Electronic Health Records: An Unfulfilled Promise and a Call to Action

Sinsky and colleagues (1) confirm what many practicing physicians have claimed: Electronic health records (EHRs), in their current state, occupy a lot of physicians' time and draw attention away from their direct interactions with patients and from their personal lives. Observers documented that for every hour of direct clinical time with patients, physicians spent 2 additional hours on EHR and desk work, and physicians reported spending up to an additional 1 to 2 hours of after-hours personal time completing documentation and EHR tasks. These observations have important implications for patient care and outcomes.

A recent study found that physicians who use EHRs and computerized physician order entry have decreased satisfaction and a higher risk for professional burnout (2). Physicians who burn out are at a significantly greater risk for depression and suicidal ideation, and there is also concern that they are more likely than satisfied colleagues to provide lower-quality patient care and to leave clinical practice early (3), although this is difficult to fully measure.

Sinsky and colleagues' unique time and motion study enabled the collection of objective data on how physicians spent their time in the examination room with patients. More than one third (37%) of this time was spent on EHR and desk work rather than talking with or examining the patient. Many studies have documented lower patient satisfaction when physicians spend more time looking at the computer and performing clerical tasks (4–6). Patient satisfaction can affect health outcomes via adherence to the care plan and can also affect physician and hospital reimbursement, so the stakes are high.

Although the study design did not enable statistical comparisons by specialty or other practice characteristics, it is notable that approximately half of the study practices had documentation support services (dictation or a documentation assistant) available to physicians. Physicians in practices with these supports spent more time on face-to-face interaction with patients. Learning colleagues' strategies to alleviate some of the practice hassles related to EHRs is a great way to move forward and make improvements, and professional organizations have begun to facilitate such learning.

STEPS Forward is an American Medical Association program that uses online modules and live events to teach physicians about strategies to enhance their practices, incorporate what they have learned into their practices, and then share what they have learned with others. The goal of the program is to help physicians and practices reach the Quadruple Aim: better patient experience, better population health, lower overall costs, and improved professional satisfaction. Similarly, the American College of Physicians (ACP) has long identified reducing administrative complexities and burdens as a priority. As such, ACP's "Patients Before Paperwork" initiative seeks to reinvigorate the patient–physician relationship by reducing administrative burdens. The ACP collaborates with other stakeholders and provides tools to assist physicians and practices. The strategies for this initiative include education, stakeholder engagement, and advocacy. The ACP has also published a position paper, "Clinical Documentation in the 21st Century," that offers policy recommendations for clinical documentation and EHR system design (7). These recommendations recognize the promise of EHRs while also acknowledging the current challenges they present and calling for stakeholder engagement and cooperation in overcoming these challenges.

Electronic health records were implemented to improve the efficiency and quality of patient care, but they have yet to achieve that promise (8). Effectively addressing the challenges of modern-day practice requires such data as Sinsky and colleagues' study provides. These data document what physicians have long believed: The work of physicians has changed dramatically in recent years, at least partially due to EHRs. Additional time and motion studies would enable examination of the effect of strategies, such as scribes or advanced care teams, on practice efficiency, physician burnout, and patient satisfaction. Now is the time to go beyond complaining about EHRs and other practice hassles and to make needed changes to the health care system that will redirect our focus from the computer screen to our patients and help us rediscover the joy of medicine.

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References

1. Sinsky C, Colligan L, Li L, Prgomet M, Reynolds S, Goeders L, et al. Allocation of physician time in ambulatory practice: a time and motion study in four specialties. Ann Intern Med. 2016. [Epub ahead of print]. doi:10.7326/M16-0961
2. Shanafelt TD, Dyrbye LN, Sinsky C, Hasan O, Satele D, Sloan J, et al. Relationship between clerical burden and characteristics of the electronic environment with physician burnout and professional satisfaction. Mayo Clin Proc. 2016;91:836-48. [PMID: 27313121] doi:10.1016/j.mayocp.2016.05.007