

This year's offering, titled "The 2012 EHR User Satisfaction Survey: Responses From 3,088 Family Physicians," at <http://www.aafp.org/fpm/2012/1100/p23.html> (members/paid subscribers only) appears in the November/December issue of *Family Practice Management*. And as authors of the survey noted up front, "Where else can you get EHR advice from a few thousand colleagues?"

Kenneth Adler, MD, coauthor of the survey report and *FPM*'s new medical editor, confirmed to *AAFP News Now* that this was the fifth EHR user satisfaction survey undertaken by *FPM*. The timing of the 2012 survey came just 16 months after what is usually a biennial project.

"We did it sooner this time given the rapidly accelerated EHR adoption that has occurred since the CMS EHR incentive programs got underway last year," said Adler.

Adler, a practicing family physician, is medical director of information technology for Arizona Community Physicians in Tucson, Arizona and a certified professional in health care information and management systems. He noted that more than 200 EHR products are currently on the market. "We want to help family physicians zoom in on the products that their fellow family physicians both use and have found most satisfying," said Adler.

The survey itself fulfills multiple needs. For example, it contains critical information to help FPs select their first EHR system or replace an existing system that's underperforming. "We'd like to help folks choose well. Making a poor choice can have a hugely negative impact on a practice," said Adler.

The information gathered in the survey also provides feedback to EHR vendors whose products—at least in the eyes of physician users—could use some adjustments.

Adler pointed out that only 38% of users participating in the survey were highly satisfied with their EHRs. "Usability issues and negative impact on physician productivity continue to be concerns," said Adler. "Vendor support remains an area of weakness for EHR vendors."

Survey authors focused on the 31 specific EHR systems that had enough physician response to represent a reasonable variety of opinions.

Practices of various sizes were represented in the survey. Nearly one-half of survey respondents hailed from practices with 10 or fewer physicians and almost as many came from practices of more than 20 physicians.

In one portion of the survey, participants were asked to note their level of agreement or disagreement with 19 statements about EHRs using these terms: strongly agree, agree, neutral, disagree, strongly disagree, and unsure.

For example, family physicians were asked about the ease of documentation, clarity of information dis-

play, help in avoiding mistakes, ability to create notes that promote better patient care, availability of useful preventive medicine tools, and ability of the system to process electronic prescriptions.

Survey takers also were asked their general satisfaction with their system and if they enjoyed using their EHRs.

Physicians supplied answers that helped study authors make some overall observations based on positive responses. For example, regarding top areas of satisfaction, users were most happy with the way their EHRs:

- facilitated intra-office messaging and tasking (60%)
- found information (58%)
- documented data (57%)
- facilitated electronic prescribing (56%)

On the other hand, areas of lowest satisfaction based on positive responses were

- effect on productivity (16%)
- effect on the physician's ability to focus on patient care (24%)
- vendor support (36%)

The authors noted that only 38% of users agreed or strongly agreed that they were highly satisfied with their EHR systems. In addition, 37% of respondents—1,131 family physicians—agreed or strongly agreed with the statement, "I enjoy using this EHR."

Authors noted that, as in past surveys, their goal was not to pick EHR system winners in terms of user satisfaction.

Sheri Porter  
AAFP News Now



From the American  
Board of Family Medicine

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## PISACANO LEADERSHIP FOUNDATION NAMES 2012 PISACANO SCHOLARS

The Pisacano Leadership Foundation, the philanthropic arm of the American Board of Family Medicine (ABFM), recently selected its 2012 Pisacano Scholars. The Pisacano Leadership Foundation was created in 1990 by the ABFM in tribute to its founder and first executive director, Nicholas J. Pisacano, MD (1924–1990). Each Pisacano Scholar has demonstrated the highest level of leadership, academic achievement, communication skills, community service, and character and integrity.



