

Thrivecast Episode 59: Strategies for Managing Your EPIC Inbox

Trish Kritek: [00:00:00] Welcome to another episode of the University of Washington's Thrivecast, the podcast designed to help school of medicine faculty thrive. I'm Trish Kritek, and today we're joined by Dr. Kimberly Ma. Dr. Ma is an associate professor in the Department of Obstetrics and Gynecology. She's the Associate Division Chief for Maternal Fetal Medicine, and important for our discussion, she's the Assistant Chief Clinical Information Officer for Ambulatory Care for UW Medicine, and that last title means that she understands EPIC much better than I do, and probably better than most of us do. So Kim, I'm really glad you're able to join us today. I want to talk with you about. How to make managing one's EPIC inbox and non daunting task.

Kimberly Ma: That's a pretty big topic to cover in one podcast for sure, but hopefully we'll give you a few strategies that people can at least chip away at. I don't expect that [00:01:00] I'll have a completely magic wand to solve everyone's issues, but I also want to acknowledge that everyone probably will have a different strategy to attacking their inbox.

Trish Kritek: I think what you just said, there's a couple things that I think are really important. Number one, we don't think this is a panacea to the fact that the EPIC inbox is a challenge, so this is meant to be some ideas for folks. And I also really appreciate what you said, like you might already have a solution.

That doesn't mean you shouldn't use your solution. That's great. This is meant to be some ideas for people as they move forward. And the last thing I'm going to say is there's a little part of me and Kim that's saying, wow, we're doing a podcast about using a computer and we can't really show it. So we're going to try to describe things as we go as needed.

So a bunch of caveats. But I still think this is a great topic and the reason I think it's a great topic is there are so many faculty who say. The EPIC inbox is killing me or it's, you know, impacting my wellbeing or it's taking up all this time and it's the time I want to be spending with the folks in my world that aren't at work and things like that.

So actually before I [00:02:00] even get into like how do we fix it or how do we work through this together, I'm going to ask you a personal question, Kim, and that is before you kind of got into this, did it cause you stress and distress in the same ways that I hear about from other folks?

Kimberly Ma: I mean, I will say I think sometimes there will be moments in my inbox that it still causes stress and dissatisfaction.

So it's not just once you reach a hurdle that it will all be in the clear, you know, it's kind of a constant thing that we take on almost every day. I'll say, first of all, I was actually in

a clinic that was still on Cerner until actually D1, so I was not on EPIC until 2021 when D1 started. And so I was a much newer user to the inbox as well.

I will say even in my experience as you know, part of the IT team, I still continue to learn tips and tricks. I just want to give a shout out to Brendan Lantz and the PLS team, who [00:03:00] will be a huge resource to many of you as well. If you want to kind of tackle on some more one-on-one customization or personalization, they are totally the team to help you out because they can use data.

From your inbox usage to tackle kind of specific areas and then also work with you to either customize or use quick actions, which I'll talk about that can help save you time. But I will say I continue to learn new things all the time. So again, it's not just one hurdle that gets you through. It's kind of a constant learning process.

Trish Kritek: I think you highlighted a resource that we want to make sure people are aware of. So when we send out this podcast with the email that goes with it, and when we post it on our website, we'll put a little bit of information about that team that can help one-on-one with folks individualizing their approach to their inbox.

So I appreciate the shout out and we'll make sure people have access to that resource. So now let's start with where do you start?

Kimberly Ma: Yeah, so I would say kind of one of the first things that. I again, did [00:04:00] not do until a little bit later. 'cause I think we were all probably like treading a little bit of water when we did D1.

We were just trying to get through the classes or trying to get through that clinic or your in-service week. You just want to try to power through with the things that you know. And, you don't know what you don't know until you've actually done customization or done personalization and that, that was kind of my, a little bit of an aha moment for me.

