				
Using the EHR has made it easier to do my job	<input type="checkbox"/>				
I find the EHR useful in my job	<input type="checkbox"/>				
Learning to operate the EHR has been easy for me	<input type="checkbox"/>				
I find it easy to get the EHR to do what I want it to do	<input type="checkbox"/>				
I have become skilled at using the EHR's advanced features	<input type="checkbox"/>				
The EHR has made it easier for me to access patient information from outside of the office	<input type="checkbox"/>				
There are too many alerts and reminders	<input type="checkbox"/>				
Using an EHR has decreased the amount of time I spend talking to my patients	<input type="checkbox"/>				
Using an EHR helps me adhere to clinical practice guidelines	<input type="checkbox"/>				
Using an EHR has caused disruptions to my work flow	<input type="checkbox"/>				
Using an EHR has improved my ability to make decisions about patient care	<input type="checkbox"/>				
Using an EHR has improved my ability to provide preventive care	<input type="checkbox"/>				
The EHR has helped me monitor how many of my patients are receiving appropriate care	<input type="checkbox"/>				
Using an EHR has improved my ability to provide high quality care to patients with chronic conditions	<input type="checkbox"/>				
I think the benefits of adopting an EHR have outweighed the challenges	<input type="checkbox"/>				

Would you recommend your current EHR to other providers interested in adopting an EHR?

- Yes
- No

If you could change one thing about your current EHR system, what would it be?

How long have you been using an EHR at this practice? _____ months

How would you classify your level of comfort with computer technology?

- Very comfortable
- Somewhat comfortable
- Not very comfortable

Please choose the statement that best describes the training you received for your current EHR:

- Ten or more hours dedicated to formal training (with vendor or practice trainers)
- Less than ten hours dedicated to formal training (with vendor or practice trainers)
- Informal training by practice staff when time permitted
- I have received no training and I'm learning the system as I use it

I receive prompt service when I require technical support

- Always
- Sometimes
- Never
- Don't know

Technical support can be relied on to fix my problem.

- Always
- Sometimes
- Never
- Don't know

Providers have been included in key decisions related to our EHR implementation

- Always
- Sometimes
- Never
- Don't know

When do you typically document a patient's notes?

- During the encounter
- After the encounter

How often to you print out a Visit Summary report from the EHR system for your patient at the conclusion of the patient visit?

- Always
- Sometimes
- Never
- Don't know

What is your title?

- MD
- Nurse Practitioner
- Physician Assistant
- Other (please specify): _____

Are you male or female?

- Male
- Female

What is your primary clinical specialty?

- General Practice
- Family Practice
- Internal Medicine
- Ob/Gyn
- Pediatrics
- Behavioral specialist
- Other (please specify): _____

How many years have you been *in practice*? _____yrs

How many years have you worked *at this practice*? _____yrs

In a typical week, how many patients do you see per hour at this practice? _____pts. per/hr

In a typical week, how many hours do you work at this practice? _____hrs per/wk

Many thanks for your feedback!