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Title

Research as a Change Catalyst: The Impact of EHR InBasket Spring Cleaning and Compassion Team Practice on Reducing Burnout

Priority 1 (Research Category)

Healthcare informatics

Presenters

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Abstract

Context

This study aimed to address physician burnout related to EHR and teamwork by designing and implementing a dual-focused intervention: reducing EHR workload and enhancing care team cohesion. The intervention included quick action shortcuts in EHR and a 30-second compassion team practice (CTP) during daily physician-nurse dyad huddles.

Objectives

Design and implement a dual-focused intervention to reduce EHR workload and enhance care team cohesion by improving management of electronic communication with patients, other clinicians thereby strengthening care teams and mitigating physician burnout.

Study Design and Analysis

Modified stepped wedge clustered randomized trial. Dependent variables included dichotomized 1-item burnout level, a perceived ease of EHR work scale, Mini Z subscale for supportive workplace, and the number of inbasket messages.

Population studied

Forty-five physicians, including 16 family physicians, 11 general internists, and 18 subspecialists, in 12 clinics.

Intervention

Forty-five physicians were randomized by their clinic to intervention (first EHR-only, then EHR+CTP) versus standard work, followed by EHR-only, then EHR+CTP, over four 4-week periods. Intent-to-treat analyses used mixed effects models. Random effects were included to account for the clustering of clinic and physician.

Dataset EHR and survey data.

Outcome Measures The outcome measures of this study include the proportion of burnout, perceived ease of EHR work, the Mini Z subscale for supportive workplace, and the number of inbasket messages.

Results

The study found that while there was no significant impact on burnout, both the EHR intervention (coefficient=0.76, $p=0.01$) and EHR+CTP intervention (coefficient=0.80, $p<0.01$) were associated with higher perceived ease of EHR work, and the Mini Z supportive work environment subscale marginally significantly increased with EHR+CTP (coefficient=0.61, $p=0.07$), indicating an increase in perceived supportiveness in the workplace. Additionally, the total number of inbasket messages per week declined (coefficient=-48.3, $p=0.03$) after the EHR intervention.

Conclusions

Researchers and informatics leaders collaborated to catalyze changes in inbasket management and team relationship. While no significant impact on burnout was observed in adjusted analyses, encouraging findings were obtained on perception of ease of EHR work, a more supportive workplace, while number of messages declined.