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Original Research Article

Relationship between electronic health record documentation burden, job satisfaction and burnout among staff nurses at KG Hospital, Coimbatore

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ABSTRACT

Background: Electronic health record (EHR) systems have become an essential component of healthcare delivery, improving the quality and accessibility of patient information. However, increasing documentation requirements may contribute to documentation burden, influencing nurses' job satisfaction and burnout. This study aimed to assess the relationship between EHR documentation burden, job satisfaction, and burnout among staff nurses at KG Hospital, Coimbatore.

Methods: A hospital-based quantitative descriptive correlational study was conducted among 100 registered staff nurses selected using a non-probability convenience sampling technique. Data were collected using a self-structured demographic questionnaire, a Self-Structured EHR documentation burden scale, the McCloskey/Mueller satisfaction scale (MMSS), and the Maslach burnout inventory-human services survey (MBI-HSS). Data were analysed using Microsoft Excel. Descriptive statistics, Chi-square test, and Pearson's correlation coefficient were used for data analysis. A p value of <0.05 was considered statistically significant.

Results: The majority of the participants had a moderate level of EHR documentation burden (90%) and burnout (64%), whereas 69% reported a high level of job satisfaction. EHR documentation burden showed a very weak negative correlation with job satisfaction ($r=-0.076$) and a weak positive correlation with burnout ($r=0.252$). Job satisfaction demonstrated a moderate positive correlation with burnout ($r=0.451$). Significant associations were observed between area of working and EHR documentation burden, experience in using EHR and job satisfaction, and formal EHR documentation training and burnout ($p<0.05$).

Conclusions: The study found that EHR documentation burden was associated with job satisfaction and burnout among staff nurses. Optimizing EHR documentation processes, improving system usability, and providing continuous EHR training may help reduce documentation burden and support nurses' professional well-being.

Keywords: Burnout, Documentation burden, Electronic health record, Job satisfaction

INTRODUCTION

Electronic health records (EHRs) have become an integral component of modern healthcare systems, improving the accessibility, accuracy, and continuity of patient information while facilitating communication among healthcare professionals and supporting evidence-based clinical practice.[1] However, the increasing use of EHR systems has also led to a significant rise in documentation requirements, particularly among nurses, who spend a

substantial proportion of their working hours on electronic documentation rather than direct patient care.[2]

Documentation burden refers to the physical, mental, and time-related demands associated with recording patient information in electronic health record systems. Complex interfaces, repetitive documentation, excessive data entry, and system usability issues can increase nurses' workload and reduce workflow efficiency.[3] A study by Melnick et al reported that increased EHR usability was associated with lower occupational stress and reduced burnout among healthcare professionals, emphasizing the importance of user-friendly documentation systems.[4]

Job satisfaction is a crucial determinant of nurses' professional well-being, staff retention, and quality of patient care. Excessive documentation demands may reduce job satisfaction by increasing administrative workload, limiting patient interaction, and contributing to work-related stress.[5] Research by Kutney-Lee et al demonstrated that supportive work environments and manageable workloads were positively associated with higher nurse job satisfaction and improved patient outcomes.[6]

Burnout is a psychological syndrome characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment resulting from chronic occupational stress. Nurses experiencing heavy EHR documentation workloads may be at greater risk of burnout because of increased administrative responsibilities and reduced time for meaningful patient care.[7] Studies have consistently shown that documentation burden contributes to emotional exhaustion and negatively affects nurses' well-being and quality of care.[8]

Understanding the relationship between EHR documentation burden, job satisfaction, and burnout is essential for healthcare organizations seeking to improve nursing work environments and optimize EHR systems. Identifying these relationships can help administrators implement strategies to streamline documentation processes, improve system usability, reduce administrative burden, and promote nurses' well-being and quality patient care.

Therefore, the present study was undertaken to assess the relationship between electronic health record (EHR) documentation burden, job satisfaction, and burnout among staff nurses at KG Hospital, Coimbatore.

