Welcome to my first edition of Global News as President!

It is my great privilege to be the President of IFHIMA for the next 3 years. My sincere thanks to Lorraine Fernandes and Marci MacDonald for helping me to ‘learn the ropes’ over the past 2 years and for their tireless work to ensure the effective and efficient operation of IFHIMA. I’d also like to welcome our new Board members, who are introduced to you later in this edition, as well as those returning for a second term.

IFHIMA has a very proud history, one that I was introduced to by the wonderful Phyllis Watson when I was an undergraduate, where she inspired and modeled the ways in which a HIM career can go beyond national boundaries, and of the value of global collaboration.

My vision for the next 3 years is to ensure that IFHIMA continues to deliver on our mission to:

“Represent and advance the global Health Information Management profession.”

We have have gained 2 new National Members in the past year, and I would like to see this further increase, especially with the new Regional Island Network member category approved at the Virtual General Assembly. We now have over 150 Associate Members from 30 nations so there is great opportunity to mobilise them to assist the Federation in achieving our objectives.

I look forward to ensuring that the work commenced in the Strategic Pillars Working Groups is continued and strengthened in the coming 3 years. We will also be establishing a number of Communities of Practice to strengthen member engagement with colleagues with shared interests. And we will be establishing more regular contact with the National and Deputy Directors of IFHIMA by holding virtual annual meetings.
I will be expanding our connections with WHO. I recently met with Steve MacFeely, the WHO Director of Data and Analytics, to discuss ways in which IFHIMA could support the work of WHO in this area of expertise that is a core skill for HIMs. I have also begun connecting the new IFHIMA Regional Directors with the WHO-FIC focal points in each of the WHO Regional Offices.

Finally, I’d like to thank all of you, our valued members, for your continued commitment to IFHIMA. IFHIMA is YOUR association so help us go from strength to strength and achieve our vision of:

“a health world enabled by quality health information.”

Outgoing Presidents Message

November 9, 2022

In Dubai three years ago, I shared my vision of IFHIMA priorities for my term. Thanks to a large group of volunteers from around the globe and great contractors we’ve done a pretty good job of meeting this vision. However, COVID hit the world about two months after the 19th Congress in Dubai and was later declared a pandemic. Obviously, the Board had to do a major pivot in our first activity, defining a new strategic plan.

First, I must thank Gail Crook Robinson, former Executive Director of the Canadian Association, for guiding us through exercises remotely to reach a consensus about the new plan. The Board and invited guests, with the assistance of Gail, reflected on past membership surveys, industry trends, feedback from the General Assembly in Dubai, and literature review. Throughout today’s VGA you will hear updates from the leaders of the Strategic Pillars and Foundation. Reports of the Pillar activities were detailed in the information packet sent October 15th.

I’m focusing my brief Outgoing President’s message on timely and effective communication, as this is essential to meeting the Strategic Plan and our goals. Hundreds of volunteer hours went into creating new IFHIMA work products. Many thanks to each of you for sharing your time and insights.

These products were produced to:

- Enhance our image
- Position IFHIMA as credible leaders in the health information arena
- Demonstrate our general and focused knowledge, with an eye to Developing Nations

If you’ve not already using these work products, please visit our website, as these should be viewed as tools to enhance your personal knowledge and skills, as well as your Associations.

With the strategic plan we were encouraged to use the SMART principles—Strategic, measurable, actionable, realistic, timebound. Our social media with MailChimp, our contact management database, and LinkedIn has grown tremendously, with 100-300% growth each year as this graph illustrates. I believe our tremendous growth in social media, website clicks, and other channels directly underpins the membership and revenue growth.

Increasing our industry visibility is central to raising our stature and creating recognition for our skills. We undertook five key activities in the past two years to specifically raise our profile in ICD-11 implementation. These activities, like all other work products, take sometimes hundreds of hours to produce. My thanks to the Leaders listed on this table and countless other volunteers.

<table>
<thead>
<tr>
<th>IFHIMA and ICD-11</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ICD-11 is a priority for IFHIMA across all our Strategic Pillars</strong></td>
</tr>
<tr>
<td><em>Membership, Engagement and Growth, Developing Nations, Education, Training and Research, and Strategic Partnerships.</em></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IFHIMA Work Product</th>
<th>Date Released</th>
<th>Leader(s)</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD-11 Whitepaper</td>
<td>February 2021</td>
<td>An-Cherwitz (USA)</td>
<td>Articulates IFHIMA ICD-11 detailed position on Website, Board updates , WHO, Social Media</td>
</tr>
<tr>
<td>Infographic</td>
<td>October 2021</td>
<td>Lorraine Fernandes (USA)</td>
<td>Quickly explains ICD-11 in any setting</td>
</tr>
<tr>
<td>Day Two SHIMA Annual Meeting</td>
<td>December 2021</td>
<td>Lorraine Fernandes, Marci MacDonald (Canada)</td>
<td>Entire day of ICD-11 global speakers targeted for ENW audience</td>
</tr>
<tr>
<td>Position Statement</td>
<td>April 2022</td>
<td>Filipa Pretty (Australia)</td>
<td>Officially articulates IFHIMA position on ICD-11 adoption and importance of HIM</td>
</tr>
<tr>
<td>IFHIMA, SEDOM, IHIM Virtual Event</td>
<td>September 2022</td>
<td>Lorraine Fernandes, Marci MacDonald, Guillermo Palacio (Spain), Sandy Burns (UK)</td>
<td>Promote ICD-11 to Europe, Middle East and Africa, plus replay for global use</td>
</tr>
</tbody>
</table>
Please stay in touch with IFHIMA through our various communication channels I’ve already discussed. Consider writing for Global News. The editors, Dilhari DeAlmeida for the past four years and the AIHW team in Australia for the next term welcome unsolicited articles and are available to assist writers!!

