How Doctors Feel About Electronic Health Records

National Physician Poll
by The Harris Poll

Stanford MEDICINE

The Harris Poll
Harris Insights & Analytics, A Stagwell LLC Company

Background, Objectives, and Methodology

New research from Stanford Medicine, conducted with The Harris Poll examined perceptions of EHR systems among primary care physicians (PCPs). The research will inform a white paper drafted by Stanford Medicine, one that is focused on identifying what problems doctors are encountering with EHRs, and then implementing solutions.

Qualified respondents were:

- ✓ PCPs (Primary medical specialty defined as Family Practice, General Practice, or Internal Medicine)
- ✓ Licensed to practice in the United States
- ✓ Using their current EHR system for a least one month

Method Statement (to be included in all materials for public release):

The survey was conducted online by The Harris Poll on behalf of Stanford Medicine between March 2 and March 27, 2018 among 521 PCPs licensed to practice in the U.S. who have been using their current EHR system for at least one month. Physicians were recruited via snail mail from the American Medical Association (AMA) Masterfile. Figures for years in practice by gender, region, and primary medical specialty were weighted where necessary to bring them into line with their actual proportions in the population of PCPs in the U.S.

Throughout this report:

- Percentages may not add up to 100% due to weighting and/or computer rounding and the acceptance of multiple responses.
- Unless otherwise noted, results for the Total (all responding PCPs) are displayed.

Key Takeaways

The Harris Poll, on behalf of Stanford Medicine, conducted a comprehensive survey of over 500 primary-care physicians (PCPs) on electronic health records (EHRs). Some key findings include:

1. Doctors see value in EHRs, but want substantial improvements.

- While roughly two-thirds of PCPs think EHRs have generally led to improved care (63%) and are at least somewhat satisfied with their current EHR systems (66%), they continue to report problems
- Four in 10 PCPs (40%) believe there are more challenges with EHRs than benefits
- 62% of time devoted to each patient is being spent in the EHR and half of office-based PCPs (49%) think using an EHR actually *detracts* from their clinical effectiveness
- Seven out of 10 physicians (71%) agree that EHRs greatly contribute to physician burnout
- Six out of 10 physicians (59%) think EHRs need a complete overhaul

2. EHRs aren't seen as powerful clinical tools; their primary value, according to PCPs, is data storage (44%).

- Only 8% say the primary value of their EHR is clinically related

3. Physicians agree on what needs to be fixed right away, and what needs to be fixed over the next decade:

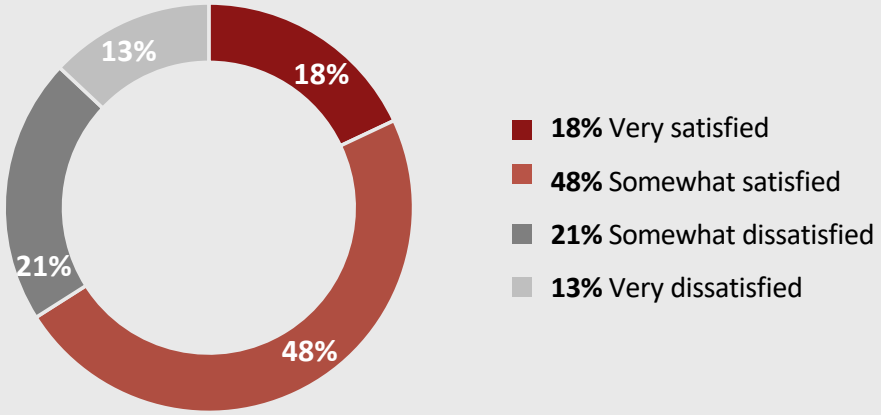
- Nearly three out of four PCPs (72%) think that improving EHRs' user interfaces could best address EHR challenges in the immediate future
- Seven out of 10 PCPs (67%) think solving interoperability deficiencies should be the top priority for EHRs in the next decade—and 43% want improved predictive analytics to support disease diagnosis, prevention, and population health management

Executive Summary

Doctors see value in EHRs, but want substantial improvements.

Two-thirds of PCPs (66%) report that they are satisfied with their current EHR system.

However, only one in five (18%) are very satisfied.



Six in 10 agree that EHRs have led to improved patient care, both in general (63%), and within their practice (61%).

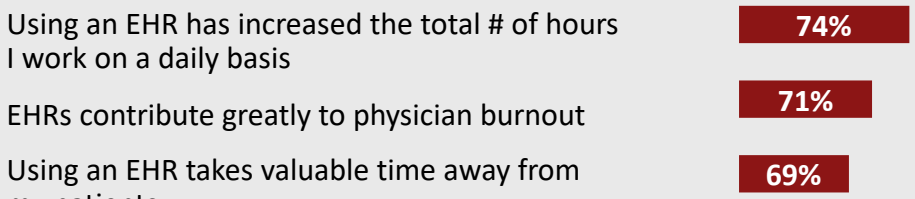
Despite 70% saying EHRs have improved over the last five years, more than half still agree that:

- ✓ EHRs need a complete overhaul (59%)
- ✓ Using an EHR detracts from their professional satisfaction (54%)

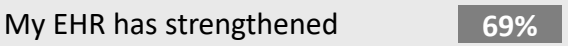
Time spent on EHRs effects patients relationships.

While only 3% of PCPs don't see **any** value in their EHR system, time constraints take a toll and patient relationships suffer:

Seven in 10 agree that

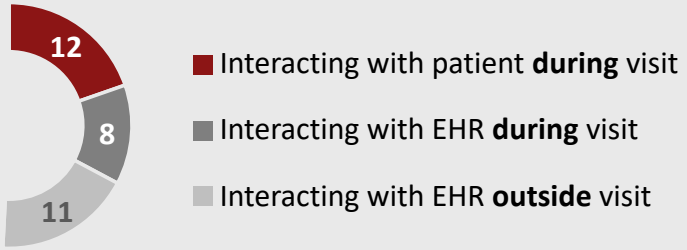


Seven in 10 disagree that



More time spent in EHR than with patient

31 min
spent on behalf of each patient; 19 of which spent in EHR

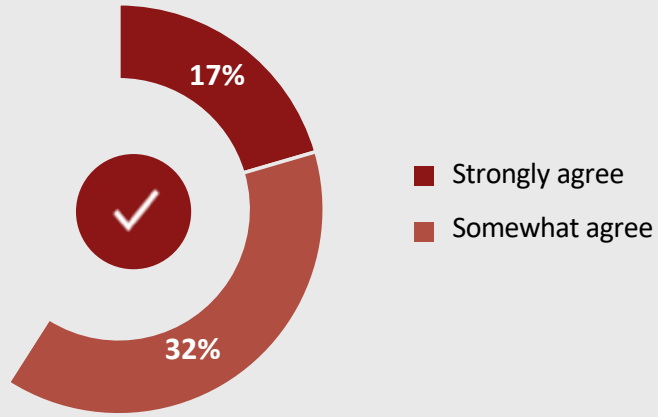


Physicians see EHRs as a storage—not clinical—tool; about half say it detracts from their clinical effectiveness.

Nearly half of PCPs (44%) say the primary value of their EHR is digital storage, while less than one in 10 (8%) cite key clinically related items such as disease prevention/management (3%), clinical decision support (3%), and patient engagement (2%).

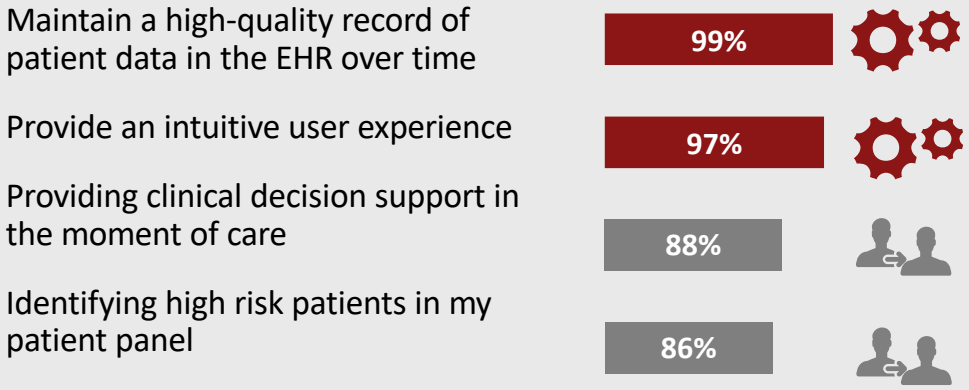
Half agree that using an EHR detracts from their clinical effectiveness

49%
agree

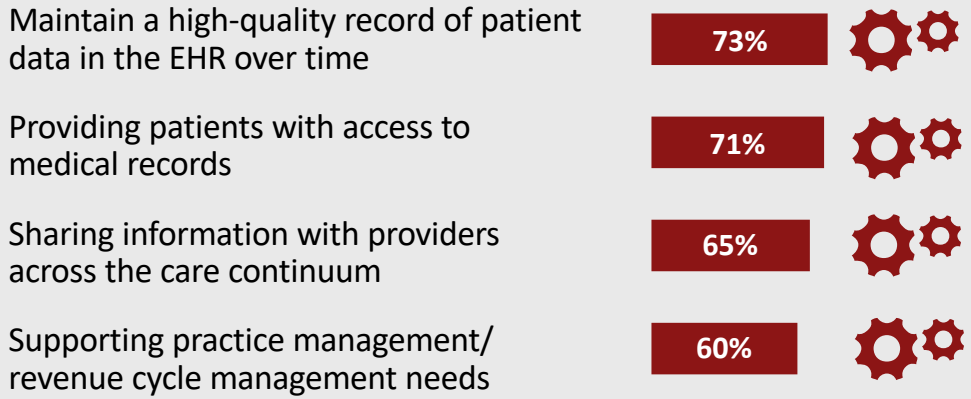


Physicians see EHRs as a storage—not clinical—tool; about half say it detracts from their clinical effectiveness. (cont.)