METHODS

Study design and setting

A hospital-based quantitative descriptive correlational study was conducted to assess the relationship between electronic health record (EHR) documentation burden, job satisfaction, and burnout among staff nurses at KG Hospital, Coimbatore, Tamil Nadu, India, during June 2026.

Study population and sample

The study population consisted of registered staff nurses working at KG Hospital. A total of 100 eligible staff nurses were recruited using a non-probability convenience sampling technique.

Inclusion criteria

Registered staff nurses employed at KG Hospital, Coimbatore. Staff nurses who had been using the electronic health record (EHR) system in their routine clinical practice for at least six months. Staff nurses working in inpatient and specialty clinical units during the study period. Staff nurses who were willing to participate and provided written informed consent.

Exclusion criteria

Student nurses, nursing interns, and trainee nurses. Staff nurses on long-term leave or absent during the data collection period. Staff nurses working exclusively in administrative positions without routine EHR documentation responsibilities. Staff nurses who declined to participate or submitted incomplete questionnaires.

Data collection

Data were collected using a structured questionnaire consisting of four sections: Section A: demographic characteristics. Section B: self-structured EHR documentation burden scale (25 items). Total scores were interpreted as low (25-58), moderate (59-91), and high (92-125) documentation burden. The internal consistency of the scale was established using Cronbach's alpha (α=0.86). Section C: McCloskey/Mueller satisfaction scale (MMSS). Total scores were interpreted as low (31-72), moderate (73-114), and high (115-155) job satisfaction. The reported reliability of the scale was Cronbach's alpha =0.89. Section D: Maslach burnout inventory-human services survey (MBI-HSS). Burnout was interpreted as low ($\leq$16), moderate (17-26), and high ($\geq$27). The reported reliability coefficients were emotional exhaustion (α=0.90), depersonalization (α=0.79), and personal accomplishment (α=0.71).

Data collection procedure

Administrative permission was obtained from the hospital authorities before data collection. The purpose of the study was explained to all eligible participants, and written informed consent was obtained. The questionnaires were distributed to the staff nurses, and completed questionnaires were collected on the same day. Confidentiality and anonymity of the participants were maintained throughout the study.

Statistical analysis

The collected data were entered into Microsoft Excel and analysed using descriptive and inferential statistics. Frequency, percentage, mean, and standard deviation were used to summarize the demographic characteristics and study variables. The Chi-square test was used to determine the association between selected demographic variables and study variables. Pearson's correlation coefficient was used to assess the relationship between electronic health record (EHR) documentation burden, job satisfaction, and burnout. A p value of <0.05 was considered statistically significant.

Ethical considerations

Administrative permission was obtained from the hospital authorities before conducting the study. Written informed consent was obtained from all participants prior to data collection. Participation was voluntary, and confidentiality, anonymity, and privacy of the participants were strictly maintained throughout the study.

RESULTS

Table 1 summarizes the demographic characteristics of the study participants. Among the 100 staff nurses, the highest proportion (30%) were aged 21-30 years, 81% were female, and 40% held a BSc. Nursing qualification. About 30% had more than 10 years of clinical experience. Most participants worked in the medical ward (24%), 42% had more than 3 years of experience using electronic health records (EHR), and 89% had received formal EHR documentation training.

Table 2 presents the distribution of electronic health record (EHR) documentation burden among the study participants. The majority of the staff nurses (90%) had a moderate level of EHR documentation burden, whereas 6% had a low level and 4% had a high level of documentation burden.

Table 1: Demographic variables of the participants (n=100).

