Dear IFHIMA Members and Friends,

My term as IFHIMA President will be in its third month as you read this message, and time is already flying. I would like to share some of the thoughts I presented during the closing ceremony of the 19th Congress in Dubai.

Throughout the Congress, we discussed the media headlines, publications, and market drivers that clearly illustrate the demand for quality, trusted data to underpin healthcare transformation. The two constituencies at the Congress, health information managers and health informaticists, are vital to creating and managing this quality, trusted data.

As noted by Deloitte in their 2020 healthcare predictions whitepaper, “For many countries healthcare data has become a national infrastructure priority and attracts significant funding.” This paper and presentations throughout the Congress noted that the demand for data is driven by many challenging factors facing the global economy, including:

- Financing and delivering healthcare for the aging population that consumes far more services than the millennials, with 10% of the population aged 65 or older
- Increase of chronic, costly diseases such as diabetes
- Healthcare spending increasing in all countries from 2 to 10% each year

The industry and HIM challenges vary from technology adoption and workforce transformation to the coming needs of ICD 11. But ICD 11 adoption also presents new opportunities that will require new policies, processes, and a workforce ready to implement and use this new system.

Recognition for the HIM professions remains a challenge, but in all honesty, it’s not a new challenge.

I shared my vision for some of IFHIMA’s priorities from 2019-2022, and these will be explored more as the Board undertakes strategic planning for this term.
In the coming years, we must:

1. Prepare for the impact of technology — proactively, rather than reactively.
2. Publish or perish. IFHIMA must articulate our vision and viewpoint to affirm the value of the HIM profession so that policymakers and healthcare leaders seek our expertise. We can do this through whitepapers, Global News, website, and a new social media strategy.
3. Refine our strategic direction. The rapidly changing healthcare environment necessitates IFHIMA taking a fresh look at our strategic direction and priorities. We must be focused while considering feedback from the 2019 member survey and the breakout groups at the 2019 General Assembly. As Steve Jobs said while CEO of Apple, “Simple can be harder than complex: You have to work hard to get your thinking clean to make it simple. But it’s worth it in the end because once you get there, you can move mountains.”
4. Organize individuals to reach IFHIMA’s potential. The Board has approved two new workgroups: one to build a stronger, more consistent social media presence and another to develop a workforce whitepaper. We’ve done a formal call for participation for members of these two groups. Please visit the IFHIMA website for details.
5. Govern and execute within our means. This is perhaps the toughest of all responsibilities for the Board. IFHIMA functions on membership dues (which have not increased in 10+ years) and the proceeds from our Congresses. We have no paid staff to organize or execute tasks. Yet, I believe we have delivered value to our members over the decades. And it is that value that we can and should be measured against.

My wish for IFHIMA, and all our members, is best summarized with this picture.

I wish each of you a year filled with experiences that create value on a personal and professional level.

IFHIMA 2019 congress in Dubai hosted by SHIMA!

“Empowering HIM Professionals through a Global Voice”

The IFHIMA 2019 congress was a vision that we at SHIMA could achieve and make into a reality. Just the thought of having the East Mediterranean Region recognized, to placing the Gulf Council Countries (GCC) on the international Map of HIM was a dream come true. This spread of 5 days of IFHIMA Congress was an excellent mix of knowledge, learning, networking and fun within the realms of multiculturalism. On the 17th to the 21st of November 2019, SHIMA was honored to host the 19th IFHIMA International Congress, at Intercontinental Festival City Convention Dubai. The inauguration was under the patronage of His Excellency Dr. Humaid Al Qatami-Director General of Dubai Health Authority. Followed by speeches from Ms Marci Macdonald-IFHIMA President, Mr Hussein AlBishi-SHIMA President, Dr. Mohammed AIRedha-EHIS President DHA, Dr. Ayham Refaat-Congress Chair. The congress was attended by more than 350 Delegates from around the world with representing multiple healthcare professionals including:

- Healthcare Executives and Senior Managers (CEOs, CFOs, CIOs, CMOs, CPSQO, CNOs, COOs)
- Health Information Management Managers and Professionals
- Health Informatics Managers and Professionals
- Insurers (and TPAs)
- Payors
- Revenue Cycle Managers and Professionals
- Coding Professionals
- Other Interested Leaders within the Healthcare Industry
- Physicians
- Quality and Risk Management Professionals
- Researchers
- Privacy, Policy Makers and Regulators
- Nurses and Other Healthcare Professionals
- Students within the HIM and HI discipline

The theme of the congress “Empowering HIM Professionals through a Global Voice” served to connect the professional
with the ever changing and evolving technological changes and challenges of the healthcare field. SHIMA invited keynote speakers and VIP Guests from all around the Globe who had come to Dubai to experience one of its kind and the very first HIM Congress in the Middle East. We had 10 Keynote speakers from different regions covering different topics of HIM to Workforce development. Having 3 years’ worth of hard work unfold so magnificently was an experience. The presence of the IFHIMA Board, the opening and closing ceremonies and the many activities in between the abstract and panel presentations were welcomed and enjoyed by all. The abstract presentations were carefully selected by the Scientific Committee and 99 of them were shortlisted. It consisted speakers from different parts of the world, truly making it International platform of knowledge sharing and networking. The presence of WHO members was an added value to shed light on ICD 11 for the future of coding. The discussions and presentations covered a vast array of topics from HIM, CDI and Clinical Coding being the main topics. The Saudi Commission for Health Specialties (SCFHS) accredited 30 Credit Hours for this congress. By the initiative of Scholarship program, SHIMA in collaboration with the congress’s main sponsor hosted 2 HIM professionals from UK & Kuwait, to attend this congress. SHIMA had 3 committee’s that overlook the smooth functioning of the Congress, The Scientific Committee, the Steering Committee and the Organizing Committee. The congress was divided in the following Topics:

- Health Information Management
- Healthcare Transformation
- Research and Studies
- Healthcare Finance / Value Based Healthcare
- Educating for the Future / HIM Survival
- Health Informatics / Digitization of Health
- Healthcare Quality & Patient Safety
- Clinical Coding, Classifications and Terminologies
- Workforce Development
- Technical Tours

Our sponsors and exhibitors consisted of delegates from Australia, local and Ministries of Health from Saudi Arabia and UAE. SHIMA through this Congress served to Celebrate the 50 Year Anniversary of IFHIMA with the best of its capabilities. There were many activities and heritage tours organized along with a Hospital visit, to bring the perfect balance and essence of this diverse region. The purpose of having this congress in Dubai was to enable the many delegates to enjoy the multicultural, fun loving and traditional ambience of the Middle East. This being the biggest achievement for SHIMA for the year 2019, a journey that started from Tokyo in 2016. It was wonderful to experience the handing over of the presidency from Ms Marci MacDonald to Ms Lorraine Fernandes. Ms. Fernandes will represent IFHIMA presidency from 2019-2022. We wish Ms Lorraine Fernandes a great term and look forward to the great vision for IFHIMA.

