Most early and midcareer pediatricians are bringing work home at least weekly, according to the Pediatrician Life and Career Experience Study (PLACES). Seven in 10 pediatricians who participated in a 2018 PLACES survey reported they do work at home, such as patient charting, at least once a week. One-quarter said they are doing so daily (see figure).

The majority (75%) also reported they work more hours each week than they are scheduled, a median of eight extra hours a week. Two-thirds work these hours at both their home and job settings, and another 12% work these hours at home only.

Three-fourths of pediatricians reported they have adequate time to care for their patients. Far fewer pediatricians (37%) reported they have enough time for administrative tasks.

"Even several years into using our EHR (electronic health record), I am still struggling to integrate its use in my patient visit," said a primary care pediatrician who participated in PLACES. "This usually leaves me with a lunchtime filled with catching up and at least an hour after work. It just doesn’t flow well with my style of patient care."

The top approaches PLACES pediatricians reported to reduce administrative burdens include improving EHR functionality, obtaining physician input on administrative structures and tasks, providing more protected time in schedules for such tasks and shifting this work to other team members.

"These data resonate with us, particularly how administrative tasks in the EHR eat into the time we want to spend talking to patients and collaborating together. It’s why we are all committed and focused on improving the functionality of the EHR," said Emily C. Webber, M.D., FAAP, chair of the AAP Council on Clinical Information Technology Executive Committee.

"Patient charting in the evening at home — ‘pajama time’ — is becoming common in pediatrics, but we’ve got to make sure it does not become our new normal."

PLACES includes the 2009–11 residency graduates cohort and the 2002–04 residency graduates cohort. Each cohort has 900 participants and includes both AAP members and nonmembers and general pediatricians, subspecialists and hospitalists. Seventy percent of participants responded to the 2018 survey.

A new cohort was recruited in 2019 (graduated residency in 2016–18), so the AAP can continue to gather pediatricians’ perspective at the start of their career.

RESOURCES

- For more information on the AAP Pediatrician Life and Career Experience Study, visit www.aap.org/places or contact Mary Pat Frintner, in the AAP Division of Health Services Research, at 630-626-6664 or mfrintner@aap.org.
"Use of an EHR has added significantly to work burden. If I try to document while in the room, it really detracts from the visit, taking away from that interpersonal experience."

— Primary care pediatrician

"My frustration level has increased 10 fold in the last six years due to EHR. I want to spend time with my patients, not with my computer!"

— Primary care pediatrician

“It is an incredible burden to finish working a 10-hour day, four to five days per week, with at least 20 EHR charts to finish (about two hours of work). I leave the office as soon as all the tasks are done that have to be done at the office, so I can spend 30-60 minutes with my son before he goes to bed. Then, I chart for two hours.”

— Primary care pediatrician

“Too much time is wasted typing, clicking buttons. EHR is not user friendly but what’s worse is that we have to put so much useless, required content to satisfy insurance companies. You end up with a note which doesn’t enhance communication/documentation but rather is a list of less important issues that bill higher.”

— Subspecialist

“I am having a very difficult time balancing work and personal life. I am up until 1:30 a.m. to complete my documentational notes. I so yearn for help to make me more efficient in documenting in the EHR.”

— Primary care pediatrician

Source: AAP PLACES Check Point Survey 7 (2018)