## Partnered Evidence-Based Policy Resource Center

# **POLICY BRIEF**

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## Medical Scribes, Productivity, and Satisfaction

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U.S. Department of Veterans Affairs Veterans Health Administration Quality Enhancement Research Initiative Medical scribes are paraprofessionals who work directly with health care providers to assist in medical documentation during episodes of care.<sup>1</sup> Scribes are becoming more prevalent, likely due to the ever-increasing burden of documentation required by electronic health records (EHR). Many young professionals pursuing careers in health care become scribes before graduate school to gain valuable clinical experience. Recent interest in the field has led researchers to study the impact of scribes on productivity and patient and provider satisfaction.

In VHA, scribes are rarely used, if at all. The VA MISSION Act of 2018 authorizes a two-year pilot program to test the impact of medical scribe use across ten VHA medical centers. Twenty scribes will be hired as VHA employees and twenty scribes will be hired as contractors. VHA will measure the effect of both groups on provider efficiency, productivity, and patient satisfaction.<sup>2</sup>

Though none is currently available, VHA-specific data will be essential to future policy development on scribe use within VHA. Though existing research is limited, a review of the literature suggests private sector scribe use is associated with increased provider productivity and satisfaction and decreased time spent charting in EHR. This policy brief summarizes these research findings.

#### **Medical Scribes**

Medical scribes are responsible for recording patient information, updating EHR, and administratively expediting an episode of care.<sup>1</sup> They are non-licensed professionals and do not provide clinical care. Scribes are most often used in emergency departments as well as various outpatient clinic settings. There is minimal regulation on the scribing profession; scribes are trained upon hiring (through classroom learning and shadowing).<sup>3,4</sup> The goal of scribe use is to alleviate the administrative burden on the health care provider so s/he can focus on clinical decision-making and the provider-patient relationship.



#### **Impact on Productivity**

Productivity measures how much work is done per one unit of input. The studies included in this brief assessed productivity in many ways, including measures based on work relative value units (RVUs) per hour, physician overtime, net revenue, and number of patients seen per hour. Even with a variety of measures, most studies found that productivity increased with scribe use.

Several studies found that scribe use increased the number of patients seen per hour.<sup>5,6,7</sup> In these and others, the number of RVUs completed per hour often increased as well.<sup>5,6,8,9,10</sup> This suggests that, by delegating administrative tasks to scribes, physicians can focus on clinical responsibilities and that division of labor is more productive than physicians doing both.

A few studies also observed increased net revenue with scribe use.<sup>10,11</sup> This does not translate directly to VHA policy because VHA does not charge for the care it delivers. However, scribes are not costly and could prove to be an efficient way to increase overall productivity in VHA.

Lastly, Friedson found that scribe use decreased documented physician overtime.<sup>8</sup> Physicians using scribes were more administratively efficient during shifts, reducing the need to complete charts after hours.

#### Impact on time spent on EHR documentation

Electronic health records are intended to improve efficiency and organization, keeping all health records in one, accessible location. However, this method of documentation has proved cumbersome. Providers often lament the time spent charting rather than with patients. Scribes may alleviate some of this burden.

Use of medical scribes was associated with a reduction in time spent by providers on EHR documentation, both during clinics and after hours.<sup>10,12,13,14,15,16</sup> Computer use in general also declined.<sup>5</sup> However, Addesso, et al. found that the time required to complete patient charts did not decrease.<sup>6</sup> This suggests scribes do not reduce the documentation burden overall, they simply shift the responsibility from the provider to themselves.

#### Impact on satisfaction and related measures

Provider and patient satisfaction are important health care system outcomes. Current literature suggests medical scribes may improve provider satisfaction while having an unclear impact on patient satisfaction.<sup>6,9,10,12,13,14,15</sup> Provider satisfaction was often assessed in tandem with various measures of efficiency and efficacy. For example, some providers found scribe use improved clinic flow.<sup>13,14</sup> Others reported they could fully focus on the patient instead of charting.<sup>13,15</sup> Similarly, they could spend more time with their patients.<sup>12</sup> Addesso, et al. found that clinicians preferred having and felt more effective with a scribe.<sup>6</sup>

However, a qualitative study in Australia reported a few emergency department providers declined to use scribes.<sup>17</sup> The providers said that charting allowed for cognitive processing, something that was lost when a scribe charted on their behalf.

The impact of scribe use on patient (and parent, in the case of pediatric clinics) satisfaction was less conclusive. Martel, et al. measured a small, but statistically significant reduction in patient satisfaction with the use of scribes, though it did remain high overall.<sup>15</sup> Bastani, et al. saw an improvement in patient satisfaction while two other studies found patient/parent satisfaction relatively unchanged.<sup>6,18,19</sup>

Physical comfort also affects patient satisfaction. Exam rooms are often small and can feel cramped during visits. Zallman, et al. found that the proportion of patients comfortable with the number of people in the room during a visit declined when scribes were present.<sup>5</sup> Even still, comfort levels with the scribes themselves were high.



#### **Moving Forward**

Medical scribe use is becoming more popular in the private sector as health care providers attempt to address the immense administrative burden of care. While preliminary literature is limited, current studies suggest scribes may improve provider productivity and satisfaction and reduce the time spent with EHR.

VHA is preparing to implement a two-year pilot program on scribe use under the VA MISSION Act of 2018. VHA-specific data will be critical to determine how scribes affect productivity and satisfaction in the VHA environment.

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### About PEPReC Policy Briefs

This evidence-based policy brief is written by the Partnered Evidence-based Policy Resource Center (PEPReC) staff to inform policymakers and VHA managers about the evidence regarding important developments in the broader health care system or economy that could impact VHA. PEPReC is a QUERI-funded resource center that collaborates with operational partners to design and execute randomized evaluations of VHA initiatives, develops and refines performance metrics, and writes evidence-based policy briefs.