In addition to the many activities that went on during the congress, the bidding process for the next congress was a much awaited one. Out of the many countries that bid, Australia won the bid to host the IFHIMA 2022 congress in Brisbane. We wish our HIM friends in Australia all the best for this experience that we are still reminiscing. The IFHIMA 2019 congress hosted by SHIMA in Dubai had assisted significantly in the recognition of the HIM profession and the importance of HIM professionals in healthcare transformation.

For more information about the IFHIMA 2019 congress, kindly visit our website: https://ifhima2019.com/index.php

Authors:
Hussein Albishi, SHIMA President
SHIMA Team
Riyadh, Saudi Arabia
IFHIMA 2019 congress in pictures

Opening Ceremony
IFHIMA 2019 congress in pictures

Poster Presentation

Presentations

Workshops
IFHIMA 2019 congress in pictures

Panel Discussions
IFHIMA 2019 congress in pictures

Panel Discussions

Bidding Process

Gala Dinner
IFHIMA 2019 congress in pictures

Closing Ceremony
Summary of IFHIMA General Assembly

19 November 2019 – Dubai, United Arab Emirates

The 19th Congress of IFHIMA, was held in the magnificent city of Dubai, and during this historical event, IFHIMA members met for the General Assembly, on November 19th, 2019.

It was a very robust agenda, with the meeting beginning at 0800 hours, and ending at 1535 hours.

There were 15 member nations present (of the current 21 members), with close to 90 observers throughout the day.

The meeting began with a welcome to all, and honourable mention to our IFHIMA Honourary Members present, Phyllis Watson of Australia, Joon Hong of Korea, and Carol Lewis of USA.

The Board members introduced themselves, followed by the National Directors and Deputies present.

The Board was very happy to introduce the IFHIMA Scholarship recipients present, Isaac Tegbey from Ghana and Geoffrey Semu from Tanzania. It is through the generosity of the Japan Hospital Award (following our last Congress in 2016) and contributors to the Ulli Hoffmann Memorial Fund, that IFHIMA is now able to offer scholarships to attend Congresses, and shall continue to do so in the future.

The agenda then moved to Accomplishments and the Strategic Plan, which was presented within the structure of IFHIMA’s three Strategic Domains, which are Advocacy, Membership, and Knowledge Domain. Please reference the website for details related to this presentation.

Membership information was presented, with highlights being the addition of our newest member Nation, Botswana, as well as review of the newer membership categories of Corporate and Educational Institution.

Of note, the new $100 for 3 year individual membership, has proven to be very popular, with many individual members taking advantage of the cost saving this provides.

Information on our positive financial position, the new and improved website design and membership payment system were also detailed and presented.

One of the highlights is the voting of the next Congress, that being in 2022. Two bids were presented, Jerusalem, Israel and Brisbane, Australia. The nations voted, with Brisbane, Australia winning the majority vote.

The Board presented our Purpose and Goals, which were reviewed and ratified at the 2018 in-person meeting. At that same meeting, which was held in Hamburg, Germany, the Board spent considerable time on discussion and review of proposals, and updated our Mission, Vision and Values. They are re-stated below, and also have been posted prior to the Congress, on your IFHIMA website. They were reviewed and presented at the GA to the membership.

**Mission** = IFHIMA represents and advances the global Health Information Management (HIM) profession.

**Vision** = A healthy world enabled by quality health information.

**Values** = Leadership – in quality Health Information Management

Integrity – principled, honest and ethical

Mutual Respect – embrace diversity and treat all with dignity and respect

Collaboration – engage and maintain global partnerships

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One of the highlights is the voting of the next Congress, that being in 2022. Two bids were presented, Jerusalem, Israel and Brisbane, Australia. The nations voted, with Brisbane, Australia winning the majority vote.
Other matters voted on were updates to the IFHIMA Constitution, that being clarifying that if two individuals on the Board are from the same country, the Regional Director representing their nation as the National Director, holds the vote on any business at the General Assembly. The other item voted on was adding to the Constitution that in the future, IFHIMA may utilize electronic voting for business matters, to enable voting on certain items to be done in advance of the General Assembly, and would permit inclusion of member nations not able to be physically present. Both motions put forth were passed with 100% voting in favour.

There was also the announcement that the Board will be implementing a “Tribute to Excellence Award” – to be bestowed at future General Assemblies. The details and creation of criteria will be established by an international task team, with the primary thought being that we should recognize members who have made significant contributions to the global work of the Federation. Details pertaining to specifics will be one of the tasks of the new Board.

IFHIMA also welcomed two new Honourary Membership Award winners at the General Assembly. Congratulations to Lorraine Nicholson of the United Kingdom and Yukiko Yokobori of Japan. Please read details on the website detailing the contributions of these two well deserving HIM’s, and it will become clear that they are exemplary role models for us all.

Regional Reports were also presented by each Board Member representing their region, and please visit the website to access same. I know you will be very impressed by the dedication and hard work these volunteers do on our behalf.

Following a presentation on the results of the IFHIMA Member Survey, conducted in 2018, the end of the day was spent with Regions breaking into teams, and discussing topics related to the survey results, and those issues specific to their nations and regions. All gathered back together and presented their findings. The detailed notes were passed to the President, who collated results and shared with the incoming President. These break-outs provided very important information for the new Board, who will utilize this valuable feedback to formulate the next Strategic Plan for the 2019 – 2022 IFHIMA term.

And of course, voting for the incoming Board was held! At this time, I would like to take the opportunity to introduce you to the new 2019 – 2022 IFHIMA Board!

President: Lorraine Fernandes, USA
President-Elect: Kerryn Butler-Henderson, Australia
Past-President: Marci MacDonald, Canada
Membership Chair: Lorraine Nicholson, United Kingdom

Calendar of events

Japan Society of Health Information Management
Health Information Management in the era of artificial intelligence – Striving for innovation in the new era
Fukuoka, Japan
September 24-25, 2020
Language: Japanese

CHIMA - Empowering accurate thoughtful health information
Winnipeg, Manitoba, Canada
October 5-6, 2020
Language: English

Ghana Health Information Management Association
Transforming the Health Systems in Ghana; the role of Health Information Managers
October 6-9, 2020
Tamale, Northern Region
Language: English

American Health Information Management Association
October 14-17, 2020
Georgia World Congress Center
Atlanta, Georgia, USA
Language: English

HIMAA
October 28-30, 2020
Melbourne, Victoria
Australia
Language: English

Please visit IFHIMA.org for most recent events.
Again, please don’t hesitate to access the actual minutes on the website. It is hard to compress 16 pages of minutes into one article, but I hope this has peaked your interest! Congratulations to Australia for winning the 2022 Congress Bid, and I hope to see many of you down under in 3 years!