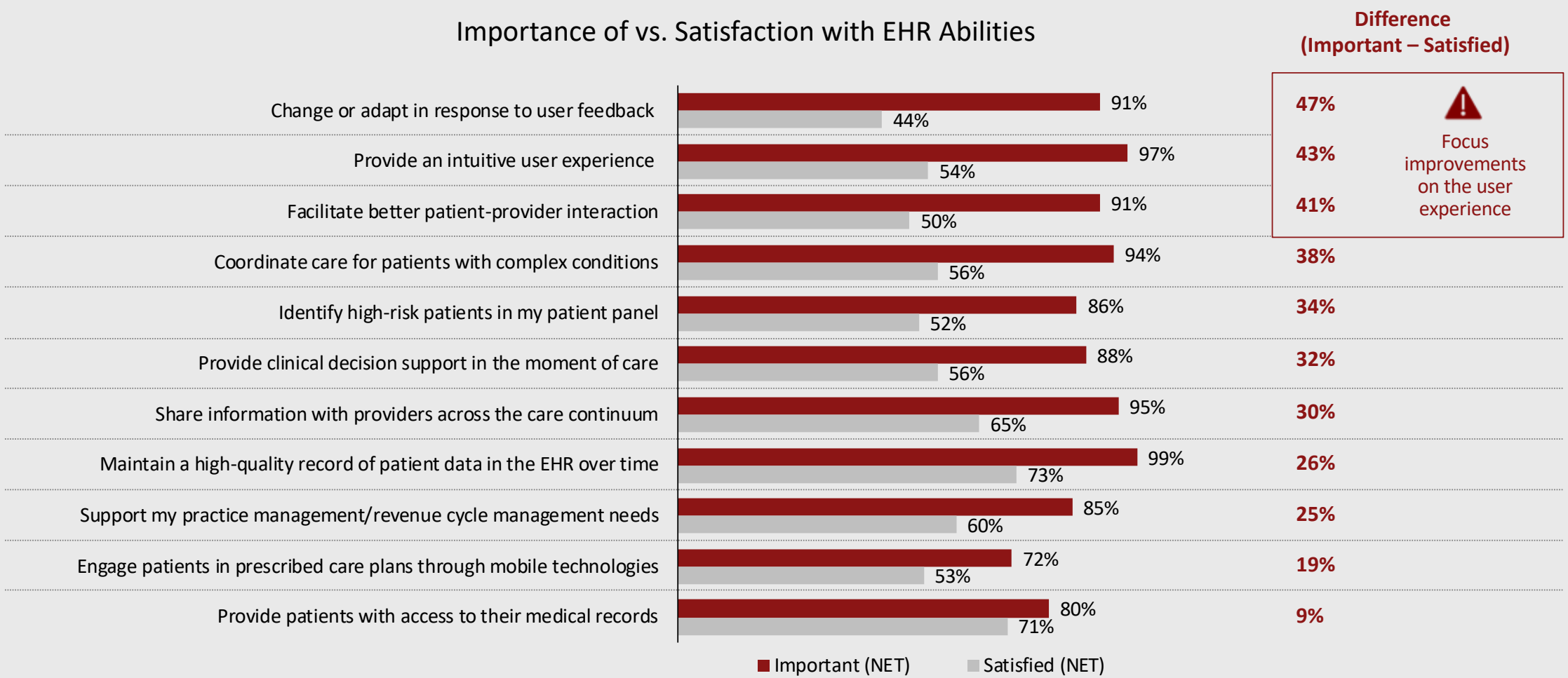
The EHR abilities nearly all PCPs agree are important are related to technology; fewer say clinical abilities are as important.



The top items PCPs are most satisfied with are also more technological than clinical:

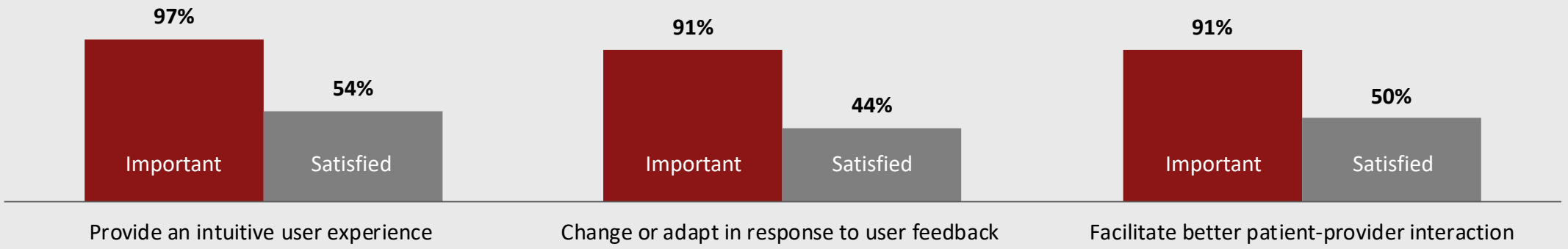


Some of the most important EHR capabilities are where PCPs believe the technology is falling short.



What nine in 10 physicians want: EHRs to be more intuitive and responsive.

PCPs agree that three features are crucial for EHRs: an intuitive user experience, adapting to feedback, and helping improve interactions between patients and providers. For all three, only half of PCPs are satisfied with their EHRs' performance at the moment.



The short-term improvement physicians want most? Improved interface design.

Top three improvements PCPs want to see in the short term:

Improve EHR user interface design to eliminate inefficiencies and reduce screen time — **72%**

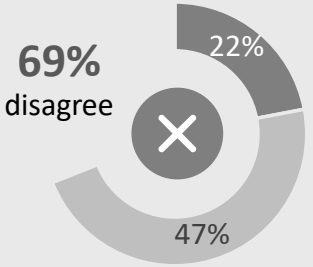
Shift more EHR data entry to support staff — **48%**

Use of highly accurate voice recording technology that acts as a scribe during patient visits — **38%**

Other solutions and EHR attitudes suggest there is also opportunity to re-imagine care teams and delegate or automate EHR tasks:

Over one-quarter of PCPs (27%) indicate that developing Artificial Intelligence (AI) assistants to support physicians with patient care and practice administration is a long-term EHR development they'd like to see in the next 10 years.

Most EHR tasks that I perform cannot be completed by anyone other than a trained physician



The biggest long-term development physicians want to see with EHRs: improved interoperability and predictive analytics.

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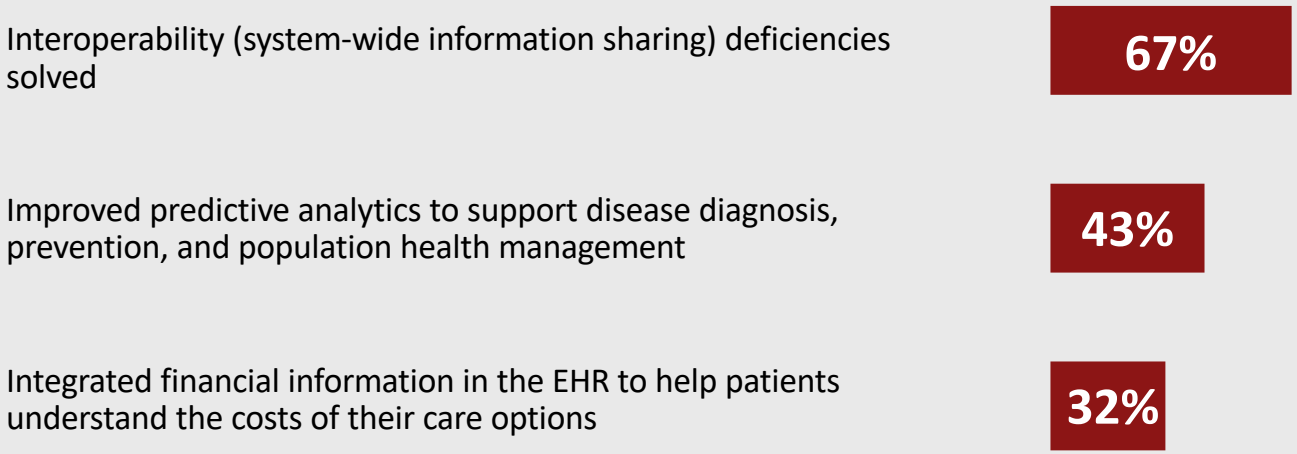
Over the next decade, PCPs would most like to see…



Nearly one in three PCPs think entrenched financial interests will be an obstacle.

PCPs see the following as the biggest obstacles to future changes: cost, structure, and incentives.

1 in 2 cite:

48%
Healthcare IT too fragmented and disconnected

48%
Cost to physician/ practice

1 in 3 cite:

30%
Financial interests within the healthcare industry are too entrenched to change the status quo

Differences emerge between PCPs based in an office and those based in a hospital.

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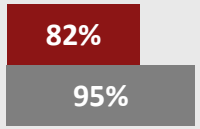
Nearly half of office-based PCPs see digital storage as the primary value of EHRs.

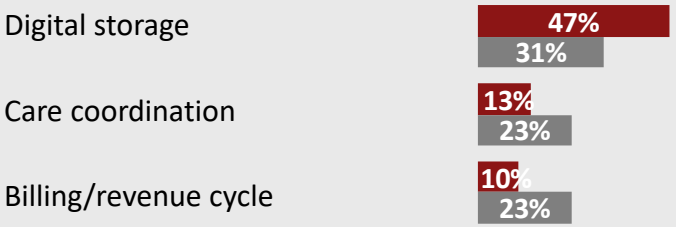
Agreement with:

Having access to digital patient data is imperative to high quality care



Office-based Hospital-based

Primary value of EHR:



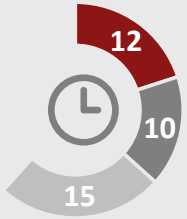
Office-based Hospital-based

Office-based

29 min
spent on behalf of each patient; 17 of which spent in EHR

Hospital-based

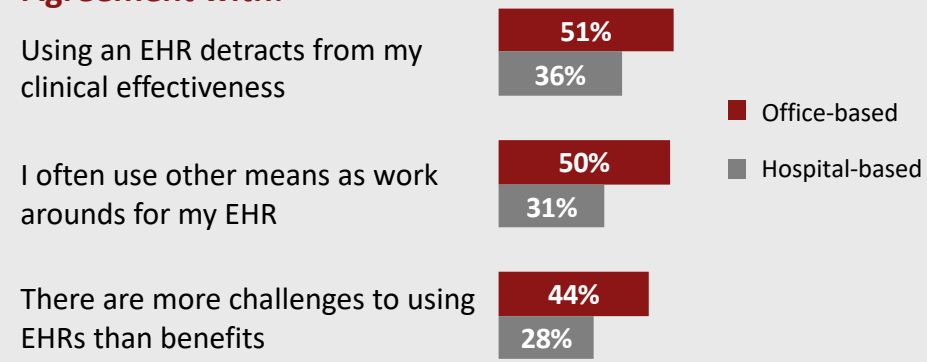
37 min
spent on behalf of each patient; 25 of which spent in EHR



- Interacting with patient **during** visit
- Interacting with EHR **during** visit
- Interacting with EHR **outside** visit

Office-based PCPs take a harsher view toward EHRs.

