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The Importance of Electronic Health Record Programs in Nursing Schools and Their Effects on Nursing Students

Jennifer Grimes

The University of Texas at Tyler – Honors Program

BACKGROUND

The American Recovery and Reinvestment Act of 2009 provided over $19 billion toward health information technology along with a mandate that public and private healthcare providers exhibit meaningful use of electronic health records (EHRs) by 2014. With the promise of financial incentives, healthcare providers slowly moved from paper charts to EHRs. By 2013, 59.4% of non-federal acute care hospitals adopted basic EHR systems (Charles, Gabriel, & Furukawa, 2014).

NURSING EDUCATION

For EHRs to work as designed, healthcare providers must have the knowledge and experience to operate them successfully and efficiently. Many nursing schools meet this challenge by including EHR programs in their curricula. Because nurses utilize EHRs to manage patient care, it is essential to teach nursing students the process of electronic documentation (Technology Informatics Guiding Education Reform, 2009; Bowers et al., 2011).

PURPOSE

This research project seeks to examine the importance and perceived benefit of teaching nursing students how to competently chart electronically and utilize information from the EHR.

EHR PROGRAMS

Nurses' use of EHRs goes beyond simple charting and documentation. Nurses must understand the data they input in order to make decisions regarding patient care (Bowers et al., 2011). Therefore, nursing schools must provide EHR programs that teach nursing students documentation skills as well as utilization of charted information (Mahon, Nickitas, & Nokes, 2009). Inexperienced nursing students may struggle to navigate through the hospital's EHR system, limiting their ability to provide quality patient-centered care (Lucas, 2010). EHR programs vary in content and method, but most allow students to access simulated patient information before simulation and document either in real time during simulations or after simulations are completed.

BARRIERS

There are numerous barriers to EHR education. Nursing faculty are one of the greatest barriers to incorporating EHR simulation software into curricula (Mahon, Nickitas, & Nokes, 2009). Students are barriers to their own education as well, most often related to computer illiteracy and the inability to use English language, grammar, and spelling correctly (Mahon, Nickitas, & Nokes, 2009). Schools and hospitals can also be barriers to EHR education.

CONCLUSION

Nursing schools must provide EHR programs in order to graduate students who are job ready. Nursing students must be instructed to use EHR systems in a way that does not focus solely on the technology but maintains a trusting patient-nurse relationship (Lucas, 2010). Barriers to EHR programs in nursing schools must be identified and overcome to provide students the best hands-on experience and patients the best healthcare providers.

EHR EDUCATION BARRIERS			
Students	**Faculty**	**Schools**	**Hospitals**
Computer literacy	Computer literacy	Choice of or development of EHR simulation software	Orientation to EHR system
Cost to purchase EHR simulation software	Knowledge of and ability to use EHRs	Cost to purchase and implement EHR simulation software	Limited availability of computers for student use
Use of English language, grammar, spelling, & medical terminology	Curriculum development	Support for faculty	Nurses' willingness to guide students
	Classroom time used to teach documentation		Clinical time used to practice documentation