Adding value to our relationships, whether personal or professional, is a driving force for me and has guided my term. Be well and thanks for the opportunity to lead this great organization for the past three years.

My wish for you and for IFHIMA

Again, my sincere thanks to all the volunteers who have helped advance our vision “A healthy world enabled by quality health information.”

Lorraine Fernandes, RHIA
IFHIMA President
2019-2022

WHO-FIC Network Annual Meeting 2022

The theme of the 2022 annual meeting of the World Health Organization Family of International Classifications (WHO-FIC) Network was “interoperability and mapping of health information.” At the start of the weeklong meetings, WHO relayed the state of the Network. Notable updates included more than twenty translations are underway and WHO clarified the intent to maintain one common open-source platform, the Foundation, as the knowledge source for the classifications in the WHO-FIC. WHO has made significant progress on tools, including the IMplementation and INformation Tracker (iMINT) provides views by region or by country. In addition, the proposal platform (https://icd.who.int/dev11) has been updated to accept proposals on post-coordination, extension codes, and suggestions for the reference guide.
WHO-FIC webinars over the last year have included 11,000 participants from 140 different countries and additional planned webinars are posted on the WHO website (https://www.who.int/standards/classifications). ICD-11 training through the WHO Academy is under development. The WHO Classifications and Terminologies Unit is also working on a reference guide for the International Classification of Functioning, Disability and Health (ICF) and plans to produce a guide to the multiple reference guides (a meta-guide). There is also a new mapping task force, where the top priority is to make a list of maps requested by countries and establish mapping use cases. Highlights from some committees and reference groups are summarized below.

**Morbidity Reference Group (MbRG)**

The group discussed how to ensure descriptions in ICD-11 are maintained. Approximately 27% of ICD-11 categories have descriptions, which is over eighteen thousand descriptions that are intended to differentiate items. The aim is to make descriptions robust but simple and limited. The group will produce a methodology paper.

There was also an update on work on an international case mix tool. A project is underway to convert the Nordic grouper, which is open source and has an online tool, for use with the current WHO-FIC classifications. This involves replacing ICD-10 with ICD-11 and replacing the Nordic Classification of Surgical Procedures (NCSP) with International Classification of Health Interventions (ICHI). Currently, effort is focused on mapping the classifications and once that is done, they will explore the grouping logic. The MbRG requested a project document.

The WHO, in collaboration with the MbRG, is testing select neoplasm codes to obtain feedback on consistency in the coding tool guidance and coding results. WHO staff are analyzing results from an initial test of several cancer codes and additional codes will be tested before year end.

**Mortality Reference Group (MRG)**

Approximately half the countries in attendance are working on implementing ICD-11 for mortality reporting. Efforts are underway to transition existing mortality tools from ICD-10 to ICD-11 and develop additional tools. This includes the Iris application, which is the legacy application that has been in use for many years, and development of Digital Open Rule Integrated cause of death Selection (DORIS). Such tools are key enablers to implement ICD-11 for mortality. The ultimate goal is to have a standard set of rules based on the Reference Guide and to harmonize Iris and DORIS to ensure outcomes are compatible. Manual coding inter-rater reliability is very poor, so using either tool will result in better data and improved comparability.

**Education and Implementation Committee (EIC)**

Approximately two dozen countries shared their status on implementing ICD-11 for either mortality or morbidity. Many have created a roadmap, with the earliest implementation dates ranging from 2024 to 2027. Challenges include funding, infrastructure, and other resources. Some shared that COVID-19 delayed planning. Meanwhile, providers in Kuwait have been documenting diagnoses in ICD-11 since December 2021. While Australia, Canada, Germany, and the UK relayed they are actively engaged in analyzing the casemix index impact, stakeholder communications, and/or translation and mapping efforts. The EIC, MbRG and WHO are establishing an Implementation Forum and will be issuing a call for volunteers.
The WHO has contracted with a vendor to produce the WHO Academy training modules. The first module, with foundational training on ICD-11, will go into production later this year. The strategy is to start with one module as a prototype, with evaluation and feedback before proceeding with others. Topics for future modules include more in-depth training on morbidity as well as mortality, a traditional medicine module, and other specialties. Countries developing their own training in the meantime should ensure it is consistent with the WHO reference guide.

Informatics and Terminology Committee (ITC)

The committee discussed the progress that has been made on various tools being developed to support implementation. For mortality, these include DORIS and the Electronic Medical Certificate of Cause of Death (eMCCD). New tools such as the ICHI Coding Tool as well as updates to existing tools have been completed. For example, the ICD-11 Coding Tool has additional postcoordination support. Possible future enhancements to the WHO-FIC Foundation may include populating the content model with other “open source” systems, e.g., the Mondo Disease Ontology and Human Phenotype Ontology. The content alignment and harmonization project is shared by the Family Development Committee and the ITC. Work on the unified foundation for ICD-11, ICF, and ICHI thus far has included harmonization of ICF Body Structure entities and ICD-11 Anatomy and Topography extension codes. Next steps are to describe different use cases of joint use of the WHO-FIC reference classifications and inventory areas that overlap.

Summary

Over the course of five days, the WHO-FIC Network successfully advanced the committee and reference group work items that support the WHO-FIC strategic plan. Updates from the WHO Classifications and Terminologies Unit also indicate progress on education, reference materials, and tools to assist Member countries with implementation. The WHO World Health Assembly in May 2023 will include a report on ICD-11 implementation status and possibly a resolution for ICHI.

