Digging into the data to cut EHR burdens that drive burnout

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Did you know that for every eight hours that office-based physicians have scheduled with patients, they spend more than five hours in the EHR?

That sobering statistic, drawn from a study published in *JAMIA*, is just one of the revelatory findings uncovered with funding support from the AMA that have quantified the EHR burdens practicing physicians know all too well and that have contributed to the doctor burnout crisis.

To help reduce physician burnout and enhance high-quality patient care, nine organizations will examine elements of EHR use to discover ways to improve workflow, teamwork and resource allocation at the practice level thanks to nearly $600,000 in grant funds from the AMA.

The AMA's Electronic Health Record Use Research Grant Program began in 2019 to identify patterns in EHR use that may detract from patient care. The AMA has awarded more than $2 million in grants to 26 organizations over the years to study a variety of EHR-use topics.

“Burdensome EHR systems are a leading contributing factor in the physician burnout crisis and demand urgent action,” according to Christine Sinsky, MD, the AMA’s vice president of professional satisfaction. “The research supported by the AMA grant program builds the evidence base to help change EHR technology into an asset to medical care, and not a demoralizing burden.”

Reducing physician burnout is a critical component of the AMA Recovery Plan for America’s Physicians.

Far too many American physicians experience burnout. That’s why the AMA develops resources that prioritize well-being and highlight workflow changes so physicians can focus on what matters—patient care.

The 2023 grant recipients are:

- AllianceChicago.
Among other EHR-use topics, the AMA-supported researchers at these organizations will:

- Explore the prevalence and the facilitators of relational continuity among patients, physicians and care teams in primary care.
- Look at factors that influence the amount of time spent using an EHR and the impact of inbox messages on EHR burden in the primary care setting.
- Study primary care physician EHR inbox prioritization.
- Examine the relationships between team stability and inbox-message frequency and whether higher text-message interruptions during order entry is associated with increased order-entry errors.
- Assess the impact e-visit billing has on clinician EHR inbox time, EHR work after scheduled hours and the overall EHR burden.
- Evaluate the association between team support for medication orders and physician time spent on order entry and time on inbox in primary care.
- Assess primary care physician time spent in the EHR during paid time off.
- Examine physician retention, clinical productivity and patterns of EHR use in the emergency department.

“The EHR Use Research Grant Program allows the AMA to work with researchers who are leading efforts to expand insight into EHR systems and measure the technologies’ capacity to support or undermine the delivery of efficient and effective clinical work,” Dr. Sinsky said.

The AMA recognizes that EHR-use data will only get more robust as vendors adopt new and better data collection and as health systems learn to maximize the potential of the data that is available. The AMA grant program is helping the field of study continue to grow.

Highlights of previously published findings from research funded by the AMA include:

- Physicians in outpatient ambulatory care receive more messages from patients through the EHR system than prior to the start of the COVID-19 pandemic.
- Physicians using virtual scribe services experience improvements in their EHR documentation time and quality.

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Women physicians spend more time on the EHR overall, after hours, and on EHR-based documentation than male physicians.

Volume of EHR use can be tracked and used to predict physician departure from practice.

A recent commentary written by one of the funded research teams, published in *Annals of Family Medicine*, outlines how to more accurately capture the time spent on the EHR outside of scheduled time for patients to produce an objective and standardized measure to use in efforts to reduce burnout, set policy and facilitate research.

Learn more with the AMA about how to take a system-level approach to EHR inbox reduction (PDF).