

Surviving the Storm: 6 Ways to End Clinician Burnout

Introduction

Today's health systems must manage the pent-up demand of patients who delayed care for the first 18 months of the pandemic. At the same time, they must balance the rising costs of care with ongoing revenue cycle pressures. All of these congruent market forces create a perfect storm. If health system leaders don't weather this storm, they risk losing their most valuable asset—their clinicians.

Physician burnout remains a real problem industry-wide. According to the 2021 Medscape National Physician Burnout & Suicide Report, 42% of physicians report burnout, the same percentage as in 2020 and just four percentage points less than in 2016. [1]





Understanding clinician burnout: It's a documentation problem

Effectively stopping physician burnout starts by fully understanding the issue. Many people think burnout is solely due to COVID-19-related stressors. But that's a small part of the story.

According to the 2021 Medscape report, which surveyed 12,000 physicians, only about 1 in 5 (21%) said their burnout symptoms began post-COVID. That means nearly 8 of every ten physicians (79%) already felt feelings of burnout before the pandemic started. The primary reason for burnout: the majority (58%) of physicians surveyed by Medscape say it's because they have to handle too many bureaucratic tasks. The Agency for Healthcare Research and Quality's MEMO (Minimizing Error, Maximizing Outcome) Study took a deep dive into the causes of physician burnout. [2]. It uncovered another troubling trend that practices implementing electronic health records (EHRs) saw an increase in stress as EHR use matured. While that stress level then decreased over time, it did not return to its baseline level. In addition, fully mature EHR systems were associated with physician stress, burnout, and intent to leave the practice.

The cost of replacing just one burned-out physician:

^{\$500,000-\$1 Million}

Realizing the full impact of reducing physician burnout

Make no mistake, the cost of physician burnout is exceptionally high. According to the American Medical Association, it costs organizations between \$500,000 and \$1 million to replace just one burned-out physician. [3]. Solving the burnout problem potentially removes these burnoutrelated expenses and drives new revenue.

Take, for example, an orthopedic surgeon who currently spends too much time on clinical documentation and not enough time delivering patient care. With the right clinical documentation solutions and services in place, that surgeon could spend an additional three hours each day doing clinical work instead of administrative work. In those three hours, the surgeon could perform three more joint replacement procedures at an average margin of \$17,500 per surgery. That's \$52,500 in increased margin per day.

Multiply that by a team of 10 orthopedic surgeons, and a health system could potentially reclaim \$525,000 in margin per day or \$136 million in additional margin over the course of a year.



Reversing the trend: 6 smart strategies to reduce physician burnout

With so much at stake in enhancing care quality, accelerating the revenue cycle, and creating satisfied clinicians, driving clinician adoption and ensuring your EHR works to its fullest potential are no longer nice-to-haves. Instead, they're an imperative. Organizations should closely examine clinical documentation integrity (CDI) solutions and services that can effectively reduce the burden on their clinicians and improve outcomes system-wide.

To start, we recommend organizations explore these six clinician adoption best practices:

Offer flexible documentation tools.

Some clinicians today choose to document their clinical visits through transcription. Others prefer medical scribes. And some wish to do both. A surgeon, for example, may transcribe while in clinic and use a medical scribe for postprocedure documentation. To meet all these needs, seek a solution that allows providers to choose documentation or medical scribing from anywhere, at any time, in the same app. The more flexible your documentation tools, the greater you'll accelerate clinician satisfaction.

Give clinicians telehealth support.

Nearly two-thirds of patients today prefer telehealth visits over in-person visits.[4] So, if providers shy away from offering telehealth visits due to documentation difficulties, it's time to get help. Seek a solution provider who can help your clinicians get on the line and assist in writing notes.

Make it easier to access legacy data.

6

A pain point for almost all clinicians is an inability to obtain data that's trapped in legacy EHRs and other systems. Finding a solution that simplifies data managing and archiving will go a long way to easing the symptoms that can lead to clinician burnout.

Scribing Gives Clinicians More Time for Patient Care

Without scribing, clinicians spend:

of their time on direct

+ 69 of t EHI

of their time on EHR-related tasks

With scribing, clinicians spend:





- Automate chart abstraction and preparation. How easy or difficult is it for clinicians to collect important information from a medical record and transcribe it into discrete locations within the organization's EHR? Answering this question–and finding solutions to simplify it through automation —will help reduce the anxiety clinicians currently feel when using an EHR.
- 5 Proactively assist clinicians who need help the most. Some CDI solution providers offer personalized analytics that identify the clinicians who need more assistance with tasks like workflow chart preparation, finding legacy data, and writing clinical notes. The sooner you can see these problem spots, the faster you can provide meaningful assistance.

Partner up with an expert. Look for a team with deep subject matter expertise in your EHR tool of choice. Ask how they'll help you support your contact center, enhance EHR workflows, and implement new EHR feature releases. Consider the areas where you might need an application, project management, optimization, training, or implementation expertise. Consider your KPIs and seek solutions and service providers who can help you drive clinical and revenue integrity forward.



Conclusion

Studies indicate that there are more than \$16.5 billion in inefficiencies in the U.S. healthcare system at any given moment. That provides health system leaders millions of opportunities to stop physician burnout through automation, standardization, and simplification of coding and billing processes.

DeliverHealth has a proven track record of success in helping health systems simplify workflows, align processes, and engage patients. We offer managed services, on-demand services, consulting services and industry-leading solutions like our eSOne platform for transcription and medical scribing—all uniquely designed to help improve CDI and stop physician burnout.

Our team recently provided one-on-one personalization workflow sessions to physicians, which successfully increased EHR adoption to 94% and prevented one physician from leaving the organization due to burnout.

[1] www.medscape.com/slideshow/2021-lifestyle-burnout-6013456

[2] www.ahrq.gov/prevention/clinician/ahrq-works/burnout/index.html

[3] www.ama-assn.org/practice-management/physician-health/how-much-physician-burnout-costing-your-organization

[4] www.himss.org/resources/state-healthcare-report-uncovering-healthcare-barriers-and-opportunities

If you'd like to explore a partnership and experience similar results, or learn more about our services and solutions, contact us today.





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