

Using the Electronic Health Record to Facilitate Patient-Physician Relationship While Establishing Care

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THE INNOVATION

The patient-physician relationship is an important therapeutic tool with often-overlooked potential to facilitate health and well-being in patients.¹ Positive patient-physician relationships are associated with higher patient satisfaction, improved adherence to treatment plans, and increased patient functional health.²⁻⁴ Meaningful patient-physician relationships may also be protective against burnout for physicians.⁵ Time is limited within the clinical encounter, however, and relationship building is only one of many physician responsibilities within a clinical visit.⁶ In this project, we used the secure messaging feature of the electronic health record (EHR) to invite patients to share narrative information about themselves before their initial visit as part of the process of establishing care.

WHO & WHERE

Our project took place at a regional clinic within the Department of Family Medicine and Community Health associated with the University of Wisconsin School of Medicine and Public Health. All adult patients who had an active patient portal account and had a first visit with the study physician as their primary care physician (PCP) within the 7-week timeframe of the project were invited to participate.

HOW

Three to 14 days before the patient's initial visit, we sent a message directly from the study physician to the patient via patient portal. The message included a greeting, an introduction to the project, and an invitation to respond directly to the question "What do you want your healthcare team to know about you as a person?" as defined by the Veteran Administration's (VA) My Life, My Story project.⁷ Immediately

before each new patient visit, we checked the secure messaging portion of the EHR for inclusion in the study and for a response. When present, patient responses were used to guide the introductory portion of the visit. Whether or not they responded, patients who viewed the message received a written post-visit survey focused on their experience of receiving the message, how it may have impacted their visit, and their reasons for not responding (if applicable). To better understand what patients felt important to share, we deidentified the patient responses and completed a thematic analysis using NVIVO software (QSR International). This project was deemed exempt from IRB approval as a quality improvement project.

LEARNING

Regardless of whether they responded with a message of their own, most patients reported a positive experience (79% positive, 17% neutral, 4% negative) with being invited to share narrative information about themselves before meeting their new PCP. Thematic analysis and examples of responses within each theme can be found in the **Supplemental Table**. While some patients shared information that would typically be gathered in an initial visit (health conditions, health history, and health goals), others wrote about personal topics such as relationships, occupation, hobbies, identity, and defining life experiences that may not have come up within the time constraints of a routine visit. From the clinician perspective, we found that reading patient narratives fostered an immediate sense of connection, facilitated agenda setting, and improved the sense of efficiency of the visit. This innovative strategy to integrate patient-owned narrative into the EHR facilitates a better understanding of what is important to patients and could be easily implemented by an individual clinician or health system. Future directions include modifying the question posed to patients and creating a patient-owned space within the EHR where patients can add narrative information about themselves.

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Key words: narrative medicine; patient participation; electronic health records; primary health care; physician-patient relations

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 **Supplemental materials, including references**

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