Time to Care

How AI-powered tools are transforming healthcare for clinicians and patients







Foreword Dr. Katie Baker

At Tandem Health, we believe the foundation of great care is time – time to listen, to think, to connect. Yet across healthcare, that time is increasingly under pressure. Admin demands are growing, and both clinicians and patients are feeling the effects.

This report is about more than paperwork. It's about what happens when admin starts to take precedence over care, and what can happen when we begin to reverse that trend.

What we found through this research is not just frustration, but hope. Clinicians want to do more of what they trained for. Patients want to be heard and understood. And both groups are open to solutions that help make that possible.

Our technology has been built with that goal in mind. By capturing notes in real time, our ambient AI scribe reduces the burden on clinicians and brings their focus back to the patient in front of them.

This report reflects a system that is ready to evolve. And at Tandem, we're ready to support that shift with tools designed to restore time, trust, and the human connection at the heart of care.



Director UK & Ireland Tandem Health

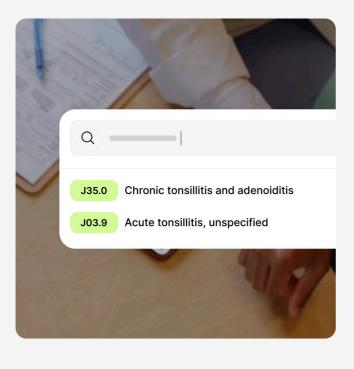


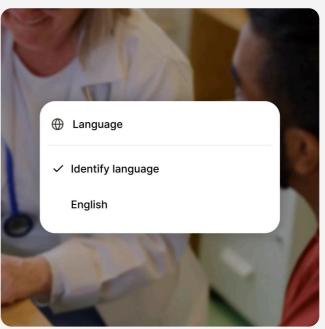
Tandem Health is a healthtech company committed to restoring the human connection at the heart of care. Our ambient Al scribe works quietly in the background during consultations, capturing, structuring, and completing medical documentation in real time.

Designed by clinicians for clinicians, Tandem reduces the administrative load without compromising on accuracy or control. It frees healthcare professionals to focus fully on their patients — not their paperwork.

Built for seamless integration into existing clinical systems, Tandem supports a range of care settings, from general practice to outpatient services. Every note is compliant, secure, and clinicianled, ensuring that efficiency never comes at the cost of safety or trust.

Tandem is where time-saving innovation meets the realities of frontline care — designed to give time back to the people who need it most.







Tandem Health commissioned this report to examine how administrative overload is affecting clinicians and patients, and to understand how both groups perceive the role of AI in addressing those challenges.

More than 1,200 people took part, including NHS and private healthcare professionals, consultants, GPs, and adult patients across the UK.

The findings show a healthcare system strained by documentation demands, but also a strong readiness for intelligent tools that restore time and improve care.

64%	of clinicians say admin negatively impacts the quality of patient interaction
49%	say it reduces their ability to focus during consultations
75%	say documentation is too time-consuming
52%	worry about accuracy when working under time pressure
Only 8	% currently use AI tools, but 88% believe they'll become standard within five years
Confid	ence is even higher among private sector clinicians
	ence is even higher among private sector clinicians
Patien	t Sentiment

This report explores the roots of documentation fatigue, the conditions for successful Al adoption, and the growing alignment between clinician and patient expectations.

Technology alone won't solve the crisis in clinical time, but designed well, it can give care back its human centre.

The patient perspective How admin disrupts care



The expectation is clear: clinicians should be clinicians, not clerks

Patients are not passive observers of systemic strain. They're feeling it and speaking up about it. In our survey, 99% of patients agreed that it is important for doctors to spend less time on administrative tasks and more time delivering direct, hands-on care. Of those, 42% said it is extremely important. Patients want to feel seen, heard, and prioritised – not sidelined by documentation.

But that's not what many are experiencing.

The disappearing doctor

For too many patients, the human connection they seek during medical appointments is being replaced by the mechanical demands of data entry. More than half (56%) of respondents said they have often or sometimes felt that their doctor was too focused on admin to properly engage with them during appointments. For 17%, their clinician spent most of the consultation focused on a screen. When those who said "almost the entire time" are included, the figure rises to 23%.

In these moments, patients are not just waiting while their doctor types. They are experiencing what feels like detachment in the face of vulnerability. For individuals navigating complex, chronic, or emotionally difficult health challenges, presence matters. In its absence, their confidence in the care they receive can be eroded.

When documentation fails

The burden of admin doesn't end when the appointment does. Its impact carries forward into the medical record – and in some cases, into the quality of treatment itself. According to our findings, 11% of patients have found factual errors in their medical records. More worryingly, 14% said these errors had a direct impact on the care they received, whether through inappropriate treatments, referrals, or advice. Taken together, that's one in four patients who have experienced the consequences of inaccurate documentation first-hand.