**Kathleen Barnes**, a 2012 Pisacano Scholar, is a 4th-year medical student at Harvard Medical School. She graduated summa cum laude from Boston College with a Bachelor of Science in Biology, and was elected to Phi Beta Kappa. She was a Boston College Dean Scholar and

received the Knights of Columbus and Boston College Presidential Scholarships. Kathleen spent a summer and semester in South Africa and Tanzania conducting research for her thesis and participating in service learning.

Kathleen volunteered with the Los Angeles Free Clinic, working to coordinate daily primary care clinics for a patient panel of 16,000 uninsured, low-income persons, and with the Coalition to Abolish Slavery and Human Trafficking.

She is the founding member of Primary Care Progress. Kathleen was appointed student member of the Dean's Primary Care Advisory Group, and is now the co-leader of the Student Leadership Committee of the Harvard Center for Primary Care. She led the local chapter of the Physicians for Human Rights and the Primary Care Interest Group at Harvard. She has served as a student leader of Harvard's Family Medicine Interest Group and has volunteered with the Crimson Care Collaborative.

Kathleen recently completed her Master's in Public Health at the Harvard School of Public Health, and is finishing her final year of medical school. She spent a month conducting primary care research at the Center for Excellence in Primary Care at the University of California, San Francisco, with Dr Kevin Grumbach and Dr Thomas Bodenheimer as mentors. She recently published a perspective piece in the *New England Journal of Medicine* on the developing vision of primary care.

She plans to practice full-spectrum family medicine with an emphasis on women's health and looks forward to becoming a leader in the transformation of how primary care is organized, financed, and delivered.



**Jillian Fickenscher**, a 2012 Pisacano Scholar, is a 4th-year medical student at the University of Nebraska Medical Center (UNMC), where she is also completing her Master's in Public Health in Community-Oriented Primary Care. She graduated summa cum laude with high distinction from Hastings College in Nebraska, with a Bachelor of Arts in Biology. Jillian received numerous awards, including the most prestigious 4-year Hastings College Walter Scott Scholarship. Jillian was named to the

Dean's list each year and to Who's Who at Hastings College during her senior year.

Jillian also received the Service Learning Experience Student Leadership Award, the Nebraska Medical Association/COPIC Insurance Scholarship, and the Nebraska Academy of Family Physicians Foundation's Student Scholarship and DeRoin Scholarships. Jillian was elected to the Alpha Omega Alpha honor society, has been a member of the family medicine interest group, and has served on UNMC's College of Medicine admissions committee.

Jillian was president of "Do JuSTIce," an interprofessional, student-run program that works to address the epidemic rates of sexually transmitted infections in Douglas County, by providing education, testing, and treatment to high-risk individuals in jail. She has also been an avid volunteer for other underserved populations, participating in various community service programs, UNMC's "SHARING" Clinic, and medical service trips to Guatemala and Nicaragua.

Jillian is now a sub-intern in the advanced rural training program, offered to selected senior medical students and allowing entrance to UNMC's family medicine training in their 4th year. Jillian is dedicated to both family medicine and public health and plans to integrate their ideals to provide quality, respectful health care, education, promotion, and advocacy to her future patients and community.



**Justin Mutter**, a 2012 Pisacano Scholar, is a 4th-year medical student at the University of Virginia (UVA), School of Medicine. As an undergraduate at UVA, Justin received a number awards, including the Echols Scholarship and recognition from the deans of the College of Arts and Sciences for "outstanding academic achievement and service."

Justin served for 2 years in central Haiti as a health worker for Zanmi Lasante, the sister organization of Partners in Health (PIH). He also served on the board of directors of Zanmi Lasante's Project on Social and Economic Rights. Justin was a recipient of the American Rhodes Scholarship and pursued graduate studies at Balliol College at the University of Oxford. He completed a Master of Studies in the Study of Religions and a Master of Sciences in the History of Science, Medicine, and Technology at Oxford. His thesis on the political economy of black lung disease in Appalachia was awarded the Jane Willis Kirkaldy Senior Prize from the Oxford Faculty of History. Justin subsequently completed the post-baccalaureate pre-medical program at Johns Hopkins University. He worked as Research

Associate for Health Policy at the Center for the Study of the Presidency and Congress (CSPC) in Washington, DC, where he helped coordinate the Commission on US Federal Leadership in Health and Medicine.

