

Dear members and friends of IFHIMA,

Welcome to our final Global News for 2015. We can look back on a successful year with some remarkable achievements: Two new member countries, Ghana and Tanzania joined IFHIMA, Saudi Arabia established a national HIM association and India re-established its national Health Information Management association. Moreover, in the African region there have been many activities to improve overall HIM practice and Wole Ajayi, IFHIMA Regional Director of Africa, gives us an overview about the major themes in this region. In this issue you'll also find two reports about the 15th World Congress on Health & Biomedical Informatics (Medinfo) that took place in Sao Paolo, Brazil.

ICD-Trainers who are interested teaching abroad might be interested in the WHO International ICD 10 Trainer Database (for more information see page 6).

Very challenging for the HIM profession is the field „Information Governance (IG)“. As a result of the growing volume and sources of electronic data and the complexities of information and communication technologies, Information Governance has been adopted in many healthcare organization. Debi Primeau provides us an overview article about IG.

Our annual face-to-face IFHIMA board meeting took place in Sydney in October 2015 during the National congress of our Australian HIM colleagues. Please find more information on page 13.

As year 2015 is drawing to a close, I would like to take this opportunity to extend my very best wishes to you. I wish you happy holidays, and a successful and healthy new year!

Angelika Haendel and the IFHIMA board

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Our Regions (please click and follow)



Report for the Region of Africa

This article is a summary of activities in HIM practice in the region of Africa in 2015 using the framework of resolutions emanating from the first International conference for Africa held in Lagos, Nigeria in August 2014. It examines the multiplicity of initiatives to drive productivity and growth by improving overall HIM practice to create new and better jobs to enable us to take a lead in the HIM arena. It has four major themes:

- Study and Exchange Visits
- Collaboration in Education and Training
- Partnership; Working Together
- Annual Meeting/Convention

Study and Exchange Visits

This theme focuses on exchange visits to strengthen education and vocational training to improve the quality of HIM services, support practice development and encourage lifelong learning at all levels. The Ghana Health Information Management Association (GHIMA) undertook exchange study visits to Nigeria and Kenya in August and October 2015 respectively - separate reports of the visits will appear in future Global News.

Collaboration in Education and Training

During the 2014 regional conference national associations and members were encouraged to embrace education and training to ensure high levels of competence and productivity. In furtherance of this objective the Polytechnic of Namibia and two Universities in Nigeria will soon commence Bachelor's and post-graduate diploma programmes in HIM in addition to a university already offering these programmes. This will produce a cohort of HIM professionals to provide quality HIM services to the health sector. The curricula were benchmarked internationally with input from the Global Health Workforce Council, the West Africa Health Organisation and global HIM experts. Regional and local stakeholders endorsed the programmes, which will be implemented in 2016. The intellectual base for creativity and excellence of work in Africa is far from being exhausted with more universities in Africa commencing HIM programmes.

Calendar of Upcoming Events

American Health Information Management Association,
 "Big Thinking; Launch Our Future"

Baltimore Maryland,
October 15-20, 2016

18th IFHIMA International Congress,
 "A New Chapter in Global HIM Begins: Application, Implementation and Dissemination"

Tokyo, Japan,
October 12-14, 2016



Partnership, Working together

The effectiveness of any organisation is greatly enhanced by partnership working with institutions with shared interests. A partnership approach provides consistent and coordinated access to training, education and employment opportunities. Major initiatives include:

- Introduction of WHO's on-line ICD10 self-learning tools (completed).
- Development of a short list of ICD codes for Africa
- The Japan Hospital Association has offered assistance to produce a simplified version of ICD modified for Africa. This would require the assembly of common morbidity and mortality conditions.
- Donation of OPCS 4.5 manuals to the Health Information Managers Association of Nigeria to facilitate the implementation of procedure coding

To achieve HIM transition we must improve networking, build alliances, create useful linkages with practitioners, professional associations and others to share resources and work together in an organized way.

Annual Meeting / Convention

The delivery of an annual meeting/convention will provide opportunities to hear about the latest research, gain new skills and resources to advance professional development accordingly an African regional summit is planned by May 2016 to focus on.

- EHR implementation and clinical coding
- Training/retraining for HIM professionals
- Continuing Professional Development
- Uniform standards of practice and a code of conduct

This summit will also promote the 18th IFHIMA Congress in Tokyo, Japan 12th-14th, October, 2016. This Congress will provide a great opportunity for HIM's in Africa and will undoubtedly far exceed expectations!

2015 has been a year of hard work and fulfilment with activities and progress in the field of HIM filled with energy and enthusiasm with productive networking across the region. The African Regional Team is gathering momentum to move HIM forward with confidence – it's a challenging but very exciting time for HIM in Africa!

