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VIRTUAL LEARNING COMMUNITIES, CONTINUOUS TRAINING AND ELECTRONIC HEALTH RECORDS

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ABSTRACT

This research seeks to address the challenge of inadequate training for EHR users. We explore continuous healthcare training and development in the use of EHRs for collection, processing, analyzing, reuse and collaboration of EHRs. We present a theory-based conceptual model of virtual learning and discuss factors that are important considerations in developing a virtual learning community to support and sustain EHR systems and their educational challenges.

INTRODUCTION

Virtual Learning Communities (VLCs) are gaining popularity as a way to communicate and share information. It provides an environment for sharing and interacting with others who have common interests and goals. Many Colleges and Universities are using them because they help in areas such as: training, decision making, sharing exchanging and collaboration [1-2]. Considering the benefits of using virtual learning communities, EHR system users may also benefit from the use of VLCs. This research thus seeks to explore the use of sustainable VLCs as a strategy for continuous training and development by examining possible factors associated with developing EHR virtual learning communities.

LITERATURE REVIEW

EHR training for employees and staff was one of the major challenges in implementing and using EHR systems [3]. Training strategies can play a significant role in the successful adoption and continued use of EHR information systems [3]. One time training may help initially, but without ongoing, continuous training on new and existing processes, procedures and tools the motivation and efficient use of the system may decline. Healthcare Virtual Learning Communities (VLCs) can provide a vehicle for continuous training through engagement with the network of users and the knowledge sharing and the development of trust with other users in the community. Based on perspectives of technology acceptance (P1 & 2), social capital (P3 & 4), and sustainability (P5 & 6), we propose:

Propositions 1 & 2: *A higher degree of perceived usefulness (P1) and perceived ease of use (P2) of the virtual learning community is associated with a higher degree of usage of the virtual learning community.*

Propositions 3 & 4: *A higher degree of a sense of belonging to (P3) and social capital gained from (P4) the virtual learning community is associated with a higher degree of usage of the virtual learning community.*

Propositions 5 & 6: *A higher degree of perceived adaptability (P5) and perceived accessibility (P6) of the virtual learning community is associated with a higher degree of usage of the virtual learning community.*

METHODOLOGY

The study will involve two phases: the first phase is to conduct a qualitative study where we interview healthcare workers who use EHR systems to evaluate whether the constructs that are used are reasonable while the second phase will survey a diverse, random samples of healthcare workers in order to evaluate the constructs and the sustainability and intention to use virtual learning communities.

CONCLUSION

In conclusion, EHR systems are challenged with providing adequate training for employees in an environment where cost-efficiencies are a high priority. Virtual learning communities may be a resource that can help provide cost-effective, continuous training.

REFERENCES

References will be available upon request