Agreement with:

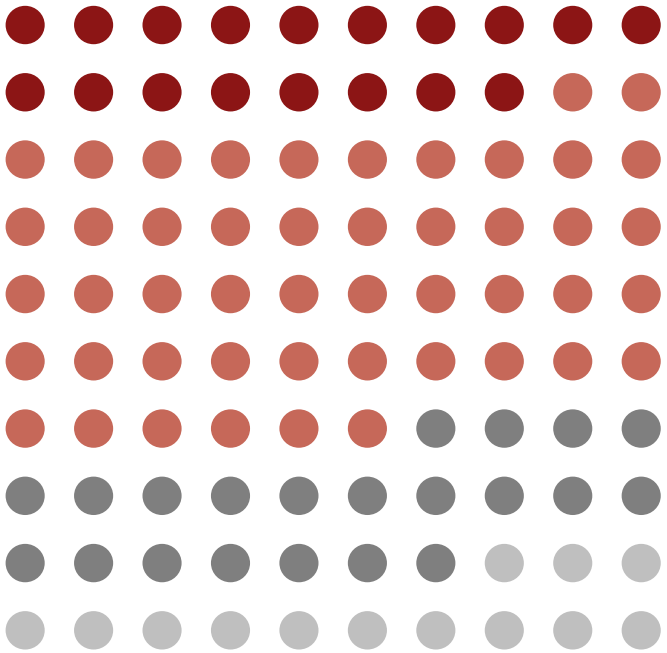


Office-based Hospital-based

Detailed Findings

Lukewarm satisfaction: Only one in five PCPs is “very satisfied” with EHRs—about the same who are “somewhat dissatisfied.”

EHR Satisfaction



18%
Very satisfied

48%
Somewhat satisfied

21%
Somewhat dissatisfied

13%
Very dissatisfied

66%
Satisfied (Net)

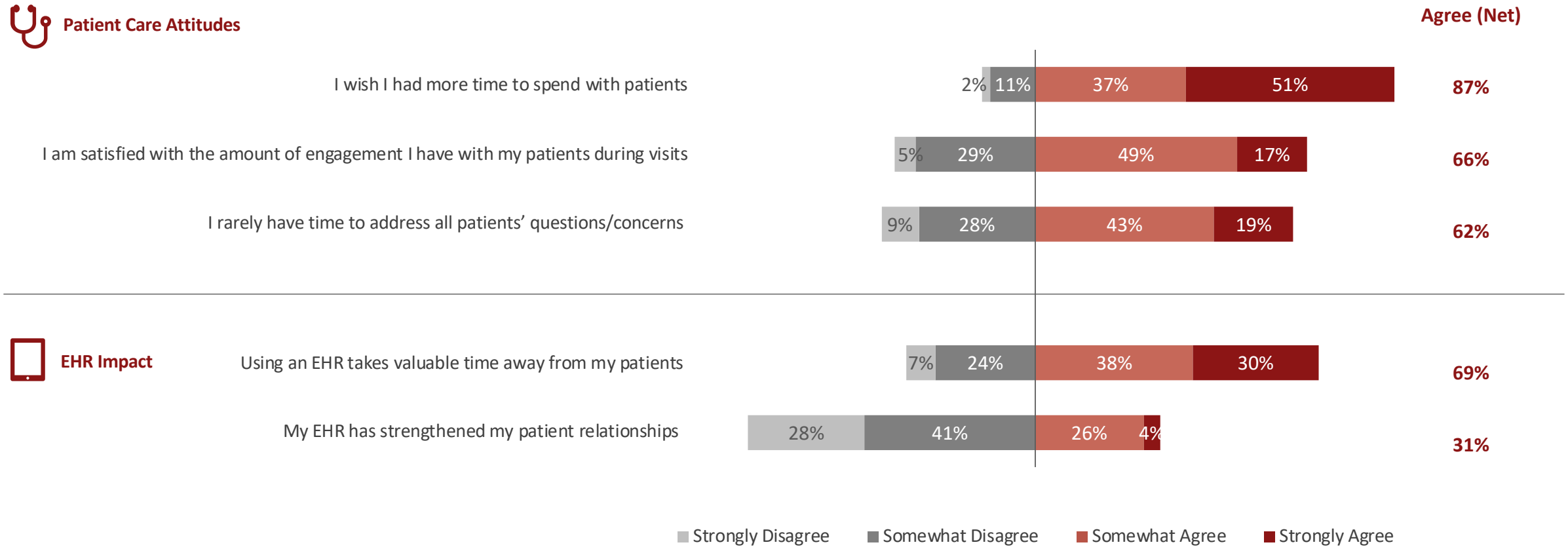
34%
Dissatisfied (Net)

Base: All qualified respondents (n=521). Q805: Overall, how satisfied are you with your current EHR system?

EHR systems take away valuable time PCPs wish they had to spend with patients.

Patient Care Attitudes and the EHR Impact

Patient Relationships and Time Constraints

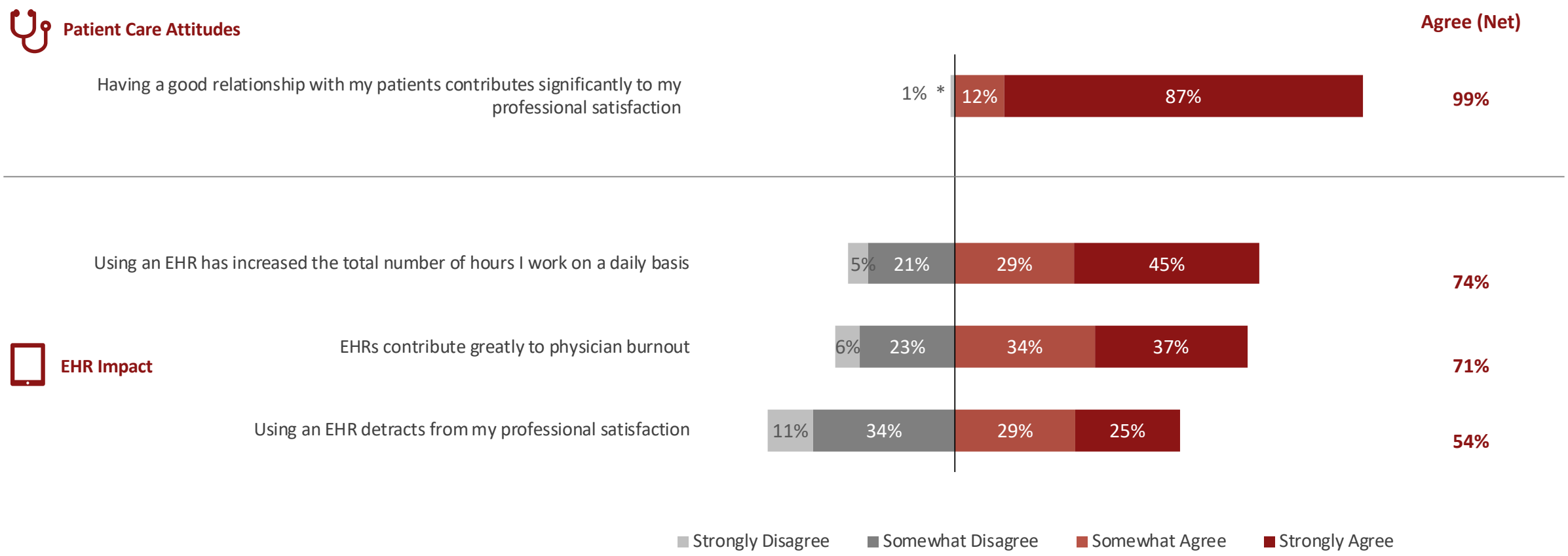


Base: All qualified respondents (n=521). Q715: How much do you agree or disagree with each of the following statements?
Base: All qualified respondents (n=521). Q820: How much do you agree or disagree with each of the following statements?

Seven in 10 PCPs say EHRs increase daily hours worked and contribute greatly to burnout.

