

What's next



Healthcare

The Way Forward: Physician burnout

Critical access and rural hospitals provide vital healthcare services to a significant portion of the U.S. population but continue to face significant challenges. Although these are small facilities with tight staffing, the day-to-day struggles basically are really no different than the largest healthcare organizations—but the issues tend to be amplified because of limited resources. In our new series with Robert Budman MD MBA, former CMIO of Atlanta's Piedmont Healthcare, we explore “The Way Forward” in offering strategic direction and help for critical access and rural hospitals.

Robert Budman, MD

Posted August 5, 2019



This article was first published on July 15, 2019, by [Health Data Management](#). Reposted with permission.

Over my career, I have had the privilege of working in a wide variety of family medicine practices, emergency departments, urgent care centers, and hospitals around the globe and at organizations large and small. I find it highly rewarding to care for patients directly as well as to support hospital staff as we successfully deliver services. Some of the most vital needs are provided at rural and critical access hospitals across the U.S. In some communities, in fact, these facilities are the [only source](#) of patient care.

The providers at these smaller facilities face similar challenges as those at larger organizations: [administrative burden](#), [burnout](#), and [financial pressures](#)(due to both an aging population and payor reimbursements)—all of which combine to affect organization-level safety and quality, plus concerns around physician [recruitment](#), [satisfaction](#), and [retention](#).

These demanding realities are amplified at smaller facilities. Consider how a 1 to 3% improvement in efficiency, for example, would affect a large healthcare organization versus a critical access hospital. For the critical access hospital, this could be the difference between survival and failure. Whereas a large organization may have a better cushion in terms of its medical staff and financial resources, smaller organizations will be more sensitive to staffing issues, modest changes in reimbursement, and health information management.

There are ways forward. Let's start with the notion of alleviating the administrative burdens that have been lumped into a physician's workday. A new report [reveals](#) that 38% percent of providers spend 10-19 hours per week on administrative tasks; 32% spend more than 20 hours per week in these activities. I know from experience that physicians would rather spend their time caring for patients, so we must streamline the processes of documentation, improve the efficient use of the EHR, and eliminate downstream inflows of added work.

Today's technologies offer numerous opportunities to move the needle. For example, speech recognition solutions accurately and more quickly capture the narrative of patient encounter notes and assist physicians in capturing correct and pertinent documentation details. In addition, virtual assistants automate tasks like lab and radiology searches, retrieve evidence-based guidelines, and carry out CPOE to help save innumerable clicks.

All these ways forward hold great promise for organizations of all sizes. For facilities with limited resources, the impact may be even more consequential, which is why working with technology partners who have a concrete vision and way forward for smaller hospitals will become imperative. And, the future holds even more promise than the present; we'll touch on where we're headed in our coming articles.

To learn more, please go to www.nuance.com/healthcare

Tags: [clinical documentation](#), [EHR](#), [EMR](#), [physician burnout](#)



About Robert Budman, MD

Dr. Budman is Board Certified in Family Med & Informatics. He focuses on efficiency, safety, and quality initiatives with global experience in multi-EHR and service line care delivery. His work involves implementation, workflow adoption, and optimization. Dr. Budman earned multiple clinical awards and speaks extensively on healthcare IT.

[View all posts by Robert Budman, MD](#)