

## Finnish physicians are not satisfied with their EHRs

The results of a nationwide study of physicians' opinions about their electronic health record systems (EHRs) were recently published in the Finnish Medical Journal. The data was collected by means of an electronic survey covering almost 4000 practising physicians. The study included a number of structured and open questions on the usability and functionality of the EHRs and electronic patient records (EPR).

The opinions of the physicians were, in the main, highly critical. The average marks they gave to the EPRs varied from 5.6 to 7.1 (on a scale from 4 or fail to 10 or excellent). This would have come as no surprise to those who had been following the discussion of the topic in professional journals or other publications in Finland.

The key element of a physician's work is the examination and treatment of patients. Using an information system should not consume too much time or draw away the physician's attention during consultations. Physicians are constantly expected to keep their work up to the highest of standards, while showing high quality and efficiency, but it would appear that the quality of the tool to be used for that purpose is somewhat questionable. The electronic systems are known to slow down the reading and, often, even the saving of information. That is why the benefits of the systems should be achieved in its strengths, which include the easy accessibility and delivery of information, prospective proactive functional elements and smart decision support systems.

The physicians estimated that in between 22% and 80% of the systems such erroneous functions had occurred which would have caused at least the risk of a seriously damaging event to a patient. There were also functional instabilities in the systems. One of the commonest problems was difficulty in accessing patient information from other organizations. For this reason a great deal of information exchange occurred by fax or paper in spite of the fact that there were also regional information systems available.

But what should be done with the information systems which show weaknesses even in their basic functions? Physicians and nurses should be given an opportunity to participate more fully than they do nowadays in the development of the EHRs in collaboration with information processing science professionals. Such means have of course already been used, but as this and many other studies from a number of countries show, the design of health care information systems has not proceeded as hoped. At European Union level great efforts are being made to apply the Medical Devices Directive and the Machinery Directive to EHRs as well. This has been staunchly opposed by representatives of the industry. We remain, however, optimistic that some kinds of acts targeted at improving the reliability and safety of EHRs in even the near future.

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