



IFHIMA
International Federation of
Health Information Management
Associations



REGIONAL DIRECTOR REPORT

November 2019

Name of the Region: Western Pacific Region

Name of the Regional Director: Vera Dimitropoulos

IFHIMA member countries in this region: 5
Australia, China, The Philippines, Japan and Korea

Number of Associate Members in this region:

Number of Corporate Members in this region: 1 (lapsed in 2019)

Number of Educational Institution Members in this Region: 0

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ACCOMPLISHMENTS & ACHIEVEMENTS IN THE REGION 2016-2019:

Summary of Activities e.g. National/Regional Conference

1. The Health Information Management Association of Australia (HIMAA) and the National Centre for Classification in Health (NCCH) has held 3 successful National Conferences between 2016 to 2019 all of which have included participation by international speakers and guests (IFHIMA strategic input = Advocacy, Knowledge and Membership domains).

In 2016 the HIMAA and NCCH Conference was held in Melbourne, Victoria

In 2017 the HIMAA and NCCH Conference was held in Cairns, Queensland

In 2018 the HIMAA and NCCH Conference was held in Hobart, Tasmania

In 2019 the HIMAA and NCCH Conference was held in Western Sydney

To date, the IFHIMA Global News featured 2 articles in 2017 and 2018 providing a summary of the 2017 and 2018 HIMAA and NCCH Conferences in Cairns and Hobart.

2. The World Health Organization Family of International Classifications (WHO-FIC) Asia Pacific Network Meetings facilitated by the Japan Hospital Association were held in Kuala Lumpur in 2017 and hosted in Sydney in 2018. These meetings have always had good representation from members of the Western Pacific Region and discussions and presentations have allowed for the sharing of ideas from member states regarding the education and implementation of health information infrastructures, mortality and morbidity coding and reporting of vital statistics to the WHO (IFHIMA strategic input = Advocacy, Knowledge and Membership domains).

ACCOMPLISHMENTS & ACHIEVEMENTS IN THE REGION 2016-2019 continued

The WHO-FIC mid-year working meetings and annual Network meetings and conferences since Tokyo, Japan in 2016, Mexico City, Mexico 2017, Seoul, Korea in 2018 and Banff, Canada in 2019 have had consistent and valuable input from a number of Western Pacific Nations and these nations are well represented on the following WHO-FIC Network Committees:

- WHO ICD-11 Joint Taskforce (completed its work in Seoul, Korea in 2018)
- International Classification of Health Interventions (ICHI) Task Force (objective to complete its work for the annual WHO-FIC Network meeting planned for Kuala Lumpur, Malaysia in October 2020)
- Classification Statistics Advisory Committee (CSAC)
- Education and Implementation Committee (EIC) Co-Chaired by Vera Dimitropoulos, Australia and Sharon Baker, Canada with the Secretariat, Filippa Pretty (Australia) is currently in the process of finalising and launching a new EIC website in collaboration with the WHO-FIC British Collaborating Centre. The website will contain vital education and implementation materials for all countries including the Western Pacific Region. The website will also include the new ICD-11 Education Tool. Both the website and ICD-11 Education Tool will be launched by the end of 2019.
- Family Development Committee (FDC)
- Informatics and Terminology Committee (ITC)
- Mortality Reference Group (MRG)
- Morbidity Reference Group (MbRG)
- Functioning and Disability Reference Group (FDRG)
- Traditional Medicine Reference Group (TMRG)

IFHIMA also has members with voting rights on both the EIC and MbRG, with a collaborative effort between IFHIMA and WHO on classification education initiatives moving forward.

Achievements

- Western Pacific Region field testing, training and implementation of ICD-10, ICD-10-AM and/or ICD-11 (IFHIMA strategic input = Knowledge domain):
 - Australia
 - Cambodia
 - China
 - Japan
 - Korea
 - Malaysia
 - Thailand
 - Vietnam
- The NCCH, led by Vera Dimitropoulos has updated the ICD-10 Training material now available on the IFHIMA Website to be used internationally for those countries using ICD-10 and those countries intending to implement ICD-10. There is also information contained in this material directing interested countries to review the electronic tools available for both ICD-11 and ICHI) (IFHIMA strategic input = Knowledge domain).
- Vera Dimitropoulos, Chair of the HIMAA Practice Quality and Safety Standards Committee led the development of the Clinical Coding Practice Framework and reviewed the HIMAA Professional Practice Guidelines which are available on the HIMAA website (IFHIMA strategic input = Advocacy and Knowledge domain).

- Sue Walker from Australia has been involved in the work of the Brisbane Accord Group, aiming to improve the Civil and Vital Registration Systems (CRVS) and mortality data principally (IFHIMA strategic input = Knowledge domain). This has involved:
 - 2017 Subregional death certification workshop in Fiji for clinicians (funded by SPC)
 - 2017 Mortality coding workshop for Ministry of Health in Fiji (funded by WHO)
 - 2018 Mortality data quality assessment for Ministry of Health, Tuvalu (funded by SPC)
 - 2018 Subregional death certification workshop in Tonga for clinicians (funded by SPC)

- Sue was also an associate supervisor for a PhD student from Vietnam who graduated in mid 2019. Her topic was about improvements in mortality data at commune health centres in Vietnam (IFHIMA strategic input = Knowledge domain).

- Led by Sue Walker, there are currently four Pacific students studying HIM at Queensland University of Technology with either Australian government scholarships or sponsorship by their own governments. They come from PNG, Solomon Islands, Fiji (x2) (IFHIMA strategic input = Knowledge domain).

- Jenny Gilder, Australia has been active on the IFHIMA Working Group developing a White Paper on Privacy and Confidentiality with the aim of developing an International Policy or Standard (IFHIMA strategic input = Advocacy and Knowledge domain).

LOOKING FORWARD FOR 2019-2022

1. Key Priorities

- Advocacy to increase membership of national HIM associations and IFHIMA
- Increased strengthening of Health Information Management and Clinical Coding as professions. Needs a top down and bottom up approach
- Top down support (tangible and intangible for standardized continuing education for the HIM and Clinical Coding workforce)
- Awareness and readiness for ICD-11 transitioning and implementation.

2. Challenges

- Lack of resources and funding in the low resource countries in the Western Pacific Region to join IFHIMA and have a voice internationally.
- Lack of resources to train HIMs and Clinical Coders to assist in the implementation of health information infrastructures and mortality and morbidity coding and reporting mechanisms to assist with international comparisons, especially for civil registration and vital statistics.
- Lack of recognition of HIMs and Clinical coders as a profession
- HIM and Clinical Coder workforce shortages
- Lack of upskilling of HIMs and Clinical Coders to face the challenges of health information digitization and the impending use of electronic health records and electronic tools such as ICD-11.