Patient Care Attitudes and the EHR Impact

Professional Satisfaction

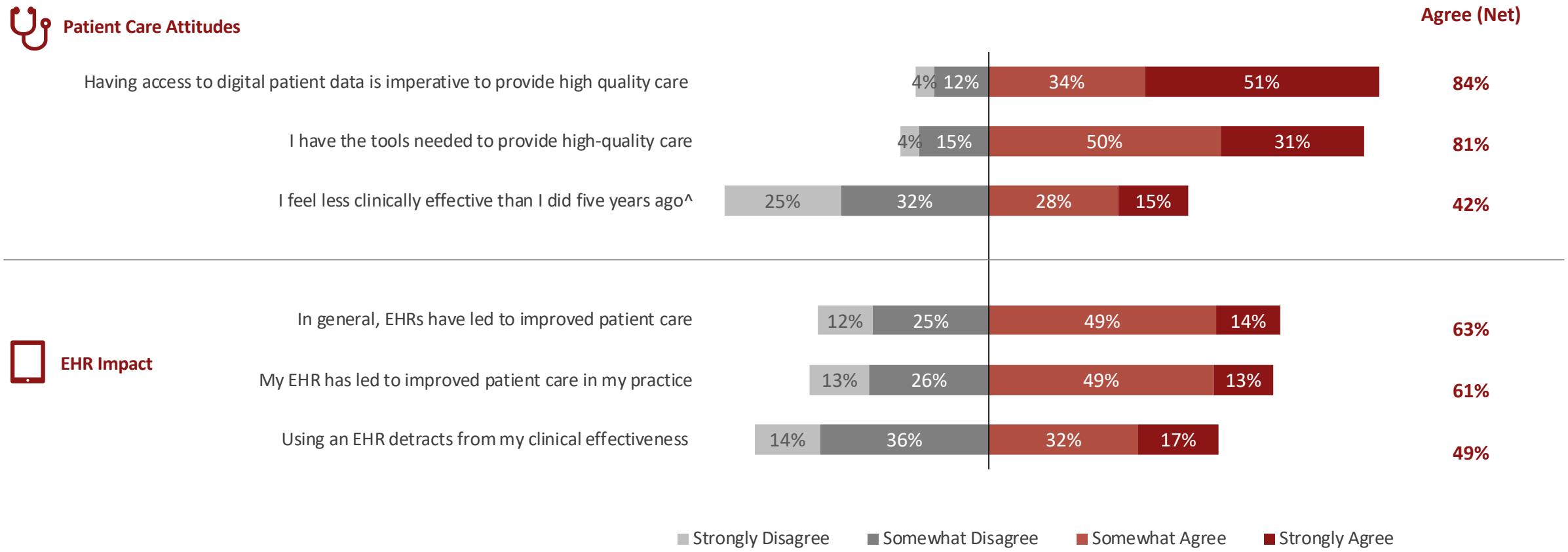


Base: All qualified respondents (n=521). Q715: How much do you agree or disagree with each of the following statements?
Base: All qualified respondents (n=521). Q820: How much do you agree or disagree with each of the following statements?

While a majority of PCPs believe EHRs have led to improved patient care, nearly half still feel their clinical effectiveness has been negatively impacted.

Patient Care Attitudes and the EHR Impact

Quality of Care and Clinical Effectiveness

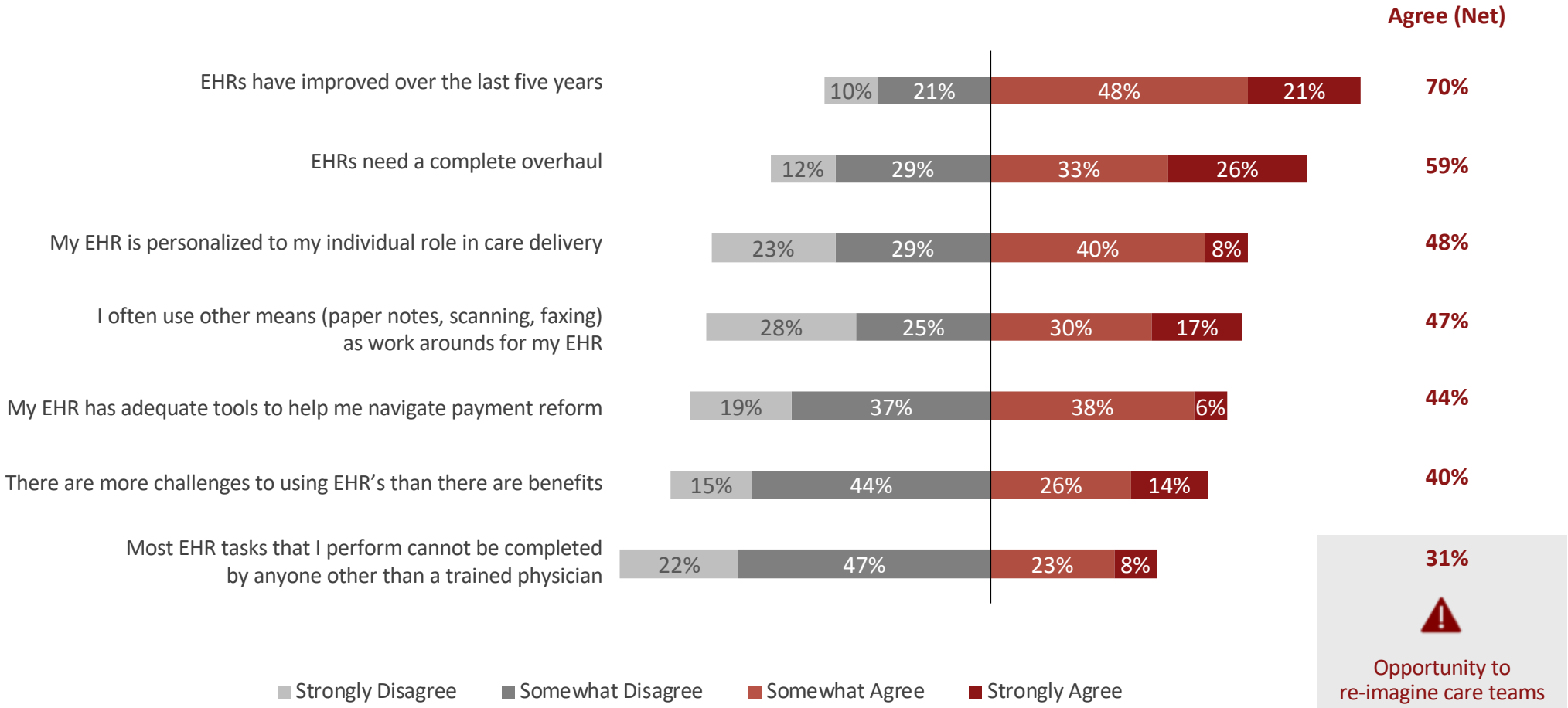


Base: All qualified respondents (n=521). Q715: How much do you agree or disagree with each of the following statements?
Base: All qualified respondents (n=521). Q820: How much do you agree or disagree with each of the following statements?

^Reduced base (those in practice 5+ years) : Total n=483;
10-20 years in practice n=175; 21+years in practice n=240

Things are getting better, but many PCPs still say a complete overhaul is needed and nearly half are using work-arounds often.