Respectfully submitted,

Marci MacDonald
Immediate Past-President
IFHIMA

Privacy Workshop for Developing Nations

The Privacy Workshop for Developing Nations was held on Sunday, November 17, during the IFHIMA 2019 Congress in beautiful Dubai. Approximately 90 IFHIMA members were in attendance. Nations represented included United Arab Emirates, Saudi Arabia, Oman, Egypt, Australia, Nigeria, Barbados, Ghana, Kenya, Kuwait, and India. A representative of the WHO was also present.

The workshop was an extension of the IFHIMA whitepaper “Privacy of Health Information: An IFHIMA Global Perspective.” During the development of the whitepaper, the authors realized the need to go beyond the whitepaper to assist developing nations in their journey toward health information privacy. Hence, the workshop was born.

A team to develop and administer the workshop was appointed by Lorraine Fernandes to include Dorinda Sattler, USA, team lead, Mujeeb Kandy, and Selvakumar Swamy of India on assignment in Qatar, and Dr. Sabu Karakka Mandapam, of India. Dorinda and Mujeeb conducted the workshop itself.

An online survey of specific IFHIMA member nations was conducted before the workshop to help the team determine relevant content. The purpose of the study was to determine the various states of privacy practice and any perceived needs related to privacy. Results revealed that nearly half of the surveyed members ranged from not having any privacy laws in place to having legislation in place but not being fully implemented. Additionally, significant barriers to health information privacy were shown to be a lack of education regarding healthcare privacy (50%), a lack of resources to address it (22%), and the lack of laws surrounding healthcare privacy (18%).
Keeping in mind the survey results, the team developed the objectives of the workshop, lecture topics, and three activities. The objectives for the participants were to learn about privacy regulations and policies from around the world, to learn how to begin formulating privacy needs that address basic principles and challenging areas on healthcare, and to receive guidance on how to get started in developing privacy practices and regulations.

The workshop began with a conversation about privacy and trust and their importance in the healthcare realm, especially in the context of providing quality and safe healthcare. After the discussion, the participants worked in groups to identify reasons behind the importance of data privacy and security. Participants then shared their results. Many of the participants were already aware of how a patient’s lack of trust in their provider’s privacy practices may result in less than optimal healthcare data or care.

Additional discussion entailed balancing the need for public health against the privacy of individuals in the context of the stigma surrounding specific diagnoses or tests, and the potential ramifications of inappropriately divulged or individually identifiable information. Also covered were needs related to establishing privacy practices with cultural alignments, using empathy maps, policy prioritization, and other tools to align privacy practice with cultural norms.

Next, a brief overview of major privacy laws from the UK, EU, and the USA, along with the Fair Information Practice Principles, was provided. The purpose of the overview was to point developing nations toward established standards for use in the development of their privacy laws.

The second activity involved initiating a patient information inventory. A sample information inventory sheet was given to the participants to get them thinking about and documenting the various formats, purposes, users, retention periods, and locations of healthcare data in their institutions. The rationale behind the activity was to help the participants understand that organizations cannot adequately protect the privacy of information unless they know the breadth of information in their possession that requires protection. Some participants indicated that this particular exercise got them thinking outside the “patient health record box.”

The last activity was to identify privacy or security breach scenarios. Once identified, the next steps were to indicate how the situations could be prevented in the future, and to identify any mitigation strategies that should be implemented once the breach was discovered. The subsequent sharing of scenarios and strategies gave much food for thought for the participants to consider and employ in their institutions.

The final discussion included ideas on how to get started down the path to implementing privacy laws. Ideas ranged from starting at one’s institution by implementing and enforcing privacy practices, drawing from other countries’ laws, leaning on associations such as IFHIMA and HIMAs for guidance and support, and finally to addressing lawmakers.

The conversations and questions raised during the workshop were engaging and showcased HIM’s passion for privacy. These workshop conversations, coupled with the data from the survey and the work of the whitepaper, highlight the necessity for continued vigilance toward health information privacy.

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Closing Keynote, Dubai, UAE,

Nov 20, 2019

I was honored to be asked to do the closing keynote at the IFHIMA 2019 Congress in Dubai. I’ve been around at IFHIMA meetings for a long time—my first was in Toronto in 1976! I was privileged to be President at the 2013 Congress in Montreal and remained active in the association and profession for 45 years now. I recognized two long time professionals as I started my talk, Carol Lewis from the US who attended the Second Congress, held in Washington DC in 1956 and Phyllis Watson from Australia who started attending in 1968 in Stockholm, Sweden, and has not missed one since!

For the closing keynote Congress in Dubai, I was asked to talk about the Past, the Present and the Future in HIM. Well, talking about the past was easy as I lived it and have worked in the profession since 1974. Talking about the present is also easy, as I’m still working in a consulting role for several hospitals in the Chicago area in the US and have a team of HIM professionals working with me in the area of coding in the inpatient and ambulatory surgery center settings, and in physician education on documentation and CDI (Clinical Documentation Improvement). Our profession is wide in scope and there are many niches that need HIM professionals.

Dubai was an amazing place. The day after I landed, I felt as if I had flown into the future. It took me 3 days there to comprehend that they do NOT have a postal system. Everything is electronic—catalogs, bills, correspondence, thank you notes, holiday or birthday greetings. That will probably happen around the world in the next years.

I did a little review of the past—the beginnings of IFHRO in 1952 in London, through the name change to IFHIMA, and now being for the first time in the UAE in Dubai in 2019. The delegates did vote on the final day this year, that in 3 years we will be in Australia, in 2022. IFHIMA Congresses have been held in Canada and the US, Europe, Asia, and Australia. I spoke of all the paper in the profession when I started working in 1974—paper everything—medical records, filing systems, using a Rolodex. Physicians were not happy about completing their charts and having to come to the Medical Record Department to do it. I referenced the 80’s and 90’s when the movement to computerization started. There was a name change in the profession in many countries from a Medical Record Association to a Health Information Management profession. Physicians still had to deal with incomplete records however, whatever the format. From 2000 to today, we have moved from ICD-9 to ICD-10 and now ICD-11 is on the horizon. The focus is STILL and should be on Data Quality.

