



Physician Satisfaction Depends on EHR Usability

By Tamara Pomerantz, MHA, MHS, PgMP

Clinicians spend nearly half their day working in the electronic health record (EHR) ([AMA, 2024](#)).

It's no surprise, then, that usability directly impacts physician satisfaction, burnout rates, care quality, documentation, and reimbursement.

A [JAMA study](#) published in August 2024 found that just over 26% of family physicians are dissatisfied with their EHR.

The study identified four key **usability factors** that strongly correlate with physician satisfaction:

1. Ease data entry
2. Alignment with workflow
3. Efficiency of finding information
4. Usefulness of alerts

EHR vendors and other niche systems and applications often promote their technical capabilities, but do these systems really integrate well with your organization's processes? Do they enable the seamless collaboration required among physicians, care teams, staff, and patients?

So, how can healthcare organizations improve the EHR experience for their physicians?

Usability Made Simple

EHR usability is not just a physician satisfaction concern for the IT department to address — it's an organization imperative tied directly to patient care quality, operational performance, and financial reimbursement. Improving satisfaction with EHR usability starts with understanding the experiences of physicians, and then building systems and processes that support, rather than hinder, their work.





Making Physician Satisfaction a Reality

Turning the four EHR usability factors into action requires a clear approach and the right tools. Here are 4 easy steps to help organizations move to ensure EHR changes address usability and ensure user satisfaction:

1. Document real-world workflows — integrating both processes and technology.

The benefits:

- Improves understanding of processes necessary for data entry and information locating.
- Increases awareness of changes necessary for appropriate practice.
- Helps drive holistic processes that make sense rather than processes limited to technology.
- Simplifies testing and validation steps necessary for effective adoption without errors.
- Aids in education and adoption.

How to implement:

- Engage frontline clinicians and support staff during workflow documentation sessions to capture practical nuances and bottlenecks.
- Use visual tools like swimlane diagrams or process maps to illustrate each step and participant in the workflow.
- [How TransIT Helps](#): TransIT enables organizations to create and maintain detailed, interactive workflow maps that reflect real-world clinical scenarios. These workflows are tied directly to testing scripts, so documentation and validation evolve together.

2. Test the technology changes using workflows and real-world scenarios.

The benefits:

- Ensures the technology supports and fosters real-world processes rather than complicating them, establishing early identification of usability concerns.
- Identifies critical gaps that may have been missed particularly around communication and hand-offs between care providers, departments, and technologies.
- Ties alerts to meaningful practice.



How to implement:

- Develop test scripts based on actual day-to-day workflows that include key hand-offs (e.g., nurse-to-provider, clinic-to-lab). This helps identify friction points that technology function testing might miss.
- Involve multi-disciplinary teams in workflow and test script review as well as testing.
- [How TransIT Helps](#): TransIT allows users to review workflows and scripts in a centralized location. Additionally, TransIT can convert Workflows into Scripts to ensure all EHR changes — such as updates, patches, or third-party integrations — are quickly incorporated and validated against documented workflows. This accelerates iterative rounds of testing and flags where real-world processes break down due to system misalignment.



3. Educate the Workflows with the integrated technology – rather than training just the tech.

The benefits:

- Clarifies what people should start doing differently in addition to what stays the same.
- Highlights where cross collaboration is occurring.
- Improves the effectiveness of training - rather than separate technology training, users learn how and why system tasks fit into their broader clinical responsibilities.

How to implement:

- Combine system training with role-based, scenario-driven learning modules derived from the workflows and test scripts.
- Reinforce training with workflow visuals and explain how new features affect upstream and downstream processes.
- [How TransIT Helps](#): TransIT links each workflow step to associated scripts that can be used as instructions, helping staff learn in context.



4. Foster Cross-Team Collaboration by bringing all stakeholders together.

The benefits:

- Encourages early identification of usability concerns.
- Improves and accelerates adoption by fostering communication, ownership, and accountability across all stakeholders.
- Aids in continuous improvement.

How to implement:

- Regularly review workflows with input from physicians, nurses, IT, and operations to identify areas of misalignment.
- Use shared metrics (e.g., time to document, alert fatigue, message volume) to create a common language for improvement.
- [How TransIT Helps](#): With dashboard tracking and enterprise licenses, TransIT makes collaboration easy. TransIT enables teams to co-develop, maintain, and validate workflows in real time. Users can flag issues, suggest improvements, and track change impacts over time, all within a centralized platform.

From Usability to Satisfaction

By clarifying workflows, testing technology in context, integrating training, and fostering collaboration, healthcare organizations can improve physician satisfaction. Tools like [TransIT](#) empower organizations to do this effectively — offering a structured, repeatable approach to aligning EHR technology with real-world practice.

How MAKE Can Help

MAKE's [TransIT tools](#) help organizations save time and resources during implementation and throughout ongoing operations. MAKE's [TaaS services](#) can help you get up and running quickly with our TransIT tools, or use our [Operational Excellence services](#) to enhance your team, governance, and processes, regardless of vendor application.





References

1. **Five physician specialties that spend the most time in the EHR.** American Medical Association, Andis Robeznieks, September 2024, <https://www.ama-assn.org/practice-management/digital-health/five-physician-specialties-spend-most-time-ehr>.
2. **Electronic Health Record Usability, Satisfaction, and Burnout for Family Physicians.** JAMA Network Open, August 2024, Vol 7, No. 8, <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2822959>.