President’s Address

Before writing this President’s address, I quickly reviewed what I wrote last time, and things could not be more different now here in Canberra, Australia. We are no longer struggling with a heat wave but have slips into the cold and frosty winter months with overnight temperatures dropping below 0° Celsius. This is making me long for meeting with you in beautiful temperate Brisbane later this year even more.

As you will see later in this edition, I had the opportunity to attend some meetings in Fiji recently with a number of my Pacific health information colleagues - a number of whom I am hopeful will be able to attend this year’s Congress.

My sincere thanks to Lorraine Fernandes who is tirelessly working to promote Congress in her role both as Past President and Marketing and Communication Chair. I also want to thank those of you who have generously donated to our Congress Scholarship Fund. At the time of writing, we have received approximately $3500 USD, with a goal to increase this to at least $5000. If you have not yet made a donation but would like to do so to help support HIM colleagues from low- and middle-income countries attend this year’s Congress, please do so here at 20th Congress Scholarship Drive Donation Form - IFHIMA.

Author:
Vicki Bennett, CHIM, FADH, CHIA
Unit Head at AIHW
IFHIMA President

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www.ifhima.com
My IFHIMA Journey from Seoul to Dubai: Experiences Gained

I had another great conversation with IFHIMA colleague, Kennedy George from Oman. I remember meeting Kennedy in Montreal at my first IFHIMA Congress.

At the onset, I would like to thank the 20th IFHIMA Congress for this opportunity to share my experiences through the IFHIMA Congresses that are held every three years in one of the Federation Member Countries spanning five continents. I have been a member of IFHIMA for the past 15 years and been a part of every Congress conducted so far. IFHIMA, serving as a global voice for the health information management profession, has provided me with opportunities to not only learn, but to network and exchange information and ideas on an international scale.

I have found that the IFHIMA Congresses are very well organized and successful, with interesting seminars and discussions on various health information topics. I have been able to meet with several international experienced and committed HIM experts, self-motivated veterans of health information, medical documentation experts, specialists in various information system and management disciplines, and practitioners from different information culture.

Interacting and sharing of ideas with them has provided me a great insight on the profession from around the globe.

My contribution to the IFHIMA Congresses includes presentations, participation in group discussions and participation in taskforce committees. I also had an opportunity to be trained in the “train the trainer program” and to study the Coding Program at Brisbane. Through my association with the experts in HIM I was able to arrange for a consultation visit of Dr. Phyllis Watson to the Sultanate of Oman to evaluate the education system and the services provided by HIM professionals here. Her recommendations have added a great value to our existing program.

The knowledge gained through these Congresses have also given me the courage to participate in preparing, organizing, and modernizing of the existing Health Information System in Oman and be updated with ICD. I hope my future interactions with my professional colleagues that I have earned during these Congresses will shed some light to identify and solve issues faced by our HIM professionals here and to introduce effective measures and practices.

In conclusion, I would like to express my heart-felt thanks to all those who have made these IFHIMA Congresses possible, and those who have enriched me with their experiences and support. I look forward to seeing my international colleagues in Brisbane!!

We look forward to seeing Kennedy in Brisbane and hearing of HIM advances in Oman.

Interview authored by:
Lorraine Fernandes RHIA
IFHIMA Immediate Past President
IFHIMA Communication Chair

Mr. Kennedy George
Program Coordinator
Health Information Management Program
Oman College of Health Sciences,
Ministry of Health
Sultanate of Oman
Join 100+ speakers, 10+ keynote and plenary sessions, 12 workshops and 7 concurrent sessions with topics in:

- Accreditation/Certification
- Artificial Intelligence
- Clinical Documentation Improvement & Data Integrity
- Digital Health/Digital Transformation
- Global Workforce Development
- Health Data Quality & Analytics
- ICD-11, Coding & Classification
- Information Governance, Privacy & Security
- Leadership
- Research, Education & Training

Join health information management professionals from around the world with speakers from Australia, India, Kuwait, Nigeria, Spain, United Kingdom and United States.

To view details and register, go to


Full registration fee includes morning tea, lunch, afternoon tea, Welcome Reception and the Gala Dinner.