IFHIMA is a different organization than it was now with a web site, a robust Global newsletter, and with an important White Paper published and more underway. Updated Educational Materials sit in the Learning Center of the web site, and the organization continues to be an Association of very dedicated volunteers.

Talking about the future was harder—there will not be much paper and Artificial Intelligence (AI) will change everything. My hope for the future is that HIM is a more recognized profession than it was when I entered the field, or where it is now. We are challenged by what awaits the HIM future but know that the focus is on Quality Coded Data and Quality Health Information. Advanced Analytics and AI will improve decision making across business processes. Coding will be automated. Analytics Translators will be needed in all disciplines. Our profession will continue to need professionals with more technical fluency and project management skills. Disintermediation, which is removing the middleman, will occur in our field and others. This process lowers costs and allows all transactions to proceed more directly. This will have huge impact on coding, analysis, and quality management.

We will need HIM curriculums to change to meet the needs of the future. We will need to know data analytics, how to work in the cloud, and how to identify business process improvement. Our future is digital for sure. We will need skilled HIM professionals at the Associate, Baccalaureate, Master’s and Doctoral levels of the profession. There will be better mining of medical record data that will help physicians make accurate decisions faster. AI will find nonspecific codes and areas in the documentation that need improvement. It will find copy/paste text and abnormal lab values, as well as potential medication interactions. There will be computer assisted coding (CAC) with increased accuracy and productivity.
In closing I shared some of my favorite sayings and expressions throughout the years---connect with the ones below that resonate with you.

*Just because everyone else thinks it’s a good idea, you don’t have to.*

*Have patience in your moments of indecision.*

*You learn more from listening than from talking.*

*Listen and learn something every single day.*

*Leadership is not always about being in charge, it is about taking care of people in your charge.*

*The best predictor of future behavior is past behavior.*

*Like your work or do something else-----it will show.*

*And my favorite-------Always stop to catch your breath and never forget the moments that take your breath away.*

Author:
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United States

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**Honorary Membership Awarded to Yukiko Yokobori**

**Dubai, November 19, 2019**

Yukiko has worked tirelessly for the Japanese HIM Association as well as IFHIMA, for many decades.

She is currently the Director of the Department of Education of the Japan Hospital Association, and the Head of Secretariat of the Japan Society of Health Information Management.

Yukiko has focused her career on the education and certification of Health Information Managers in Japan since 1991.

She has been actively participating in the WHO-FIC network since 2003, assisting in the areas of education, as well and revision and implementation of ICD globally. She has served as the Co-Chair, representing IFHIMA and her nation, on the WHO-FIC EIC from 2014 to 2018. She assisted in the establishment of the WHO-FIC Asia-Pacific Network in 2006, and continues to serve as the Network’s secretariat.

From 2019 – 2016 she served on the IFHIMA Board as the Regional Director of South East Asia. She continues her IFHIMA work through liaising with the WHO-FIC Collaborating Centre in Japan, where she oversees the training of ICD and ICF since 2011. Additionally, she leant her expertise as an IFHIMA representation as a council member of the Global Health Workforce Council for 3 years, until 2016, and continues to serve on the Global Advisory Council for Healthcare Workforce – to improve population health through development of a highly skilled and qualified HIM global workforce.

Of special note, she successfully coordinated and oversaw the very successful IFHIMA 2016 Congress in Tokyo, Japan, and was instrumental in creating a sponsorship program to provide financial support, enabling IFHIMA developing nation members to attend future congresses.

Yukiko continues to share her knowledge and support to the global HIM community, and is a valued and sought after expert within the profession. IFHIMA is forever grateful for her past and ongoing support of the Federation.

It is with great honour, that we present this IFHIMA Honourary Award and Membership, to Ms. Yukiko Yokobori!

Author:
Marci MacDonald
IFHIMA Immediate Past President
Canada
Honourary Membership Awarded to Lorraine Nicholson

Dubai, November 19, 2019

Lorraine has been a pillar and in many ways, the face of IFHIMA, to many nations. Her decades of work with IFHIMA have shaped the Federation to where we are today, and her positive influence and leadership continue to impact many HIM’s internationally. Lorraine first attended an IFHIMA Congress in 1984 – which was the 9th Congress at the time, in Auckland, New Zealand. She joined the IFHIMA Board in 2000, and was the reigning President when our federation changed its name from IFHRO to IFHIMA in 2010 at the Congress in Milan, Italy.

In addition to her support of the European members and the global HIM community as a whole, we would be amiss if we did not make special mention of her devotion to developing nations. Nowhere is this more apparent than the continent of Africa, where she has devoted much personal time, effort and expertise to our colleagues from this region. She is known as the “Mother of HIM” – and has been an unwavering advocate in advancing the profession and educational opportunities.

Notably, Lorraine’s presentation on the challenges of obtaining educational materials in developing nations, inspired the idea of a “Book Donation Project”, proposed by an American member. Starting in 2013, Lorraine worked single handedly as the IFHIMA representative, to coordinate the books donated by AHIMA, and ensured they were delivered to deserving educational facilities across the entire globe.

Lorraine served as the IFHIMA President from 2007 – 2010, and since leaving the Executive IFHIMA Board, has continued on as the Membership Chair. Challenges with software, technical upgrades and revisions, were sometimes challenging, but Lorraine met all these situations with her usual calm grace, and success was always the end product!

Professionally she is a sought after consultant in all areas of the Health Information Management profession, and widely respected by all who have the fortunate experience to meet her.

It is with great honour that we present this IFHIMA Honourary Award and Membership, to Ms. Lorraine Nicholson!

Author:
Marci MacDonald
IFHIMA Immediate Past President
Canada

Note of Appreciation from the scholarship recipients

Empowering HIM Professionals through a Global Voice

I’m glad to express the great experience gained from the 19th IFHIMA Congress held in Festival City, Dubai, United Arab Emirates from 17th to 21st November 2019 where I met many experienced and committed international colleagues, self-motivated veterans of Health information, medical documentation experts, specialists in various information system and management disciplines, and practitioners from different information culture. Personally I think this congress was very well organized and very successful. I fully enjoyed the one-week event with so many interesting seminars and discussions on various health information topics.

Several of the sessions, delivered by several HIM experts had been very informative and insightful on their particular subjects. I would like to take this chance to reflect upon my enriching experiences in Tanzania and summarize in what ways this IFHIMA Congress helps me to make a comparative study of Health Information practices and adopt an international perspective on how to benefit from exchange of ideas, sharing of ideas and interacting with counterparts from around the global.
From the very first day of the Congress I enjoyed the greatest talk and discussion from educational partners and colleagues on both scientific program and that of general assembly. The most of the sessions I benefited most includes those of Clinical Documentation Improvement (CDI) in line with the related exhibition also an on-going ICD 11 implementation plan and strategies.

