

New research links hard-to-use EHRs and physician burnout

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What's in the news: The electronic health record (EHR) systems now used in the vast majority of U.S. hospitals and physician offices get an average grade of “F” on the usability scale in the results of a newly published survey of nearly 900 doctors. Given that EHR work gobbles up as much as two hours of physicians' time for every one hour they spend delivering patient care, that result is grimly unsurprising.

After researchers adjusted for physician respondents' age, gender, medical specialty, practice setting, and hours worked, they found that how well doctors rated their EHRs' usability was “independently associated with the odds of burnout,” according to a study published today in *Mayo Clinic Proceedings*.

On a zero-to-100 scale of usability—the higher the better—every one point boost in EHR usability was linked to a 3% lower odds of physician burnout, as measured using the Maslach Burnout Inventory.

“A strong, dose-response relationship between EHR usability and the odds of burnout was observed,” says the study, which was co-written by AMA professional satisfaction experts Christine Sinsky, MD, and Michael Tutty, PhD, along with leading burnout researchers from Yale, Mayo Clinic and Stanford.

“Too many physicians have experienced the demoralizing effects of cumbersome EHRs that interfere with providing first-rate medical care to patients,” said AMA President Patrice A. Harris, MD, MA.

“It is a national imperative to overhaul the design and use of EHRs and reframe the technology to focus primarily on its most critical function—helping physicians care for their patients. Significantly enhancing EHR usability is key and the AMA is working to ensure a new generation of EHRs are designed to prioritize time with patients, rather than overload physicians with type-and-click tasks.”

Why it matters to patients and physicians: Nearly half of American doctors exhibit at least one symptom of physician burnout, which has been linked to physicians' opting to cut back on clinical care, pursue nonclinical career options within medicine or taking their considerable talents outside the

health care field altogether. That pattern is exacerbating the country's doctor shortage and access-to-care problems.

What's driving so many doctors to a state of EHR dissatisfaction? Consider this context. Previous researchers have found that Google search gets a usability score of 93 on the 100-point scale. The worst-performing everyday software product was Microsoft Excel. Yet that oft-maligned product, graded as having "low marginal" usability, still scored a 57—nearly a dozen notches higher on the usability scale than the 45.9 score that doctors gave the EHR on average.

Across industries, the average product score is 68 on the usability scale, yet only 15.8% of the doctors surveyed graded their EHR that highly. Researchers noted that while the relationship between usability and burnout "was strong," they "were unable to determine causation or the potential direction of effect given the cross-sectional nature of the data."

What's next: This research measures "the overall state of EHR usability, not the usability of any specific vendor or instance of the EHR," the study's authors wrote. "The current viability variability in EHR usability across health care systems and vendors has been shown to be wide with certain tasks having an average of a ninefold difference in time and eightfold difference in clicks" between different implementations of the same EHR and across EHRs from different vendors.

The authors noted that today's EHRs "are still in a nascent form and are only going to become more complex moving forward," the study says. Given that reality, "if EHR usability does not improve, increasing complexity could lead to compounded unintended effects on patient safety and physician burnout."

The AMA's ongoing effort to reduce physician burnout is striving to attack the dysfunction in health care by removing the obstacles and burdens that interfere with patient care.

"The AMA is working to make the patient-physician relationship more valued than paperwork, preventive care the focus of the future, technology an asset and not a burden, and physician burnout a thing of the past," Dr. Harris said.

These AMA efforts include:

- STEPS Forward™, a collection of more than 50 award-winning online tools that help physicians and medical teams make transformative changes to their practices and covers everything from managing stress and preventing burnout to improving practice workflow.
- Institutional assessments of burnout levels within medical organizations to provide a baseline metric for implementing solutions and interventions that reduce system-level burnout rates and improve physician well-being.
- "Debunking Regulatory Myths," a series in which the AMA provides regulatory clarifications to physicians and their care teams to aid in their day-to-day practice environment.

- EHRSeeWhatWeMean.org, a collaboration between the AMA and MedStar Health to demonstrate the risks and challenges caused by poor usability in electronic health record technology that reduce time available for physicians to care for patients.