Key speakers and presenters include:

**ROB HEFEREN**
CEO, Australian Institute of Health and Welfare

**MARY STANFILL**
Member of Education & Implementation (EIC) and Morbidity Reference Group (MbRG) at WHO FIC

**DR. STEPHEN DUCKETT**
Health Economist & Proponent of Activity Based Funding in Australia

**PROF MICHAEL KIDD**
Deputy Chief Medical Officer, Australian Government Department of Health

**JASON TRETHOWAN**
CEO, Headspace

**ASSOC. PROFESSOR SUSAN FENTON**
Assoc. Dean for Academic & Curricular Affairs, UT Health - Houston

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**Early Bird Rate Cut-Off: 29 July 2023**

**himaa2023@arinex.com.au**
Welcome Note from the Health Information Management Association of Australia

The Aussies cannot wait to welcome everyone to the IFHIMA 20th Congress/HIMAA 40th National Conference! Hosted in beautiful Brisbane, our Congress venue (The Brisbane Convention and Exhibition Centre) is situated in the spectacular South Bank cultural precinct overlooking the Brisbane River. The venue is among some of Australia’s major contemporary art museums, inner-city parklands which offer a wide selection of cafes, bars & restaurants, world-class museums and galleries, a performing arts centre, and the Wheel of Brisbane. It is one of the city’s most vibrant and cherished spaces.

The Congress Program is packed with amazing speakers ready to share their knowledge, research and professional experiences with you - our colleagues and friends:

- Ten exceptional keynote speakers on a wide variety of HIM related areas of interest.
- Twelve workshops offer a wealth of interactive opportunities to: interact with ICD-11, reflect on research methods, address accreditation, contemplate clinicians’ championship of CDI, weigh up workforce, cogitate coding workforce and workflows, grapple with gap analysis, delve into diversity, contemplate computer-assisted coding, and levitate with Leadership.
- 90 Speakers in Concurrent streams will present their research and professional practice experiences in the fields of Accreditation & Certification; Digital Health; Global Workforce; ICD-11, Coding & Classification; Research, Education & Training; Information Governance, Privacy & Security; Quality & Patient Safety; Clinical Documentation Improvement & Data Integrity; and Health Data Quality & Analysis.
- Four outstanding clinicians delivering clinical update sessions in each of their specialty areas for clinical coder education.
- Lots of international news from IFHIMA Colleagues.
- One AMAZING Motivational speaker to inspire, educate and motivate our colleagues with ideas for resilience, goal setting, teamwork, and attitude to life.
- Many opportunities to network, mingle, catch up with old friends and make new ones at our Welcome Reception on Monday evening, and dine out in style at the Gala Dinner before dancing the night away on Tuesday evening.
- Discover the opportunities that await you at the next IFHIMA Congress in 2025 when Australia hands over the ‘torch’ to the next hosts.

Can’t wait to see you there!!!

Article provided by:
The Health Information Management Association Australia (HIMAA)
Scholarship Awards to 20th Congress

Congratulations to the IFHIMA Scholarship awardees who will be attending the 20th IFHIMA Congress in Brisbane, Australia starting October 30, 2023. These awardees receive paid registration and a stipend to help with travel expenses.

The awardees are:

- Dr Sabu KM Mandapam, India
- Irmawati Irmawati, Indonesia
- Emmanuel Sule, Nigeria

The awardees were selected from a candidate pool from Low and Lower-Middle Income Countries (LMIC) per the previously published criteria. The scholarships are funded from the IFHIMA Scholarship Fund that includes contributions from:

- IFHIMA Japan Award Scholarship, donated by the Japan Hospital Association after the 18th Congress in Tokyo
- Ulli Hoffmann Memorial Fund, which contains monies from private IFHIMA members specifically requesting their donations be utilized to support LMIC IFHIMA member attendance at Congresses.

IFHIMA thanks all the candidates for their contributions to the profession.

Author:
Lorraine Fernandes, RHIA
IFHIMA Immediate Past President and Communication Chair

AHIMA Advocacy Summit 2023

The American Health Information Management Association (AHIMA) Advocacy Summit was held March 20-21, 2023, in Washington, DC, USA. There were over 200 attendees for the educational sessions that were provided on March 20th, and approximately 150 AHIMA members who met with Representatives and Senators on March 21st.

Educational topics included:

- The Department of Health and Human Services Offce for Civil Rights,
- Advancing data for better health,
- The Trusted Exchange Framework and Common Agreement (TEFCA),
- Protecting health data privacy in an interconnected world,
- Data quality and patient safety through improved patient identification and matching,
- End-user perspective in health IT policy and standards and,
- The future of artificial intelligence.

AHIMA’s Lauren Riplinger and Kate McFadyen moderated discussions on several of these topics.