Authors:
Kathy Giannangelo, Mary H. Stanfill and Joanne Valerius

Professional networking begins in college. This can look different across professions, schools, and even student bodies. But making connections is an important first step. Online education undoubtedly makes this more challenging, but the internet is not a barrier. In fact, it’s a whole new world! Creating a LinkedIn account to further your reach is an option for everyone, where you can strengthen your face-to-face impact, or as a starting point that you can build on as you progress through your career. Many employers look to LinkedIn to find candidates and to learn more about them.

At UCF, the health information management program (formerly medical records) has been available as a major since the 1970s. Our alumni often settle in Florida and we keep in touch with many of them through networking efforts such as LinkedIn and Facebook, as well as through professional meetings. The
personal connections made in the classroom and in our careers often become lifelong friendships. To encourage student involvement, we often host regional professional meetings on campus and we are able to reconnect with alumni and forge new relationships between our students and employers in Central Florida. The opportunity for mentoring between the workforce and students can benefit from the interactions at this type of encounter which is professional but less threatening than a formal setting in a healthcare organization. In other words, the student is on “home turf” and can put their best foot forward in a supportive environment. Student membership is available in regional organizations, and we also encourage American Health Information Management Association (AHIMA) membership which includes a component state association (CSA) membership. Taking advantage of all of the perks of membership is important for students to network too!

Now that UCF has joined IFHIMA, the opportunities for professional networking have expanded globally. All HIM professionals benefit from connections who they can share ideas with and learn from. For example, the early adopters of ICD-11 will have lessons learned for the United States and other countries who will be later adopters. Students need to be aware of the international trends in health information management and IFHIMA provides a wealth of resources to add to the base of knowledge.

As noted above, we encourage regional meeting attendance, as well as the Florida Health Information Management Association annual meeting. To further promote and support attendance nationally, UCF has taken groups of undergraduate students to the national AHIMA conferences. We travel as a group and the experience provides students with an instant way to network among their peers. When we reach the exhibit hall for the first time, the students are not intimidated, rather they have a plan to visit vendors and learn about opportunities for employment, volunteering, and, of course, networking.

Author:
Alice M. Noblin, PhD, RHIA, CCS, PMP
CCIE Interim Associate Dean, Academic Affairs
University of Central Florida
Alice.noblin@ucf.edu

ICD-11: IFHIMA Continues Our Commitment to its Strategic Priority

IFHIMA and our national members SEDOM and IHRIM welcomed individuals from xx nations to our 29 September, 2022 virtual three hour event dedicated to advancing ICD-11 knowledge.
Speakers from the WHO, Australia, Canada, Czech Republic, Germany and Nigeria shared their perspectives on the status of implementation, key priorities to ensure a successful ICD-11 journey, and much more. Ulrich Vogel from Germany and Miroslav Zvolsky from the Czech Republic shared their respective countries strategies and journey to ICD-11 adoption. Eunice Omidoyin from Nigeria shared her research on preparedness for ICD-11 in Africa.

Special thanks to Megan Cumerlato, Australia, who enlightened the audience about the use and progress of ICHI, The International Classification of Health Interventions. Akeela Jamal, Canada, provided 11 essential change management steps in ICD-11 implementing.

IFHIMA sincerely thanks 3M for being our corporate sponsor and underwriting the cost of six developing nation scholarships for the event. Thanks also to the Virtual Medical Academy (VMA) for their digital platform and marketing.

My sincere thanks to Marci MacDonald, Mandy Burns, and Guillermo Paluzie for their participation in planning and executing the event.

Author:
Lorraine Fernandes, RHIA
IFHIMA President 2019-2022

After three years of virtual meetings, the health information community came together in person at AHIMA22 Global Conference in Columbus, Ohio, October 9 – 12.

The event kicked off with an opening address by Marcus Whitney, founding partner of Jumpstart Health Investors.

"You can believe in innovation, but not without hustle, heart, and some amount of risk," he said.
“We see a world where health is transformed by data and information advances... A world where health information professionals are recognized alongside their clinical and managerial colleagues as vital leaders in healthcare’s quest to improve outcomes, lower costs, and enhance access,” she declared.

How do we get there? AHIMA will continue to:

- Drive a robust health public policy agenda
- Identify new learning and certification opportunities
- Engage in thoughtful strategic partnerships that help deliver on the world that we envision.

The last day, AHIMA President/Chair-Elect Jennifer Mueller, MBA, RHIA, SHIMSS, FACHE, FAHIMA, encouraged everyone to use a “power pose” whenever they need an extra boost of confidence.

“We often, the work we do can feel separate from real people and real experiences. But put yourself in the shoes of a daughter or son who feels helpless because the information they need is not easily accessed,” she said, “then consider the work we do.”

Mueller noted there are challenges and hard work ahead for the profession. Mueller stated “When you feel like you can’t do this remember your power pose and know that you can!”

The next day, Dr. Tina Shah, MD MPH, a national expert on digital transformation and health policy, delved into issues at the heart of the healthcare industry: burnout, equity, and consumerism.

We cannot truly achieve health equity if people do not understand the system or the information that is provided to them, she noted. But health information professionals can make a difference. Taking care of data, digitizing healthcare, and reducing the cognitive load on clinicians are all vital steps toward a better healthcare future.

