# Burnt Out: Addressing Nursing Documentation in a Time of Crisis

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### About Me

- BSN from Mount Mercy University in Cedar Rapids, IA
- PhD Student at University of Minnesota in Minneapolis, MN
- Research Focusing on Informatics, Thinking, and Independent Health Management
- Clinical Experience in Transitional and Long-term Care Nursing





# Objectives

- Describe documentation burden in post-pandemic nursing practice
- Discuss implications for modern nursing practice



## What is documentation burden?

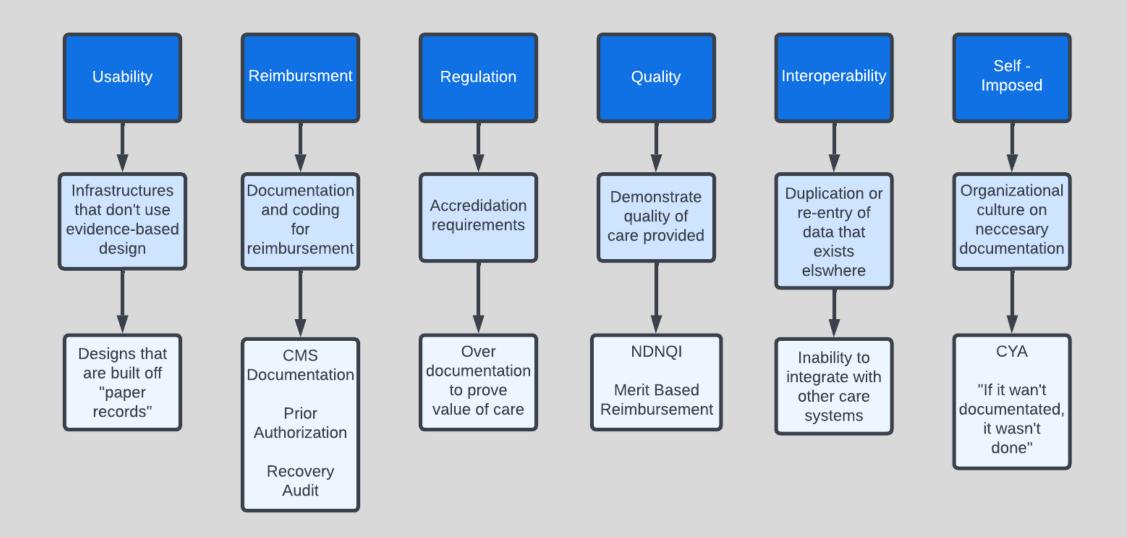
- Too much documentation
- The need for completion of unnecessary documentation in an electronic health record <sup>1</sup>
- Redundant documentation and regulatory requirements contribute to this burden <sup>2, 3</sup>
- Six interrelated domains of causative factors of documentation burden <sup>4</sup>
- Both systems related and cultural <sup>4</sup>



# Cultural Consequences

- "CYA" <sup>4</sup>
  - Nurses document to absolve them from legal liability, documenting interventions performed to mitigate lawsuit
- "If it's not documented, it isn't done" <sup>4</sup>
  - Perpetuates a litigious society
  - Further inquiry into the minimum legal necessities for nurse documentation of care

#### The Six Domains of Burden: A Conceptual Framework



Note: Six Domains of Burden. Adapted from *The Six Domains of Burden: A Conceptual Framework to Address the Burden of Documentation in the Electronic Health Record*, by P. P. Sengstack, B. Adrian, D. L. Boyd, A. Davis, M. Hook, S. L. Hulett, E. Karp, R. Kennedy, L. Heermann, T. A., Niblett.

#### Nursing Documentation and the Nurse

- Approximately 50% of a nurse's productive time is devoted to documentation of care <sup>3, 4</sup>
- Nurse documentation has the potential to be reflexive, and effective historical and pedagogical tools to evaluate and teach nursing care <sup>5</sup>
- However, places undue burden on nurses and clinicians due to its volume <sup>1-6</sup>
- Documentation practices are mediated by effective informatics and nurse leadership, environmental, and personal (nurse specific) factors 5, 6



#### Between a Rock and Hard Place

 Current problem: defining what documentation is nice to have and what is needed to have to promote continuity of care, accurate billing, and demonstrate safe, legal, and quality nursing practice





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#### Next Steps

- Work to refine the Minimum Data Set (MDS) to include only the most necessary components to reduce documentation time and workload 4, 7
- Work to establish evidence-based practices to build electronic health information (EHR) infrastructures <sup>4, 8</sup>
- Investigate personal, professional, and environmental factors that contribute to documentation burden and burn out <sup>4-6</sup>
- Engage in collaborative and interdisciplinary work groups to inform nursing documentation standards<sup>8</sup>

#### Want to learn more?



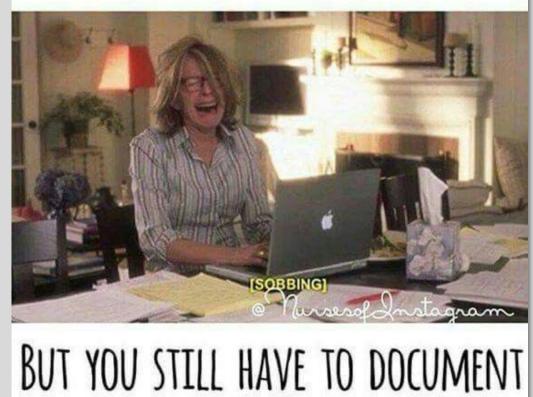


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## Discussion

- How have you experienced documentation burden in your nurse practice?
- What parts of your documentation are helpful to your practice?
- What parts of your documentation would you like to see go away?

## WHEN IT'S TIME TO GO



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#### For More Information



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