Variables	Category	Frequency	Percentage
Age (years)	21-30	30	30
	31-40	29	29
	41-50	14	14
	Above 50	27	27
Gender	Male	19	19
	Female	81	81
Educational qualification	GNM	39	39
	BSc. Nursing	40	40
	Post Basic BSc. Nursing	17	17
	M.Sc. Nursing	4	4
Clinical experience	<1 year	15	15
	1-5 years	29	29
	6-10 years	26	26
	>10 years	30	30
Area of working	Medical ward	24	24
	Surgical ward	19	19
	ICU	13	13
	Emergency department	11	11
	Operation theatre	11	11
	OPD	22	22
Experience in using EHR	<1 year	18	18
	1-3 years	40	40
	>3 years	42	42
Formal EHR training	Yes	89	89
	No	11	11

Table 3 presents the distribution of job satisfaction among the study participants. The majority of the staff nurses (69%) had a high level of job satisfaction, whereas 17% had a moderate level and 14% had a low level of job satisfaction.

Table 4 presents the distribution of burnout among the study participants. The majority of the staff nurses (64%)

had a moderate level of burnout, whereas 20% had a high level and 16% had a low level of burnout.

Table 2: Distribution of level of EHR documentation burden (n=100).

Level	Score	Frequency	Percentage
Low	25-58	6	6
Moderate	59-91	90	90
High	92-125	4	4

Table 3: Distribution of level of job satisfaction (n=100).

Level	Score	Frequency	Percentage
Low	31-72	14	14
Moderate	73-114	17	17
High	115-155	69	69

Table 4: Distribution of level of burnout (n=100).

Level	Score	Frequency	Percentage
Low	≤16	16	16
Moderate	17-26	64	64
High	≥27	20	20

Table 5: Descriptive statistics of study variables.

Variable	Mean±SD
EHR documentation burden	75.43±15.21
Job Satisfaction	117.45±27.74
Burnout	22.44±5.15

Table 5 presents the descriptive statistics of the study variables. The mean score for EHR documentation burden was 75.43±15.21, the mean job satisfaction score was 117.45±27.74, and the mean burnout score was 22.44±5.15 among the study participants.

Table 6: Correlation between EHR documentation burden, job satisfaction and burnout.

Variables	Pearson's Correlation (r)	Description
EHR documentation burden versus job satisfaction	-0.076	Very weak negative correlation
EHR documentation burden versus burnout	0.252	Weak positive correlation
Job satisfaction versus burnout	0.451	Moderate positive correlation

Table 6 presents the correlation between Electronic Health Record (EHR) documentation burden, job satisfaction, and burnout among the study participants. Pearson's correlation analysis revealed a very weak negative correlation between EHR documentation burden and job satisfaction (r=-0.076). A weak positive correlation was observed between EHR documentation burden and burnout (r=0.252). In addition, job satisfaction showed a moderate positive correlation with burnout (r=0.451).

Table 7: Association between selected demographic variables and EHR documentation burden (n=100).

Demographic variable	χ^2 value	df	P value	Interpretation
Area of working	6.62	1	p<0.05	Statistically significant association

Table 8: Association between selected demographic variables and job satisfaction (n=100).

Demographic variable	χ^2 value	df	P value	Interpretation
Experience in using electronic health records (EHR)	9.40	1	p<0.05	Statistically significant association

Table 9: Association between selected demographic variables and burnout (n=100).

Demographic variable	χ^2 value	df	P value	Interpretation
Formal training on electronic health record (EHR) Documentation	7.41	1	p<0.05	Statistically significant association

Table 7 presents the association between selected demographic variables and electronic health record (EHR) documentation burden. A statistically significant association was observed between the area of working and the level of EHR documentation burden (χ^2=6.62, df=1, p<0.05).

Table 8 presents the association between selected demographic variables and job satisfaction among the study participants. A statistically significant association was observed between experience in using electronic health records (EHR) and the level of job satisfaction (χ^2=9.40, df = 1, p<0.05).

Table 9 presents the association between selected demographic variables and burnout among the study participants. A statistically significant association was observed between formal training on electronic health

record (EHR) documentation and the level of burnout (χ^2=7.41, df=1, p<0.05).