On the other hand, the presentation made by Dr Robert Jakob and his colleague from WHO on progress and the implementation of ICD-11, Coincidentally in my country (Tanzania) is developing a national electronic system called GoT-HMIS to be used in all Public health facilities at all levels, therefore I realize that the process of taking ICD-11 in to consideration during that process will be of great advantage to us. There is no doubt that the challenges confronted by HIM professions from the uses of ICD-10 will be taken in a very high consideration following the flexibility noted in the use of ICD-11 electronically.

In line with other many presentations I benefited on the number of words of wisdom from key IFHIMA leaders and experts, here I may mention few as: - Marci MacDonald, Lorraine Fernandes, all organizers as well as other talk from our experienced elders and past IFHIMA presidents were of encouraging especially to us with growing National associations in Health Information and finally the great historical book for IFHIMA authored and presented to us by Prof. Phyllis J Watson.

I expect that the knowledge gained will give me courage to participate in the organizational work in preparation and modernization of the existing Health Information System. What some of the speakers shared with the audience intrigued me and I want to learn more of their experiences in this regard. I hope my future interactions with my colleagues of THERIA (Tanzania) and other countries will shed some light on many of the seemingly unsolved problems faced by many young HIM Professionals and introduce the effective measures and practices. I will make an effort to disseminate related helpful and effective measures and information to my Tanzania colleagues.

In conclusion, I would like to express my heart-felt thanks to people who have made this IFHIMA conference possible, and those who have shared their experiences and support provided to me during that one exciting week in Festival City, Dubai, United Arab Emirates. I have benefited very much from this fantastic event.

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The 19th IFHIMA Congress in Dubai; A memorable experience with a remarkable impact

Attending the 19th IFHIMA International Congress, 2019 was a great and fabulous experience.

The congress was very well organized and successful. I fully enjoyed the five day event with so many interesting and capacity building workshops, meetings and discussions in various sessions. In all the sessions, delivery by several renowned health professionals were very informative and insightful on their particular subjects.

The congress equipped me with cutting-edge knowledge and skills in the field of Disease coding and classification, healthcare quality and patient safety, health information management, health informatics, and other healthcare related disciplines. The convergence of various key stakeholders, among others, provided a platform that discussed critical resources needed to support continuous improvement in health care for suitable development. The conference in addition, described the level of preference and capacity to which professional practice should aspire. It also featured high-level panel discussions on health sector innovations, roundtable discussions, shared challenges and inspired innovative solutions including diverse partnership meetings where initiatives were shared.

I was exposed to other innovative methods applied in health service improvement and Information Management. At the congress, I was practically equipped with knowledge which helped widen the range and scope of my experience to be able to face cum transform challenging working spheres and cultures. Presentation sessions on Healthcare Finance / Value Based Healthcare, Health Informatics / Digitization of Health, ICD-11 Transition and Capacity Building also
served me the opportunity for which I acquired new ideas to make positive impact in my country, Ghana. Through the congress, I was also able to utilize the opportunity in deepening ties with other Health Information Management (HIM) organizations for continuous development through peer benchmarking for strong partnership. With the knowledge acquired and synergies built from the congress, I would ensure to apply new working methodologies and leverage networking opportunities to strengthen the Health Services and Information Management systems in my country. This I shall achieve by adopting innovative approaches I harvested from the congress for the good of my country.

In conclusion, I would like to express my heart-felt thanks to the IFHIMA Board, for fully sponsoring me to attend this wonderful congress. I thank the IFHIMA Scholarship board for this general scholarship given towards developing countries. I have benefited very much from this wonderful event. I will endeavor to share the knowledge acquired from the congress with my colleagues by organizing a nation-wide training. This will help build a good working culture needed for developing the HIM profession in Ghana.

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Universal health coverage (UHC) has become a pressing topic worldwide. In the Middle East, the healthcare reform needed in order to achieve UHC has brought about an unprecedented interest in ICD coding. Gulf countries have taken the lead with Saudi Arabia, UAE, and Qatar adopting DRG-based payment systems. Other countries in the region are following in their footsteps as Egypt and Jordan are currently paving the way for modern national health insurance schemes.

However, as ICD-10 has become clinically and technologically outdated, many countries have modified the original version released by the WHO to accommodate the extra level of detail required for implementation of case mix for reimbursement. Modified versions like ICD-10-AM (Australian Modification), CM (Clinical Modification, USA) and others are not only used in their countries of origin but have also been adopted by other countries.

The WHO has realized that ICD-10 in its current form is beyond repair and a new classification system should be developed to meet the scope and use of ICD coding globally. This led to the birth of ICD-11. With its flexible level of detail, ICD-11 can be adapted for primary care settings, adverse event reporting, surveillance of rare conditions, and the use of case mix for reimbursement.
The ultimate aim of ICD coding is to enable the whole world to speak one language. With the level of flexible detail provided by ICD-11, the different local variants of ICD-10 will no longer be needed and the world can now speak one language: ICD-11.

On 21st November 2019, the last day of the 19th IFHIMA international congress in Dubai, several sessions and a workshop on ICD-11 were held by Dr. Robert Jakob and Mr. Nenad Kostanjsek from the Classifications and Terminologies team at the World Health Organization (WHO).

Here are the main takeaway messages from the day:

- ICD-11 is fully electronic and can be integrated with existing EMRs for use online or offline
- ICD-11 improves the ease and accuracy of coding requiring less user training and reducing the cost of coding
- ICD-11 includes new chapters like traditional medicine, functioning assessment, and extension codes which allow flexible addition of detail
- ICD-11 is multilingual with internationally consistent translations
- Each ICD-11 entity has its own Uniform Resource Identifier (URI) which facilitates linkage with other information interchange products and terminologies
- A proposal platform allows all interested parties to suggest changes to ICD-11

The workshop included a hands-on coding exercise in which trainees were required to find the ICD-11 codes for a list of diagnostic terms. After a brief demonstration by Mr. Kostanjsek, trainees were successfully able to find the correct codes using the ICD-11 training tool accessible at https://icd.who.int/ct11/icd11_mms/en/release. Some useful features on the tool include using the “try flexible search” option, the filter which allows you to search within specific chapters, the green icon which indicates a coding note, and the red + icon that brings your attention that mandatory post coordination is required.

The diversity of the attendees enriched the discussion. It was quite interesting to see how delegates from different countries and professional backgrounds viewed the opportunities and challenges of implementing ICD-11 in their settings. Some discussed the potential difficulty of providing internet connection to rural areas and providing computers for coders in resource-limited settings. Dr. Jakob pointed out that although fully electronic, ICD-11 can also be used offline.

