

# How collaboration with IT cut 1,500 clicks a day per physician

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An overflowing inbox, repeated clicks to complete one task and feeling burned out. These are things some physicians face as the result of their electronic health record (EHR). To address these inefficiencies within the EHR issues and improve professional satisfaction, the Northeast's largest nonprofit independent medical group collaborated with their IT department to cut 23 clicks per encounter—about 50 million clicks a year.

EHRs worsen professional satisfaction because of “poor usability, time-consuming data entry, interference with face-to-face patient care, inefficient and less fulfilling work content, lack of operability and degradation of clinical documentation,” said Steven Strongwater, MD, president and CEO of Atrius Health.

To address EHR technology barriers, Atrius Health bundled multiple solutions together to enhance workflow and continue their work in reducing physician burnout.

“It was built on the commitment of our IT team to change technology to improve the workflow and it was built on the commitment that we would deploy as many resources as it took to get these things to work,” Dr. Strongwater said at the International Conference on Physician Health in Toronto. The event was co-sponsored by the AMA, Canadian Medical Association and British Medical Association.

Here are the changes Atrius Health made with IT to reduce clicks and time spent in the EHR to increase professional satisfaction.

Enhancing workflow with widescreen monitors. Implementation of widescreen monitors across all practices allowed physicians to have several windows open at a time. The use of widescreen monitors helped to reduce click counts “enormously,” said Dr. Strongwater. Unfortunately, many practices did not want to use the widescreen monitors at first. However, even though implementation occurred in only 75 percent of the sites, at an estimated 1,500 clicks reduced per provider per day, about 50 million clicks were reduced overall.

Implementing e-prescribing. For technology, Atrius Health began using e-prescribing, which requires a two-factor authentication for controlled substances. This helped save \$56,267 to date in the health system because it “eliminated certain paperwork, particularly for the narcotics,” Dr. Strongwater said.

Reducing time in the EHR. “We spend 20 percent in clinical review, another 25 percent in notes, but we spent almost 20 percent in the in-basket,” said Dr. Strongwater. Through SWAT team, time in the EHR was reduced, saving about 30 minutes per physician per week. People generally felt it was personally beneficial (86 percent) or beneficial to their department (82 percent). However, only 50 percent stated that these changes improved joy in practice.

## Clearing up the in-basket

About one-third of messages received are about medication refills, carbon copies of other records and charts, and media manager, which is anything that is scanned in from a lab report or medical report.

From 2014-2017 there was a 230 percent rise in copy records or charts at Atrius Health practices and it is only getting worse. With help from IT, the number of messages received in the in-basket were reduced by creating dashboards. About 200,000 messages—40 percent—were moved into the dashboards, clearing up in-basket space for physicians.

Another area that seemed to jam up the in-basket were admit, discharge, and transfer (ADT) notifications, which are typically sent to the primary care physician.

“What happens is they would get a message that says, ‘Your patient has arrived to the emergency room,’” said Dr. Strongwater. “Then they’d say, ‘We’re considering an admission for your patient.’ Then they would say, ‘No we’ve admitted them,’ and so we have three unnecessary inbox messages.”

These have shifted entirely to the case managers and have been effectively moved out of the inbox notifications. The total of this group of changes, eliminates another 1.7 million clicks each year.

Committed to making physician burnout a thing of the past, the AMA has studied, and is currently addressing issues causing and fueling physician burnout—including time constraints, technology and regulations—to better understand and reduce the challenges physicians face. By focusing on factors causing burnout at the system level, the AMA assesses an organization’s well-being and offers guidance and targeted solutions to support physician well-being and satisfaction.

The AMA Ed Hub™—your center for personalized learning from sources you trust—offers CME on a broad range of topics including Creating the Organizational Foundation for Joy in Medicine™ using the STEPS Forward™ open-access platform that offers innovative strategies that allow physicians and their staff to thrive in the new health care environment. These toolkits can help you prevent physician burnout, create the organizational foundation for joy in medicine, create a strong team culture and



improve practice efficiency.