AHIMA CEO Wyclecia Wiggs Harris, PhD CAE, shared powerful stories of health data being used to save patient lives.
Mateo Salvatto, a 22-year-old tech entrepreneur, delivered the final keynote address. Focused on how he could use technology to help people, he created an app that has helped over 350,000 people with hearing and verbal communication disabilities. Salvatto encouraged the audience to imagine all the things they could do. “Anyone can change the world,” he said.

Authors:
Darryl Robinson, Amy Ferguson, and Sarah Sheber for AHIMA

A very special thank you to Mr. Cheens Lee, President of the Health Information Management Association of Australia, for attending the conference and presenting on the main stage on Tuesday, along with our IFHIMA President, Ms. Lorraine Fernandes – who gave a well received presentation to promote the IFHIMA Congress to be held October 29th – November 1st, 2023 in Brisbane, Australia!

Mr. Lee also spent considerable time in support of IFHIMA by being present at the booth and meeting with many delegates.

IFHIMA also thanks him for providing gifts from Australia – which were drawn and presented to the following lucky attendees:

Rosalee Alston-Rivers
Maria Ward
Emmalee Kiper
Shannon Ricketts
Jacqueline Moczygemba
Debi Primeau

Congratulations, and congratulations to the lucky folks who caught the Koala and Kangaroo that Lorraine and Cheens tossed to the enthusiastic crowd, following their presentation!

We look forward to seeing you in-person at the Brisbane Congress!

Please visit our website for further information!

Author:
Marci MacDonald
Brigadier Isaac Seidl concluded the opening plenary sharing his experiences of how health information has informed improvements in the defense force health care services.

The conference sessions covered a wide range of health information related topics. There were presentations from the tertiary education sector discussing the effects of remote learning and placements on HIM students; the impacts of the COVID-19 pandemic on the monitoring of reported deaths, training opportunities for coders, and health service provision were all highlighted. Speakers also discussed the future of the healthcare sector, emphasising the need for change due to forecasted population needs and clinician shortages. Opportunities ICD-11 poses in improving clinical information capture across a variety of use cases was also discussed. Clinical updates were provided on haematology, burns, endocrinology, mental health, and cardiology. A special highlight was the motivational session on Laughter Yoga with Merv Neal.

Fantastic workshops this year encouraged engaging in research, the role of information management in digital projects, coding auditing, practical use of ICD-11 and the potential introduction of cluster coding in ICD-10-AM.

Networking opportunities were aplenty with the Prohibition Gin cruise, Welcome Reception and Conference Dinner events. Plenty of dancing, posing for photos (in and out of the photo booth) and good conversation were had, as well as new connections made.

On the final day of the conference, presentations were themed around governance of health information management as well as general HIM topics, clinical document integrity and improvement, and coding and classification.

In the closing session, an address from the President Elect of IFHIMA Vicki Bennett invited attendees to the 40th HIMAA Annual National Conference in 2023 which will be held in conjunction with the 20th IFHIMA Congress, in Brisbane, Australia from 29 October to 1 November. The IFHIMA Congress will showcase innovations from presenters from Australia and internationally with the theme ‘Advancing global health: in pursuit of high-quality digital information’. We look forward to seeing you there!

Authors:
Georgia Savvopoulos, Breanna Harnetty, Brooke Macpherson, Filippa Pretty

The Canadian College of Health Information Management (the College) and CHIMA, Canada’s Health Information Management Association (together ‘the Organization’), are pleased to share the following updates.

CHIMA has recently concluded its annual Health Information Professionals (HIP) Week, where attendees learned of the Organization’s new five-year strategic plan, a new professional designation, and evolved curricular standards.
Evolving curricular standards, launching a new medical coding working group

Over the past two years, the College has engaged in rigorous consultations and research to produce the new Health Information Fundamentals Curricular Standards. The new standards have evolved from the Learning Outcomes for Health Information Management (LOHIM). This aligns with the College’s mission to promote lifelong learning, create flexibility within curriculum models, and enable more opportunities for health information (HI) professionals in Canada.

During HIP Week, CEO and Registrar Jeff Nesbitt, BA, MBA, ICD.D, explained the reason for these new standards: “This evolved approach allows us to simply be more specific in our terminology and evolve our efforts versus a wholesale change, which isn’t needed. We’ve said that LOHIM has served us well, and it truly has. What we’re doing is simply refining it based on our current frameworks and models.”

To foster discussions on modernizing national coding standards, the College has formed a medical coding working group, which will kick off in December 2022.

Bringing visibility to professionals in registration roles

The College has also launched a new professional designation—the Health Information-Certified Associate (HICA). This new designation will bring professional and academic credibility and visibility to individuals in registration roles.

While the immediate focus is registration within acute care, this certification applies to roles in primary care and beyond, such as health records clerk, medical office assistant, data entry clerk, administrative support worker, and others.

Returning to in-person education days

For the first time since the pandemic, CHIMA recently hosted its Manitoba and Nunavut chapter members at an in-person education day. At this event, Dr. Joss Reimer MD MPH FRCPC shared the importance of health data in distributing vaccines and mitigating vaccine misinformation in Manitoba. Also speaking at the event were the province’s privacy experts, who shared best practices in privacy management and confidentiality.

The Organization anticipates more opportunities to elevate the voices of Health Information professionals and advance the significance of their roles in the delivery of care.

Authors:
Lola Opatayo

The Kenya Records and Information Management Board

Background

In Kenya, in late 1960s, the first Medical Records Officer was employed by Ministry of Health. By 1970 there were only 2 qualified medical records staff in Kenyatta National Hospital. Through the 1970s collaboration between Kenya and the UK, many Kenyans received scholarships to study medical records in Britain and become registered by the Association of Medical Records Officers – United Kingdom (AMRO (UK)).