I was like, oh, I can change some of the things that I don't like about my inbox. So kind of one of the first steps that I took was you can rearrange your folders. So you'll see commonly that your folders are on your left side. You can prioritize the folders in the order that you want, whether it's like results or patient messages first, if you want like incomplete notes or open encounters kind of lower down 'cause you already know that those are open.

Anyways, that kind of helps me visually sort what is to me the most important within my inbox. And [00:05:00] so, uh, I'll probably. Comment on this frequently, but there will be a wrench that you can use within EPIC to kind of help customize some of these, some of these things.

Trish Kritek: Okay. So the first thing is you can reorder your folders and make 'em like intuitive to you.

Correct. Into the, yeah, that seems helpful. I, that resonates with me in terms of my Microsoft Outlook inbox. Correct.

Kimberly Ma: I would say kind of the other thing to know about yourself before even tackling your inbox is to kind of know your personality, like whether you're a doctor efficient, or a doctor procrastinator.

You know, some of these strategies by knowing your own personality, I think will also help kind of encounter your inbox that way too.

Trish Kritek: Can you give me a little bit more of an example on that? Like yeah, let's go with the doctor procrastinator, what's your strategy? What's your, what's your suggestion for that one?

Kimberly Ma: Yeah, so there are some tools that can help you if you like, let's say, and I mean this is also kind of setting up [00:06:00] those boundaries of like. Your admin time, your clinical time versus your research time or your off time too. So, you know, I think we live in a fast-paced world where we feel like we have to answer every message instantly, and that's not always such the case.

So let's say you have an admin day, you really want to focus on writing a research grant or doing some administrative tasks that you don't want to log into EPIC or stay logged in the whole time. So one of the strategies could be that there is the option within EPIC to send you an email reminder once a day it goes out at midnight.

Not that you have to check your email at midnight, but it can let you know that you have new messages available in your EPIC folder. And so that way you can kind of focus that time a little bit more. If you are the procrastinator, perhaps that would kind of be the opposite and give you a reminder like, Hey, I actually do have to log in to look at these messages, or, I have new messages that I should take care of at this point, versus some of the other people who like to have kind of better [00:07:00] boundaries within their EPIC slash other life.

Sometimes those email reminders might be helpful in that, that aspect as well.

Trish Kritek: I like that idea because most of us are in email all the time, and I appreciate someone's out there is listening and saying, I don't need another email. However, what this does is it allows you to not always be in EPIC and either to remind you to go there or to kind of alert you of things.

So I kind of like that because it doesn't mean that you're tethered to EPIC all the time.

Kimberly Ma: Yeah, exactly.

Trish Kritek: That's kind of a strategy for reminding yourself of things, and then you also gave us kind of a way to change the way things look on your screen. I think one of the things I hear is that people just have a lot of stuff that's coming at them, so do you have thoughts on that?

Kimberly Ma: Yeah. So I would say there are still kind of two other views that I found helpful as far as setting up your screen. And one is like, let's go to results. Results. There's a lot of labs that are coming back and it gives you a lot of information. [00:08:00] And so when you click on that. Result, it will preview it in another pane.

And so you can either do what the PLS team says, hot dog style, which is like side to side, or you can do hamburger style, which is like up and down. And so you can also kind of decide which style is best for you. I will say the other thing is, is that within that actual results notification, there's like the patient name, the date, the test, you can actually arrange those columns too.

So to me, I kind of have arranged them so that I have the name of the test, the patient. Those are kind of the most important to me, but it is hard 'cause EPIC has the possibilities of showing you all these other headers, which you may not actually need. And so I would try to edit that that way too.

Trish Kritek: So I like that because it's like controlling the information that you're given and I like it 'cause you're prioritizing what's meaningful to you.

Like I care about this patient and this lab [00:09:00] and I don't know about the hotdog versus hamburger, but I think what I hear in that is make it look the way it works for you and test out a couple different ways to do that so that it seems intuitive or logical for you. And, and most of what I hear you saying is empowering people to change how it looks.

