Building a Golden Nursing Informatics Structure

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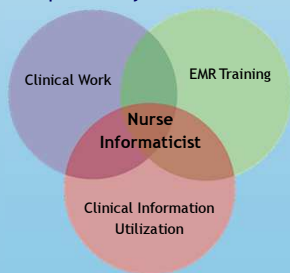Whitney King, BSN, RN, CPN; & Laura Sandoz, BSN, RN, CPN
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Background/Problem

➤ Disengaged nurses with technology initiatives
➤ Nurse champion identified to lead "big bang" Electronic Medical Record implementation in August 2013
➤ Within a year, realized one nurse informaticist for entire organization was not enough
  ▪ Resources spread too thin
  ▪ Needed nurse informaticists with area specific clinical knowledge

Approach

➤ Nurse Informatics positions created
  ▪ Emergency Services
  ▪ In-Patient Services
  ▪ Surgical Services
➤ Job Description written with three focus areas:
  ▪ Clinical Work
  ▪ EMR Training
  ▪ Clinical Information Utilization
➤ Matrix Reporting Structure
  ▪ Clinical work supervised by nursing unit leadership
  ▪ Informatics work supervised by Clinical Informatics Manager

Aim

➤ Working clinical knowledge enhances the nurse informaticists ability to support end users
➤ Keeping the nurse informaticist at the bedside allows them to stay current with workflows and better identify barriers to efficiency
➤ Technical knowledge gives the nurse informaticist the capacity to advocate for documentation standardization and leverage functionality
  ▪ This facilitates turning EMR data into useful information for the clinical nurse to apply in practice
➤ Nurse informaticists are the bridge between clinical nurses and Information Technology

Results

➤ Heightened training due to the combined knowledge of clinical workflows and system functionality
➤ Collaborative relationships with the EMR analysts resulting in effective systems enhancements that support end users
➤ Role expansion by integrating other forms of technology into nursing practice

Implications for Practice

➤ Demonstrates the positive and impactful work that can be accomplished
  ▪ Increased staff understanding of informatics
  ▪ Increased staff satisfaction with the EMR
➤ Collaboration between clinical areas with the ability to standardize documentation throughout the organization

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