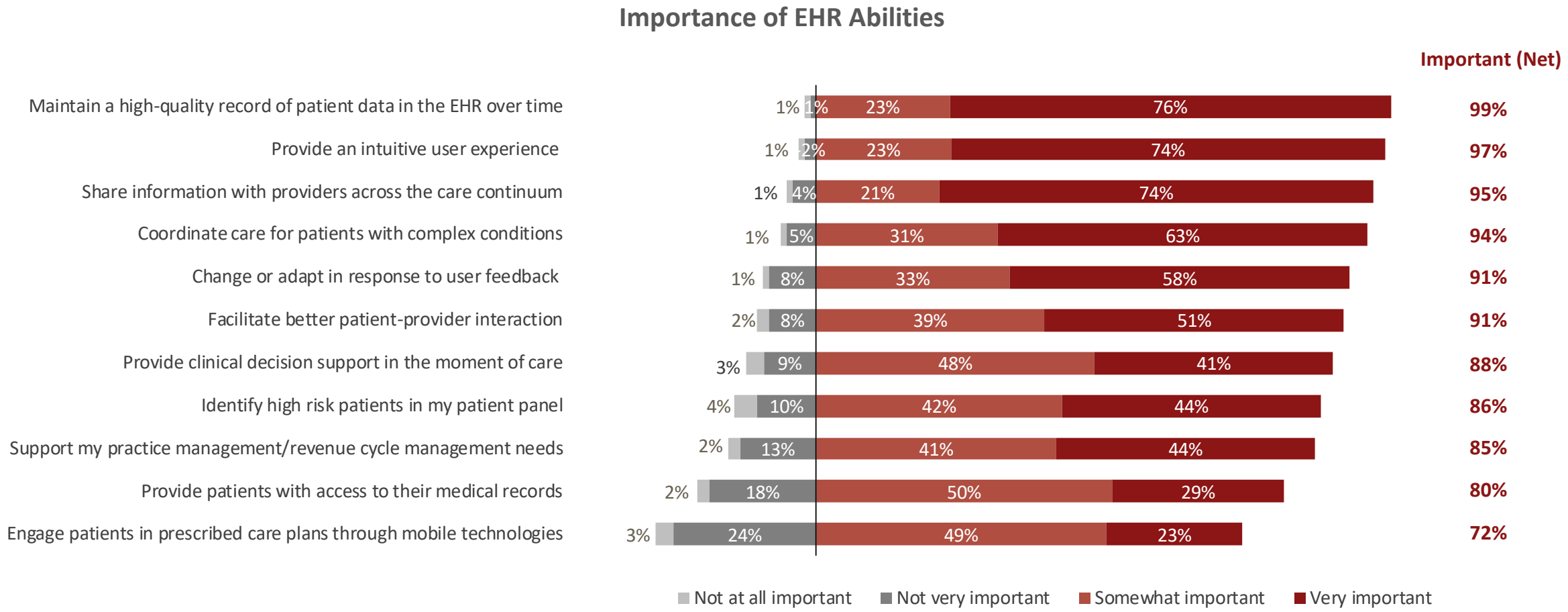
Additional EHR Attitudes



Opportunity to re-imagine care teams & delegate EHR tasks

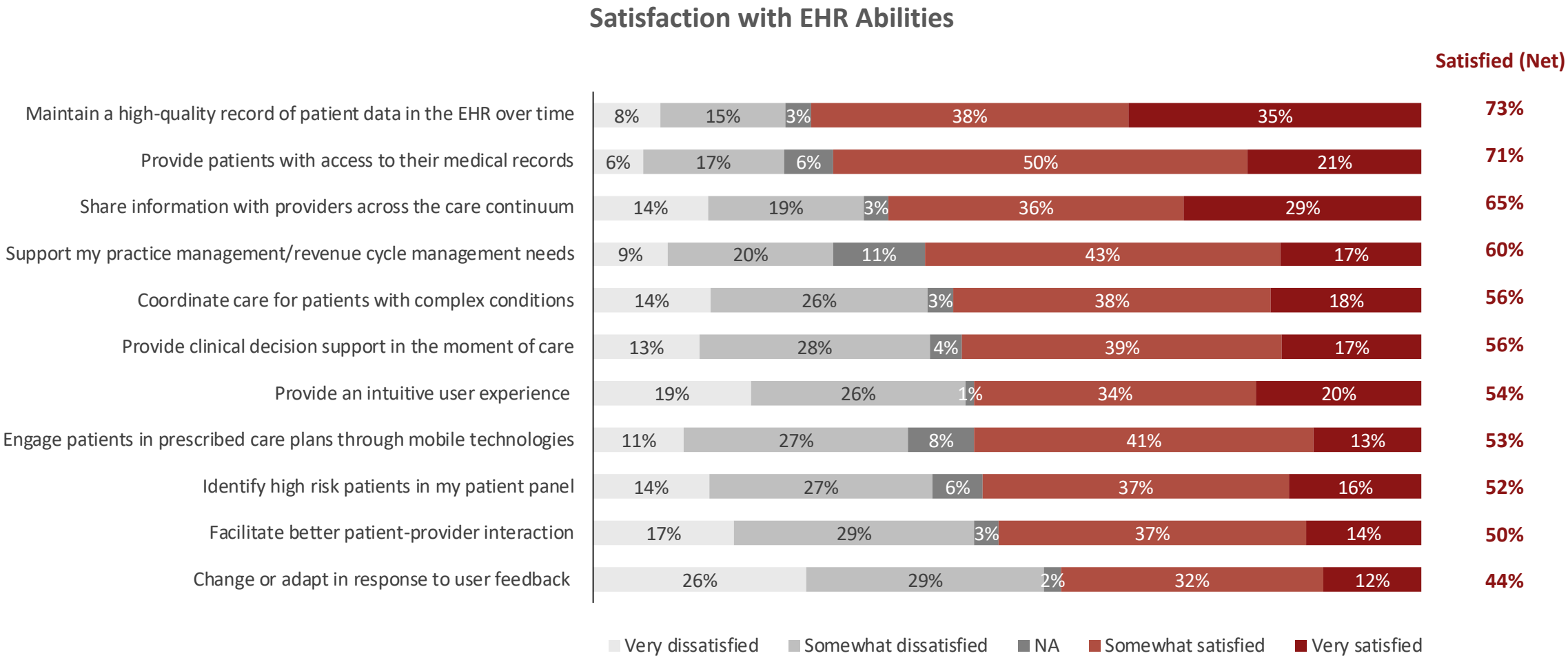
Base: All qualified respondents (n=521). Q820: How much do you agree or disagree with each of the following statements?

Nearly all PCPs agree on what the most important abilities of EHRs are.



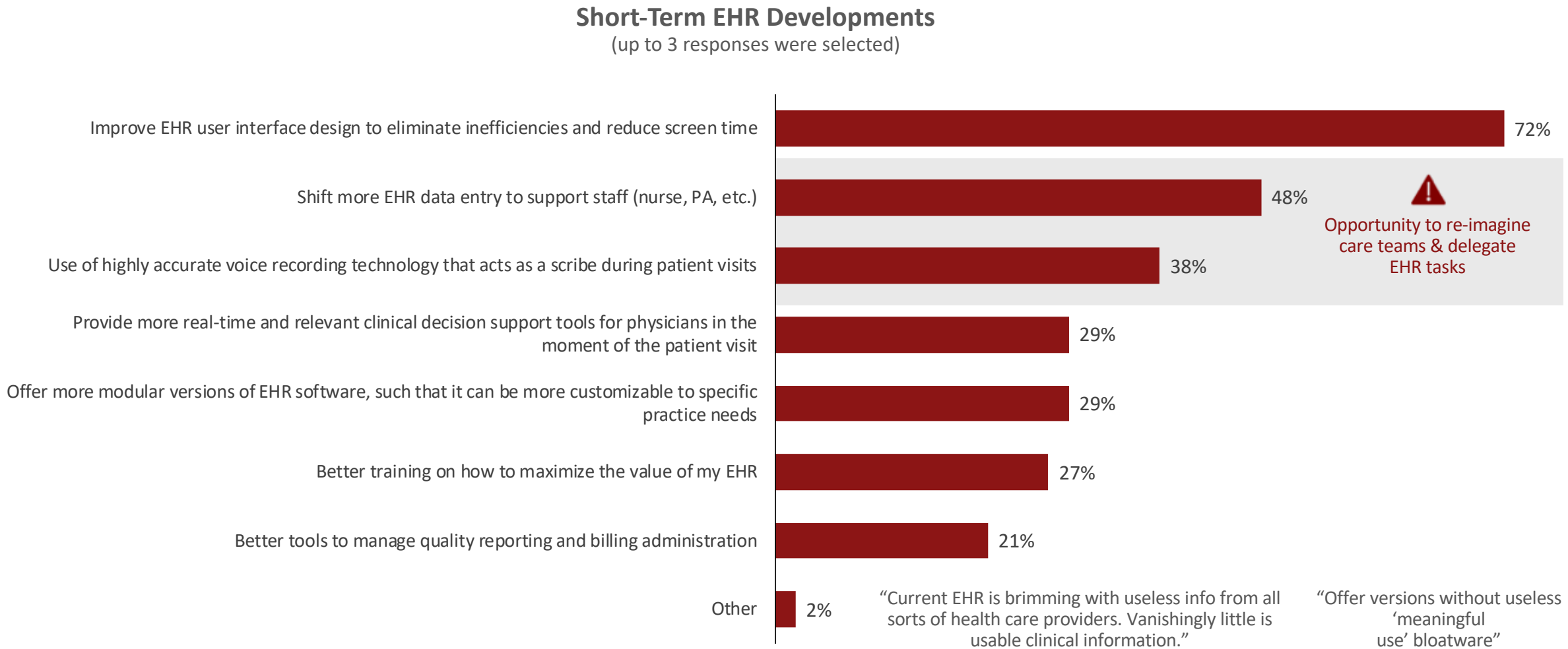
Base: All qualified respondents (n=521). Q825: How important is it that an EHR system have the ability to do each of the following?

Less than half of physicians are satisfied with their EHRs' ability to change or adapt.



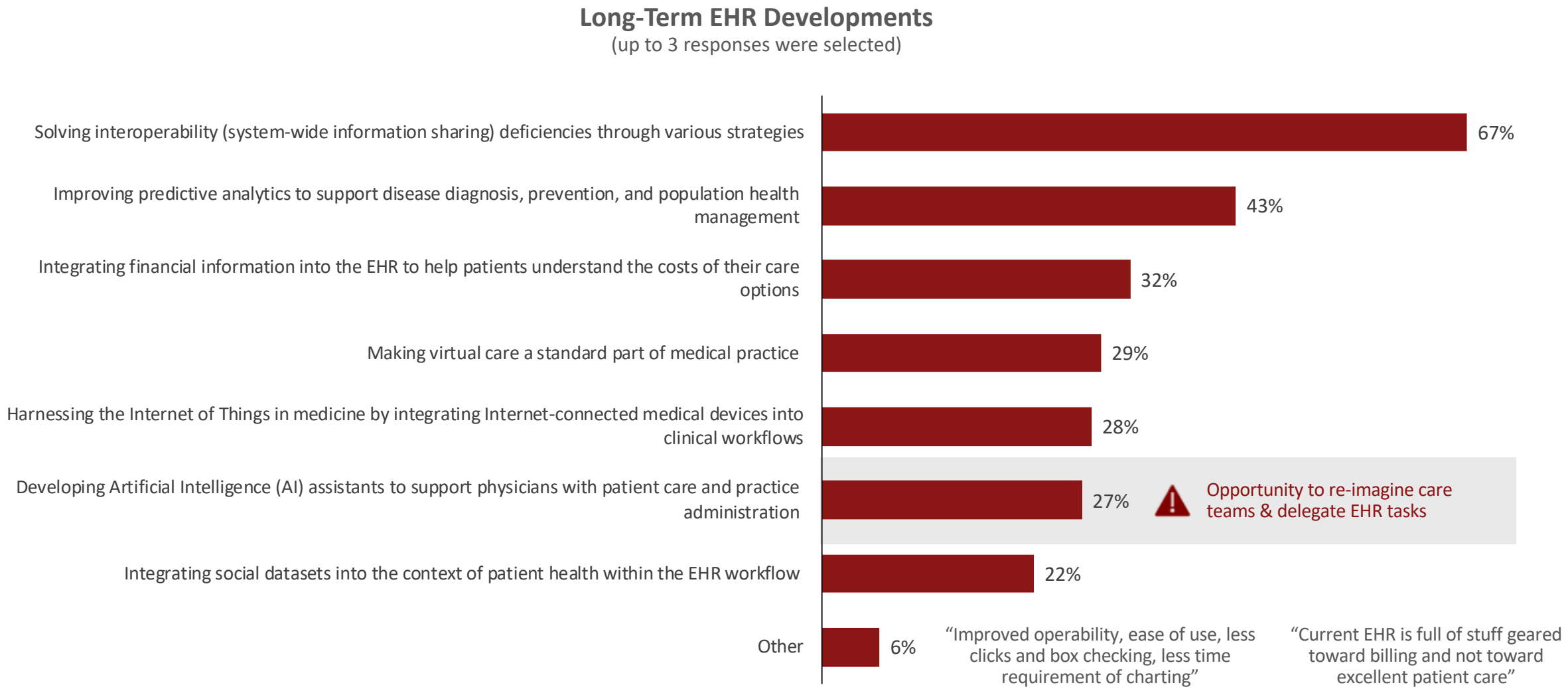
Base: All qualified respondents (n=521). Q830: How satisfied are you with your EHR system's ability to do each of the following?

Nearly three in four PCPs want EHRs to improve their user interfaces.