Meetings with Representatives and Senators were held at the corresponding ofces for each Component Association. AHIMA members were advocating for removal of Section 510 of the Labor, Health and Human Services, Education, and Related Agencies Appropriations Bill. Section 510 has been an item of concern for many years, as the language in the bill is an obstacle to creation of a nationwide patient identifcation system. Without
If Data Could Talk, What Would It Say?

Attend AHIMA23 for an extraordinary experience that will have everyone talking.

Register Today!

As health information professionals know, health data is much more than it appears. It tells the story of patients and caregivers, of challenges and triumphs. Join us this October to connect with your community of health information professionals, engage in conversations about the future of healthcare, and learn about trending topics that will have everyone talking.

AHIMA23 is more than an event; it’s where health information comes to life.

Attend AHIMA23 Conference in Baltimore

The American Health Information Management Association (AHIMA) will host its in-person annual conference on October 8-10, 2023, at the Baltimore Convention Center in Baltimore, Maryland, USA.

The AHIMA23 Conference is the only annual meeting designed specifically for health information professionals by health information professionals.

Attendees can look forward to:

- Thoughtfully selected educational sessions delivered by industry leaders
- Best practice learnings that they can implement immediately at their own organizations
- Myriad networking workshops and events

...all while earning valuable CEUs!

Networking events and workshops will also be offered at the in-person event.

Connect with Your Global Community at AHIMA23 Virtual Conference

AHIMA will also host its virtual conference October 26-27, 2023. Attendees can connect, learn, and network with peers from around the world without leaving their home or work place. Educational session content will differ from that offered at the in-person conference and will be available on-demand for several weeks following the conference.

Registration is open!

Learn more about AHIMA23 Conference today.
a nationwide patient identification system, HIM professionals face issues that include duplication of services, misidentification of patients, and other patient safety problems.

The other topic AHIMA members were advocating for was Social Determinants of Health (SDOH) data. A recent study conducted by National Opinion Research Center (NORC) identified challenges related to lack of standardization of data collection, lack of integration of data into health records, insufficient training about data collection, and limited use of SDOH data. AHIMA members were asking for introduction of legislation to provide federal funding for training on collection of SDOH data.

While the AHIMA Advocacy Summit was only a two-day event, Public Policy and Government Affairs professionals continue to work year-round in the Washington, D.C. office to pursue advocacy efforts on the AHIMA advocacy agenda.

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Efforts for prevailing with the implementation of ICD-11 in Japan

ICD-11 was adopted by the World Health Organization (WHO) in 2019, and came into effect in January 2022, marking a significant transition from ICD-10. The revision process from ICD-10 to ICD-11 spanned over 30 years, resulting in a classification system that introduces numerous noteworthy changes. It will be important to become familiar with these changes brought forth by this latest revision.

To assist the understanding of these changes among the health information management personnel in Japan, a book summarising the process leading to the revision of ICD-11 and the changes from ICD-10 has been published by the Japanese Society of Medical Information Management. It summarises the ICD-11 coding tools, an overview of coding, the features of each chapter and explanations of examples. Although the Japanese version of ICD-11 is not yet completed, this book should provide many important guides for health information managers in the country.

The Japanese Society of Medical Information Management also compiled an ICD-11 coding manual and ICD-11 coding textbook. Many health information managers have used this textbook to learn and get familiar with ICD-11 coding. In addition, we held online and face-to-face workshops, and approximately 2,800 health information managers participated in the seminars. Additional ICD-11 coding workshops are scheduled this year.
Since the Japanese language version of ICD-11 has not been completed yet, we are using the English version for training of ICD-11 coding currently, and we are experiencing some difficulty in understanding the foundations exactly due to the language barrier. Yet, precise understanding of those is essential for accurate clinical coding. Further knowledge of anatomy and the other basic medical sciences are required, and we need to study more.

Implementation of ICD-11 in Japan faces some additional problems such as legislative changes required for the mortality statistics. An additional issue is the problem of the master nomenclature of diseases used for reimbursement for medical services. These are concerns that will take some work to review.

Some of the steps taken in Japan to resolve issues or problems with the implementation of ICD-11 may interest some other countries who are about to implement it.

It may take some time to get used to the new classification, but we are looking forward to health information management areas implementing and using ICD-11.

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Clinical Registries at the DVMD Spring Symposium

The professional association for documentation and information management in medicine (DVMD)

Clinical registries are increasingly gaining attention - this was demonstrated by the contributions and the resonance of the 4th DVMD Spring Symposium in Munich, Germany on March 21, 2023. More than 80 participants, primarily health information managers, service providers and researchers, discussed objectives, benefits and formats of clinical registries. These include, in particular, data management, data security, analysis of data and legal aspects.