Wole Ajayi

IFHIMA Regional Director for Africa



MedInfo 2015:

Experiencing the 15th World Congress on Health & Biomedical Informatics, Sao Paulo, Brazil

MEDINFO is the premier international health and biomedical informatics event. MEDINFO 2015 was hosted by SBIS (Brazilian Health Informatics Association) on behalf of the International Medical Informatics Association (IMIA) and took place in Sao Paulo, Brazil from the 19th to 23rd August 2015. “eHealth-enabled Health” was the theme of the 15th World Congress on Health & Biomedical Informatics.

World leaders in this field were gathered in Brazil to share knowledge and analyze how eHealth and Biomedical Informatics are contributing to address some of the most challenging problems in health care, public health, consumer health and biomedical research.

Researchers, clinicians, technologists and managers were invited to contribute and share experiences on the use of information methods, systems and technologies to improve patient safety, enhance care outcomes, promote patient-centered care, facilitate translational research, enable precision medicine and improve education and skills in health informatics. This was an historical event as MEDINFO was hosted in South America for the first time.

The conference program featured five keynote presentations, 178 paper presentations, 248 poster abstract presentations, 27 panels, 30 workshops and 17 scientific demonstrations. The contributions and presentations included in the program were carefully selected through a rigorous review process involving almost 400 reviewers for a large number of submissions (793) sent by 2500 authors from 59 countries.



Fig 1: Dr. Jakir

This was a fantastic opportunity for any academican, researcher and or consultant of Public Health Informatics arena to present at one of the biggest health related conferences in the world. For me, it linked perfectly with my role in Public Health Informatics. Our presentation was on “Challenges and Hurdles of eHealth Implementation in Developing Countries” on 22 August 2015. We were a group of researchers from 5 countries (Argentina, Bangladesh, Colombia, India, Uruguay). And it was really amazing to share our findings among the international delegates. Researchers included Jakir Hossain BhuiyanMasud (UNICEF, Bangladesh); Humberto Fernán Mandirola

Brieux, Daniel Luna, Carlos Otero, Paula Otero, Fernán González Bernaldo de Quirós (Hospital Italiano, Buenos Aires, Argentina); Fernando Antonio Portilla Vicuña (HL7 Colombia, Bogotá, Colombia); Sushil Kumar Meher (All India Institute of Medical Sciences, Delhi, India); Selene Indarte (SUEIIDISS, Montevideo, Uruguay).

The objective of this study was to know which are the challenges and hurdles to improving eHealth in developing countries. This was a cross-sectional descriptive study. Data collection was carried out among those attending INFOLAC 2014 the Latin American Conference on Medical Informatics organized by the Uruguayan Society of Health Informatics in Montevideo Uruguay in October 2014 and APAMI 2014, Asia Pacific Association for Medical Informatics Conference organized by the Indian Association for Medical Informatics (IAMI) in New Delhi, India in November 2014. We surveyed experts to evaluate their opinion about 5 general questions:

- economic support by Government for eHealth,
- Government education or training projects in the field,
- issues related to cultural or educational problems for the implementation of eHealth,
- policies in terminology or messaging standards
- eHealth status policies for long periods.

The respondents answered affirmatively in these proportions:

1. Economic support policies 58 %,
2. Training policies 25 %,
3. Cultural and educational problems 95 %,
4. Standards policies, 38 %,
5. Policies for long periods, 50 %.

Our survey has shown that the important problems that need to be addressed in order to implement e-Health in developing countries are cultural and educational, in second term economic resources and in third term Policies for long periods. More information can be found at www.ncbi.nlm.nih.gov/pubmed/26262087

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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, Lorraine Fernandes (Ifernandes54@gmail.com) 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 (angelika.haendel@uk-erlangen.de).

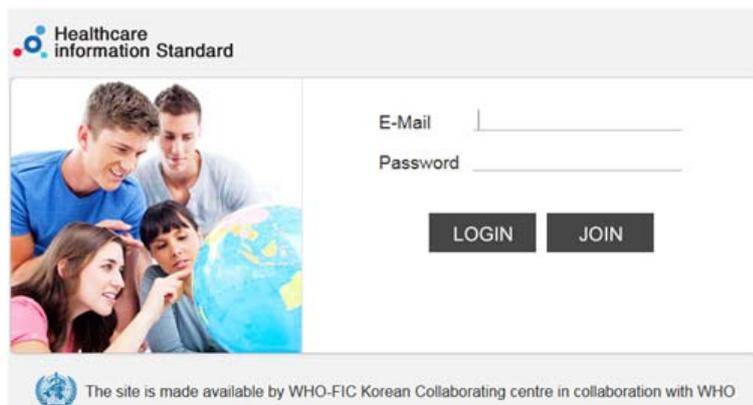
International ICD 10 Trainer Database

As a non-governmental organization, IFHIMA enjoys official relations with the World Health Organization (WHO). Moreover, IFHIMA is part of the Education Implementation Committee of the WHO Family of International Classifications. Currently IFHIMA is working on a project with WHO to develop and promote an international training strategy and explore the development of an international certification strategy for coders. In cooperation with the Korean WHO Collaborating Center an International Trainer Database has been established.