Percentage of patients valuing hands-on care



These aren't just system failures. They are deeply personal breaches of trust. Patients who discover mistakes in their records often feel they must compensate for the system's shortcomings – printing summaries, repeating information, double-checking details they had every right to assume were correct.

Continuity requires confidence

Patients expect their story to follow them through the healthcare system, from the GP's office to the specialist's clinic, from the emergency department to post-discharge care. But many find that their records don't keep up. When patients encounter missing or inconsistent information, they are left with the burden of filling in the gaps. This not only leads to frustration and lost time – it fosters a sense that the system is not listening.

It would be easy to interpret these findings as a demand for greater speed or administrative efficiency. But the truth is more fundamental. Patients are not asking for quicker care; they are asking for present care. They want attention during appointments. They want confidence that their experiences and symptoms are being captured accurately. And they want reassurance that decisions are being made based on complete, correct, and up-to-date information.

This is not a resistance to digital healthcare. It is a call for thoughtful, human-centred systems – tools that enhance rather than erode the clinician-patient relationship. Patients do not expect technology to disappear. But they expect it to serve care, not compete with it.

"It correlates all the information and history that the patient is reporting. I've found that Tandem takes the effort out of writing the notes fully, so I can concentrate more on the patient in the room rather than typing during the consultation."

Janine Farmer Advanced Nurse Practitioner The Hill Surgery

The clinician experience Burdened, burnt out, and ready for change



A profession under pressure

Clinicians across the UK are contending with an unsustainable burden of administrative work, and the toll is visible in every aspect of their practice. In our survey of patient-facing healthcare professionals, 64% said that documentation negatively impacts the quality of their patient interactions. Nearly half (49%) went further, stating that it directly reduces their ability to focus during consultations. This isn't a secondary task. It's the central disruption to how care is delivered.

Many described toggling constantly between the person in front of them and the screen beside them, caught between clinical empathy and clerical obligation. Some admitted they can no longer do justice to either.

One respondent put it plainly:

"Most of my working day now is spent typing, not treating."

Strain, stress, and risk

The pressure is not only practical, but also emotional and clinical. According to the data, 75% of clinicians believe documentation is simply too time-consuming. For 61%, it directly undermines their ability to focus on patients. Over half (54%) report increased stress levels linked to documentation demands, and half (50%) say these pressures elevate the risk of clinical error. Nearly a third (32%) link admin overload to burnout – a stark indicator of the long-term cost of these demands.

Behind the numbers lies a sense of mounting fatigue. Clinicians report guilt over rushed appointments, worry about missing important details, and frustration that their professional expertise is being redirected toward clerical labour. Many stay late to catch up on notes, while others admit to completing records hours after consultations, relying on memory rather than immediacy.

Clinicians who thinks documentation is simply too time-consuming

"Poor working memory when trying to summarise masses of information... led to burnout. I had to keep thousands of lists so I don't forget anything. Tandem significantly improved both my record keeping and overall wellbeing."

Dr Melania Ishak NHS Obstetrics & Gynecology Registrar



Documentation and its consequences

The cost of documentation pressure is not only emotional; it also affects clinical safety. More than half of clinicians (52%) said they worry that documentation completed under time pressure is incomplete or flawed. An additional 27% said that record inaccuracy is a serious daily challenge in their practice. These aren't just admin issues. They directly impact diagnoses, care coordination, and patient outcomes.

Clinicians report a growing sense of frustration and fatigue. While the complexity of patient care is not in question, it is the administrative burden surrounding it that many describe as unsustainable. Their comments reflect a profession increasingly concerned that time spent recording may come at the cost of time spent caring.

"By the time I finish my notes, it's hours later. I can't guarantee they reflect everything that was said,"

said a survey respondent.

Ready for better tools, not more complexity

Despite all of this, clinicians are not rejecting innovation. They are rejecting solutions that fail to serve the realities of clinical life. Several respondents recounted previous experiences with new platforms that introduced more steps, more friction, and less time for care. They don't want complexity disguised as progress.

52%

Clinicians who say inaccurate records are a serious daily challenge due to time pressure