With the aid of clinical registers, complex disease and treatment processes can be systematically mapped over a longer period of time. Clinical registries, in addition to clinical studies are the most important tools for researching new therapies and improving

Brisbane, Queensland, Australia

All dates per Brisbane, Australia time (UTC +10, AEST)
Registration Opens Wednesday, February 23
Early Bird registration rate available now to July 29
Standard registration rate available from July 30 to September 25
Onsite registration rate from September 26
established treatment methods. Epidemiological cancer registries are a good example: their nationwide availability in Germany makes it possible to gather information on the incidence and prevalence of the different types of cancer; about its distribution in accordance with the age, gender and place of residence of the patients, as well as about the likelihood of surviving.

The Implant Registry Germany (IRD) based on the Implant Register Act (IRegG) is a nationwide registry established to improve the safety and quality of implants and medical care with implants. In the first stage, only breast implants will initially be covered. Mandatory reporting will start in January 2024. Knee and hip implants will follow in the second stage. The implant registry essentially collects data that are already routinely recorded in the information system of the health care providers (e.g., information on the operation, findings, diagnoses and the implant). In addition, the registry regularly receives information from the statutory and private health insurance companies as to whether a registered patient is still alive or has died in the meantime.

There currently exists about 400 German registries, a major number of them without a statutory requirement to report data. The present discrepancy between “too little” and “too much” unused data stressed the need for the establishment of a nationwide registry database. Challenges lie in making further improvements in the use of registries for care research and in linking them with external data sources. The key message of this symposium was that the future lies in the interconnection of registry databases.

An important component of the future health data architecture is the new Register Law, which aims to open up data used for research and development in medical technology. To achieve this, a decentralised research data infrastructure is to be established. The upcoming Register Law is intended to provide the basis for a sustainable register structure in register-based research. Clinical Registries are designed to document health care processes and generate evidence-based knowledge. The planned Register Act is about improving access to and use of register data in order to improve the use of health data.

At the DVMD spring symposium, it clearly became evident during the discussions that the interconnection of clinical registries with each other and with other data sources is increasingly coming into focus. Interconnectivity and interoperability are central pillars for a connected health data ecosystem. They open up new dimensions of knowledge generation for register-based research.

We are delighted that Phyllis Watson from Australia and honorary member of the DVMD participated in this symposium. What an honour for the DVMD and this conference! The spring symposiums of the DVMD take place every two years. In the years in between, the association organises its conferences. Next year, the symposium will take place on 07 and 08 May in Hanover, Germany.

The DVMD e.V. represents the interests of all professionals in the field of documentation and information management in medicine. Founded in 1972, the association currently has around 800 members, including private individuals and companies. The DVMD is committed to high quality standards in training and studies, as well as to the professional development of its members. Cooperations with related associations and federations enable the building of networks on a national and international level.

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Canadian College of Health Information Advances Medical Coding in Canada

Medical coders matter, and the Canadian College of Health Information Management (the College) is committed to advancing this practice. From 2018 to 2022, the College conducted extensive industry and academic consultations, which showed that the prevailing academic standards no longer met industry demands and competency requirements.

Consequently, new modernized academic standards have been introduced, granting the College the opportunity to build a complementary set of medical coding academic standards that support advanced competency. This will ensure that future medical coders will have the general knowledge required by all health information professionals and an appropriate level of entry-to-practice knowledge.

To further the development of medical coding academic standards, the Canadian Health Information Management Association (CHIMA) hosted an initial meeting of the CHIMA medical coding community. This event connected coders across the country and provided an opportunity for participants to learn of new concepts for professional development and the numerous ways their work affects data output.

Free resources are available to learn more about how the College is elevating coding in Canada.