DISCUSSION

Demographic characteristics

The present study revealed that the majority of the participants were aged 21-30 years (30%), female (81%), held a bachelor of science in nursing qualification (40%), and had more than 10 years of clinical experience (30%). Most participants were working in the medical ward (24%), had more than three years of experience using electronic health records (42%), and had received formal EHR documentation training (89%). These findings indicate that the participants had adequate professional exposure and familiarity with EHR systems. Similar demographic characteristics have been reported among nurses using electronic health record systems, where prior EHR experience and formal training improved confidence and competence in electronic documentation (Table 1).[9]

EHR documentation burden

The present study found that 90% of staff nurses experienced a moderate level of electronic health record documentation burden. This indicates that although EHR documentation requires considerable time and effort, most nurses were able to manage the documentation workload effectively. Moderate documentation burden may be attributed to institutional support, regular use of EHR systems, and previous training. Similar findings have shown that nurses generally experience a moderate level of documentation burden and that reducing unnecessary documentation significantly improves workflow efficiency and professional satisfaction (Table 2).[10,11]

Job satisfaction

The present study demonstrated that 69% of staff nurses had a high level of job satisfaction. Despite moderate documentation burden, nurses maintained positive job satisfaction, possibly because of supportive leadership, teamwork, professional autonomy, and familiarity with EHR systems. Similar findings have reported that supportive work environments, adequate organizational resources, and positive organizational culture significantly improve nurses' job satisfaction (Table 3).[12,13]

Burnout

The findings of the present study revealed that 64% of staff nurses experienced a moderate level of burnout, whereas 20% had a high level of burnout. Continuous documentation demands, workload, and occupational stress may contribute to burnout among nurses. Similar findings have demonstrated that increased workload and administrative responsibilities are important contributors to burnout and emotional exhaustion among nursing professionals (Table 4).[14,15]

Descriptive statistics

The mean EHR documentation burden score was 75.43±15.21, the mean job satisfaction score was 117.45±27.74, and the mean burnout score was 22.44±5.15. These findings indicate that although nurses experienced moderate documentation burden and burnout, they maintained relatively high job satisfaction. Similar findings have emphasized that documentation burden is influenced by EHR usability, workflow design, and organizational support (Table 5).[16]

Correlation between EHR documentation burden, job satisfaction and burnout

The present study revealed a very weak negative correlation between EHR documentation burden and job satisfaction (r=–0.076), a weak positive correlation between EHR documentation burden and burnout (r=0.252), and a moderate positive correlation between job satisfaction and burnout (r=0.451). These findings indicate that documentation burden has a greater relationship with burnout than with job satisfaction. Similar findings have reported that increased EHR-related workload is associated with higher levels of professional burnout and reduced occupational well-being (Table 6).[9,17]

Association between demographic variables and EHR documentation burden

The present study demonstrated a statistically significant association between the area of working and EHR documentation burden (χ^2=6.62, p<0.05). Documentation requirements vary across clinical departments because of differences in patient acuity, workload, and complexity of care. Similar findings have reported considerable variation in documentation workload across different hospital units (Table 7).[11]

Association between demographic variables and job satisfaction

The present study found a statistically significant association between experience in using Electronic Health Records and job satisfaction (χ^2=9.40, p<0.05). Nurses with greater EHR experience are more confident in documentation practices and experience fewer workflow interruptions, leading to improved job satisfaction. Similar findings have shown that professional competence, EHR proficiency, and organizational support are important predictors of nurses' job satisfaction (Table 8).[12,13]

Association between demographic variables and burnout

The present study demonstrated a statistically significant association between formal EHR documentation training and burnout (χ^2=7.41, p<0.05). Adequate EHR training enables nurses to perform documentation more efficiently, thereby reducing frustration and occupational stress. Similar findings have shown that improved EHR usability,

structured user training, and workflow optimization reduce documentation-related stress and clinician burnout (Table 9).[17,18]

CONCLUSION

The study found that EHR documentation burden was associated with job satisfaction and burnout among staff nurses. Optimizing EHR documentation processes, improving system usability, and providing continuous EHR training may help reduce documentation burden and support nurses' professional well-being.

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