



Do HIM Professionals get HI?

H. Dominic Covvey with Kelly Abrams

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Why is Dominic Commenting on Health Information Management?

Over 5 years ago I was called by a Health Records department manager at a Canadian hospital. The individual had recently completed a Masters degree in

Health Information Management (HIM) at a university in the States, but was totally frustrated with being unable to get involved in the institution's Information Services (IS) function. This compounded the frustration associated with being relegated to what the person perceived was a "clerical management" position. We talked at length, as it was clear that the person had key competencies that many IS folks lack, but, because of the Health Information Management designation, was not perceived as being of the same ilk or of value beyond managing the Records department.

Years earlier I had met another HIM professional in Canada who had, in fact, been able to break through the silicon ceiling and became the CIO of a large healthcare organization in Western Canada.

Well, I guess one person "getting in" and one not could be explained by relative competencies, for example, political sophistication. But I think, more likely, it was a matter of the employers' or IS department directors' perceptions and the HIM professional's will. But who knows.

I am sure most of us involved in some aspect of Health Informatics recognize that we have a genuine human resources shortage or "capacity" crisis. We need thousands of people to plan, select, deploy and manage the eHealth infrastructure in health institutions, regional agencies, provincial eHealth offices, and private industry. We also need teachers to mint these folks. We can't forget also that even the people already in IS positions need additional training as many have not had the opportunity to study Health Informatics in any of its depth and breadth. Yet, all the educational

programs in Canada don't yet produce, by my count, even 100 Health Informatics professionals a year.

This situation is changing for the better, with many new programs, particularly in our community colleges, in the process of opening their doors now and over the next few years. However, it will take 2-plus years to graduate the issue of these programs, and that just doesn't seem to be fast enough. What's more, the numbers will still be small as the programs are not well known and the field of Health Informatics is about as well known in high schools as is Thermodynamics.

I want to point out that, to me, the word "capacity" means more than warm bodies. It should mean properly trained professionals who want to make a career in the area and who will stay with our organizations at all levels. Consultants are a great short-term fix, but they do not represent the medium or long-term solutions. By "properly trained professionals", I mean people who have developed demonstrable competencies in the broad spectrum needed to make eHealth (which I always think of meaning "enabled-health" and connoting much more than the electronic aspect) a reality, and they aren't just technical, e.g. hardware, software, networks, etc. competencies. Rather the professional must have adequate knowledge, skills and experience, as well as positive attitudes, in topics like the nature and structure of health information and the health system, health system processes and roles, health data and data standards, information retrieval, the psycho-social aspects of systems, re-engineering and management of change, telehealth, and many other areas. If you want to see the detail on the essential competencies, access "Pointing the Way: Competencies and Curricula in Health Informatics" (1) and read the section on Applied Health Informatics.

So, beyond competent individuals, we want people who will stay within our organizations, understand their objectives and culture, participate in their processes, relate with their people, and become a part of the fabric that makes them vital entities.

Why is Kelly Abrams Commenting Here?

I have been aware of the fact that HIM Programs teach approximately 70% to 80% of the same content as HI programs for a long while. HIM programs incorporate specific content focused on information management such as health record science, data acquisition, standards, data quality, legislation including healthcare professional acts, privacy, consent, adult guardianship, etc.

In the past, the focus in health organizations has been on procuring, implementing and managing the technology. Recently, information management (IM) and knowledge management have come into vogue, with the realization that the technology is important, but what it's all about is the information, its appropriateness and quality, its management, its delivery and its use. This is what we teach HIM professionals!

I can also note that the view of HIM Professionals as "clerical" is changing. HRSDC has recently moved HIM Professionals out of the clerical national occupation code (NOC) and into a professional NOC. The Canadian Health Information Management Association (CHIMA) is continuing to lobby for a separate HIM category. We are looking to achieve this by 2011. Employers are already moving towards hiring HIM Professionals in higher level positions. Interestingly, HIM representatives

are already represented on most if not all national and provincial councils and committees that are addressing aspects of eHealth, such as data standards.

Beyond this we are finding that more HIM Professionals are working outside the acute care setting, for example in information and communications technology companies, privacy offices, public health surveillance, health ministries, and the like.

Given all this, it seems obvious that HIM professionals have a value to the health environment far beyond the limits of the health records area, even considering our classic competencies. To potentiate even greater value, we have also recognized that our training programs must be expanded to address other required competencies, particularly technical competencies and the management of this technology. So, right now, we are a resource for the IS team and the organization as a whole. As we move forward, though, we see a far deeper and broader involvement in Health Informatics.

This transition will be gradual, but inexorable. As greater numbers of HIM Professionals acquire undergraduate and graduate degrees, the concerns and influences of the profession will broaden. CHIMA is currently in discussion regarding program certification with five universities. Four of these programs are Health Informatics programs. This is a good indication that there is growing recognition of the common

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content between health information management and health informatics.

So, why are we commenting now?

It should be obvious now why we are thinking these thoughts.

HIM professionals are an important way of dealing with our eHealth capacity crisis, NOW.

We recently participated in a think-tank session (see participants in Table 1) called by Gail Crook, the CEO and Registrar of CHIMA, and by the Waterloo Institute for Health Informatics Research (WIHIR). In this session it became clear that HIM Professionals, particularly those already in the field, could provide a much needed enhancement of our eHealth capacity. If one examines the curricula of the programs that trained these professionals, they imbue many of the competencies that Applied Health Informaticians should possess. Not everything, but a good piece!

Work following up on this think-tank session includes:

- characterizing the competencies taught in HIM programs,
- comparing this to the competencies expected of Applied Health Informaticians, and defining the gap, and
- examining what can be delivered in terms of full-time and continuing education programs to create a whole new source of talent related to eHealth.

We gained a general idea of what will need to be done, and it isn't an instant fix. However, it appears to be an interesting idea and one worth pursuing.

Your Comments?

What are your thoughts on this? Do you agree or not? What are the issues as you see them? Have you had any personal experiences related to HIM professionals involved in IS?

If you email us (via dcovvey@uwaterloo.ca) your thoughts and suggestions, we will weave them into a follow-up article, perhaps along with other details that become available. ●

CHIMA-WIHIR Think-Tank Session Participants

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WIHIR, University of Waterloo

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