Author:
Lola Opatayo, BA, MA
Canadian College of Health Information Management
Canadian Health Information Management Association

A Student Review and Perspective of IFHIMA’s Website

As students enrolled in the Health Information Management (HIM) program at the Centre for Distance Education in Canada, we engage in both instructional and practicum-based learning. The program is accredited by the Canadian College of Health Information Management, and students can enrol in this program from across the world as all content is delivered online. In the second year of the program, students complete a practicum, which is a project assigned by an organization or facility. The project assigned to us was to review the recently developed and launched IFHIMA website. We were tasked with providing suggestions that could improve the functionality, design, and content of the website and to identify errors such as spelling and grammar. As HIM students who are new users of the website, we brought a fresh perspective while also understanding the needs of potential users of the website.
We went through the entire website, page by page, with the goal of assessing the website to find any errors or issues in spelling or grammar, typos, inconsistencies, and problems with functionality, design, or content. During our review we compiled our findings into an Excel spreadsheet. Among these were several suggestions that we feel might enhance the functionality of the website. Suggestions to improve the IFHIMA website experience include:

**Addition of search bar**

We believe the website should have a search bar. This would be helpful for navigating the website and locating specific information. As students who are using the website for educational purposes or looking for volunteer opportunities it would be efficient to navigate the website by using a search tool. We learned that this was a previous feature on the website and will be put back in place.

**Expansion of member exclusive content and functions**

During our review of the website, we found that members have the ability to log-in to their accounts on the website for commenting on articles. We learned that a member only area for exclusive content (in addition to commenting on articles) is not something that IFHIMA has created yet. Our suggestion is to add information that states that members only content will be available in the future. This way, visitors to the site understand the current use of the members section but may also increase membership retention if they know more features are on the way.

**Inclusion of drop-down menus**

For ease of use and organization of the website we suggest that main sections that have drop down menus should also have a side menu once you navigate to the page. For example, we recommended that the Education and Training section should have a drop-down menu including ‘Body of Knowledge’, ‘Modules’, and ‘Curricula Competencies’. Once you navigate to the Education and Training page each of those subtopics are shown in a menu on the side of the webpage.

We understand that not all of the recommendations made from the review process may be implemented due to the limitations of the web development software, Word Press. Additionally, recommendations are also impacted by budgetary constraints and will be selected based on the discretion of the IFHIMA board.

The deliverables for this project were the creation of an Excel spreadsheet with our findings, a Power Point presentation, and an article about the project for IFHIMA’s Global News. This practicum project was a great opportunity for us, and we are very grateful to IFHIMA for providing it to us. As students who are soon to graduate and write our Canadian Health Information Management (CHIM) Certification Exam it was a chance to see in depth, one of the many organizations out there that will be available to us as resources and supports in our future careers. It is a great community that we look forward to being a part of. This project has also given us the opportunity to see where our skills can take us not only with Health Information but in organizational roles as well. Practicing our analytical skills in this way and having the chance to present our analysis will no doubt help us in our future careers.

**Author(s):**

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HIM Student  
Centre for Distance Education in Canada  
Paula Pflugfelder  
HIM Student  
Centre for Distance Education in Canada
The World Health Organization (WHO) has developed an online product to capture and display comprehensive and up-to-date information on the implementation status of its Family of International Classifications (FIC) at global, regional and country levels.

The need for a systemic approach to the capture of mortality, morbidity, functioning and interventions data in health information systems has long been recognised. The Implementation and Information Tracker, or the IMINT, has been developed to supply this information for countries’ surveillance systems but with the ability to highlight potential areas for improvement.

The IMINT contains 11 sections to complete based on the previous WHO-FIC Implementation Database and the WHO mortality and morbidity surveillance questions.

**Screenshots of sections in the IMINT:**

The IMINT includes a dashboard and data visualisation features to illustrate implementation levels, data coverage and quality by country and over time.

Piloting of the IMINT was undertaken in February/March of 2022, and analysis of results was completed in April/May 2022; roll out to country focal points commenced in June 2022.

The WHO hopes to provide a further update on the IMINT later in the year.

**Author:**

Nenad Kostanjsek, Technical Officer
Classifications and Terminologies Unit
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Globalizing Health Information

The world has become smaller and more accessible thanks to technology. Growing up in Africa, communication could take weeks or months depending on how and where you were sending your postal letter, and telephones were a privilege of few in the society. Now, we can email and video call anywhere in the globe.

Health information has taken a similar evolutionary detour though there are still the last vestiges of antiquated modes of health information producers and custodians’ practices sporadically spread across Low and Lower-Middle Income Countries (LMIC). This does not necessarily justify the dystopian narrative and literature I have come across.

I am excited about this year’s Joint 20th IFHIMA & 40th HIMAA National 2023 Congress that will be held in Brisbane, Queensland, Australia. The theme Advancing global health: in pursuit of high-quality digital information is very timely and relevant to the health information profession. With such concepts, the globalization of health information will achieve its mission.

