

CHALLENGING EMR COMPLACENCY

By MISSY PADOLL

In a recently released video, CRICO offers a vision of how EMRs of the future might improve health-care safety for both patient and physician.



CRICO has produced a new video that embodies a vision of the future: it shows how electronic medical records (EMRs) might be embedded into the physician workflow in a way that would improve healthcare delivery.

CRICO, a group of companies owned by and serving the

Record of the Future,” is based on real MPL cases. Through combined analysis of how harm can come to patients from flawed encounters with providers using EMRs, and conversations with medical and technological visionaries across the country, the video integrates various scenarios into an idealized

patient/physician encounter.

Hearing significant frustration from physicians about their experiences with EMRs, CRICO was inspired to envision a way in which these soon-to-be-

required tools might be better integrated into the clinical workflow. This would allow the EMR to offer some relief to physicians and nurses who face seemingly insurmountable challenges in managing time and data.

Everyone who works in a clinical setting, or has ever been treated in one, probably has an opinion about EMRs. Physicians complain of alert fatigue, lack of

standards across systems, and a need for too much manual entry. On the other side, patients complain about having to compete for their doctor’s attention during an exam when she or he spends too much time and concentration on the computer.

“How many times have we gone to the doctor’s office where the doctor is looking at the EMR, but not looking at the patient,” asks Hiep Nguyen, MD, a surgeon at Boston Children’s Hospital. “They’re spending more time filling out the forms that are required for billing and documentation and not spending time with the patient.”

Doctors and nurses face growing challenges that a workflow-oriented EMR can help mitigate: information overload, production pressure, administrative requirements, and increasingly short visit times with patients. They need a solution that will anticipate logical and standardized workflow steps; provide prompts for referrals, prescriptions, and lab tests; and then automatically populate the record and generate reminders.

Luke Sato, MD, chief medical

officer and senior vice president for CRICO said, “The impetus behind this video was to facilitate a dialogue among healthcare professionals—physicians, IT staff, and hospital administrators—about why we aren’t making better progress in the development of EMRs. Through analysis of medical malpractice claims, we are able to identify and reveal the design deficiencies in the EMR that contribute to claims. The best technological design is one that is integrated seamlessly into one’s workflow. The current EMR is passive—the physician has to actively look for data, instead of the technology anticipating what the physician needs to act on.”