If you are an interested trainer you can log in to the database and provide personal data such as name, email address and home country. In addition, information on training experience (including references) and time you are available to give classes abroad. There are strict access controls, only selected WHO staff members have access.

This Trainer Database works like a “dating agency”. For example, WHO receives a request for a trainer e.g. 3 weeks ICD-10 training in a certain country, WHO will do a search query in the database. If there is a trainer who is available, WHO’s role is limited to providing the requesting country with the name and contact details of the available trainer.

www.hins.or.kr/traning/login.do



Put your fingers to the keyboard, please!

IFHIMA Global News welcomes 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 content available, and volunteers who will help edit.

Please send your articles (pictures or graphs add a lot of appeal) in a word format (no PDF) to Lfernandes54@gmail.com

Report on MedInfo 2015 and International Medical Informatics Association (IMIA) General Assembly

I had the pleasure of attending this exciting conference held August 19-23 in Sao Paulo, Brazil, as well as representing IFHIMA at the IMIA General Assembly, held Thursday, August 20th.

The IMIA General Assembly was chaired by President Dr. Lincoln de Assis Moura, and attended by medical informatics delegates from around the globe.

Highlights

- The meeting opened with welcoming Bolivia and Serbia as new national members, Hamad Medical Corporation, Qatar as a new corporate member, and SUNY Downstate Medical Center, Brooklyn, New York, USA and UNC, Charlotte, North Carolina, USA, as two new academic members.

- Specific to IFHIMA, IMIA President Dr. Moura explained that he has been serving on the Global Health Workforce Team, created by AHIMA and co-chaired by AHIMA and IFHIMA, to look at standardized global competencies for Health Informatics (HI) and Health Information Management. He re-affirmed the partnership between IMIA and IFHIMA, and the importance of dealing with HIM related issues with IFHIMA, as both IMIA and IFHIMA represent their respective professions on an international scale. Delegates discussed the need to collaborate with HIM, and acknowledged that HI and HIM are close partners, and that HI extends to many disciplines.

- This was Dr. Moura's last General Assembly as President, and he thanked all members for their support throughout his term.

- Regional reports were presented by:

- APAMI – Asia Pacific Association for Medical Informatics
- EFMI – European Federation for Medical Informatics
- HELINA – Health Informatics in Africa
- IMIA-LAC – Regional Federation for Health Informatics for Latin America and the Caribbean
- MEAHI – Middle East Association for Health Informatics
- North America – COACH and AMIA (Canadian Organization for the Advancement of Computers in Healthcare and American Medical Informatics Association).

All discussed their recent and future conferences. Please refer to the specific website of each member association for detailed information.

Other Reports

IMIA has various Special Interest Working Groups, of which there are over 20. Working Group of the Year awards were given to two Working Groups:

- History in Biomedical Health
- Technology Assessment and Quality Development

The VP of Special Affairs, Monique Jaspers, discussed the accreditation of Health and Biomedical Informatics Programs. Currently five programs are accredited, and three are requesting accreditation.

Hiroshi Takeda, the Liaison to the International Federation for Information Processing (IFIP), reported on peer review articles and

conferences, and announced that the World IT Forum will be held in Costa Rica – Sept 12 – 14, 2016. IFHIP will be meeting and holding their General Assembly October 9 – 10, 2016, in Korea.

Michio Kimura, the Liaison Officer to ISO, advised members to view the website for recently approved standards.

Antoine Geissbuhler, the Liaison Officer to WHO reported collaboration is ongoing, and that IMIA is consulted on all global IT related issues.

Christoph Lehmann reported that the IMIA Yearbook of Medical Informatics 2015 is now available on the website. 2016 will be the 25 year anniversary of IMIA with a special yearbook published highlighting the last 25 years of keynote authors. There will be a focus on looking back 25 years, comparing this to present day, and seeing “what we got wrong”.

In addition to attending the General Assembly, I also had the pleasure of presenting on Digital Health in Canada. The presentation time was also shared with American colleagues Claire Dixon-Lee, Mervat Abdelhak and Bonnie Cassidy, who spoke on Population Health Management. The session was well attended, with folks standing!