There is an affluence of health data/information production but limitations in the utilization. With the abundance of health information, the utilization and the impact should not be limited to emergencies, crises, or pandemics. Evidence-based decisions are a justif cation of the sigfnican ce of health information. Policies are frozen and shelved consequently, or not implemented due to system failures. The critical role of health data and information in informing policy and evidence-based decision-making in healthcare delivery should be emphasized.

Health information is the biggest goldmine of the modern data/information that should be guarded jealously and as one of the zealous cavalry, I believe we are on the right track and need to tighten our hold a little bit. How we have more health information at our fingertips and better technology, but debilitating healthcare systems globally remains a cryptic equation.

What I experienced in Japan gave me pride as a Health Information Management professional, everything I have read theoretically I witnessed firsthand in Nagasaki University hospital. The Japanese culture and discipline made paperless health information management look seamless and healthcare services delivery not only accessible and affordable, but ef cient. With the digital transformation taking place since the late 90s, the organization and timeliness of the events were exquisite.

The pandemic lessons are still vivid and even those with the deepest pockets and the aristocracy were not spared. The panacea was unifying as one and implementing simple common practices. It reminded us of our interdependence as human beings and societies and how the world is now a digital realm.

A chain is only as strong as its weakest link. As indicated in my paper, “Efforts to a Belief and Decolonize Global Health”, the proliferation of artifcial intelligence (AI) for health and the Decolonization of global health is no longer an option but a need.
Some have cautioned against espousing AI, which is debatable, especially in healthcare considering human errors, and the need for storage, timeliness, and precision in health information.

In addition to reducing turnaround time, there is a lot of hope in optimizing available resources. AI is changing how everything, and everyone operates. The technology will be an impetus to more accurate and detailed information about diseases, their etiology and treatments. It will be possible to identify and predict disease trends consequently, plan better if not prevent the disease before it evolves.

Data privacy and protection is culminating, and we need to use today’s and tomorrow’s keys to operate and open today’s doors. Most importantly, the concept of AI has been, and is, constantly evolving. What you go to sleep with is not always what you wake up to in the world. If we can guard our homes, savings, armoury, and state houses surely, we can safeguard our health data too.

I advocate for the globalization of health information as it will yield standard operating procedures and healthcare equity. It is through such forums like the Congress being organized by IFHIMA in Brisbane Australia that the advancement of global health will be achieved.

Author:
Salim Omambia Matagi, AMRO, IFHIMA
Principal at KMTC
IFHIMA Member

Pacific Health Information Network Meeting 2023

Established in 2006, the Pacific Health Information Network (PHIN) is a regional network of health information system (HIS) and digital health professionals across the Pacific that aims to address shared challenges through regional collaboration, common standards and practices, and information sharing. The World Health Organization (WHO) and the Pacific Community (SPC) provide joint secretariat for PHIN.

PHIN held its first meeting since 2019 from 28 – 30 March 2023 in Nadi, Fiji on “Strengthening Health Information Systems and Digital Health”.

Call for Articles!
The IFHIMA Global News editorial team is requesting articles. We welcome contributions from individual members, as well as member countries.

We appreciate short articles, 400-700 words that share HIM activities, meeting summaries, or key events. Please honor this word limit to avoid extensive editing or rejections.

We publish approximately three times per year based upon available content. Please send your articles (pictures or graphs add a lot of appeal) in a Word format (no PDFs) to editor@ifhima.org the Editorial Team, Global News.
Participants from 19 Pacific Island Countries and Territories (PICTs), as well as key partners, attended in person. Vicki Bennett, the IFHIMA President, in her capacity as an Advisor to the PHIN Board, also attended and presented at this meeting. This meeting aimed to strengthen the network for PICTs to share and exchange innovative ideas towards advancing HISs and digital health in the region, foster fruitful discussions, share related capacity-building needs and most importantly network with country professionals who are leading or advancing digital health development.

The objectives of the meeting were to:

- Discuss the draft third Healthy Island Monitoring Framework (HIMF) progress report before it is finalized and presented at the 14th Pacific Heads of Health meeting, and to discuss the use of HIMF data for policy,
- Exchange experiences and identify capacity-building needs in HIS and digital health, and to discuss key implementation actions to operationalize the PHIN strategic plan,
- Develop coordinated, practical, and sustainable technical support in HIS and digital health that aligns with country needs and promotes data-driven policies.

Information presented on the Pacific regional health architecture and Healthy Islands vision framed the technical presentations, country case studies and group activities on the HIS challenges, opportunities and lessons learned related to implementing the HIMF.

