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*

Physician
- Practicing physician (MD/DO)
- Physician resident or fellow
- Dentist (DDS/DMD)

Advanced practice provider
- CRNA
- Midwife
- Nurse practitioner
- Physician assistant

Nursing
- Clinical nurse specialist (CNS)
- Licensed practical nurse (LPN/LVN)
In which setting do you primarily work?

*In which setting do you primarily work?*

- Ambulatory care
- Inpatient care
- Inpatient and ambulatory care
- Emergency department

Locations of use

(Select all that apply)

- Hospital A
- Hospital B
- Hospital C
- Clinic A
- Clinic B
- Other (please specify)
Step 2: Tell us how you use the EHR (Part 2 of 3)

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)

Number of years you have used this EHR at your current organization

<table>
<thead>
<tr>
<th>Years Using EHR</th>
<th>Less than 1 year</th>
<th>1–2 years</th>
<th>3–5 years</th>
<th>6–9 years</th>
<th>10+ years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

Do you agree with the following statements?

This EHR...

- ...enables me to deliver high-quality care
  - Strongly disagree
  - Disagree
  - Neither agree nor disagree
  - Agree
  - Strongly agree
  - Not applicable

- ...makes me as efficient as possible
  - ○
  - ○
  - ○
  - ○
  - ○
  - ○

- ...is available when I need it (has almost no downtime)
  - ○
  - ○
  - ○
  - ○
  - ○
  - ○

- ...has the functionality for my specific specialty/clinical care focus
  - ○
  - ○
  - ○
  - ○
  - ○
  - ○

- ...provides expected integration within our organization
  - ○
  - ○
  - ○
  - ○
  - ○
  - ○

- ...provides expected integration with outside organizations
  - ○
  - ○
  - ○
  - ○
  - ○
  - ○

- ...has the fast system response time I expect
  - ○
  - ○
  - ○
  - ○
  - ○
  - ○

- ...is easy to learn
  - ○
  - ○
  - ○
  - ○
  - ○
  - ○
<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>...has alerts that prevent care-delivery mistakes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>...keeps my patients safe</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>...allows me to deliver patient-centered care</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>My clinical practice is enhanced through the use of the EHR</td>
<td>○</td>
<td></td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Detailed comments about your EHR satisfaction</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you agree?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My initial training prepared me well to use this EHR</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Overall, <strong>ongoing EHR training/education</strong> is helpful and effective</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I was trained on how to use the EHR for workflows specific to my specialty and/or practice area</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td><strong>Virtual instructor-led EHR training/education</strong> has sufficiently met my needs</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>
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

**[NEW] Please rate your participation in and the usefulness of the following training programs**

<table>
<thead>
<tr>
<th>Training Type</th>
<th>Have participated and found training useful</th>
<th>Have participated, but training was not useful</th>
<th>Have not participated, but I want to participate</th>
<th>Have not participated and have no desire to participate</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scheduled one-on-one training</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Impromptu one-on-one training (e.g., rounding visit)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Classroom</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Training in a department meeting</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Self-directed virtual training</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Instructor-led virtual training</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
Would you like more EHR education/training?

- [ ] Yes
- [ ] No

[Non Nursing] Do you use the following EHR personalization tools?

<table>
<thead>
<tr>
<th>Tool</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personalized note templates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personalized macros</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personalized order sets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preference lists for orders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personalized chart review</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Speed buttons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Filters</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personalized sort orders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personalized layouts (where possible)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

[Nursing Only]  NEW-Please rate your level of agreement with the following statement
How do you document?

(Select all that apply)

☐ I **directly enter** (type) a significant amount of my documentation

☐ I use **personalization tools** for a significant amount of my documentation (e.g., smart phrases, macros, templates)

☐ I use **speech 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

Do you agree that the training you received regarding your documentation method(s) was satisfactory?

<table>
<thead>
<tr>
<th>Method</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct entry (typing)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Personalization tools</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Speech recognition</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Dictation/transcription</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
</tbody>
</table>

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

Ambulatory patient encounters

0 10 20 30 40 50 60 70 80 90 100

Not Applicable
What percentage of charting are you able to immediately complete during inpatient rounds?

[Non Nursing] [If applicable] 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

[Nursing only] How many hours of productivity are lost per week in unproductive charting (duplicative or adds no value)?

- 0 hours
- 1–2 hours
- 3–4 hours
- 5+ hours

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

Do you agree with these statements?

- Patient data/results are easy to access and understand
- I receive an appropriate number of messages in my In Basket/message center
NEW—What percent of your patient messages could be handled by another member of your care team?

- 0-9%
- 10-20%
- 21-40%
- 41-60%
- 61-80%
- 81-100%

Do you agree with these statements?

This EHR...

- ...reduces duplicate orders of diagnostic tests and procedures
- ...improves communication regarding diagnostic procedures and their results
- ...improves care coordination
- ...helps me achieve my workplace’s safety goals (i.e., reduced rates of septic shock, CLABSI, CAUTI, falls, etc.)
### Do you agree with these statements?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Our <strong>EHR vendor</strong> has designed a high-quality EHR.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Our <strong>organization</strong> has done a great job of implementing, training on, and supporting the EHR</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I have <strong>personally</strong> done a great job of learning the EHR system so that I can be successful</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

<table>
<thead>
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<th>Statement</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I know how to request a <strong>fix</strong> to the EHR</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>EHR <strong>fixes</strong> are made in a timely manner</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td><strong>[NEW]</strong> I know how to request an <strong>optimization</strong> to the EHR</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td><strong>[NEW]</strong> EHR <strong>optimizations</strong> are made in a timely manner</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I have a voice in trying to improve the EHR</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Changes to the EHR are well communicated</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td><strong>[NEW]</strong> Changes to the EHR in the most recent upgrade [Org adds upgrade date] improved my experience using the EHR</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>
I am able to get support in a timely manner when I have an EHR issue

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

There is someone assigned to help my department with the EHR

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

The IT department is actively seeking to improve the EHR for clinicians

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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</tr>
</tbody>
</table>

**Burnout**

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

- ☐ I enjoy my work and have no symptoms of burnout
- ☐ I am under stress and don’t always have as much energy as I used to, 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, and I think about work frustrations a lot
- ☐ I feel completely burned out, and I am at the point where I may need to seek help

If you are experiencing symptoms of distress and are considering harming yourself, please contact the national suicide lifeline by calling 988 or contact your employee assistance resource [INCLUDE CONTACT INFORMATION HERE].

**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
Have you participated in a burnout prevention program at your current organization? If yes, did it have a positive impact on your sense of burnout?

<table>
<thead>
<tr>
<th>Program</th>
<th>Yes, and it made a positive impact</th>
<th>Yes, but it did not make a positive impact</th>
<th>No, but I would like to</th>
<th>No, and I do not want to</th>
<th>I was not aware of this program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program 1</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Program 2</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Program 3</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

NEW-What would you like your organization to do to help alleviate your feelings of burnout?

Within the next two years, how likely are you to leave your organization?
(Your answer to this question will remain anonymous even if you agreed to share your name with your organization.)

○ Very unlikely
○ Unlikely
○ Neither unlikely nor likely
○ Likely
○ Very likely

Demographic Information

[Non Nursing] Area of clinical focus (specialty)
(select one)

Other (please specify)

[Nursing Only] Area of nursing focus
(select one)

Other (please specify)

[Infrequently Asked] [Nursing and Allied Health Only] Are you a licensed or an unlicensed professional?

- Licensed
- Unlicensed

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?

If you could fix 3 things in our EHR tomorrow, what would you fix?

Change 1
Change 2
Change 3

Other related comments and/or concerns