Building a Golden Nursing Informatics Structure
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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 informaticist’s 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

April, 2016