27%

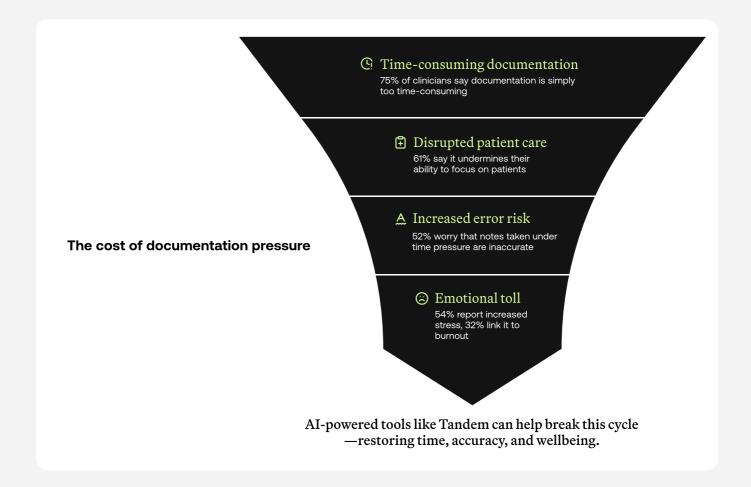
Clinicians who worry documentation done under time pressure is incomplete or flawed



When asked what they do want, clinicians were clear. They are looking for documentation tools that operate in real time, integrate seamlessly into existing systems, require minimal editing, and allow them to retain final control over the record. One clinician noted:

"AI powered documentation can improve efficiency and reduce administrative burden."

The message is consistent and compelling: the need is urgent, not for more technology, but for the right technology. Better-designed systems that restore time, support accuracy, and re-establish the connection between clinician and patient. Clinicians are not resisting change. They are asking for it. But they will only adopt solutions that work the way they do: with precision, pragmatism, and purpose.



Clinician openness to AI Features, expectations, and future use



Awareness is growing, but implementation is cautious

Clinicians are not just aware of ambient Al tools – they are increasingly open to adopting them. According to our survey, nearly half (49%) of respondents said they were aware of Alpowered clinical documentation solutions, yet only 8% currently use one in their daily practice. This indicates a profession that is cautiously optimistic but still waiting for tools that meet their practical needs.

Importantly, most clinicians believe these tools have real potential. When asked how beneficial they thought AI documentation would be for their own work, 85% saw at least some value. One in five described the potential benefits as "extremely" significant, while a further third said they would be "very" beneficial. Only a small minority (15%) felt they would be of little or no use. These figures reflect a profession with an open mind, but one that is focused on evidence and outcomes.

In the words of one survey respondent:

"AI powered documentation is a very essential tool in healthcare."

What clinicians value most

Clinicians were also asked which benefits they would value most from an Al-powered documentation tool. Time savings ranked highest, cited by 66% of respondents. Nearly half (47%) pointed to faster report completion, while 45% said greater accuracy in notes would make a meaningful difference. A further 44% hoped that such tools could help reduce the stress associated with daily admin. Importantly, 38% saw the potential to improve patient interactions by freeing up attention during consultations.

These findings suggest that clinicians aren't simply chasing efficiency; they are looking for tools that support their focus, wellbeing, and connection with patients.

Percentage of clinicians seeing potential to improve patient interactions



"I am more satisfied with the quality of my consultations, and patients also seem to appreciate that extra attention and engagement from me. I am able to go home on time and Tandem has helped improve my work-life balance."

Nadeem Ahmed GP at Melrose Surgery

What would encourage adoption

While enthusiasm exists, adoption will depend on meeting specific practical criteria. When asked what would encourage them to adopt an Alpowered documentation tool, clinicians offered clear preferences. The most cited incentive was positive feedback from colleagues, chosen by 41% of respondents. Demonstrated time savings followed closely at 40%, underscoring the importance of proven performance in real clinical environments.

Other key motivators included strong data security and compliance (39%) and seamless integration with existing systems (31%). Just 18% said a free trial or pilot programme would be persuasive, while only 9% said a clear return on investment was a top factor. This suggests clinicians care less about financial framing and more about practical trust and peer validation.

The outlook shows that clinicians are open to AI, provided it delivers. They want tools that help them reclaim time, improve accuracy, and reduce admin, but adoption will only happen if solutions earn their trust and prove their value in the real world. In the next chapter, we explore whether patients share this openness, and what they expect from AI when it enters the consultation room.

Percentage of clinicians valuing data security and compliance



Patient attitudes to AI Support, expectations, and boundaries



Awareness is limited, but support is strong

Before encountering this survey, most patients had little exposure to Al-powered clinical documentation. Just over half (53%) said they were not aware that such technology could be used to help doctors capture notes during consultations. Only 22% said they already supported its use, while 25% were aware but unsure.

Despite this limited awareness, patient support for Al grows quickly when the benefits are explained. When asked if they would support Al if it reduced the time doctors spend on paperwork, an overwhelming 77% said yes – including 30% who "strongly support" the idea. Fewer than one in five (18%) expressed concerns, and just 5% said they would not support it at all. It's evident that once the purpose of Al is understood, patient openness increases significantly.

Optimism with defined expectations

Patients are not just supportive in principle, but they're also optimistic about what AI could enable. A majority (70%) agreed that AI-powered tools could help doctors focus more on their patients, with 28% strongly agreeing. Similarly, over half (51%) agreed that AI could reduce mistakes in medical records, and 67% believed it could shorten appointment times and reduce delays.