So it. It works for you as best possible.

Kimberly Ma: Yeah, that's right. I'm not saying that the default EPIC view is for everyone, but you should do kind of what, what works best for you.

Trish Kritek: Are there other things that are kind of, not redesigning the screen, but kind of how you work with EPIC? Like that email reminder or kind of how you're doing it either in real time while you're dealing with stuff or kind of longitudinally that you think are tips or tricks that have helped you?

Kimberly Ma: Yeah, so I would say the biggest one is something called a quick action, which I probably did not utilize for the first two years while on EPIC. Don't tell anyone else on my IT team [00:10:00] that. But a quick action is a button that you can personalize either within for a result or a patient advice or a nurse call where it is kind of basically one step, one click.

So, for example, I have one for me personally, where there's a common genetic test that I always order in pregnancy and I have it set up where it, I let the patient know that it's a normal test result and it's, you know, this test is consistent with either a male fetus or female fetus. And. Then I can just send it to the patient, and so literally I don't have to go into the patient's chart.

The other thing is, is that you can do a lot of this work within the inbox without kind of clicking and opening the chart, and then kind of digging through more steps. I do that quick action for lab results. I also do that quick action for, um, patient advice. A lot of times my nurses will answer kind of the initial path of like, you know, common questions, uh, in pregnancy or what have you.

They want to [00:11:00] send it to me just to make sure that I don't have anything additional to add. And I will say 90% of the time I don't have anything additional to add. So I also added like a quick action button for any patient advice when the nurse forwards it to me, my automatic reply is that I agree with the advice given, so I just click it once and send it and I don't have to bother with it again.

So I think Quick Actions is a very underutilized tool within EPIC that can actually simplify some of these common things that we do every day.

Trish Kritek: I love that, and I suspect there are things that people do all the time that could be quick actions. I don't practice in the outpatient setting. I only practice on the inpatient setting, but I still have some ideas about some quick actions.

So I really like that. And what I also heard you say was, and you don't have to open up the patient's chart, you can just do it from that flow of your inbox. And I think that is. Gotta be a time saver. So a challenge to folks who are listening, think about two or three things that could be those quick actions and, and potentially try to put those into place.

And [00:12:00] I'm sure some people are like, how do I do that? And that's where there's, there's information for you that won't all come out in the podcast, but there's ways to, to learn how to do those quick actions.

Kimberly Ma: Definitely. I think that is probably one of my other biggest tips is to try to avoid going into the chart, going to the encounter.

You know, saving those steps by doing it within the in basket is, is a huge time saver. Similarly, I mean, I know we're focusing on the in basket, but if you have a long clinic panel and you want to preview your clinic patients, you can also do that similarly with your schedule view where you can just. Have one patient highlighted and then in the bottom or the side pain, you would have like a patient preview to be like, oh yeah, I remember this patient.

This is, you know, I saw her two weeks ago, blah, blah, blah. So that's another way that can save you some clips without having to go into the chart as well.

Trish Kritek: Again, I think these are great things and, and we are talking about the in basket, but I think it's actually valuable in all aspects, and it seems like this kind of one-on-one [00:13:00] personalization support might be really helpful to get to that point.

You alluded to this a second ago that you have nurses answering questions and then they're kind of sent onto you. And one thing I'm kind of curious about, maybe it goes beyond what we're going to talk about here, but I'll, I'll try. How about that relationship with the people who are sending you stuff into your in basket like.

Do you have tips on that? Because I think that is one of the challenges is what ends up in your in, in basket. So thoughts on that?

Kimberly Ma: Yeah, I, I mean, that is, I think, complicated in just the general world that we live in too, because there's a lot of ways that people can get notified these days, right? It could be an in basket, it could be an EPIC chat, could be.

You still use your pager or phone, that's, you know, that's another option. There's email and so I think it really helps to kind of strategize good chat etiquette or within your clinic or within your provider system as well. And so, you know, I think of your in basket is something as similar to email in that, you [00:14:00] know, it may not be responded today.

