Practice Switching Checklist

Changing the system your practice runs on, without losing a record, a booking or a client's trust. Work through it in order.

> **The principle.** Your records are yours, and your obligation to hold them does not pause because a contract ended. Get a complete, readable export before you cancel anything, and keep the old system readable until you have proved the new one holds everything.

Four weeks out. Get your data out first

- [ ] Ask your current provider, in writing, for a full export of client records, clinical notes, documents and attachments, in an open format such as PDF or CSV.
- [ ] Confirm what is not included in the export. Attachments, letters and outcome measures are the usual omissions.
- [ ] Ask how long they retain your data after you leave, and how it is destroyed. Keep the reply.
- [ ] Export the appointment history and the financial and billing records separately.
- [ ] Open a sample of exported files. An export you have not read is not a backup.
- [ ] Store the export somewhere secure that is not a personal laptop.

Three weeks out. Set the new system up properly

- [ ] Decide what actually migrates. Active clients, always. Discharged files can often stay in the archive.
- [ ] Load a handful of clients first and check the fields landed where you expect.
- [ ] Rebuild your note templates and letter templates before go live, not after.
- [ ] Set roles and access so clinicians see their own clients and administrative staff see what they need.
- [ ] Reconnect billing, Medicare and any online booking links.
- [ ] Check outcome measures carry across with their dates, so trend lines survive.

Two weeks out. Tell people

- [ ] Tell clients what is changing and what is not. Most care about two things only: is my information safe, and will my appointment still be there.
- [ ] Update your privacy policy to name the new provider and describe how information is handled, including any AI involvement.
- [ ] Refresh consent where the new arrangement is materially different from what clients agreed to.
- [ ] Tell referrers and your GP network the practical details: new booking link, same fax and email if possible.
- [ ] Brief the front desk on the questions they will be asked, with the answers written down.

Go live week. Run both, briefly

- [ ] Keep read access to the old system for at least a month. Do not cancel on day one.

- [ ] Reconcile a sample: pick ten clients and check every note, document and measure is present in the new system.
- [ ] Watch the first week of billing closely. Payments are where migrations break quietly.
- [ ] Log issues in one place rather than in messages between staff.
- [ ] Ask each clinician at the end of week one what is slower than before, and fix that first.

Closing out

- [ ] Only cancel the old subscription once the reconciliation passed and the export is stored.
- [ ] Get written confirmation that the old provider has deleted or returned your data.
- [ ] Remove departed staff and old integrations from both systems.
- [ ] Record the date of the switch in your practice's own records, with who did what.
- [ ] Diarise a review at ninety days.

Ask any provider before you sign

- Can I export everything, myself, without asking you?
- In what format, and does it include attachments?
- Where is the data held, and by whom?
- What happens to it if I leave?
- Who can see it inside your company?

Red flags

- Export available only on request, or for a fee.
- No clear answer on data location.
- Notes exportable only as a single unreadable file.
- Deletion timeframes that are not written down.
- A contract that auto renews before your review date.

Do not forget

- Records for clients seen as children, retained far longer.
- Supervision records, which live outside client files.
- Consent forms, which are part of the record.
- Anything sitting only in a clinician's own drive.

General guidance, not legal advice. Your practice remains responsible for its record keeping obligations throughout a migration. Ecko Health, v1.0, August 2026.