Base: All qualified respondents (n=521). Q845: Please consider shorter-term developments and solutions that could help alleviate EHR challenges. Which of the following could best address these challenges in the immediate future? Please select up to three responses.

The biggest long-term fix: EHRs sharing information with other systems.

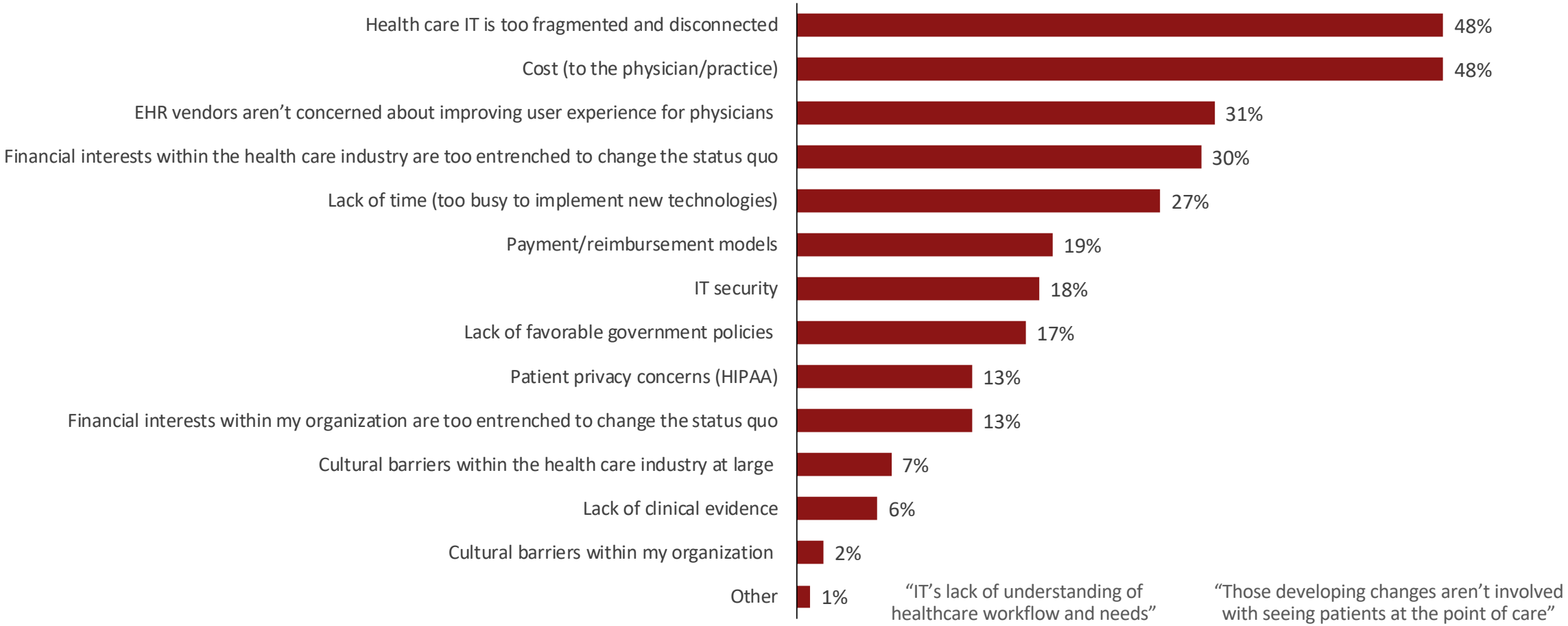


Base: All qualified respondents (n=521). Q835: Which of the following EHR developments would you most like to see realized in the next 10 years? Please select up to three responses.

The two biggest challenges PCPs see: fragmented IT in healthcare, and cost to the physician/practice.

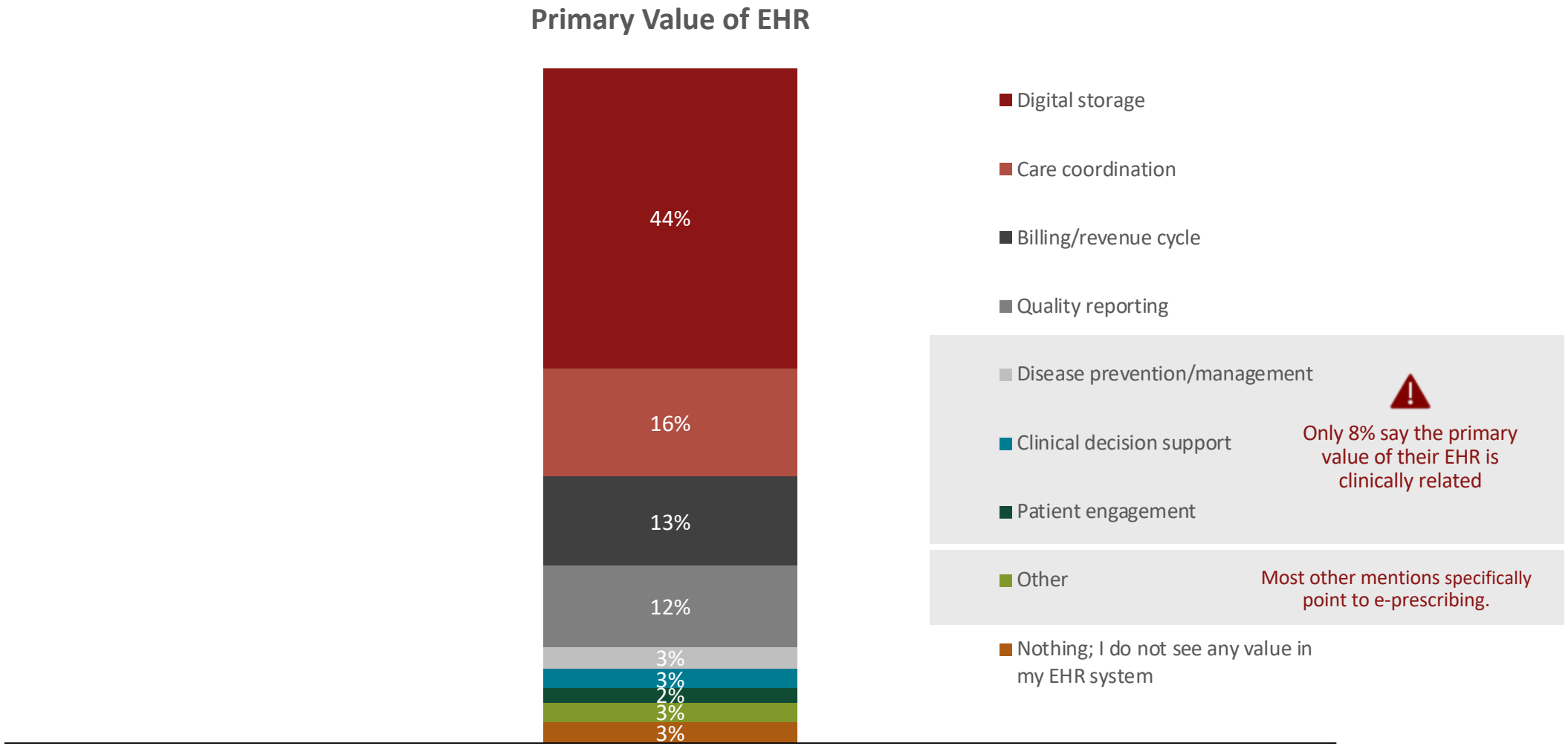
Obstacles to Achieving Long-Term EHR Developments

(up to 3 responses were selected)



Base: All qualified respondents (n=521). Q840: What are the biggest obstacles standing in the way of these types of EHR developments in the future? Please select up to three responses.

For seven out of 10 PCPs, the primary value of EHRs is either a basic tech or administrative function.



Base: All qualified respondents (n=521). Q850: In your opinion, what is the primary value of your EHR system as it's currently being used today?

On average, PCPs spend more time interacting with the EHR than with the patient.

Average Time Spent During and Outside of Patient Visit

11.8 minutes
Interacting directly with a patient **during** a visit

8.3 minutes
Interacting with the EHR system **during** a patient visit

10.6 minutes
Interacting with the EHR system **outside** of a patient visit

18.9 minutes
Total time spent in EHR

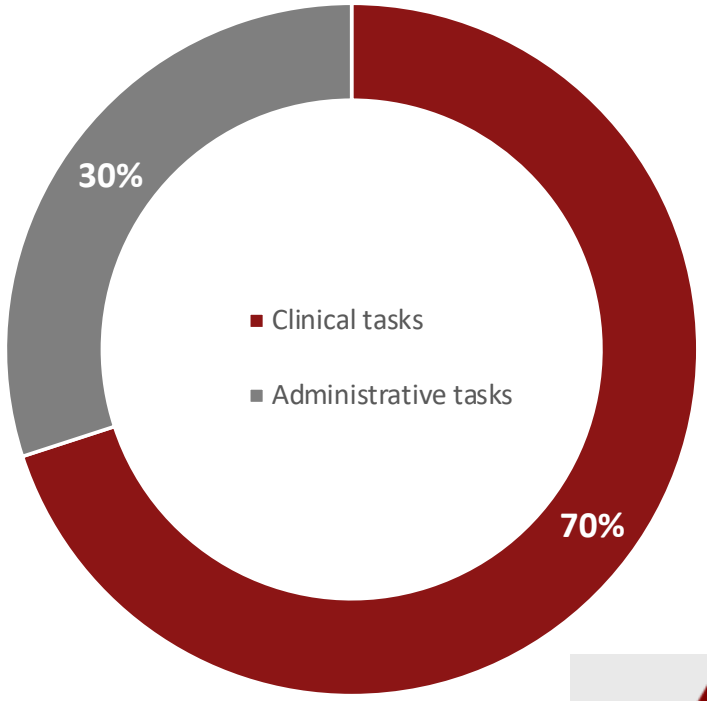
Hospital-based PCPs spend more time than office-based PCPs interacting with the EHR both during the visit (10.0 vs. 7.6 minutes) and outside the visit (14.5 vs. 8.9 minutes).