Based on the technical presentations, country case studies and group discussion on digital health, it was concluded that PICTs should develop evidence-based strategic plans by assessing their digital health maturity and building on their digital health foundations. Beyond technical details on digital health and health information architecture, the plans should also include elements of a sustainable digital ecosystem, such as change management, cybersecurity, and disaster recovery. It was also established that the pool of technical experts across the Pacific should be leveraged by promoting peer assistance through the PHIN.

To improve the quality of civil registration and vital statistics (CRVS) and data coding using the International Classification of Diseases (ICD), PICTs reaffirmed their need for mortality and morbidity coding training, medical certification of cause of death training, and access to ICD coding tools. To support transition to and implementation of the ICD 11th Revision (ICD-11) in the Pacific, it was concluded that each country will nominate an ICD-11 focal point. PICTs also noted that technical support is required to develop and implement a national transition plan.

To strengthen governance and revitalize the PHIN, a new board was elected with representatives from Cook Islands, New Caledonia, Papua New Guinea, Samoa, and Solomon Islands being appointed to the new Board for the next 2 years.

It is hoped that PHIN will soon join IFHIMA under the new Regional Island Network membership category and be represented at this year’s Congress in Brisbane.

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IFHIMA President
BAR BHIMA is back!

The Barbados Association of Radiographers (BAR) and The Barbados Health Information Management Association (BHIMA) will host their 4th Joint Conference from November 10-12, 2023, at the O2 Beach Club and Spa, Dover Beach, Christ Church, Barbados.

This year’s conference entitled, ‘Bridges, Gaps, Silos and Synergies: Reflections of the Past. Vision for the Future’ is targeted towards key stakeholders, health care leaders, clinicians, radiographers, health information specialists, nurses and other interested health care and IT professionals.

The program will feature various academic presentations and the Associations are seeking Continuous Professional Development credits from their affiliated bodies.

Below is the general breakdown of the conference activities that are scheduled to run over the three days:

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<tr>
<td>Day 2</td>
<td>November 11th</td>
<td>Conference</td>
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<tr>
<td>Day 3</td>
<td>November 12th</td>
<td>Networking Breakfast</td>
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For more information or if you are interested in submitting an abstract, please visit the conference website.


Author:

Deneice Marshall, M.Sc.,Dip.Ed,RHIA
President- Elect, IFHIMA

IFHIMA 20th Congress Scholarship Funding Drive

A pillar of IFHIMA’s Strategic Plan is to strengthen its relationships and Health Information Management (HIM) practice with developing nations (herein after referred to as Low and Mower-Middle Income Countries). To that end, IFHIMA launched a 20th Congress Scholarship Drive in May 2023 to fund attendance for HIM professionals from low and lower-middle income countries who meet certain criteria and might otherwise not be able to travel to the Congress.
It is recognized that traveling to Brisbane, Australia is not inexpensive. While business trips and conference fees for continuing education are tax deductible in many countries, for our members from low and lower-middle income countries, the cost of attending a conference is often entirely out of reach.

We hope that the funds we raise can offset some of the expense for qualified applicants.

Donations are being accepted by IFHIMA, a 501 (c) (3) non-profit, per US tax code*. IFHIMA will issue receipts to facilitate deductions for tax purposes.

Please donate to the 20th Congress Scholarship Drive at one of these levels. Note the amounts listed are in US dollars (USD).

Clownfish $25-49
*Encouraging and Helpful Friend*

Blue Tang Surgeon Fish $50-99
*A just keep Swimming* A helpful friend!

Green Sea Turtle $100-249
*A long distance friend*

Dugong $250-499
*Gentle and Friendly*

Humpback Whale $500+
*An amazing creature*

DONATE HERE for the 20th Congress Scholarship Drive

Any monies collected and not awarded will be added to the long-standing IFHIMA Scholarship Fund.

Sincere thanks to those who have already contributed, and please consider donating to assist the very deserving health information practitioners from low and lower-middle income countries.

* Donors to IFHIMA, a 501(c) (3) non-profit, will receive a tax receipt per US tax code. Determining potential applicability of the IFHIMA tax status to other nations is the responsibility of the donor.

Author:
Lorraine Fernandes, RHIA
IFHIMA Immediate Past President and Communication Chair
WHO-FIC Mid-Year Meetings

From 8 to 11 May 2023, the Australian Collaborating Centre (ACC) for the World Health Organization Family of International Classifications (WHO-FIC) Network welcomed many of the Committees and Reference Groups to Sydney, Australia for their mid-year meetings. These included:

- The Education & Implementation Committee (EIC)
- The Family Development Committee (FDC)
- The Functioning and Disability Reference Group (FDRG)
- The Informatics and Terminology Committee (ITC)
- The Morbidity Reference Group (MbRG)
- The Mortality Reference Group (MRG).

