



Example EHR Experience Survey

Step 1: Information about you (Part 1 of 3)

All responses are being collected by KLAS Research. While KLAS will need to identify you by name for internal purposes and for the integrity of the study, your identity will not be released to your sponsoring organization (see above) with the results of this survey without your permission. To learn more about how we process and protect your personal data, you may view our [Privacy Policy](#).

Please indicate below whether you would like your organization to see your identity in connection with your responses.

- Share my identity in connection with my responses with my sponsoring organization
- Do not share my identity in connection with my responses with my sponsoring organization

Contact information

*Required

First name*

Last name*

Email address

Clinical background*

- Practicing physician (MD/DO)

- Physician resident or fellow
- Nurse practitioner or physician assistant
- Nurse (RN)
- Allied health professional
- Other (please specify)

Years practicing medicine or nursing (including education)

- 0–4 years
- 5–14 years
- 15–24 years
- 25+ years

What kind of patients do you care for?

- Adults
- Pediatric patients
- Adults and pediatric patients

Locations of use

(Select all that apply)

- Hospital A
- Hospital B
- Hospital C
- Clinic A
- Clinic B
- Other (please specify)

Are you employed by Organization X?

- Yes
- No

On average, how many hours a week do you spend in clinical practice?

- <20 hours per week
- 20–39 hours per week
- 40–60 hours per week
- 60+ hours per week

Do you agree?

- | | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
|---|-----------------------|-----------------------|----------------------------|-----------------------|-----------------------|
| I find great fulfillment in my work as a care provider. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Step 2: Tell us how you use the EHR (Part 2 of 3)

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What is the EHR you primarily use? This is the single EHR you are giving feedback about in this survey.

If you do considerable work with multiple EHRs, you are welcome to take the survey multiple times to account for those experiences.

- EHR 1
- EHR 2
- EHR 3
- Other (please specify)

Non Nursing Area of clinical focus (specialty)

(select one)

Other (please specify)

Nursing Only Area of nursing focus

(select one)

Other (please specify)

Number of years you have used this EHR

Years Using EHR	1	2	3	4	5+
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you agree?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
My initial training prepared me well to use this EHR.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My ongoing EHR training/education is helpful and effective.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How many hours do you spend each year receiving follow-up training or other education on EHR functionality (including reading tip sheets, learning from peers, participating in formal training, etc.)?

0 hours

- 1–2 hours
- 3–5 hours
- 6–10 hours
- 11–15 hours
- 16–20 hours
- 20+ hours

Nursing Only Do you agree?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
The time that I spend doing EHR documentation is reasonable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Non Nursing Do you use the following EHR personalization tools?

	Yes	No
Personalized note templates	<input type="radio"/>	<input type="radio"/>
Personalized macros	<input type="radio"/>	<input type="radio"/>
Personalized order sets	<input type="radio"/>	<input type="radio"/>
Preference lists for orders	<input type="radio"/>	<input type="radio"/>
Personalized report views	<input type="radio"/>	<input type="radio"/>
Speed buttons/shortcuts	<input type="radio"/>	<input type="radio"/>
Filters	<input type="radio"/>	<input type="radio"/>
Personalized sort orders	<input type="radio"/>	<input type="radio"/>
Personalized layouts where possible	<input type="radio"/>	<input type="radio"/>

Non Nursing How do you document?

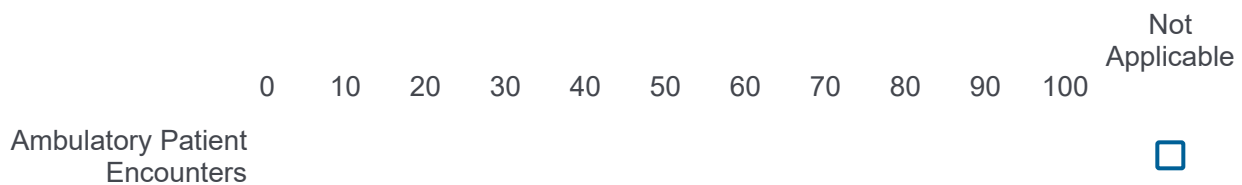
(Select all that apply)