The demand for registration of an association grew and in 1975, the Association of Medical Records Officers Kenya (AMRO-K) was established and registered under Cap 108 of Registration of Societies. Since then, the AMRO-K has remained an active member of International Federation of Health Information Associations (IFHIMA).
The Association's objectives for the Health Records and Information Management profession are:

1. Develop guidelines and standards for professional practice.
2. Promote universal growth in the profession in terms of numbers and recognizing quality training.
3. Ensure availability of quality workforce for the management of health records, and health and related information systems within the health sector and beyond the borders.
4. To enroll and renew memberships, retain, and maintain members in the professional practices

In 1976, to further improve the professional establishment of Health Information Managers in Kenya, there was a collaboration with the Directorate of Personnel Management for assistance.

In 1978, scholarships were limited while the demand for the personnel was high, as such the Kenyan government began training health information professionals locally with a two-year certificate course in Medical Records. In 1990, a diploma course was included to the program, and in 2009, a degree course. So far over 6000 personnel have been trained in various levels, with about 4000 registered by AMRO-K working in both the public and private health sector, and about 600 active members contributing to AMRO-K.

SWOT Analysis

Despite having been in existence for several years, the profession of medical records and health information management services in Kenya has not managed to make a breakthrough in terms of transforming the profession in its critical interventions and operations towards meeting the most significant targets and indicators as expected by many of the members. This has been attributed to a set of factors, most of which are inter-related, such as:

1. Absence of a legislative framework to support the profession within the health sector and management of the affairs of medical records and health information management services
2. Weak networks among the health information professionals
3. Inadequate funding and limited or low levels of resources
4. Limited recognition which resulted in de-motivated members
5. Lack of professional advancement locally
6. Varied working titles and non-acceptance of job titles
7. Poor structure within the Ministry of Health
8. Association had been dormant for several years and in the recovery stage
9. Low subscription of members to the Association
10. Low enumeration of the health information professionals
11. Lack of qualified staff in highly placed positions
12. Lack of a well-articulated, prioritized strategic plan; and
13. Weak health information management systems in the sector.

The combination of these factors led to the stagnation of various activities towards effectively delivering the services as described in the constitution of the association and in the scheme of service of the medical records and health information profession.

The scheme of service was developed and first revised in 2012, then again in 2018 and 2022 as carrier guidelines with the aim of:

- Providing for a well-defined career structure which will attract, motivate and retain competent and suitably qualified Medical Records and Health Information Management professionals in the Civil Service.
- Providing for clearly defined job descriptions and specifications with clear delineation of duties and responsibilities at all levels within the career structure to enable the officers understand the requirements and demands of their jobs.
Establishing standards for recruitment, training, development and advancement within the career structure on the basis of knowledge, qualification, merit and ability as reflected in work performance and results and ensure appropriate career planning and succession management.

In 2015, as a Private Members Bill, the National Assembly House Health Committee members supported the Bill. The Act was signed off herein referred as The Health Records and Information Managers Act 2016. In the Kenya Gazette Supplement Acts 2016 Number 81 (Acts No. 15).

In 2019 to 2022 AMRO-K lobbied to members of the National assembly, the Cabinet Secretary responsible for Health as well another process of amendment of the Health Acts began in the ministry to align all Acts to the Health Act 2017. It was also imperative that under the Presidential executive orders, we ensured that among the Acts pending implementation in the Ministry of Health and most Ministry of Health strategic documents, the Health Records and Information Managers Act was among the other Acts on the list. All these resulted to the current Kenya Gazettement No 9323 of 2022 to the Board for HRIM with the following members:

1. Onesmus Kamau
2. Mercy Kahare
3. Silas Otieno
4. Amos Rangang
5. Olive Muchene
6. Esabel Juma
7. Anne Waihura
8. Pepela Wanjala

The main lessons learned throughout this process are:

- Members of the association must be cohesive enough to push and facilitate the Bill to the end. In our case members contributed towards the facilitation of the private bill.
- Consistent lobbying, and communication to the leadership.
- Work with other professionals and through other organisations or committees. In our case AMRO-K pushed some of the issues for the profession through the Kenya Health Professionals Society where it is a member, The Kenya Health professional oversight authority (KHPOA) and the parliamentary Health committee.
- Collaboration with different institutions. During the nomination it’s imperative that all stakeholders from training institutions, regions, different organisations (finance, etc.) must be engaged.

Acknowledgments

1. Cabinet Secretary Ministry of Health Sen. Mutahi Kakwe EGH for Gazettement of the Board
2. The Principal Secretary Ministry of health Susan Mochache for facilitating the nominations and communication to the different organisations
3. Chair parliamentary Health Committee Hon. Sabina Chege
4. Drafter and mover of the Bill Hon. Neto
5. AMRO-K Members for consistent guidance and support including financial
6. AMRO-K executive members (Alice, Kahare, Odira, Sikolia, Yusuf, Wanjala) and all previous executive members AMRO-K
7. Ministry of Health Legal team,
8. Submission of nominees from the different entries / institutions

Author:
Pepela Wanjala
One key outcome of the pandemic was recognizing that advanced training in the field of public health informatics (PHI) is necessary. The United States Centers for Disease Control and Prevention (CDC) defines public health informatics as “the systematic application of information, computer science, and technology to public health practice, research, and learning.”

The World Health Organization has not issued a definition for PHI. In 2021, the Office of the National Coordinator for Health Information Technology funded various organizations in order to train persons from underrepresented populations in public health informatics and technology. The University of Texas Health Science Center at Houston received one of these awards for its “Gaining Equity for Training in Public Health Informatics and Technology” or GET PHIT program. GET PHIT includes developing curriculum to train undergraduate and graduate students, as well as professional development for existing professionals. Internships are also offered for students who qualify.

