Future of the Health Care Workforce: Where are we going?”

May 23, 2018
Setting the Context

Source: Various, AMA
Projected physician shortfall of between 42,600 and 121,300

Increasing Medical Student Matriculation

Medical Student Matriculation

Caps on federal Medicare funding for residency training limits the ability to expand graduate medical education

Increasing Signs of Burnout

How Do Physicians Compare?

What Causes Dissatisfaction?

“Physicians who used EHRs and CPOE were less satisfied with the amount of time spent on clerical tasks and were at higher risk for professional burnout.”

“More after-hours time spent on the EHR was associated with burnout and less work-life satisfaction.”

“Physicians who reported higher % of time spent on administrative duties had lower levels of career satisfaction, higher levels of burnout, and were more likely to be considering seeing fewer patients...PA, clinical documentation, and medication reconciliation were rated the most burdensome tasks.”
What Causes Dissatisfaction?

“Burnout was associated with high stress, low work control, and low values alignment with leaders.”

“The leadership qualities of physician supervisors appear to impact the well-being and satisfaction of individual physicians.”

“The number of hours a physician works is not related to happiness, but the perceived ability to manage workload was significantly related to happiness.”
Allocation of Physician Time: Part 1

• For every hour physicians provide direct clinical face time to patients, nearly 2 additional hours are spent on EHR/desk work.

• Outside office hours, physicians spend another 1 to 2 hours each night doing EHR/desk work.
Tethered to the EHR: Primary Care Physician Workload Assessment Using EHR Event Log Data and Time-Motion Observations

ABSTRACT

PURPOSE Primary care physicians spend nearly 2 hours on electronic health record (EHR) tasks per hour of direct patient care. Demand for non-face-to-face care, such as communication through a patient portal and administrative tasks, is increasing and contributing to burnout. The goal of this study was to assess time allocated by primary care physicians within the EHR as indicated by EHR user-event log data, both during clinic hours (defined as 8:00 AM to 6:00 PM Monday through Friday) and outside clinic hours.

METHODS We conducted a retrospective cohort study of 142 family medicine physicians in a single system in southern Wisconsin. All Epic (Epic Systems Corporation) EHR interactions were captured from “event logging” records over a 3-year period for both direct patient care and non-face-to-face activities, and were validated by direct observation. EHR events were assigned to 1 of 15 EHR task categories and allocated to either during or after clinic hours.

RESULTS Clinicians spent 355 minutes (5.9 hours) of an 11.4-hour workday in the EHR per weekday per 1.0 clinical full-time equivalent: 269 minutes (4.5 hours) during clinic hours and 86 minutes (1.4 hours) after clinic hours. Clerical and administrative tasks including documentation, order entry, billing and coding, and system security accounted for nearly one-half of the total EHR time (157 minutes). EHR use per weekday per 1.0 clinical full-time equivalent was 252 minutes (4.2 hours).

• Physicians spent an average of 5.9 hours out of an 11.4-hour workday working in the EHR.

• Clerical and administrative tasks accounted for 44 percent of the total EHR usage time.

• Inbox management took up 24 percent of family physicians’ time.

Brian G. Arndt, John W. Beasley, Michelle D. Watkinson, Jonathan L. Temte, Wen-Jan Tuan, Christine A. Sinsky, and Valerie J. Gilchrist, Tethered to the EHR: Primary Care Physician Workload Assessment Using EHR Event Log Data and Time-Motion Observations, Ann Fam Med September/October 2017 15:419-426
“Pajama Time”: Saturday nights belong to EHRs

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Why Does it Matter?

“We found support for the notion that the depersonalization dimension of physician burnout was associated with patient outcomes of lower satisfaction and longer post discharge recovery time (after controlling for severity of illness and other demographic factors).”


“Burnout is associated with lower patient satisfaction, reduced health outcomes, and it may increase costs. Burnout thus imperils the Triple Aim”

Physicians Leaving Practice and Profession Due to Burnout

Because of Burnout

- 1 out of 5 physicians intend to reduce clinical work hours in the next year.
- 1 out of 50 physicians intend to leave medicine altogether in the next 2 years to pursue a different career.