If it's responded tomorrow, that would be okay. Versus chat is something that needs a little bit more attention, but also acknowledging that, you know, for some people, they're getting a ping on their phone from Haiku every time somebody sends an EPIC chat. We can talk about that a little bit later too, as a different strategy.

But I think kind of setting up those time expectations are important to set up with your clinic staff and with other providers. Then I would say lastly, it's also kind of giving yourself a little bit of grace. So in general, the guideline for answering, you know, a patient message, we usually have a disclaimer when a patient sends it.

You know that this is not usually checked on non-business days after hours. Usually a three business day wait is the typical response time. And so again, you know, we are, we all have different personalities of whether we want to answer a message, done it right away, but trying to think about [00:15:00] consolidating that time together so that you can answer a batch of messages instead of doing it ping throughout the day.

For some people, that might be a better strategy.

Trish Kritek: I think there was a lot of great stuff in there, and one is to actually have an explicit conversation with the folks on your team about how you're going to use different

things. And I appreciated kind of stratifying the urgency and how you're going to communicate about things based on the urgency.

Some is setting expectations with patients, which is hard 'cause I'm a patient and I probably don't follow those expectations, but I get that and I really like let a bunch of them get there and then take. 30 minutes or an hour and kind of work through them all as opposed to in, out, in, out, in, out. And I think that's a strategy with email as well.

And I think it's a good strategy in both of these spaces. I know that some people find that uncomfortable 'cause it's like something sitting there. And so if that's you, then do your thing. But if you can get it so you have chunks of time, that, that makes a lot of sense to me. I'm going to go off on a tangent for a second because you said something tantalizing. Do you suggest that people [00:16:00] don't have their secure chat? Ping them or what were you going to suggest about that? Because I do think that people go crazy because they're being contacted in so many different ways, so much of the time.

Kimberly Ma: Yeah. I again, think you have to know yourself to know what works for you.

So I will say I have Haiku. For me, it is a great resource, especially when I'm on inpatient, when I do have to actually, you know, I might be in a room or between patients and then I can get onto the EPIC chat because I'm not at a workstation. I will say it is a catch 22. I don't check haiku when I'm on vacation, you know, or when I'm not on a clinical day.

I do try to avoid checking haiku. I know other people who have gone as far as like hiding it within their apps or even removing it when they're on vacation, because I can see for some people it could be a little bit over information or an overburden at the time. And so again, it's kind of. Knowing [00:17:00] what your personality is and what works best for you.

This is a strategy to help you. Um, and hopefully it's not a hindrance, but certainly again, to me, I personally like being on the workstation over haiku, but I use it to augment some of my time on innovation, especially.

Trish Kritek: I use it in the inpatient setting as well and I think it can be useful. And then sometimes it becomes a lot of ping, ping, ping.

So I also can have great empathy for people who are like, there's a lot of that. I'm going to go back to kind of outpatient in basket. I suspect there are a couple people who are listening whose in basket is like out of control. And so you're not going to fix that for them in this moment, but what's your advice for kind of how to start to deal with that?

Because all of us have those things in our life where it kind of gets a little bit out of control, and then it's like easier to avoid it than to kind of tackle it. And that could be

your EPIC inbox, but it could be a lot of other things in your life instead. So do you have any guidance [00:18:00] on that?

Kimberly Ma: Yeah, I mean, I agree.

Avoidance. Avoidant traits can be very common with the EPIC inbox. For me, it's like my child's closet. You know, anything in your life there's, there's probably something that needs to be tackled that we all avoid. So I would say, first of all, for some people it feels like a huge hole to climb out of, and I think.

Even just a little bit of time with personalization I think could get you a little bit out. I'm not saying that one hour of time will clear out your whole entire inbox, but I do think it has to start somewhere. And I also think it's not a great strategy to kind of continue this because it's, unfortunately, it's not going to go away at this point.

