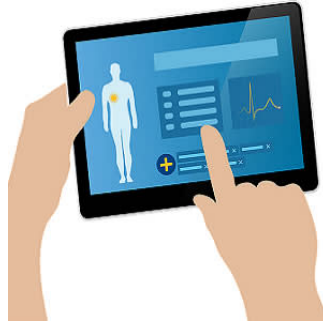

Has the EHR blame game gone too far?



It is a common complaint among physicians that EHR documentation takes too much of their time. They say that EHR systems are not designed to support documentation in a way that works well for members of care teams. EHR usability is a point of frustration for clinicians and can have patient safety consequences, some experts have warned.

In a new study published in JAMA, however, researchers found that just a small percentage of patient safety events can be traced back to specific aspects of EHR usability. The study reviewed 1.7 million events reported to the Pennsylvania Patient Safety Authority and from a large multihospital academic medical centre between 2013 and 2016. Researchers sought to determine cases of possible patient harm that explicitly mentioned a major EHR vendor or product.

According to the results, only 0.11% of events explicitly mentioned an EHR vendor or product and just over 500 events (0.03%) includes language explicitly referencing EHR usability. The most common categories were data entry and alerting, making up nearly half of EHR-related events.

Despite the low percentages, the study's lead author Raj Ratwani, PhD, argued the conservative parameters — including limiting the analysis to events that named one of the top five largest vendors within one state — indicated the events they identified were “just the tip of the iceberg in the grand scheme of things.”

Since patient safety incidents are notoriously underreported, therefore the likelihood that a clinician would include the name of the EHR vendor tightens those parameters even farther.

“We really wanted to be deliberate and concrete in the way we looked at this data,” explained Ratwani, the scientific director of the MedStar Institute for Innovation’s National Center for Human Factors. “We didn’t want to put numbers out there that people might argue with.”

Those conservative estimates underscore the need for greater industry collaboration between vendors and providers and to optimise federal policy. Ratwani points specifically to two provisions of the 21st Century Cures Act that require transparent reporting around EHR usability and real-world testing for interoperability.

Although it isn’t included in Cures, Ratwani also supports a national health IT safety collaborative, something organisations like the ECRI Institute and Pew Charitable Trusts have recently called for.

Ratwani also pushed for federal agencies, like the Agency for Healthcare Research and Quality (AHRQ), which funded the JAMA study, to support further research into EHR safety events, regardless of how low those percentages may seem.

Worried that the study results might lead some to dismiss the potential for harm, the author stated: “Our level of acceptability here should be zero. We should be striving for no harm events, particularly because there’s a deep science behind usability; we know how to make these systems well designed.”

Source: [FierceHealthcare](#)

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