- I **directly enter (type)** a significant amount of my documentation
- I use **voice recognition** for a significant amount of my documentation
- Someone else helps** enter a significant amount of my documentation (scribes or office staff)
- I use **dictation/transcription** for a significant amount of my documentation

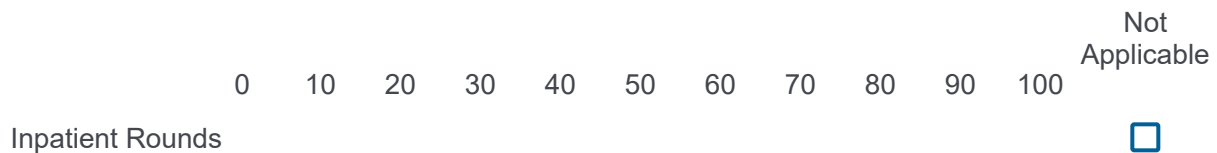
Non Nursing Do you enter your own orders?

- Yes, all of the time
- Yes, most of the time
- No, most of the time orders are entered and signed by another member of my care team
- No, most of the time someone pends these orders for my signature

Non Nursing [If applicable] What percentage of charting are you able to complete during or immediately after your ambulatory patient encounters?



Non Nursing [If applicable] What percentage of charting are you able to immediately complete during inpatient rounds?



How many hours per week do you spend completing your charting *outside of your normal business hours* (evenings, weekends, after your shift, etc.)?

- 0–5 hours
- 6–15 hours
- 16–25 hours
- 25+ hours

Last Step: Tell us your experience (Part 3 of 3)

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Do you agree with the following statements?

This EHR...

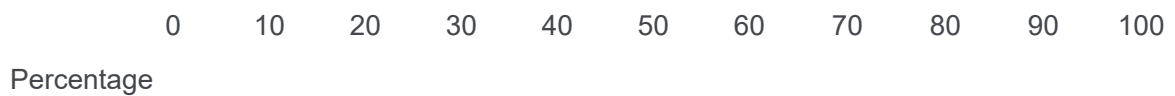
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable
...enables me to deliver high-quality care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...makes me as efficient as possible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...is available when I need it (has almost no downtime)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...has the functionality for my specific specialty/clinical care focus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...provides expected integration within our organization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...provides expected integration with outside organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...has the fast system response time I expect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...is easy to learn	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...provides the analytics and reporting I need	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...keeps my patients safe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...allows me to deliver patient-centered care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Detailed comments about your EHR satisfaction

[Optional] Do you agree?

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
This EHR and our organization's technology enable me to identify and prevent opioid misuse and addiction.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In what percentage of patient encounters does data electronically received from outside our organization better inform your delivery of care?



Do you agree with these statements?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
Our EHR vendor has designed a high-quality EHR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Our organization has done a great job of implementing, training on, and supporting the EHR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have personally done a great job of learning the EHR system so that I can be successful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Burnout

Using your own definition of burnout, select one of the answers below:

- I enjoy my work. I have no symptoms of burnout.
- I am under stress and don't always have as much energy as I did, but I don't feel burned out.
- I am definitely burning out and have one or more symptoms of burnout (e.g., emotional exhaustion).
- The symptoms of burnout that I am experiencing won't go away. I think about work frustrations a lot.
- I feel completely burned out. I am at the point where I may need to seek help.

What are the primary contributors to your feelings of burnout (if any)?

(Select all that apply)

- No personal control over my workload (working too many hours)
- Lack of autonomy in my job
- Chaotic work environment
- Lack of effective teamwork in my organization
- Lack of shared values with organization leadership
- Too much time spent on bureaucratic tasks
- After-hours workload
- EHR or other IT tools inhibit my ability to deliver quality care
- EHR or other IT tools hurt my efficiency
- Lack of training/proficiency on EHR or other IT tools
- Other (please specify)

Comments

You have reported high satisfaction. What do you believe that you do differently from some of your peers that enables you to be highly successful with the EHR?

Other related comments and/or concerns

Most significant improvements you have seen in the past 12 months

Changes you would like to see

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