20.1 minutes
Total time spent in each patient visit

30.8 minutes
Total time spent on each patient (during and outside of visit)

62% of time devoted to each patient is being spent in the EHR

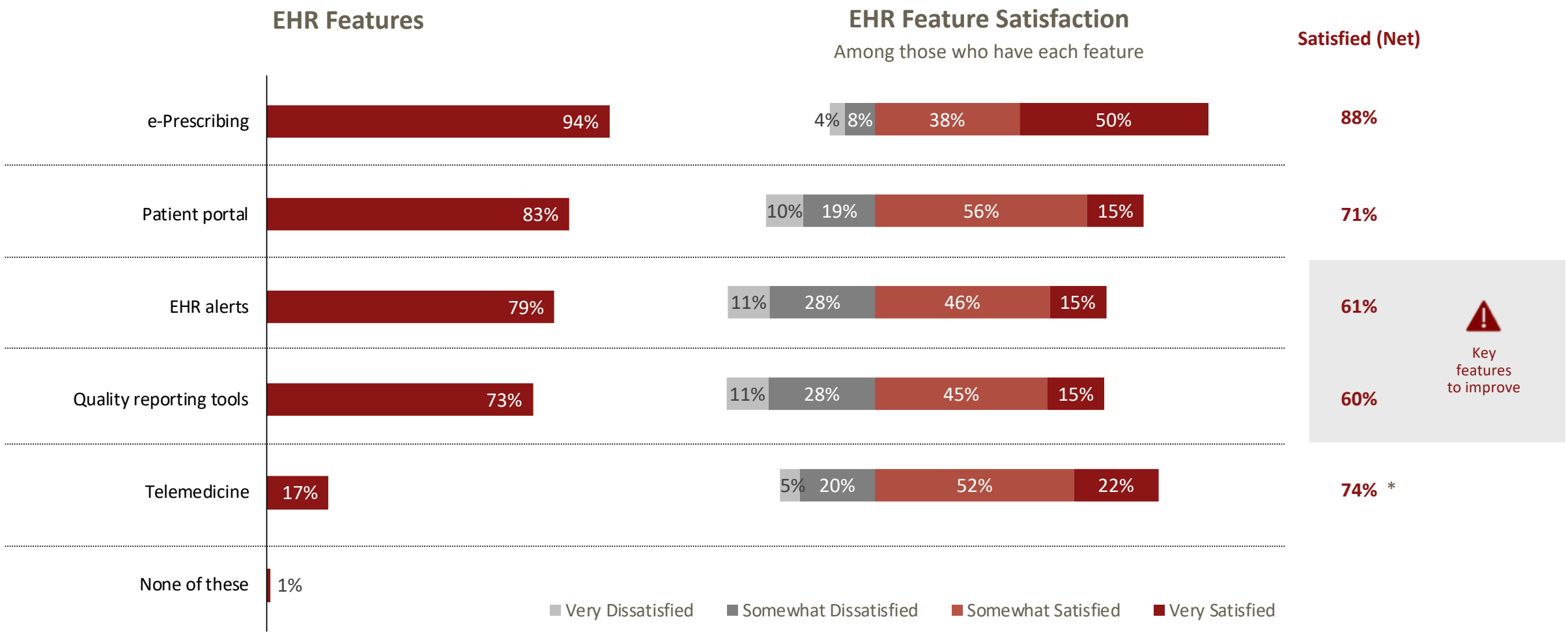
Proportion of EHR Time Spent on Tasks



Clinical tasks are time consuming possibly due to poor user interface

Base: All qualified respondents (n=521). Q854: How much time is spent on each of the following activities for a typical established/return patient?
Base: All qualified respondents (n=521). Q870: What proportion of the total EHR screen time you spend is spent on clinical vs. administrative tasks?

While most PCPs have and are satisfied with e-Prescribing, many are less satisfied with EHR alerts and quality reporting tools.

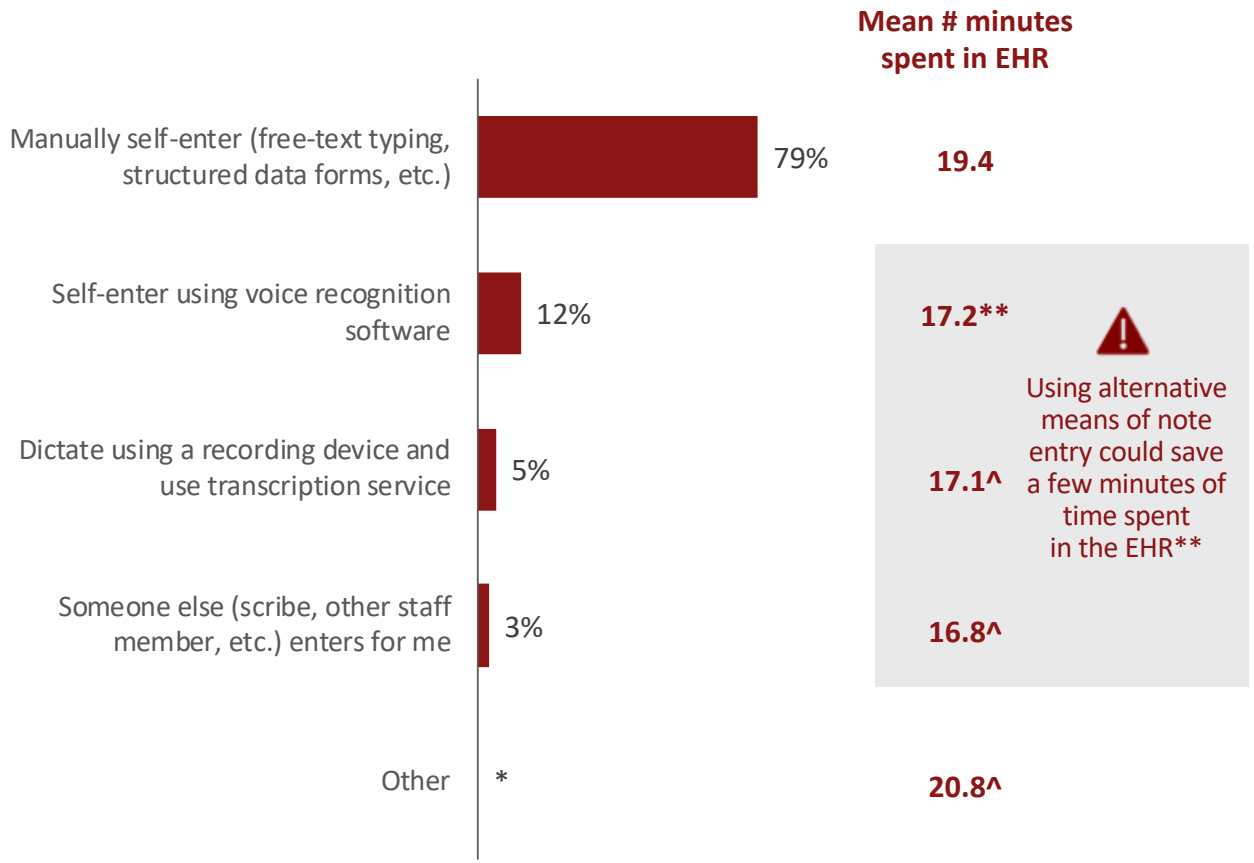


Base: All qualified respondents (n=521). Q810: Which of the following features, if any, does your EHR have?
Base: All qualified respondents (n=521). Q815: How satisfied are you with each of these features provided by your EHR?

*Caution: Small base size (n<100). Results should be interpreted as directional only.

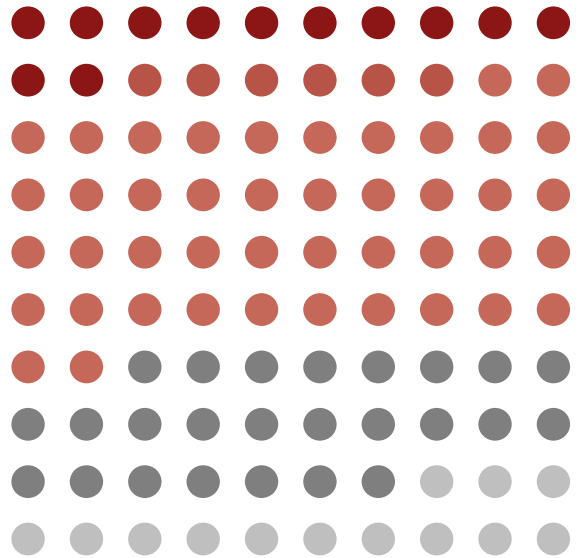
The majority of PCPs are manually self-entering their notes, with only a small proportion using alternative means.

