

**Attachment—Additional Questions for the Record**

**Subcommittee on Health**

**Hearing on**

**“Caring for America: Legislation to Support Patients, Caregivers, and Providers”**

**October 26, 2021**

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**The Honorable Frank Pallone, Jr. (D-NJ)**

- 1. Your testimony points out the high rates of suicide and the long, overlooked burden on the healthcare community. It is important to see your sister-in-law not just through the lens of tragedy but also what she stood for as a physician, daughter, sister, and aunt. What do you think Dr. Breen would say to members of Congress about the need for mental health support legislation to help peers? Why is passage of the Dr. Lorna Breen Health Care Provider Protection Act so important?**
  - Lorna loved her job and loved to help people, but after a certain point, the stress, lack of sleep, and at times constant death, takes a toll even on the best of us. She was exhausted and overworked yet she was convinced that if she talked to a professional or sought mental health, she would lose her medical license or face ostracism from colleagues. I truly believe that if more mental health resources were available to healthcare practitioners and it was clear that seeking these resources wouldn't result in recourse or retribution, that physicians suffering in silence would get the help they need but are reluctant to seek.
  
- 2. We are often discussing mental health supports for providers already in the workforce. What suggestions would you make regarding how medical school programs such as the new Medical College of Georgia (MCG) 3+ program, can implement mental health support as a core component of the physician education curriculum?**
  - At the Dr. Lorna Breen Heroes' Foundation, we support early education about the importance of mental health and wellness in the workforce at the start of a physician's career path. But for those already practicing in the field, it's vital for health care practitioners to know what resources are already available to them and be educated on new tools to improve mental health. MG3 is an excellent example of focusing on curricular components that are highly relevant to the modern practice of medicine. Incorporating well-being and mental health programming into the new curriculum is more relevant than ever.

## **The Honorable Brett Guthrie (R-KY)**

The COVID-19 pandemic has inflicted wounds on our health care delivery system. In response, we must deliver immediate, practical, and sustainable support to health care providers. In order to nurture the weary medical workforce back to health and keep them strong moving forward, clinical workflows must be redesigned to foster resiliency.

The Journal of the American Board of Family Medicine (the Journal) published an article that identifies the growing time spent on electronic medical records and desk work – workload outside of the examination room – as a major contributor to physician burnout. As burnout reaches epidemic proportions, medical scribes offer a solution by assisting with critical ancillary tasks. The role of the medical scribe initially grew out of the need to assist emergency department physicians in navigating complex electronic health record systems. Medical scribes were assigned to input patient data into EHRs and document the medical encounter in the EHR in real time, enabling physicians to be fully patient-oriented and focus on direct patient care rather than navigating the fields and screens of an EHR. This is especially important in the emergency department where seconds can make a difference in clinical outcome. In the ED and other ambulatory settings, the use of scribes decreases the time physicians spend on record keeping, allowing them to focus on patient diagnosis and performing medical procedures – maximizing their medical expertise and the joy of practicing medicine. Medical scribes are one of the most effective solutions for physicians who feel overwhelmed by clerical tasks.

### **1. As the health care delivery system seeks to foster a more resilient health care workforce, would medical scribe support of care teams contribute to that aim?**

- We welcome all avenues to increase efficiency and accuracy in the hospital while simultaneously decreasing the amount of time medical practitioners spend on administrative tasks not related to patient care. In my experience, scribe programs are very effective in reducing administrative burden on our clinicians. The downside of scribe programs is they are additional costs on the system. In addition, most scribes are in a gap year between college and medical school so there is a high degree of turnover in those positions. Virtual scribe programs and scribe programs embedded into the medical record technology using artificial intelligence should be explored as a potential solution.
- The core function of a physician's time should be spent treating patients, not bogged down in the minutiae of administrative tasks. Medical scribes are an excellent example of innovation that promotes proficiency in record-keeping while reducing factors that contribute to burnout.