Computers will still be needed but he noted that alternatively almost everyone in the world owns a smart phone. Mapping between ICD-10 and ICD-11 also remains a point of concern for some. Countries using the U.S. Clinical Modification (CM) have only recently moved to ICD-10-CM making the shift to ICD-11 in the near future highly improbable. Developing DRGs based on ICD-11 is yet to be accomplished.

ICD-11 was approved by the World Health Assembly in May 2019, the same year that IFHIMA is celebrating its 50th Golden Jubilee anniversary. This marks the beginning of a new era for HIM professionals as the use of technology in ICD-11 coding is likely to change the profession forever shifting our efforts towards improving the quality of clinical documentation, and allowing more advanced statistical analysis for the vast amount of data that has been accumulating over the past years in our healthcare systems for better management and planning.

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A Brief Report from Lyon

MedInfo 2019, titled Health and Wellbeing e-Networks for All, was held in Lyon, France from August 25 – 30, 2019. The MedInfo meeting is sponsored by the International Medical Informatics Association and held every two years. Although held in English, the conference included special sessions in Chinese and French. Topics covered on the program included telehealth, human machine interaction, predictive analytics, ICD-11, SNOMED-CT, EHRs, patient engagement, education, and workforce development, among many others. The general sessions were “European Vision of Medical Informatics, Artificial Intelligence in Medicine, Drawing reproducible conclusions from observational clinical data with OHDSI, Capacity Building and Embedded Research to Strengthen
National Health Information Systems,” and “From biological genotype to digital phenotype.” The historical setting of Lyon, where two rivers converge, was a beautiful place for the conference. There were silk tunnels and a cathedral to explore, with many wonderful restaurants.

Some highlights are shared below.

Workforce and Education

There were several stimulating papers discussing workforce and education. Butler-Henderson and Gray presented the findings from the inaugural Health Information Workforce Census, a tool used in Australia to capture data about the health information and informatics workforce. A global first, the data captured from the census has informed workforce planning and forecasting. A simulation model to identify future needs and supply of physicians was introduced by Relic, Fišter and Božikov. Marc et al presented the findings from a global analysis of workforce recruitment adverts. Their analysis showed different trends across different countries, theming roles based on required skills and knowledge: 1). technology focused; 2). clinically focused; 3). compliance focused; and 4). sales/marketing/management focused. Global trends in countries with developed health information/informatics systems allows other countries to monitor for their own workforce development and future forecasting. A skilled workforce is essential when implementing health information and communication technology, with Celis et al discussing their strategy to create such a workforce in Buenos Aires. In Croatia, they are developing the biomedical informatics workforce, with Fister et al discussing the opinions of educators.

Almalki, Househ and Alhefzi presented the recently launched the Saudi Arabia Health Informatics Competency Framework. This framework, based on existing frameworks from Australia, Canada and the United States of America, has been developed to be used as an evaluation tool by individuals, employers, government, and educators. An update to the TIGER International Framework of Core Competencies in Health Informatics 2.0 was provided by Hübner et al. The framework has been developed to specify informatics competencies within nursing roles. Fenton, Ross and Simmons presented the introduction the first known professional doctorate in health informatics, developed at the University of Texas. The program aims to provide a doctorate in health informatics, with a strong coursework component, to produce evidence-based professionals. Higher education biomedical and health informatics training in Europe was outlined by Kolokathi et al. They presented a detailed database of educators throughout Europe in this field. Liu, Liu and Li examined the differences between medical/health informatics education across China, Japan and South Korea. Whilst Japan and South Korea offer contemporary programs, there were few educational offerings in China.

Authors:
Dr. Kerryn Butler-Henderson and Dr. Susan Fenton

Special interest group (SIG)

A special interest group (SIG) is being formed for those with an interest in health information research. The HIM Research SIG is currently in the planning stage with several leaders across the globe involved. Central to this initiate is the development of the research skills of HIM practitioners. The SIG will include podcasts and community forums, and shared resources to support people who are interested in undertaking research. Further information will be distributed via IFHIMA when the online SIG platform is finalized.

If you are interested in participating, please contact:

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AHIMA19 Post-Conference Highlights

Change, transformation, and courage were the dominant themes of the AHIMA19 Health Data and Information Conference in Chicago.

AHIMA President Valerie Watzlarf, PhD, MPH, RHIA, FAHIMA, kicked off conference with a deep dive into one of AHIMA’s strategic goals—shaping the health information management (HIM) profession by honing health information skill sets.

“Without health information professionals and your skills, the healthcare machine stops. Without you, data is not properly managed,” she said.

AHIMA CEO Wyclecia Wiggs Harris, PhD, CAE, invoked the association’s new mission and vision statements and enumerated four keys to help HIM professionals lead “the movement to transform health and healthcare.”

- Continue to build the “House of Health Information” by investing in members and infrastructure
- Lead the industry toward greater integrity, access, and connection—three impact areas where HIM must be thought leaders and change agents
- Partner with other industry leaders to pursue creative solutions, follow the unknown path, and connect people, systems, and ideas
- Position AHIMA as global healthcare leaders
- Empowering HIM and Patients

Audience members had the option to choose between two General Session tracks. In the first, Watzlarf discussed the scope of the work of the American Medical Association’s (AMA) Opioid Task Force with David Barbe, MD, MHA, past president of the AMA, and Patrice Harris, MD, MA, current AMA president.

Barbe and Harris agreed that better collaboration between clinicians and HIM professionals makes a difference to patient care.
“[HIM professionals] help doctors take care of patients. Through data collection you can capture information more efficiently,” said Barbe. “The advent of the [electronic health record] and tremendous changes, such as ICD-10 and [emerging] payment models have brought HIM to the fore.”

In the second general session track, Alexandra Mugge, deputy chief health informatics officer at the Centers for Medicare and Medicaid Services (CMS), spoke about interoperability and the power of the Patient Access Initiative.

“Patients are no longer passive participants; they now have the ability to be empowered consumers of their data that puts them in the driver’s seat to make the best and most informed decisions about their health,” Mugge said.

Doug Lindsay, who was bedridden and homebound for 11 years due to a mysterious illness, shared his inspiring story about his quest for medical solutions and the innovative surgery he ultimately developed that saved his life.

From the confinement of his bed, Lindsay read journals, textbooks, articles, reviews, and case studies. His research led him to H. Cecil Coghlan, MD, a medical professor at the University of Alabama at Birmingham who believed in Lindsay’s search for answers. Their combined efforts led to multiple medical scans that revealed bilateral adrenal medullary hyperplasia.

