## Site Visit Checklist

During the procurement process, you eventually reach the stage where you should visit with the clients of the EHR vendor finalists being considered. The site visit should allow you to see how the EHR performs in a real-life setting. Your EHR vendor should be able to provide you with a list of reference sites. Preparation is key to ensure your organization gathers the needed information in an efficient and effective manner. This enables the reference site to provide information that is useful and also shows respect and consideration of their time in helping your organization make a final decision about a vendor.

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| Site visit checklist | |
| pre-visit preparation | |
|  | Carefully select your site visit team to include someone from each department in your organization - administration, billing, and clinical departments |
|  | Identify primary contact from the reference site |
|  | Schedule date and time of reference site visit with primary contact |
|  | Plan to visit the reference site while patients are being seen |
|  | Block off your leadership team’s calendar for the reference site visit |
|  | Work with your leadership team and reference site primary contact to develop visit agenda. Include time for:   * introductions , * overviews of organizations, * tour of facility, * use of software product in setting, and * question and answer sessions with end users and leadership team about system. |
|  | Finalize agenda with reference site and send out to your organization’s leadership team |
|  | Review the site visit agenda and schedule with the leadership team |
|  | Communicate to your leadership team what they can expect during the site visit |
|  | Develop production demonstration scenarios or identify key product functions the leadership team would like to see in setting |
|  | Develop questions for reference site \*See Questionnaire Below |
|  | Send product demonstration request and questions to reference site one week prior to visit |
|  | Plan and confirm logistics of site visit including:   * Address, locations and maps * Transportation * Travel time * Beverages, snacks and meals |
|  | Determine if non-disclosure agreements are needed and sign prior to visit |
|  | Schedule your leadership team for a post site debriefing at your facility |
|  | Final confirmation of site visit 24 hours prior to visit |
| SITE VISIT PROTOCOLS | |
|  | Come prepared with preprinted agenda, schedules, and business cards to exchange with staff |
|  | Arrive early and depart on time – be considerate of the reference site’s time |
|  | Listen and observe intently and objectively |
|  | Identify best practices and lessons learned |
|  | Balance questions – review strengths of system first and then discuss areas for improvement |
|  | Reflect on past performance and impact of future by asking questions such as:   * What is your level of confidence in using the vendor in the future? * Will the vendor meet your needs in the next 3-5? |
|  | Ask open-ended questions such as:   * What important questions remain that I should have asked? * What last bit of advice you wish you had known in advance, before engaging the vendor? |
|  | Seek permission to follow-up with reference site post visit |
|  | Be gracious and thank the reference site for hosting your visit |
| POST SITE VISIT | |
|  | Have leadership team reflect on visit and write about or rate experience |
|  | Hold a debriefing meeting to discuss site visit experience |
|  | Review positive and negative components of visit |
|  | Review unexpected areas discussed at site visit |
|  | Coordinate follow-up questions to reference site (if needed) |
|  | Coordinate follow-up questions to vendor (if needed) |
|  | Send thank you to reference site hosting visit |

## Site Visit Questionnaire

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| SITE VISIT QUESTIONNARE | |
| BACKGROUND | |
|  | How large is your organization (number of sites, employees, physicians, nurses, etc.)? |
|  | What month and year did you go live with your EHR system? |
|  | How many interfaces do you have with the EHR? What systems are interfaced? |
|  | Has the EHR system been implemented throughout your entire organization or only in some settings? |
|  | What other systems or add-ons from this vendor and others have you installed in your organization? |
| USAGE | |
|  | What percent of your clinical providers use the EHR? |
|  | What functions do your providers use most often? |
|  | What has been the best thing about implementing the EHR for providers? |
|  | What has been the most frustrating thing? |
|  | How much customization has your organization done? |
|  | Are you happy with the templates provided by the vendor? How do they get modified? |
|  | Have you successfully implemented e-prescribing? |
|  | Are you able to perform e-faxing or electronic exchange of health information? |
|  | Can users access the system remotely? How do they do this? |
| TRAINING AND SUPPORT | |
|  | How long does it take for clinical staff to become fully trained in using the EHR system? |
|  | How long does it take for other staff to be trained? |
|  | What training methods did you successfully use? |
|  | What kind of internal EHR support system did you implement? How many full time support personnel are required? Do you use outside consultants? |
|  | Does the EHR vendor supply regular upgrades? If so, how frequently? |
|  | How have you been able to handle software upgrades, server maintenance and system back-ups? |
|  | When have you had to contact the vendor for support? How responsive has the vendor been? |
|  | Who maintains your interfaces – your organization or the vendor? |
| IMPLEMENTATION AND HARDWARE | |
|  | Did your EHR implementation go smoothly? How long did it take? |
|  | How much of the paper charts were scanned or converted into the EHR? How did you do it? |
|  | Did you have to upgrade hardware and network components in preparation of using the EHR system? |
|  | If you are using a wireless network, how well does it work? |
|  | Do you still use paper? If paperless, how long did it take? |
|  | Have you had any system downtime? If so, how was it handled? |
| SATISFACTION | |
|  | Would you purchase EHR software from this vendor again? |
|  | What would you do differently? |
|  | What does your organization like the most and least about the EHR? |
|  | Is there anything else you would like to tell us about your experience with the EHR product? |

Note: Tool adapted from the MetaStar (DOQ-IT) Reference Site Visit Tips: [https://www.**metastar**.com/web/professional/docs/.../**SiteVisiting**Tips.doc](https://www.metastar.com/web/professional/docs/.../SiteVisitingTips.doc)