

How Digital Tools Can Help Prevent Healthcare-Provider Burnout



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Burnout is a syndrome that occurs due to considerable stress in the workplace, often including a shortage of workers leading to increased workload on existing staff. It can be recognized by signs of fatigue, exhaustion, cynical attitude and “a tendency to view people as objects rather than as human beings,” according to Dr. Tait Shanafelt of the Mayo Clinic in his landmark 2015 study.

Hospitals are dealing with the burden of staff shortages – and, in turn, burnout – despite Covid-19 hospitalizations hitting a pandemic low, as more and more patients need care while the finite number of healthcare workers declines.

Healthcare professionals' burnout rates have risen over the past decade, and the pandemic has only made it worse. It's introduced a new normal of ongoing variants and associated cases that have pushed medical professionals over the edge due to patients' overwhelming demands and expectations for these already burned-out healthcare workers.

A Kaiser Family Foundation and *Washington Post* survey of 1,327 healthcare workers during the pandemic found that 55% of healthcare workers felt symptoms of burnout, and another 62% said the symptoms harmed their mental health. A pre-pandemic study showed that 44% of physicians already felt burnout, with the major causes being working long hours, completing administrative work and dealing with electronic medical records.

The issue of physician burnout is costly for hospitals because of the increased chance of errors leading to millions of dollars in lawsuit costs. Still, the biggest problem it poses is harmful and dangerous for the patients because burnout increases medical errors. A study by the *Annals of Internal Medicine* estimated that \$4.6 billion in costs related to physician burnout are spent each year in the U.S., and found economic value in investing in programs to reduce this burnout.

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So, what type of digitalization solutions could eventually prevent burnout amongst physicians and providers in hospitals and clinics? While acknowledging that many possible technology solutions exist, we'll touch on three and discuss how each could reduce healthcare professionals' long work hours and large administrative workload, which duly benefits the patients in their care.

1. Share information across different electronic medical records systems

With variations in electronic medical records (EMR) across various hospitals, physicians and providers spend ample time entering patient data or searching other systems for patient data (i.e. results and labs). The current EMR systems provide convenience to the payers and hospitals for billing, but they are not necessarily physician- and provider-friendly.

While it is impossible to keep building new EMR systems, some have opened doors to interoperability and third-party vendors for add-on features or extensions. Interoperability enables health data exchange between different EMR systems, and thus establishes a health information ecosystem. Some physicians with entrepreneurial thinking have started to digitize and automate services using third-party vendors within their existing EMR system.

2. Improve communication between providers and between providers and patients

Most EMR systems have developed secure smartphone applications with patient data for physicians to review and evaluate from home or while traveling, helping to reduce their administrative workload. Smartphone applications developed by third-party vendors have been popular for better care coordination and communication among providers. Physicians Practice's Mobile Health Survey reports that 69% of physicians used HIPAA-compliant smartphone apps for staff communications, while 51.1% communicated with patients via the same app.

At the same time, smartphone usage could lead to an always-on

culture. Hospital systems should be wary and implement usage in such a way as to prevent healthcare professionals from feeling obliged to review results or answer queries outside of normal business hours. One solution may be to allow access via the smartphone only while the doctor is actively connected to the hospital's network.

3. Consider a hybrid model of care (in-person, virtual visits and scheduling automation)

In this pandemic age, it is important to consider a system capable of in-person and virtual consultation (like follow-ups) now that insurance provides reimbursement for virtual care. Artificial intelligence (AI or ML) or administrator systems can determine whether the patient needs a physical presence (e.g. for non-urgent specialty follow-ups). The scheduling automation system can group the virtual visits on a specific day, and the provider can decide whether to attend from home or the hospital. This opportunity allows the provider to vary their schedule and use a quiet home setting that may help prevent burnout.

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Healthcare systems are becoming more complex with the advent of emerging new technologies and the fast-paced adaption of these technologies. To prevent professionals' burnout, the healthcare system should collaborate and partner with specialized technology vendors and specialized consultants to enable smooth transition of their digital transformational journey.

I support the strategy shift of my entrepreneurial healthcare professional colleagues and investor clients for developing new, advanced and innovative technology platforms and

applications to resolve potential burnout-related issues. I also encourage my healthcare colleagues to first consider partnering with the existing specialized technology vendors in the market, rather than starting a new business or product independently. While many medical institutions, government organizations, entrepreneurs and health-tech investors are tackling healthcare professionals' burnout, I believe a more collective and collaborative effort could be more productive than these siloed efforts, which will ultimately help ensure the wellbeing of those we treat.

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