Lindsay is determined to help others suffering from rare conditions find a space for answers and—hopefully—more cures through the Lindsay Center for Collaborative Care and Innovation.

Building Toward the Future

Incoming AHIMA President/Chair-elect Ginna Evans, MBA, RHIA, CPC, CRC, FAHIMA, addressed the audience on the final day of AHIMA19 and shared her vision for the future for the profession and the association. She challenged the audience to dream big for their future.

“Change is scary. Disruption is scary. Being left behind is even scarier,” said Evans. Two of the keys to not being left behind, according to Evans, are the ability to think creatively and inventively. “Creativity and innovation are still places where humans have an edge over machines.”

AHIMA CEO Wyclea Wiggs Harris, President Val Wattzaf, and AHIMA Chief Product, Marketing, and Sales Officer Leslie Stokes congratulate the winner of AHIMA's first pitch competition.

Speaker Carey Lohrenz was the first female F-14 Tomcat fighter pilot.
Population Health Shines at Inaugural Pitch Competition

Giving a voice to under-represented patients is the goal of the winner of AHIMA’s inaugural Pitch Competition, sponsored by Eclat Health Solutions and LeapFrogBI and hosted in collaboration with MATTER. More than 50 healthcare innovators applied for AHIMA’s Pitch Competition, which called for cutting-edge solutions that improve the connections between people, systems, and ideas to transform health and healthcare.

Drugviu, a population health platform, won the first-place $5,000 award. Drugviu is a data-based solution that provides usage information on medications prescribed to minority populations based on the experiences of others who have taken the medication.

“This money will allow us to pursue the mission of expanding the data set of medication and health experiences to include minorities,” said Drugviu founder and CEO Kwaku Owusu. “We’re going after an underserved population. There is no meaningful data on how medication affects 40 percent of the US population. Our goal is to expand the data set of medication and health experiences to include communities of color.”

Owusu said the idea for Drugviu came after speaking before the Food and Drug Administration on medical device safety. “I learned about the under-representation of people of color in research involving medical device safety and I learned there was severe under-representation in medical trials and clinical trials,” he said. “People are responding because there is a need to understand and to be included,” he said. “We also want to encourage the medical community to be more inclusive of communities of color.”

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Report on the 45th Annual Meeting of the Japan Society of Health Information Management

The 45th annual meeting of the Japan Society of Health Information Management (JHIM) was held successfully on the 19th and 20th September, 2019 in Osaka. As health information management began in both Tokyo and Osaka at the same time, Osaka is a historical place for HIM.

Dr. Masanobu Saito, the president of Osaka Minami Medical Center, conducted the Meeting under the theme of “Shoulder responsibility for tomorrow - Information Literacy.” there were 288 speakers, which included 64 students. The number of attendances of the meeting totaled to 421 people. It was the most people ever attended in JHIM’s history. Because there were more registered lectures than ever before, and the topics of lectures by Dr. Masanobu Saito and Dr. Hiroyuki Suenaga, the chairperson of JHIM, were critically relevant to today’s issues, and all themes of lectures were very interesting for HIMs, there were a record number of participants at this forum. The titles of major lectures are listed below.
New executive officers were appointed and Dr. Hiroyuki Suenaga was reappointed during the meeting by the new officers. The most excellent paper and the paper offering the most encouragement received awards and were recognized. Furthermore, 5 new leaders of HIM were certified by the Japanese Hospital Association and the number of leaders of HIM increased to 90.

The next JHIM annual meeting is scheduled to be held in Fukuoka, Japan, on the 24th and 25th September, 2020. The meeting will be conducted by Dr. Toru Muranaka, the vice president of Jyunshin Gakuen University, the honorary CEO of National Hospital Organization Kyushu Medical Center, under the theme of “Health Information Management in the era of artificial intelligence – Striving for innovation in the new era”.

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IFHIMA Board 2010-2016
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IFHIMA Report on the WHO-FIC Education and Implementation Committee (EIC) Annual Meeting 2019

The 2019 Annual World Health Organization Family of International Classifications (WHO-FIC) Network meeting was held in Banff, Canada and it was a successful meeting for the Education and Implementation Committee (EIC), with many achievements to report.

There were two EIC sessions held on 8 and 9 October and there were many new countries joining the WHO-FIC network this year. The EIC meeting was very well attended and we started off by hearing from Malta, Israel, Poland and Iran (with a brief presentation by the Iranian contingent) with updates on their progress exploring the International Classification of Diseases, 11th Revision (ICD-11) implementation.
An update was provided by WHO which included information regarding the ICD-11 resolution, the transition and maintenance of the ICD and International Classification of Functioning, Disability and Health (ICF) Implementation Database to the WHO server, the compilation of a diagnostic term set for enhancement of the ICD-11 index and ICD-FIT, WHO FIC Training and Education (including ICDFIT, the ICD-11 Education Tool and the formation of the WHO Academy) and the implications for EIC work in 2019/2020.

WHO also demonstrated ICDFIT with the recent release of the integrated ICD-11 coding tool and browser. ICDFIT now also includes coder feedback as to how the coder performed against the ICD-11 gold standard and there is capacity for peer comparison with team reports to view results and rankings of individuals within the teams.

A new EIC Website update was provided with an acknowledgement of the significant work that has been done by the EIC Co-Chairs and Secretariat along with the collaborative efforts of the UK WHO-FIC Collaborating Centre Team. The EIC Website is on a Kahootz platform, developed for both public and EIC member purposes. Material on the old EIC website was assessed and moved across where appropriate. As well, WHO FIC Information Sheets are being reviewed and updated before their upload to the new EIC Website.

The ICD-11 Education Tool was demonstrated at the meeting with an overwhelming positive response from the committee and its observers. The Education Tool provides introductory units which include the structure and use of ICD-11 as well as the tooling environment. There is a unit for each of the Mortality and Morbidity rules as well as chapter specific units that comprise classification structure, content and conventions. Additional information has been included for the new ICD-11 chapters/sections, as well as highlighting chapter specific notes from the ICD-11 Reference Guide. Units also include examples and exercises which, for education purposes are coded to the fullest extent (i.e. always assigning extension codes where applicable). Units generally include examples and practical exercises for learning consolidation.