Method for Entering Notes into EHR



Satisfaction with Voice Recognition Technology

Among those who use voice recognition technology**



12% Very satisfied

50% Somewhat satisfied

25% Somewhat dissatisfied

13% Very dissatisfied

62% Satisfied (Net)

38% Dissatisfied (Net)

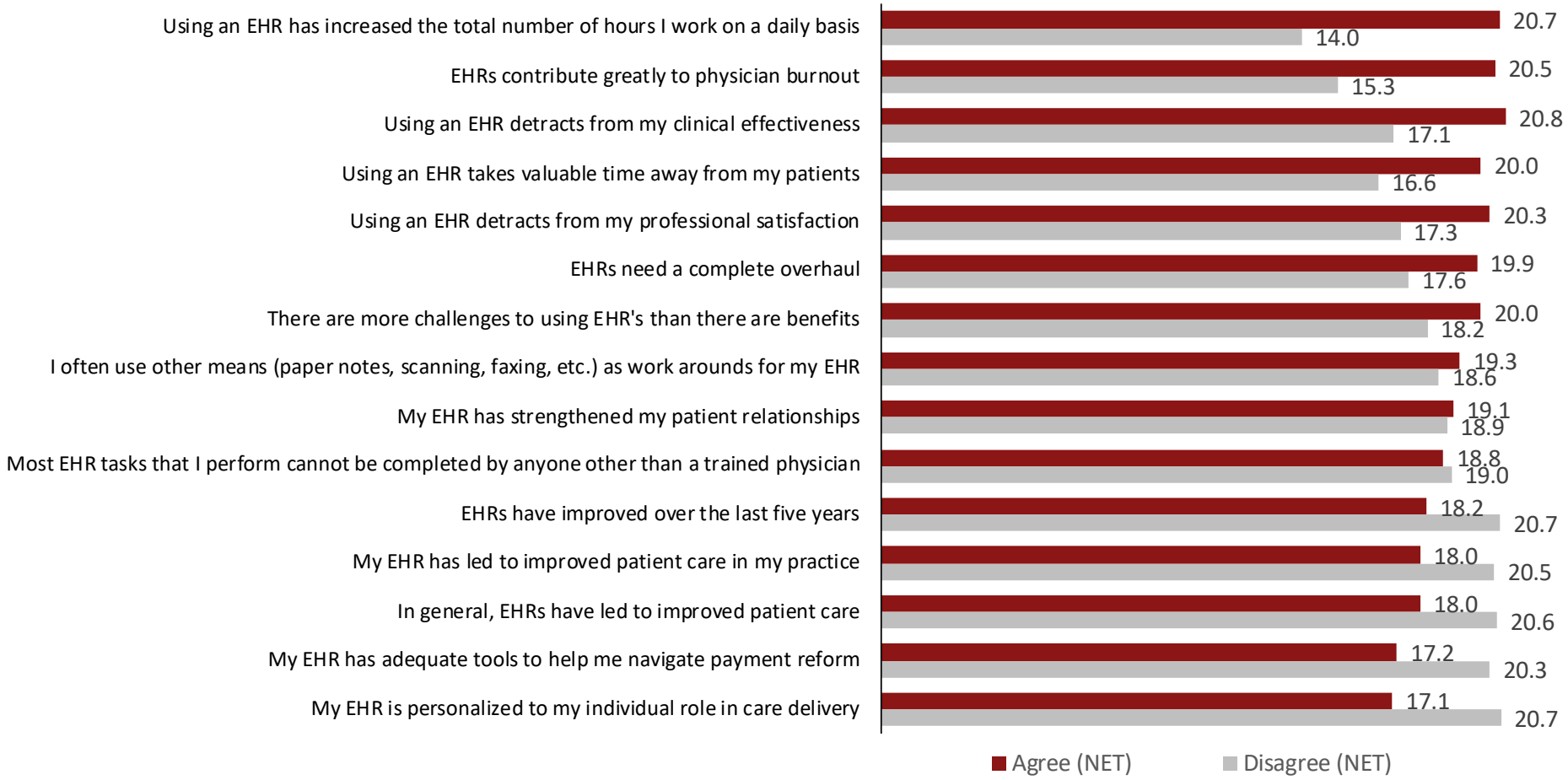
Base: All qualified respondents (n=521). Q875: Which of the following best describes how you enter most of your notes into the EHR system?
Base: All qualified respondents (n=521). Q880: How satisfied are you with the voice recognition technology you use to enter your notes into the EHR?

**Caution: Small base size (n<100). Results should be interpreted as directional only.

^Caution: Very small base size (n<30). Results should be interpreted as directional only.

PCPs who agree that EHRs increase daily hours worked and that they contribute greatly to physician burnout spend over 5 minutes more per patient visit in the EHR than those who disagree with those statements.

Mean Number of Minutes Spent in the EHR by Agreement with Statements



DIFFERENCE (Agree-Disagree)

6.6
5.2
3.7
3.4
3.0
2.3
1.8
0.7
0.2
-0.3
-2.5
-2.5
-2.6
-3.1
-3.6

Those who agree with these statements spend significantly **more** time in the EHR than those who disagree

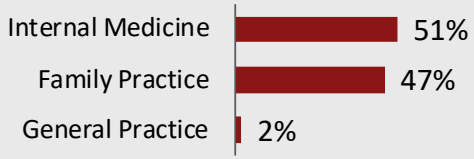
Those who agree with these statements spend significantly **less** time in the EHR than those who disagree

Base: All qualified respondents (n=521). Q820: How much do you agree or disagree with each of the following statements?

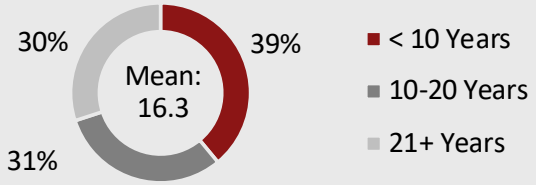
Physician Profile

Physician Profile

Primary Medical Specialty



Years in Practice



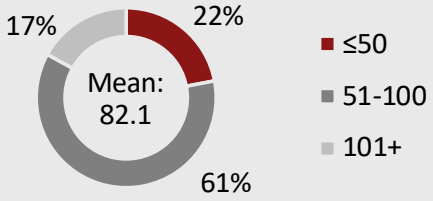
Gender/Age

38% Female

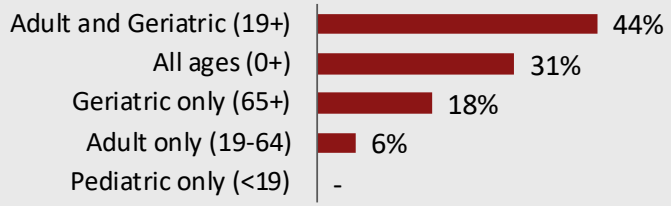
62% male

47.2 Mean Age

Weekly Patient Volume



Patient Population



Practice Setting

69% Office/Clinic

23% Hospital/Lab

4% Equally Office/ Hospital

4% Other

Office Setting

20% Solo Practice

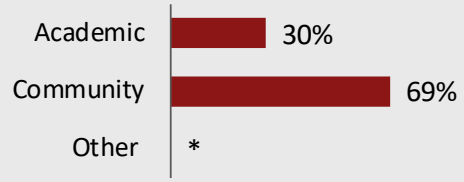
43% Single-Specialty Practice

34% Multi-Specialty Practice

3% Other

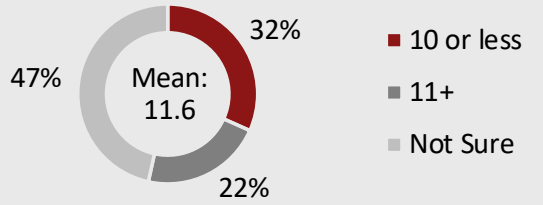
Base: n=398

Hospital Setting



Base: n=116

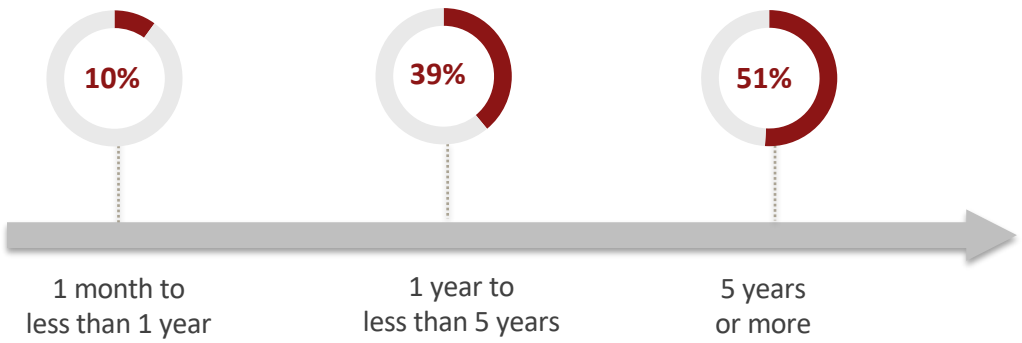
Payers Submitted Claims To in Past Year



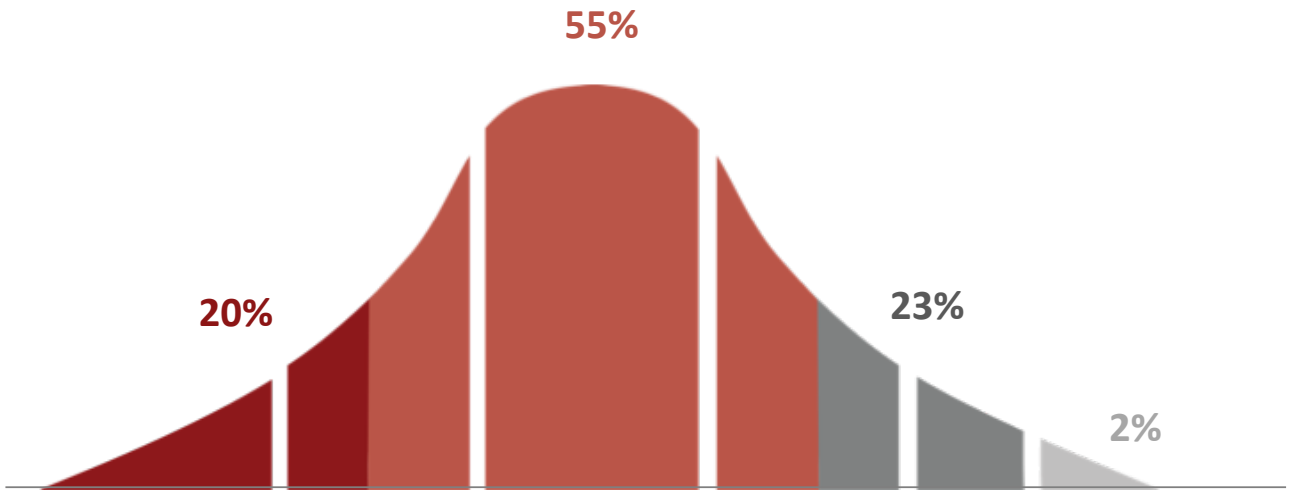
Base: All qualified respondents (n=521) (Unless otherwise specified)

EHR and Technology Background

Duration of Current EHR Use



Technology Adoption



Base: All qualified respondents (n=521). Q610: How long have you actively been utilizing this EMR/EHR system?
Base: All qualified respondents (n=521). Q720: Which of the following statements describes you best?