

## Arch Collaborative Example 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
- Midwife
- CRNA
- Nursing
- Allied health professional
- Other (please specify)

*Nursing Only* **Nursing Role Type**

- Clinical Nurse Specialist
- LPN
- Medical Assistant
- Nursing Assistant
- RN
- Unit Clerk

*Allied Health Only* **Allied Health Role Type**

- Athletic Trainer
- Clinical Laboratory Scientist
- Counselor
- Dietician/Nutritionist
- Occupational Therapist
- Pharmacist
- Physical Therapist
- Radiation Therapist
- Respiratory Therapist
- Social Work
- Technician
- Technologist

*Allied Health/Nursing Only* **What type of care do you provide?**

- Direct care
- Indirect care
- Support

*Allied Health/Nursing Only* **Are you a licensed or an unlicensed professional?**

- Licensed
- Unlicensed

### In which setting(s) do you primarily work?

- Ambulatory care
- Inpatient care
- Outpatient services
- Emergency department
- Home care
- Community health services
- Telehealth

### 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

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

**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)

*Allied health only* Area of clinical focus

Other (please specify)

Number of years you have used this EHR

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

Do you agree?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
My <b>initial training</b> prepared me well to use this EHR.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall, <b>ongoing EHR training/education</b> is helpful and effective.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Tip sheets and online training</b> are helpful and effective.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>In-person training</b> is helpful and effective.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Would you like more EHR education/training?

- Yes
- No

Which of the following best describes why you want to receive more EHR education/training?

- I am in **desperate need** of more training to be more proficient
- I would **appreciate** more training to be more proficient
- I **feel proficient** but would like more training

Which of the following best describes why you **do not** want more EHR education/training?

(Select all that apply)

- I am proficient and **do not need more** EHR education
- I have **low confidence that the training would be high quality**, so I would not want more
- Training **costs too much time**
- I would attend training but **only if I was paid** to attend

*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 chart review	<input type="radio"/>	<input type="radio"/>
Speed buttons	<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?

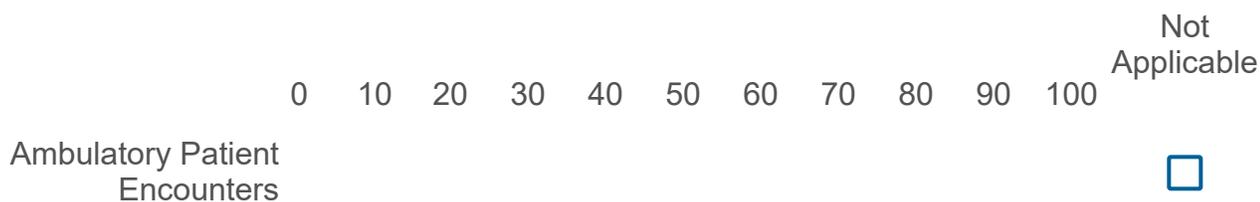
(Select all that apply)

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

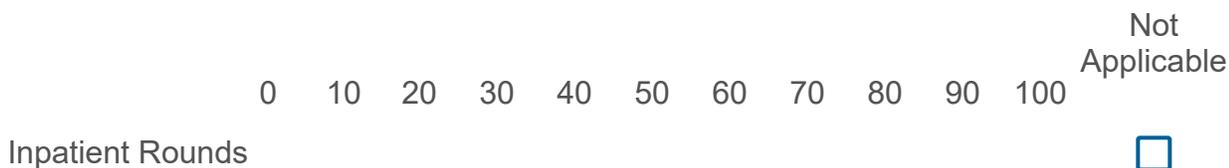
Do you agree with the following?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable
The quality and clarity of <b>my</b> documentation is very high	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The quality and clarity of my <b>peers'</b> documentation is very high	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*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?





	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable
...has the <b>functionality</b> 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 <b>integration within our organization</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...provides expected <b>integration with outside organizations</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...has the fast <b>system response time</b> I expect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...is <b>easy to learn</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...provides the <b>analytics, quality measures, and reporting</b> I need	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...keeps my <b>patients safe</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...allows me to deliver <b>patient-centered care</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### Detailed comments about your EHR satisfaction

### Do you agree?

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
<b>Patient data/results</b> are easy to access and understand	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This EHR's <b>alerts prevent</b> care-delivery mistakes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
It is easy to <b>access and assimilate data</b> from other EHRs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This EHR <b>provides risk-stratification tools</b> (i.e., social determinants of health, severity, indexing, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This EHR and our organization's technology enable me to <b>identify and prevent opioid misuse and addiction.</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*Non Nursing* What areas of the EHR need the most improvement/optimization?

	Impedes my personal efficiency	Impedes patient care	Impedes both my personal efficiency and patient care	Does not need improvement
Results review	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medication reconciliation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medication ordering	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other orders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In basket/message center	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Documentation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Integration with outside organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chart review	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*Nursing Only* What areas of the EHR need the most improvement/optimization?

	Impedes my personal efficiency	Impedes patient care	Impedes both my personal efficiency and patient care	Does not need improvement
Clinical information review	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Impedes my personal efficiency	Impedes patient care	Impedes both my personal efficiency and patient care	Does not need improvement
Care plans	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discharge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flowsheets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MAR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Navigator/menu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Notes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Orders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Worklists/care compass	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### Do you agree with these statements?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
Our <b>EHR vendor</b> has designed a high-quality EHR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Our <b>organization</b> 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 <b>personally</b> 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.

If you are experiencing symptoms of distress and are considering harming yourself, please contact the national suicide lifeline by calling [800-273-8255](tel:800-273-8255) 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
- 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)

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

**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

### Previously Asked Questions

Are you employed by Organization X?

- Yes
- No

*Nursing Only* What is the highest level of education you have obtained?

- Associate degree
- Diploma
- Nursing BSN
- Second-degree BSN
- PhD in Nursing
- Midwifery
- Other (please specify)

## 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"/>

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 use the following EHR personalization tools?

	Yes	No
Copy forward	<input type="radio"/>	<input type="radio"/>
Document all	<input type="radio"/>	<input type="radio"/>
Document multiple	<input type="radio"/>	<input type="radio"/>
Customized patient list	<input type="radio"/>	<input type="radio"/>
Customized workspace	<input type="radio"/>	<input type="radio"/>
Personalized layouts where possible	<input type="radio"/>	<input type="radio"/>

*Nursing Only* Do you agree?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
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	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 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

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



Current EMR proficiency

- Expert user
- Advanced user
- Intermediate user
- Novice user
- Struggling user

How many hours per week do you spend completing your charting *during* your normal business hours?

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

Most significant improvements you have seen in the past 12 months

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