And so I do think kind of chipping away is a little bit. You can also see if there are. You know, resources within your clinic or your partners that could help with your inbox, although oftentimes I know those resources are not always there, but just, you know, [00:19:00] tackling a little bit at a time I would think is better than not at all.

Trish Kritek: I think, and again, maybe taking advantage of the folks that you talked about before in terms of coming with some strategies for moving forward. I, like I said, I think it can become one of those things that's just like so overwhelming. It's hard to, to kind of figure out even how to start to chip away at it, but appreciate that and I think it does have to be a long term strategy.

Okay. You've, you've shared a ton of pearls so far. Is there any one thing that when you started doing this that made the biggest difference for you? Or is it just the kind of combination of small steps of personalization that ended up making it more and more manageable?

Kimberly Ma: I think it was more of the, the small steps, but certainly everyone has kind of a different area that they need help with, whether that's like documentation versus inbox versus chart review.

And so again, not. That you have to tackle all three at once or anything like that. But I do think kind of doing it in a stepwise fashion or little by little makes, makes the most [00:20:00] sense, at least for me.

Trish Kritek: I think you've given lots of ideas for people to use. Without a doubt. They'll be like, I need to look at EPIC while I do this, and I hope they do.

I should have made a, a listener warning Open Epi EPIC as we're talking so they can visualize the things that you're talking about. I ask everyone that I talk to on this podcast

if they have one last pearl that they want to share with folks. So do you have one last Pearl that you think would be important for people to hear?

Kimberly Ma: I mean, I do think there are some other powers within the inbox that can be helpful. There can be like reminders sent to yourself if you want to like follow up on a lab later, if you can search your inbox as well, or search past messages as well. There are also keyboard shortcuts if. If you don't want to click or reducing your mouse, which can also save some time, but definitely, that's probably better.

All for the personalization session. The PLS team, I would say again, you know, I would really try to invest that short amount of time with the PLS team because I do think that even. [00:21:00] Small hour invested can make a huge difference. We actually did this within my department where we actually had PLS sessions offered to the entire faculty, residents and fellows.

And it actually saved a significant amount of time, almost like I think six to seven minutes per visit. The amount of PJ or pajama time decreased. You know, so there can be kind of long lasting results. And these were results even six months after they did a PLS session. So I know we are all very busy people and obviously you have to prioritize, you know, certain things over others or what have you, just trying to get through your week.

But I do think that even one PLS session can save you a significant amount of time in the long term.

Trish Kritek: I think that's a great advertisement for the PLS team, and I personally think everyone should invest in that. I, I hear you. It's an hour of your time, but it sounds like that hour of your time can be made up in time you save both in clinic, but then I, I appreciate you highlighting the fact that we know that people spend a fair [00:22:00] amount of time outside of the work hours or pajama time.

Dealing with the work that's related to their ambulatory care. So we do want to minimize that because it is not letting people do the other things that they'd like to be doing when they're not in the workday. And so I think there's a great endorsement and I'm super excited that you had a whole group do it, and you saw it across that as a durable effect.

So PLS team, I hope you get a lot of referrals after this podcast. Kim, I really appreciate all that you shared. I know it was a little weird to talk about the computer and how to interact with the computer on a podcast, but I think there's a lot there. Obviously, there's a lot there to say like, go talk to the PLS team.

But a lot of things that people can try right now to try to make their experience with their EPIC in basket better, and I think this is a great starting point. So thank you so much for joining us today.

Kimberly Ma: Of course. Thanks for having me.

Trish Kritek: Always a pleasure. And I'll say to everybody out there, if they want to listen to more episodes of Thrivecast, they can [00:23:00] find them at Apple Podcast, Spotify, or wherever you find your podcasts.

You can also find them on the UW School of Medicine faculty website at faculty.uwmedicine.org. Thanks for listening and have a great day.