Please visit the EIC Website which is still under construction, but is being updated quarterly. There are some very important WHO-FIC resources and links available here as well as the Beta version of the ICD-11 Education Tool and associated resources. The website is available at: https://hscic.kahootz.com/connect.ti/WHO_FIC_EIC/grouphome

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HIMAA/NCCH National Conference 2019

Australia was again party to an informative, thought-provoking, and well-organised conference by the Health Information Management Association of Australia (HIMAA) and National Centre for Classification in Health (NCCH). The 36th HIMAA
and NCCH annual conference was held at the newly-opened Bankwest Stadium, Parramatta, from 23rd to 25th October, where all delegates celebrated ‘70 years of Strength in Diversity’. Those who were brave enough attended the pre-conference ghost tour at the old Parramatta Gaol, learning about criminals and ghosts of time past; which was preceded by a tour of Westmead Hospital and Precinct, both being enjoyed by all attendees.

Over the three days, delegates broadened their knowledge on health analytics, medico-legal issues, education and training, information governance, patient quality and safety, health services management, health classifications and coding, digital health/informatics, and health information management on the international stage. From breaking timber boards (through ‘10 Seconds of Courage’) and applying clinical codes to scenarios from Game of Thrones, to dancing the night away at the ‘Better Than Gold, We’re Platinum’ conference dinner, it was a memorable three days!

The first day of the conference kicked-off with Charlie Farah who had the aspirational message that HIMs are the real Chief Data Officers in healthcare. Throughout the day we saw discussion of hot topics such as data literacy, ICD-11, factors influencing HIMAA membership, the 2018 Australian Health Information Workforce Census, Australian Emergency Care Classification version 10, clinical coding auditing in Qatar, comparison of Stroke Registry and administrative data, computer-assisted clinical coding, and clinical documentation improvement programs and competencies. Delegates also enjoyed the ‘10 Seconds of Courage’ motivational session by Nadine Champion – who knew we had promising martial artists amongst us?

Topics presented and discussed on the second day of the conference surrounded data and quality and safety, including Australia’s life-long person-centric health data sets, data breach processes and maintaining data quality, writing for the HIM-Interchange, identifying adverse events through CHADx, RSI for length of stay, and development of interactive applications for medication reminders.

Clinical updates sessions were also held, including dental procedures, stereo-EEG and epilepsy, premature babies, managing patients in ICU, and the NCCH Coding Workshop (which always brings passionate, however constructive, discussions).

In amongst dance moves on the dancefloor, awards for outstanding commitment to and excellence in the HIM...
profession were presented at the conference dinner, including Melissa Turnell, Sally McIntosh, Sue Walker, Alida Minchella, Kirstie Mountain, Dwayne Richards, Lee Hanlon-Morris, and Dusty Ellen.

The third and final day of the conference saw barriers being broken down to support a proactive health information workforce, including utilising digital health to empower professionals to deliver better care, understanding the evolving role of the clinical coder and building our teams, and discovering the diverse roles of health information professionals. Supporting trainee clinical coders and our workforce in general, implementing ‘coding from home’, and improving data quality, were key messages.

The HIMAA and NCCH 2019 conference was the last delivered as a joint venture by NCCH and HIMAA and we thank NCCH for all their hard work and support over the years. The content and organisation of this conference was exemplary and we all look forward to 2020.

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Health Information Management Association (HIMA) India 5th National Conference

HIMA INDIA CONFERENCE - 2019 08th and 09th Nov 2019 at National Institute of Mental Health and Neuro Sciences (NIMHANS), Bangalore, Karnataka - India

The conference was organized by HIMA India in association with National Institute of Mental Health and Neuro Sciences (NIMHANS), Bangalore, Karnataka, Bangalore - India. It was inaugurated by the Director and Dean of NIMHANS (an institute of National importance). A book which talks about managerial methods in attaining status of prominence in primitivity by Prof. Dr. G D Mogli titled as “DR. MOGLI’S MIRROR” was released by Director NIMHANS during the opening ceremony of the conference.

HIMA INDIA CONFERENCE - 2019 focused mainly on the theme “Implementation of Unified Medical Record System with Professional Standards across the nation”. The Conference was packed with exciting scientific session formats, a plethora of expert speakers from various states of the National and presented on timely topics.

The objective of the conference was:

1. Presentation of scientific papers, panel discussion to enhance the knowledge of the participants.
2. Building network among the HIM professionals
3. Honoring Karnataka State HIM Professionals excelled in the HIM profession including Education & Execution
4. To have annual General body meeting

About 39 renowned speakers with vast experience in HIM, IT, Healthcare management and allied fields have presented the papers on the following topics.

1. Implementation of Unified Medical Record system
2. Medicolegal, Health Insurance and reimbursement process and its challenges
3. Roadmap for creating Health Information Management Centre (HIMC) For Excellence in India
4. Why and how MRD/HIM should play a vital role in accreditation (NABH/JCI/MCI) process
5. Future of HIM education and required skills in the 21st century
6. Challenges and opportunities in Implementing E.H.R. in India
7. Mental Healthcare Management System (MHMS)
8. Time series pattern of AYUSH morbidity statistics

Panel Discussion: Two fascinating Panel discussions were held on topics related to the conference theme and Release of patient information by leading experts in HIM.

Participants: More than 360 participants from HIM and IT professionals, students, Doctors, Nurses, Quality assurance and administrative personnel across the country participated. All the presented articles were compiled and printed in the proceedings and distributed to the participants.

Awards and Recognition:
- Mementos were given to all speakers, Participation certificates to all the participants.
- Prof. Dr. G D Mogli’s Award for Professional excellence in HIM 2019 was given to four members. This award was instituted in the year 2011, and presented every year to the professionals who excelled in the HIM profession.
- DR. MOGLI’S MIRROR book was distributed to all the participants free of cost, cost incurred for the same was borne by HIMA India and Prof. Dr. G D Mogli.
- Online Quiz was conducted, more than 200 people participated in the quiz, Top five were awarded.

Conclusion: The Conference was grand success due to the extraordinary efforts of organizing committee, all the participants applauded that “papers presented were of high standard” the same was published in the newspapers.

General Body meeting
General body meeting was held on first day of the conference, during this meeting the resolution for submission of recommendations to the Govt. of India on Road map for creating Health Information Management Centre (HIMC) For Excellence in India is unanimously approved by the HIMA India members.

Plan for Year 2020: HIMA India 2020 conference will be held on Dec 2020 at Goa.

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Dyp. National Director of HIMA for IFHIMA
Note from the Editor

Hope everyone is off to a great 2020!! Welcome to our first GN issue for the year. Hope you enjoyed reading this issue. IFIHIIMA publishes Global News two or three times per year with the intent to highlight national association news, share board activities in support of the IFHIMA mission and strategic plan, and keep members abreast of other IFHIMA activities.

I encourage contributions from all of our member nations to make it a truly global newsletter. Please feel free to contact me with your ideas and questions.

A copy of the guidelines can be found at: https://ifhima.org/editorial-guidelines/

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