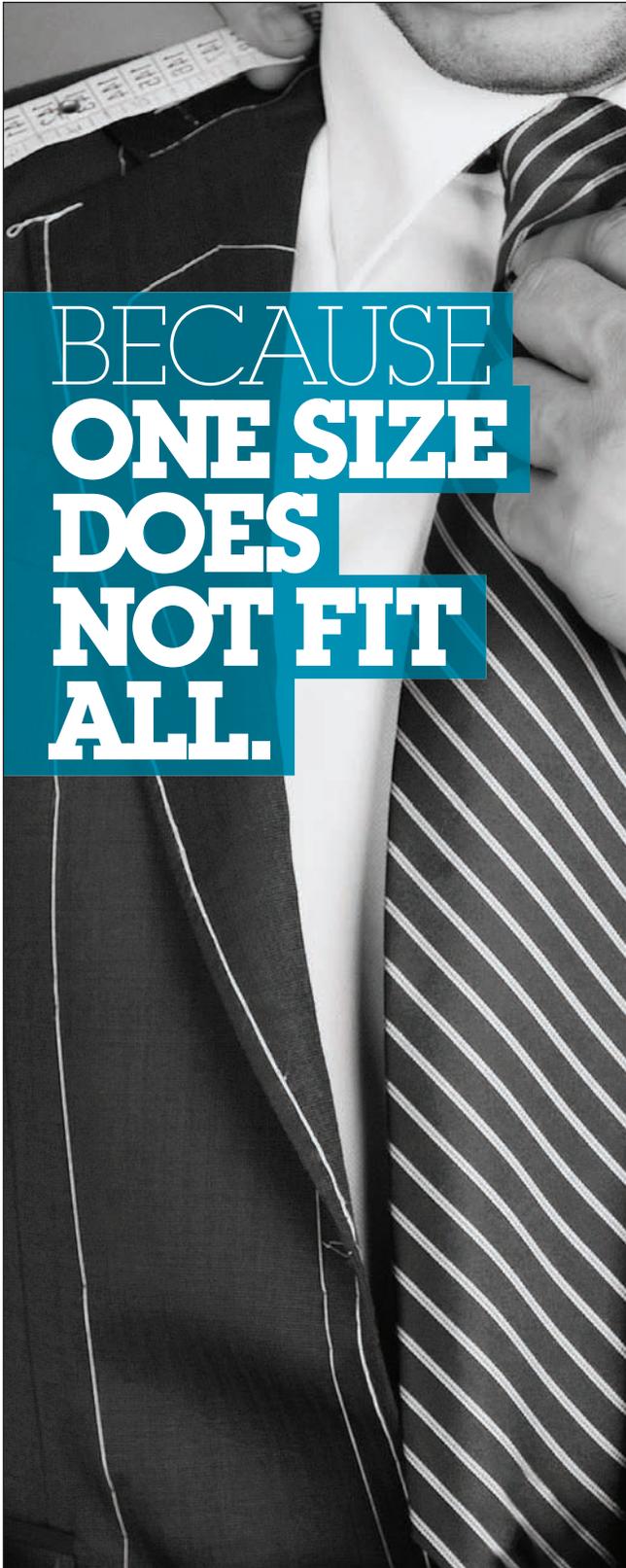
Genesis of the video

To get a better sense of the risks that the healthcare industry is facing in this area, CRICO conducted a pilot analysis of MPL claims in which the EMR was cited as a contributing factor to the error or adverse event. The claims analysis involving an EMR found that many involved a missed and delayed diagnosis by a primary care physician. The pilot identified 42 related cases,

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Harvard medical community, provides medical professional liability (MPL) coverage, claims management, and patient safety resources to its members. The dramatization represented in this 10-minute film, “Better, Safer Care: Imagining a Medical

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with assert years ranging from 2007–2012. This data clearly indicates an emerging risk that we will continue to track.

There are myriad articles, videos, and social media posts in the healthcare industry about EMRs. Despite abundant discussion, there is no concerted effort to design the next generation of EMRs with the physician in mind. In addition to a need for standards across systems, the need for manual data entry with today's EMRs adds to the burden of already time-pressed physicians.

This film was created as a collaborative effort between CRICO's Luke Sato, MD, and David Ting, MD, associate medical director for information systems at Massachusetts General Physicians Organization, who acted as an expert resource for script development and video production. Ting said, "The actual purpose of the video is to ask whether we might intelligently prioritize today's choices to move our institutions toward improved patient care and improve provider and practice work-life experience."

"Better, Safer Care" presents a vision for a streamlined and integrated clinical experience, one where physician, patient, and EMR work as a team to provide a significantly automated, safer, and more efficient experience. CRICO's depiction of a patient-physician encounter in the video is meant as a launching pad to begin the conversation about how new technologies might be better leveraged. Most of the technical solutions presented in this film are currently available. So why, for example, don't all EMRs use voice recog-

inition software to capture automated dictation of patient encounters?

Dr. Ting explains it this way "We inundate our physicians with so much data and so much work and so many tasks and tell them that all of this is priority one and it all has to be handled now. That is a recipe for airplanes crashing out of the sky. From a risk perspective, it's a huge risk, because the human brain can only do one thing at a time."

The head-on approach to these issues has elicited emotional reactions from those who have seen the film, ranging from "cool, efficient, saves time, and improves outcomes" to "I don't want voices interfering with my patient interactions." Regardless of a positive or negative reaction, the film is, ultimately, catalyzing discussion



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Through broad dissemination of "Better, Safer Care: Imagining a Medical Record of the Future," we hope to prompt conversation and initiate action by healthcare leaders poised to implement change. Ideas abound. We know ours is not the only vision. We invite all who need to interact with EMRs to watch our film and share your reactions. The video is available for viewing on the CRICO website, www.rm.f.harvard.edu/EMR, or through the CRICO Video channel on YouTube. 

For related information, see
www.rm.f.harvard.edu.

