Family doctors spend 86 minutes of “pajama time” with EHRs nightly

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A new study using electronic health record (EHR) system event-logging data to track family physicians’ workdays finds that primary care physicians spend more than half of their work day interacting with the EHR—with nearly a quarter of that computer work happening after clinic hours. Yet, physician experts argue, a big chunk of the administrative work family physicians and other doctors do on EHRs could be properly delegated to other members of the practice team.

The study, published today in Annals of Family Medicine, was co-written by researchers from the AMA and the University of Wisconsin’s medical school and engineering department. Over a three-year period, all Epic Systems Corp. EHR interactions from 142 family physicians in a single health care system in southern Wisconsin were captured from “event logging” records, used to monitor performance of the system.

The tale of all that tape is that each weekday, physicians spent an average of 5.9 hours out of an 11.4-hour workday working in the EHR. That consisted of 4.5 hours during clinic times and 1.4 hours after work. Clerical and administrative tasks such as documentation, order entry, billing and coding and system security, accounted for 44 percent of the total EHR usage time. About one-third of the time was spent on medical care EHR tasks such as chart reviews and problem lists, while inbox management took up 24 percent of family physicians’ time.

One of the study’s co-authors, Christine Sinsky, MD, is a practicing internist and has used an EHR for more than 15 years. In that time, she said, increasing requirements and regulations have fundamentally changed the nature of a physician’s work.

“Work previously done by other team members has been shifted to the physician in the EHR,” said Dr. Sinsky, who is the vice president of professional satisfaction at the AMA and practices at the Medical Associates Clinic and Health Plans in Dubuque, Iowa.
“Tasks that may have earlier required a matter of seconds, now may each take one to two minutes. Add this up over the thousands of individual tasks each day and it wasn’t surprising that I and other physicians began to wonder if we were spending more time caring for the computer than caring for the patient,” she told AMA Wire®.

Especially concerning, Dr. Sinsky said, is the 86 minutes family physicians spend doing administrative work after hours or at home, which she has dubbed “pajama time” with the EHR.

Event logs are available to help identify areas of EHR work that can be delegated to help reduce workload and improve professional satisfaction. There are more than 1,000 event descriptions to identify user interactions with Epic, which includes both patient care-related events and system-level technical events.

The data from the Wisconsin family physicians’ event logs buttress the findings in a direct-time motion observation study that Dr. Sinsky and colleagues published in 2016 in Annals of Internal Medicine, which found that for each two hours physicians spend on direct patient care, they spend one hour wrestling with EHR tasks.

Dr. Sinsky explained that most organizations have access to the type of back-end data examined for this new study, and that the information can help determine how much after-hours time their own physicians are spending in the EHR rather than with their families, friends or getting much needed rest.

“Individual organizations can also use this audit data to understand how much of the patient visit is spent on the computer and how much of the total physician workday is spent on clerical tasks—such as order entry and visit note documentation—that do not require the skills and training of a physician,” said Dr. Sinsky.

User-event log data is valid for assessing individual physician performance within the EHR, influencing workflow redesign and assessing the impact of organizational changes on task management by health care team members, Dr. Sinsky and her co-authors wrote.

5 ways to fix primary care downers

Developing organizational metrics can help cut stress and burnout related to EHR systems. There are five potential solutions to common problems exhibited in primary care to help physicians find “joy in practice,” the study’s authors wrote.

According to the study, these proposed solutions are:
Proactive planned care.
Team-based care that includes expanded rooming protocols, standing orders and panel management.
Sharing of clerical tasks including documentation, order entry and prescription management.
Verbal communication and shared inbox work.
Improved team function.

“The most powerful intervention to increase direct clinical face time with patients is advanced team-based care where the physician is paired with a stable team of two or three clinical assistants,” said Dr. Sinsky. “In this model, one of the clinical assistants provides in-room support during the patient visit, performing real-time information retrieval, visit note documentation and pending of orders.”

“Together, this care team is able to efficiently provide access and care to patients who need to be seen, close preventive and chronic-illness care gaps in a standardized manner and—because the medical assistant or nurse was in the room during the appointment—can also provide more robust between visit care,” she added.

A panel discussion, “Electronic Health Records: Impact, Optimization, and Usability,” in the AMA Running Your Practice Community is your chance to join key stakeholders to discuss topics such as usability and optimization, share best practices and learn from each other. Panelists include: Michael Hodgkins, MD, MPH, the AMA’s chief medical information officer; John Halamka, MD, chief information officer at Beth Israel Deaconess Medical Center; Mark Friedberg, MD, MPP, senior natural scientist, Rand Corp. This discussion, which runs through Sept. 15, is open to AMA members and non-members. Visit the discussion page.

To ensure new digital health solutions facilitate effective care and relationships between patients and physicians, the AMA brings the physician voice to innovators and entrepreneurs. By recognizing the key challenges physicians face when implementing health IT and the increase of direct-to-consumer digital health apps, the AMA aims to help physicians navigate and maximize technology for improved patient care and professional satisfaction.

The AMA is focused on influencing health IT with the goal of enhancing patient-centered care, improving health outcomes and accelerating progress in health care.

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