The online professional development training is available to anyone who is interested, and on demand until September 2025. Continuing Education certificates will also be awarded upon completion of each unit as well. The professional development program was developed based on a needs assessment conducted with multiple public health agencies in Texas. The first available module is Introduction to Public Health Informatics and takes approximately 6 hours to complete. Once registered for the training, participants have six months to work through the materials. The next module to be loaded will be Public Health Analytics, followed regularly by other modules.

Author:
Susan Fenton, PhD, RHIA, FAHIMA
Associate Professor & Associate Dean for Academic and Curricular Affairs
UTHealth Houston, School of Biomedical Informatics

Welcome to the new IFHIMA Board Members

The IFHIMA board of Directors is excited to announce four new members. These appointments were made at the IFHIMA November 2022 meeting.

Hosizah Markam, Dr, M.KM
IFHIMA Regional Director, Southeast Asia

Hosizah is the Head of Health Information Management (HIM) Study Program, Faculty of Health Science, Universitas Esa Unggul Indonesia. She was one of the founders and the first chairperson of the Indonesian Higher Education for Health Information Management Association (APTIRMIKI) from 2011-2016. Previously, she was also on the board of the Indonesian Professional on Medical Records and Health Information Association (PORMIKI) between 1999-2011 and has participated in developing policy and curriculum for HIM education in Indonesia.
Hosizah has a baccalaureate degree in HIM, a master’s degree in public health major in Health Informatics, and a doctorate degree in Health Science, majoring in Health Information. She was recipient of the AHIMA Foundation “The Jimmy Gamble Endowed Student Merit Scholarship” in 2014. Currently, she is on the Advisor Board of APTIRMIKI and a team assessor of the Indonesian Accreditation Agency for Higher Education in Health (IAAHEH). She is invited to speak at seminars and is also a reviewer for several journals and research proposals at the Ministry of Education and Culture, Research and Technology RI. Her research covers a range of topics, including the development, testing and publication regarding Electronic Integrated Antenatal Care (e-iANC), digital health, public policy implications of computing systems and information governance.

Ahmed Alhatlan
IFHIMA Regional Director, Eastern Mediterranean
Ahmed Alhatlan is a co-founder and vice-president of the Saudi Health Information Management Association (SHIMA), and also the Regional Director for the East Mediterranean at the International Federation of Health Information Management Association (IFHIMA). Ahmed has 20 years of experience in health information management, casemix, classification systems, hospital management, data privacy, clinical documentation improvement, change management, policy, health quality, in addition to developing and evaluating strategies. He has worked in many governmental and private health sectors. Ahmed participates in many national and international professional and scientific committees and has discussed many scientific theses in several international conferences. He also contributed to the publication of multiple research papers in a number of scientific journals related to health information. Ahmed holds a Bachelor’s degree in Health Information Management and a Master’s degree in Health Services Management from Curtin University in Australia. In addition to many international professional accreditations such as Certified Strategy Development Professional (CSP), Certified Professional in Governance, Risk Management and Compliance (GRCP), Certified Health Information Manager (CHIM), Certified Professional in Healthcare Information and Management Systems (CPHIMS), and Certified professional in Patient Experience (CPEx).

Sharon Campbell
IFHIMA Regional Director, Western Pacific
Sharon Campbell has a broad range of experience in the health, business and education sectors over 25 years which has provided extensive knowledge and skills, including a knowledge of management, quality, risk, clinical classification, casemix, administrative and hospital management, and change management. Sharon currently works within the private health insurance industry and seasonally lectures at Curtin University in the Masters of Health Administration course. Sharon has course coordinated across two universities in the Health Information Management program, these being Curtin University and La Trobe University. Sharon has participated in and chaired in a number of committees, two current ones being the Health Information Management (HIMAA) Accreditation Council and as Convenor of the Privacy and Security Community of Practice.
Sharon also participates in the HIMAA HIM-Interchange Journal Committee. Other activities that Sharon has participated in includes the delivery of industry relevant podcasts through HIMAA. Delivery of presentations has occurred at a number of conferences over the last few years and also authoring of papers. Sharon has a passion for the Health Information Management industry and mentoring and helping others to achieve good outcomes in their careers. Sharon holds an undergraduate degree in Health Information Management (Curtin University) and a Master’s of Management of Health Services (Curtin University) and additionally a Graduate certificate in Health Data Auditing and Integrity (La Trobe University) is held. Sharon is looking to enrol in a PhD in 2023 with the Department of Health Economics and Data Analytics (Curtin University). Sharon is a HIMAA Certified Health Information Management (CHIM).

Lynette Czarkowski, MS, RHIA, FAHIMA
IFHIMA Regional Director, The Americas

A HIM professional her entire career, Lynette is Chief Operating Officer and Executive Consultant with e4 Services, where she is responsible for consultants and consulting engagements across six practices spanning health IT, HIM, and revenue. In her role, she also consults on EMR implementation engagements, specializing on program governance and project management. Prior to e4, Lynette was Senior Vice President of Products and Services for the American Health Information Management Association (AHIMA). Before AHIMA, Lynette served as Director of Product Management at SoftMed Systems, and prior to that enjoyed a successful career in the traditional HIM arena as Director of HIM at Georgetown University Hospital in Washington, DC and at Saint Francis Hospital of Evanston, Illinois. Throughout her career, Lynette has been active in numerous HIM committees and projects at the local, state, and national level. She recently completed a term on the Board of Directors of the Illinois Health Information Management Association and is a past president of the District of Columbia Health Information Management Association. Lynette holds a Master’s Degree in Information Systems from the George Washington University and a B.S. in HIM from the University of Illinois at Chicago.