Justin matriculated at the UVA School of Medicine in 2009 in the generalist scholars program (GSP). He has continued to pursue his passion for community-based medicine, serving as a summer fellow at the Healthy Appalachia Institute in southwest Virginia, where he interned at the LENOWISCO Health District. His interdisciplinary GSP scholarly project utilizes history of medicine and health policy to focus on the future of primary care in central Appalachia. Justin has also recently been selected as a student director of the Board of the Virginia Academy of Family Physicians.

As a future family physician, Justin hopes to center his work on critical issues in health and medicine facing underserved rural communities. In addition to working to establish high quality innovations in clinical and preventive care in rural America, Justin plans to continue to write about and advocate for the transformation of health systems for all underserved populations.



**Ben Pederson**, a 2012 Pisacano Scholar, is a 4th-year medical student at the University of Minnesota Twin Cities Campus. While obtaining a Bachelor of Arts in Biology at Macalester College, Ben completed internships with local organizations focused on immigrant and refugee health. Ben received a post-baccalaureate Intramural Research Training Award supporting 1 year of research at the National Institutes of Health.

Ben worked in Tanzania on a USAID-sponsored 5-year Child Survival Project. Returning from this experience, he cofounded 'Just Health Network,' a nonprofit organization that provides small capital grants for community-based health initiatives in low and middle-income countries.

Ben was selected as 1 of 2 students at the University of Minnesota to participate in the pilot year of the Metropolitan Physician Associate Program, a 9-month clinical rotation located in an underserved urban community, focusing on the impact of patient-centered medical home services on health disparities specific to North Minneapolis and on family medicine resident education in Minnesota.

Ben spent a year working at AMPATH in Eldoret, Kenya as a Fogarty International Clinical Research Scholar, where he worked on a project focused on improving TB diagnostic availability and TB/HIV clinic integration. During this year, Ben also organized the Minnesota-Organic Health Response Kenya Alliance.

Ben plans to pursue a career in academic family medicine that integrates urban underserved medicine, global primary care development, and medical education innovation.



**David Rebedew**, a 2012 Pisacano Scholar, is a 4th-year medical student at the University of Wisconsin School of Medicine and Public Health. He completed his Bachelor of Science in Neurobiology and Psychology at the University of Wisconsin – Madison (UW). David received numerous awards and scholarships as an undergraduate, including the highly selective Wisconsin Alumni Association Senior Outstanding Student Award, and the Herfurth and Kubly Award for Initiative and Efficiency. David served as the chairman of the student activities committee and the president of the student government association at UW-Fond du Lac.

In 2010, he was the Elsevier "Cool Med Apps" contest prize winner and received the Korbitz scholarship. David published a book on Kindle about how to get into medical school titled, *Your Questions Answered: Getting into Medical School and Graduating Debt Free - A Guide to High School, Pre-medicine, and Medical School*.

David served as the coleader of UW's Family Medicine Interest Group (FMIG) and currently serves as the co-leader of the advocacy and intervention for medical students. David is also the Founder, President, and Secretary of the National Alliance on Mental Illness (NAMI) – Trempealeau County. David also currently serves as a pre-medicine peer mentor and as a MEDiC volunteer. Most recently, he was elected into the Gold Humanism Honor Society.

During residency, David intends to continue mentoring students and encouraging them to pursue a career in health care. Thereafter, he plans to create a free clinic for the underserved in rural Wisconsin that will also serve as a teaching center for health care students.



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## NEW CURRICULUM WILL HELP FACULTY LEAD CHANGE

The Society of Teachers of Family Medicine (STFM) and the Association of Departments of Family Medi-