The meetings were successfully held in a hybrid format, with over 60 participants from 16 countries in person and over 100 participants online. It was great to see so many people from around the globe participating.

The four days of meetings provided a valuable opportunity to work through key issues and activities essential to updating and maintaining the ICD, ICHI and ICF.
There were also social events held including a Network dinner, an ACC dinner, and two bike rides around Manly and the beautiful Northern Beaches.

During the week an ACC ICF Symposium was also held. The aim of the Symposium was to provide information about and explore the potential of the ICF and its uses and potential uses in a variety of use cases.

International and Australian speakers discussed projects in which they had used the ICF and their experiences with the classification. Attendees reported that the Symposium was interesting and informative.

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IFHIMA is very pleased to welcome our latest Corporate Member – Beamtree.

Beamtree is a health data analytics company based in Sydney, Australia, specializing in providing healthcare organizations with computer assisted and automated coding tools, and various other smart tools. The company has been providing services and support for more than two decades and are known for their expertise in assisting organizations with analysing, interpreting and benchmarking data – and are also actively engaged internationally.

Please feel free to learn more about this innovative company via the link provided below:

The New IFHIMA Membership Category - Regional Island Network

At the last IFHIMA General Assembly, a motion was passed to create a new membership category, in support of promoting small island nations with few members, joining together to become a member of the Federation. The Regional Island Network (RIN) membership category holds the same benefits as National Membership.

A RIN membership is reserved for close geographical clusters of similar small islands, with each island having less than or equal to three HIM practitioners, which are representative of activities within the field of HIM. Those applying under this category may access the “Guidelines for Establishing a New Association”, as per the IFHIMA website. RIN Membership members shall appoint an IFHIMA Director and Deputy Director to represent them, the Director being eligible to sit on the IFHIMA Board of Directors, as a Regional Director for one of the six global regions. Notably, IFHIMA follows the regions as established by WHO, those being Africa, Americas, Eastern Mediterranean, Europe, South East Asia and Western Pacific.

Each RIN holds the same rights and privileges as National Members, and will be entitled to vote on all Federation issues, during the IFHIMA General Assembly.

Privileges of an IFHIMA Regional Island Network Membership:

- Nominating a representative from their nation to serve on the IFHIMA Board as the Regional Director for their WHO region.
- Sending a representative (IFHIMA Director/Deputy Director or a nominated member of the RIN association) to the IFHIMA General Assembly.
- Having one vote as the RIN representative at the General Assembly.
- Opportunities to organize conferences in collaboration with IFHIMA.
- As with all IFHIMA member categories, HIMs belonging to a RIN will be subject to reduced registration fees to attend Congresses.
- Certificate of Regional Island Network Membership of IFHIMA is issued on payment of annual member dues, equivalent to dues of a one year Associate Membership.

For further details please review the IFHIMA website: https://ifhima.org/about-ifhima/ or contact Marci MacDonald, IFHIMA Membership Chair, at contact@ifhima.org.
Letter from the Editorial Team

The Global News Editorial Team proudly presents the second issue of IFHIMA Global News for 2023. This issue of Global News is comprised of articles from around the world, with submissions from IFHIMA members in Australia, Canada, Japan, Germany, the Western Pacific Region, Switzerland, and the United States.

Featuring pieces on the upcoming IFHIMA Congress, the recent WHO Family of International Classifications Network mid-year meetings, an article about the ICD-11 IMINT platform, the Pacific Health Information Network, and exciting regional updates from Japan and Germany.

We will continue to strive to bring our readers interesting, relevant, and informative content from across the IFHIMA regions in our final issue of 2023 and into 2024. We encourage contributions from all our member nations to make IFHIMA Global News a truly global newsletter. Please feel free to contact us with your submissions, ideas and questions. A copy of the guidelines can be found here.

Hope you enjoy this edition and happy reading!

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, Georgia Savvopoulos and Natasha Millerd-Stevens are recent graduates itching to experience everything HIM has to offer.

Breanna Harnetty BHlthSc (MedClass), BHlthInfoMgt
Georgia Savvopoulos BICT (HIM)
Brooke Macpherson BSc, BHS, BHIM(Hons)

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)