Tribute to Excellence

During the November 9, 2022, Virtual General Assembly, VGA, I had the great personal and professional pleasure of awarding the first ever IFHIMA Tribute to Excellence Award to Margaret Skurka. Margaret will receive a complimentary registration to the 20th Congress in Brisbane as recognition of this award.

Margaret is well known to many through her tireless work as an educator, past President of IFHIMA and AHIMA, 12 years on the IFHIMA Board, and 10+ years as the IFHIMA representative to WHO FIC EIC and MbRG.

These illustrative quotes are just the tip of the iceberg in validating the depth of Margaret’s dedication, professionalism, collegial spirit, and commitment to global HIM.

Author:
Lorraine Fernandes, RHIA
IFHIMA President 2019-2022
Health Information Management Journal (HIMJ)

Health Information Management Journal (HIMJ) has been published in one form or another for 51 years. It is a fully peer-reviewed, health information management research journal. It has extensive international reach and reputation, and is a significant entity within the global health information management profession and well beyond. HIMJ is owned by the Health Information Management Association of Australia (HIMAA). It is published by SAGE, an international publishing house. Refer journal site: https://journals.sagepub.com/home/him

HIMJ is guided by an experienced Editorial Board, which incorporates an International Advisory Board comprising leading, international researchers in health information management. In accord with international journal publication ethics, HIMJ has full editorial freedom and independence.

The importance of HIM research and publication

Research, and peer-reviewed publication of the findings, are essential to underpin and support the knowledge base of the HIM profession at both global and local-country levels. The formal showcasing of published HIM research and scholarly work is critically important in building and promoting the profession’s evidence-base and prestige. We encourage experienced and emerging HIM researchers from around the globe to submit high quality manuscripts for consideration for publication. The article categories (types) are: original research; professional practice and innovation; literature review; forum; and article commentary. Refer Submission Guidelines: https://journals.sagepub.com/author-instructions/HIM

The Impact Factor

HIMJ is the only scholarly journal owned by a national health information management association to have an Impact Factor (IF). This is a universally-applicable, scientometric index for ranking academic journals.

The IF is based on the mean, annual number of citations of articles published in a journal in the previous two years (2-Year IF), or previous five years (5-Year IF). HIMJ’s 2-Year IF has increased this year to 3.778; its 5-Year IF has increased to 3.611.

Journal IFs are independently calculated and indexed in Web of Science; this pre-eminent, global citation database includes the official IF rankings of tens of thousands of journals from around the world.¹ HIM researchers will be interested to know that in addition to being indexed in Web of Science (Clarivate Analytics), HIMJ is included in the following internationally significant, journal abstracting and indexing databases: CINAHL; Clarivate Analytics: Science Citation Index Expanded (SCIE); Clarivate Analytics: Social Sciences Citation Index (SSCI); EBSCOhost; Informit’s Humanities and Social Sciences Collection; MEDLINE; ProQuest; PubMed; and Scopus. This extensive distribution means that HIMJ’s articles are widely available for health and medical researchers, and students, across the globe to retrieve, read and cite.

Opportunity for HIM researchers - Special IFHIMA Congress issue

In recognition of the fact that HIMAA will have the privilege of hosting the International Federation of Health Information Management Associations (IFHIMA) 2023 Congress in Brisbane, Australia, HIMJ is planning a Special Congress Issue (Vol. 52, Issue 1, January 2024). The purpose is to celebrate the research work of international health information management colleagues.

The IFHIMA 2023 Congress peer-review panel members will allocate scores, based on research-related criteria, to the IFHIMA Congress research abstracts during the double-blind peer review process. The authors of the highest-scored research abstract from each of the IFHIMA World Health Organization (WHO) Regions will be invited by the Editor of HIMJ, Dr Joan Henderson, to submit a full research paper for peer review and potential publication in HIMJ’s International Special Issue commemorating the IFHIMA Congress. Authors of the highest-scoring abstracts will be advised by email and asked to confirm their willingness to submit a full paper within the timeframe (by 15 June 2023). These will be announced publicly at the Closing Session of the Congress.

Authors are reminded that, for research papers, the HIMJ Editorial Board and SAGE Editorial policies require that all papers reporting human studies must state that the relevant Ethics Committee or Institutional Review Board has provided (or waived) approval, including the name of the Institution of the review committee, and the approval number.

Author:
Kerin Robinson, BAppSc(MRA), BHA, MHP, PhD, CHIM
Editor-in-Chief, Health Information Management Journal.

IFHIMA Holds First-ever Virtual General Assembly

November 9, 2022, was the historical day for the first-ever IFHIMA VGA. The virtual approach was required as the 20th Congress, where the General Assembly would normally be held, will not be held until October 29, 2023 in Brisbane. The VGA represented the end of the 2019-2022 term for the Board of Directors.

Primeau Consulting Group’s Information Governance (IG) Assessment and Consulting Services allow healthcare organizations make better decisions by assessing data and information, identifying sensitive information assets and developing a governance program to align with its strategic goals.

For more information on how PCG can assist your IG goals, visit us at www.primeauconsultinggroup.com or call 424-203-3203.