The top benefits, when presented in a multi-choice format, aligned with these hopes:

69%	said AI could give doctors more time to focus on patients
52%	pointed to faster appointments and reduced waiting times
35%	believed it would reduce doctor stress and improve care
32%	cited fewer medical record mistakes

This is not abstract approval. It's a set of clearly articulated priorities: fewer delays, fewer errors, and more meaningful time with clinicians.

Reassurance is key

While most patients are supportive, that support comes with boundaries. Over half (51%) said they worry about Al making mistakes, and 37% expressed concern about privacy and data security. These are not fringe concerns, but rather, essential conditions for trust.

Comfort with AI increases significantly when reassurance is offered. Just under one third (32%) said they would be completely comfortable if their doctor used AI during a consultation to improve accuracy and efficiency. But a further 53% said they would support it if there were guarantees around security. Only 14% said they would be uncomfortable regardless.

The same pattern holds for productivity use cases. When asked if they'd be comfortable with Al helping doctors see more patients, 34% said yes outright, and another 52% said yes with the same caveat around data security. Again, only 14% said they would be uncomfortable.

The outlook for AI in healthcare Confidence, preference, and market readiness



Al is coming, and most clinicians expect it

Across the UK's clinical workforce, the consensus is clear: Al-powered transcription is not a passing trend, but a future standard. When asked whether they believe such tools will become a routine part of medical practice within the next five years, nearly 88% of clinicians said yes or possibly, and 35% said they expect it to happen "definitely". Only a small minority (10%) thought it was unlikely.

This high level of confidence indicates not only growing familiarity with Al documentation tools, but a belief that adoption is inevitable. Practitioners are not waiting for permission; they are anticipating implementation.

"Tandem saves me 45–60 minutes per session – a 35–40% gain in efficiency. I'm more engaged with patients and go home on time. It integrates perfectly and is lightning-fast."

Nadeem Ahmed, GP at Melrose Surgery
A stronger appetite in the private sector
But within this overall positivity lies a more strategic insight. While the NHS primary care workforce is cautiously optimistic – with 39% saying Al will "definitely" become standard, and 50% saying "possibly" – private practitioners show even greater confidence. In this group, 45% expect it to be a certainty, and 51% believe it is at least possible.

Notably, none of the private sector respondents felt uncertain, and none said Al adoption was unlikely.

This contrast is telling. While NHS teams remain constrained by systemic challenges and procurement barriers, private sector professionals are thinking differently. They are not simply open to innovation. In fact, they are ready for it.

Patients aren't demanding AI, but they're ready for it

Patients may be slower to anticipate the rise of Al, but they are no less open to its use. When asked whether they would prefer to visit a doctor who uses Al-powered tools to improve accuracy and efficiency, more than half (54%) said they have no preference either way.

However, nearly one in four (23%) actively said they would choose a doctor who uses AI – a figure that matches those who would prefer one who does not (23%).

This near-even split shows that while most patients won't select care based on Al alone, it is increasingly a differentiator. As tools become more widespread, and their benefits more visible, this balance may shift. What emerges is a compelling opportunity for providers who adopt Al to position themselves as modern, efficient, and forward-thinking to a growing base of tech-aware patients.

Aligning expectations for adoption

Together, these views provide a strong indication of readiness, especially in the private sector. Clinicians expect AI to become standard, and many patients are either supportive or indifferent to its presence in the consultation room. What matters now is matching this enthusiasm with real-world tools that deliver on expectations: accuracy, transparency, and time savings.

For Al to become mainstream, it must integrate smoothly into clinical routines, prove its value quickly, and address legitimate concerns around privacy and oversight. But the foundational trust and the permission to adopt is already in place. The market is not resistant. It is simply waiting for the right tools.



Closing words

The findings throughout this report point to a simple truth: the administrative burden in healthcare is no longer a background issue. It is an active disruptor of care, connection, and clinical clarity.

Patients feel it when their stories are missed. Clinicians feel it when their time and attention are diverted. And both sides – perhaps for the first time – are looking to technology not as a barrier, but as a bridge.

Ambient AI scribe tools like Tandem don't just reduce documentation time. They restore it — giving clinicians the chance to refocus on care and giving patients the presence they value most. The solution is not to abandon innovation, but to humanise it. That's what the data demands, and what the moment invites.

This is not a theoretical future. It is a practical and pressing opportunity, especially for the private sector. Practitioners in private settings are not only more confident that AI will become standard, but they are also more empowered to act on that belief. Patients are receptive, clinicians are motivated, and the need for change is urgent.

Healthcare is built on trust. And trust is built on time, attention, and accuracy — the very things ambient AI exists to protect.

The time to care is now. The tools are ready, and so is the profession.