

Provider Documentation Improvement – Do Scribes Impact Workflow?

Sharon Stemm, RN, BSN, Anne Homan, RN, BSN

South Shore Hospital, Weymouth, MA

Keywords: Medical scribe, Workflow, Documentation

Background

Hospitalists have reported data entry challenges monopolizing the majority of their day. A high volume of patients are managed by the hospitalist group. With a constant influx of patients that require hospital admission evaluation by this group, as well as ongoing assessments for discharge, their productivity is instrumental to overall patient flow. The goal of the scribe trial was to examine hospitalists' workflow, determining if real-time documentation by a scribe would improve provider workflow, increasing productivity while providing high quality patient care. The research team consisted of Hospitalists and Nurse Informaticists.

Method

Initial shadowing with a hospitalist was completed for one shift prior to initiating scribing, going to the gemba (going to see the actual process and understand the work) to observe daily routine and pace. Workflow was observed and time studies related to task completion were recorded. Subsequent shifts included the provider rounding on admitted patients or admitting patients using a scribe. Both parties were present during the provider interaction with the patient. The scribe used a computer on wheels to document the encounter.

The sample included both physicians and advanced practice clinicians using a scribe with a randomized hospitalized patient population. The data was collected using real time studies and feedback from the providers. Collected data was gathered regarding the provider patient load with or without a medical scribe. At the completion of the scribe trial, time studies were performed to analyze the provider's workflow utilizing a computer on wheels independently.

Limitations included no order entry performed by the scribe. The scribe did have the ability to document, navigate the medical record, and send pages to contact other providers. The scribes were Nurse Informaticists who have the ability to educate the providers regarding system functionality and suggest workflow modifications.

Results

There was insufficient evidence to support promoting widespread use of scribes in our facility to improve workflow, but there were providers who reportedly preferred having a scribe. Some providers using a computer on wheels independently at the patient's bedside found that this was just as effective for time management and workflow improvements. There was no "one size fits all" model determined to improve workflow.

Conclusion

It was concluded that for clinicians, documenting in real time allowed well-organized progression through their assignment, and permitted time for additional admissions and discharge preparations for the next day. Also, nurses reported improved communication with providers as they coordinated the patient's plan in real – time. Benefits to this trial included improving knowledge of the computer systems among providers and identification for documentation template revision. This trial was the catalyst to several other trials launched to improve provider workflow.

References:

Carr, S. (2014). Medical Scribes Improve Physician Satisfaction. Can They Improve Diagnosis, Too? *Patient Safety & Quality Healthcare*, 11(4), 18-20.