A flipbook of reports and videos from the Strategic Pillar Leaders and Regional Directors was distributed mid-October. The post-event Zoom recording and the flipbook can be found at IFHIMA.org.
Highlights from the VGA include:

**Announcing the ratification of two Constitutional Amendments.** The Regional Island Network creates a new category of membership for geographically close islands with a small number of health information professionals. The Vacancy in Office amendment creates provisions to address replacing the President Elect position in the event of vacancy in this office. Previously the Constitution was silent on this issue.

**2025 Congress site.** The Saudi Health Information Association (SHIMA) was the sole bidder for the 2025 Congress. Ahmed Alhatlan, incoming Eastern Mediterranean Regional Director, shared that SHIMA will host the 21st Congress in November 2025 in Riyadh or Jeddah, KSA.

**Tribute to Excellence.** Margaret Skurka, MS, RHIA, from Chicago, Illinois, USA was awarded the inaugural Tribute to Excellence. See the separate article in this GN issue for details.

**Membership.** Growth in all categories of membership is evident as shared by Marci MacDonald, Membership Chair. As of November 9, the Nations total 20, Associates 180, Educational institutions four, and Corporate seven. Associates grew 38% year over year and Corporate grew 40% year over year, with the 2022 number only reflecting ten months of data. Uganda and Saint Lucia were welcomed as our newest national members.

**Review of the finances.** Finances are in good position, with revenue increasing 28% thanks to an increase in membership, instituting sponsorship fees, and revenue from newly created events. The overall fund balance increased 23% past three years. The restricted funds supporting scholarships remains at 53K during the past three years, as interest rates for safe investments were basically nil.

**WHO FIC.** IFHIMA was present in full force at the WHO Family of International Classifications (FIC) meeting in Geneva mid-October. Mary Stanfill, Kathy Giannangelo and JoAnn Valerius participated in committees, workgroups, and general sessions. Vicki Bennett was also in attendance, although representing the Australian Collaborating Centre. Special thanks to Kathy Giannangelo for developing the IFHIMA poster highlighting our activities in support of ICD-11.

**Regional Reports.** The six Regional Directors presented a brief overview of national activity within their respective regions. A detailed summary of regional activities is within the flipbook.

**President’s Report.** Outgoing President Lorraine Fernandes emphasized the importance of timely, effective communication in advancing IFHIMA’s mission, credibility, and industry position. Highlights included 11 new work products addressing workforce development, certification, information governance, leadership, and COVID 19. Global News was published three times per year. Social media through LinkedIn and MailChimp (the IFHIMA contact database) has grown from zero to over 1000 followers in each application. The new IFHIMA website was highlighted as a major achievement. Special recognition was given to the volunteers and contractors who contributed hundreds of hours to each of these products.

**Incoming Presidents Message.** Incoming President Vicki Bennett shared her desire to see the work of active participation throughout the term continue and strengthen. One of the ways to accomplish this is through communities of practice for several priority areas, and this will be explored in early 2023. With videoconferencing readily available, IFHIMA now can more regularly connect with National and National Deputy Directors.
Expanding the IFHIMA relationship with WHO beyond FIC is important, and the conversation has begun with Steve MacFeely the WHO Director of Data and Analytics. Finally, Vicki thanked all valued members and volunteers for their continued commitment to IFHIMA.

**Invitation to Brisbane.** A special invitation to the 20th Congress in Brisbane was issued by Vicki Bennett, incoming President. Vicki shared that the dates have been finalized as 29 October – November 1, 2023, and that program development is well underway. Registration will open February 2023.

The 90-minute VGA closed with a reminder of the IFHIMA vision “A healthy world enabled by quality health information” and best wishes until we meet in Brisbane in a year.

Author:
Lorraine Fernandes, RHIA
IFHIMA President 2019-2022

---

**Coming up in the next issue of IFHIMA Global News!**

- Welcome to the new president-elect – Denise Marshall
- Establishment of Communities of Practice
- IFHIMA International Congress: Brisbane
Letter from the Editorial Team

Welcome to the third issue of Global News for 2022!

We are proud to present this issue from the new Australian editorial team, supporting Vicki Bennett as the incoming President of IFHIMA. Our team is comprised of Health Information Managers (HIMs) with a diverse range of interests and experience. Brooke Macpherson and Filippa Pretty are our senior HIMs with more than 40 years of experience between them. Breanna Harnetty and Georgia Savvopoulos are recent graduates itching to experience everything HIM has to offer. In this issue we reflect upon the work that IFHIMA has previously conducted as well as spotlighting important projects that have been planned for the future.

We will strive to continue to bring you interesting, relevant, and informative content from across the IFHIMA regions. On behalf of the new Australian editorial team, we would like to thank Dilhari DeAlmeida and Lorraine Fernandes for their assistance in compiling and publishing this issue of Global News. The Australian editorial team will publish 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. We encourage contributions from all our member nations to make it a truly global newsletter. Please feel free to contact us with your submissions, ideas and questions. A copy of the guidelines can be found at:


Hope you enjoy this edition and happy reading!

Breanna Harnetty BHlthSc (MedClass), BHlthInfoMgt, Georgia Savvopoulos BICT (HIM), Brooke Macpherson BBSc, BHS, BHIM(Hons), and Filippa Pretty B.App Sci. (HIM).

Disclaimer:

Contributions to Global News are welcomed from members and non-members of IFHIMA and articles should be typed and sent by e-mail to the Editor, Australian team (editor@ifhima.org) for consideration for publication. Responsibility for referencing in any article rests with the author. Readers should note that opinions expressed in articles in Global News are those of the authors and do not necessarily represent the position of IFHIMA.

PS: If you do not wish to receive further IFHIMA/IFHIMA messages or editions of Global News please let us know and we will remove you from the mailing list. (editor@ifhima.org)