January 28, 2019

Donald W. Rucker, MD
National Coordinator for Health Information Technology
Office of the National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
330 C St SW, Floor 7
Washington, DC 20201

Re: Draft Strategy on Reducing Regulatory and Administrative Burden Relating to the Use of Health IT and EHRs

Dear Dr. Rucker,

The American Academy of Nursing (Academy) submits the following comments in response to the draft "Strategy on Reducing Regulatory and Administrative Burden Relating to the Use of Health IT and EHRs."

The Academy serves the public and the nursing profession by advancing health policy and practice through the generation, synthesis and dissemination of nursing knowledge. The Academy's more than 2,700 fellows are nursing's most accomplished leaders in education, management, practice, and research. They have been recognized for their extraordinary contributions to the promotion of the public's health through evidence and innovation.

The Academy commends the Office of the National Coordinator (ONC) and the Centers for Medicare & Medicaid Services (CMS) for the draft Strategy on Reducing Regulatory and Administrative Burden Relating to the Use of Health IT and EHRs. We believe this draft Strategy between ONC and CMS will prove vitally important for transforming health care in the United States.

The draft Strategy has the potential to reduce some of the burden health Information Technology (IT) and Electronic Health Records (EHRs) place on clinicians, which could result in improved clinician workflow and ultimately achieve better patient outcomes. The impact that EHRs have had on clinicians' workflow is well documented —with it being estimated that nurses, physicians, and residents spend as much as half of their time completing clinical documentation.[i] This directly impacts the care patients receive as well as the quality of that care.

With regard to the draft Strategy on improving clinical documentation, the Academy agrees that reducing regulatory burden and re-documentation is necessary to lessen the "note bloat" impacting clinicians reporting requirements related to quality and billing. Dr. Patricia Sengstack, DNP, RN-BC, FAAN, a fellow of the Academy who formerly served as the chief nursing informatics officer at the Bon Secours Health System, conducted a study in which she found that the EHR required 593 clicks to complete all fields, in an admission assessment.[ii] The Academy commends the ONC's recommended strategies to "continue reducing overall regulatory burden around documentation of patient requirements" and to "leverage data already present in the EHR to reduce re-documentation in the clinical note," both of which will simplify clinical documentation and reporting requirements.[iii]

The Academy also supports ONC's recommendations regarding strategies and research designed to address health IT usability, interoperability, and the user experience. The Academy agrees that increasing the intuitiveness of health IT systems by using human factor engineering will help to reduce redundancies and the time required to complete forms, as well as address the current disconnect between the traditional paper-based methods of recording health data and the input of that data into health IT systems. Additionally, standardizing medication information, order entry, and patient results displays within health IT will dramatically lower confusion while increasing patient safety.

The Academy notes that the draft Strategy mainly focuses on physician workflow examples and, by doing so, misses important aspects that impact the entire interprofessional care team comprised of nurses, physicians, pharmacists, other clinicians, and health professionals. With more than 4 million nurses nationwide, the profession represents the largest segment of the nation's workforce; therefore, nurses play a vital role in impacting quality, safety and cost.[iv] The Academy respectfully requests that ONC broaden its approach in consideration of the entire healthcare workforce, where applicable. Additionally, the term "health care provider" as opposed to "physicians and other health care professionals," should be incorporated in future drafts to better encompass the interprofessional nature of the care team.

Ultimately, the center of health care systems is the patient. Designing health IT and EHRs requires the full complement of expertise that spans an interprofessional approach representing the entire team—including the patient. All who interface with these systems offer a unique lens that can increase workflow efficiency, and usability, while creating a process for continual improvement – all for the ultimate benefit of improved patient care. As such, the National Academy of Medicine recommends a person-centric design strategy that supports high-quality care delivery and reinforces team communication.[v]

The Academy appreciates the opportunity to comment on this important draft strategy aimed at reducing regulatory and administrative burden related to health IT and EHRs. We believe the strategy holds great promise in reducing these burdens, which will ultimately improve clinician work satisfaction and improve patient care. We welcome further discussions and the ability to comment again in the future on this important policy affecting all nurses and patients. The Academy is ready to be of assistance, and willing to discuss further our recommendations for executing the strategies. Please do not hesitate to contact the Academy's Chief Executive Officer, Dr. Suzanne Miyamoto, at smiyamoto@aannet.org.

Sincerely,

Karen S. Cox, PhD, RN, FAAN
President

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[i] Ommaya, A. K., P. F. Cipriano, D. B. Hoyt, K. A. Horvath, P. Tang, H. L. Paz, M. S. DeFrancesco, S. T. Hingle, S. Butler and C. A. Sinsky. 2018. Care-Centered Clinical Documentation in the Digital Environment: Solutions to Alleviate Burnout. NAM Perspectives. Discussion Paper, National Academy of Medicine. https://nam.edu/care-centered-clinical-documentation-digital-environment-solutions-alleviate-burnout

[ii] Cochran, K., Freeman, R., & Moore, E. (2018). "Health IT for nursing: What now?," American Nurse Today. Retrieved from: https://www.americannursetoday.com/healthit-nursing/

[iii] Office of National Coordinator for Health Information Technology. (2018, November). "Draft Strategy on Reducing Regulatory and Administrative Burden Relating to the Use of Health IT and EHRs," (p. 46).

[iv] National Council of State Boards of Nursing. "Active RN Licenses." Retrieved from: https://www.ncsbn.org/6161.htm.

[v] Ommaya, A. K., P. F. Cipriano, D. B. Hoyt, K. A. Horvath, P. Tang, H. L. Paz, M. S. DeFrancesco, S. T. Hingle, S. Butler and C. A. Sinsky. 2018. Care-Centered Clinical Documentation in the Digital Environment: Solutions to Alleviate Burnout. NAM Perspectives. Discussion Paper, National Academy of Medicine. https://nam.edu/care-centered-clinical-documentation-digital-environment-solutions-alleviate-burnout.