Marci with IMIA President, Dr. Lincoln

Respectfully Submitted by Marci MacDonald



Marci Presenting at MedInfo, Sao Paulo, Brazil

Have you paid your 2015 IFHIMA membership dues?

Membership dues can be paid on-line using a credit or debit card at www.ifhima.org/apply

Alternatively there is the option to file a paper application/renewal by downloading the form from the website and mailing it to the address provided on the form.

Please visit our website www.ifhima.org to easily update your information.

Global Health Workforce Council Update

The Global Health Workforce Council (GHWC) through a grant awarded to AHIMA by the United States Department of Commerce, and in collaboration with IFHIMA and the AHIMA Foundation continues to advance the HIM profession through its [Global Academic Curricula Competencies for Health Information Professionals](#). As reported in previous issues of the Global News, these global curricula are a set of current and standard academic competencies for faculty, students and professionals practicing in health information management (HIM), health informatics (HI), and health information and communications technology (HICT) roles. While best understood by reading the detailed document or by viewing the recent [You Tube](#) recording, it is important to understand the intent is to assist countries in their infrastructure and capacity building efforts geared toward establishing a systematic approach to the management of health information. With continual advances in technology and the resulting data explosion, there is a real opportunity to positively impact patient and population health. The GHWC project recognizes formal education as the foundational building blocks upon which countries can build a sound infrastructure. The release of the curricula competencies in July 2015 was but the first step in this multi-phased project.

During Phase 2 of the current GHWC project, three workgroups have been tasked with developing a guidance document for infrastructure building, a maturity assessment tool, and a role mapping resource. IFHIMA members, along with GHWC and other global volunteers have committed countless hours to the completion of these documents that will be added to the global section of the AHIMA website prior to February 2016. An early look at the infrastructure document reveals considerations related to academic programming, accreditation, and certification. The role mapping resource outlines roles in the health information professions

and ties them to each of the 29 domains within the global curricula. Finally, the genesis of the maturity assessment tool was a 2008 WHO entitled [Assessing the National Health Information System](#). The current workgroup has expanded on that tool to assist users in determining their level of readiness for implementing academic programs in the health information professions.

Phase 3 workgroups are forming now and will begin meeting in early February, 2016. These workgroups will focus on grouping competencies into academic courses; developing training materials; and identifying knowledge, skills, and abilities (KSA) that link to the global competencies for the health information professions. These workgroups typically meet via teleconference once or twice per month with individual work between meetings. Should you have an interest in volunteering please contact the [AHIMA Foundation](#) to request placement on a workgroup. The efforts of the past, current, and future workgroup members are greatly appreciated. Through your good works we have an outstanding opportunity to significantly impact the advancement of the health information professions globally.

Respectfully Submitted by:

Desla Mancilla, DHA, RHIA

Sr. Director, Academic Affairs; AHIMA Foundation



Participants in the recent GHWC sponsored faculty development program held in Manipal, India.

HIM Leading Information Governance

Information Governance (IG) is increasingly being adopted in healthcare organizations according to a study conducted by American Health Information Management Association (AHIMA) and Cohasset Associates in 2015. Still early in its adoption, IG is becoming recognized as a strategy for addressing the integrity, quality, and protection of the increasing volumes of information in healthcare. Legal, regulatory and security concerns are also frequent drivers for establishing an IG program or initiative. Although the label Information Governance may be new, the principles and processes for IG have been embraced and led by Health Information Management (HIM) professionals for years.



AHIMA defines information governance as: “An organization-wide framework for managing information throughout its lifecycle and supporting the organization’s strategy, operations, and regulatory, legal and environmental requirements”. However, the following definition is perhaps easier to understand: “Information governance is really

defined as the framework of policies and a framework of accountabilities. Who has authority to do what with information? And what are the road maps, what are the signposts, the guidelines of how information is collected, managed, used and accessed?” (Kloss, 2014).

It is important to understand that no longer is information governance just a function of HIM. From the registration clerk in admitting to the doctor seeing patients in the hospital and finally to the analyst maintaining servers in IT, information governance encompasses all departments of an organization. Information governance affects every person in the organization and there is a need to understand the flow of the information throughout the organization and what part each individual plays in that movement. Information governance assumes an accountability that encourages a right behavior when handling important or private information.

Starting an IG initiative can be overwhelming due to the exhaustive amount of goals to be accomplished and the expectations that need to be set to address the issues identified. Using a formalized project management approach in developing an IG program is key and requires the organization to identify the need for IG, communicating the need, and gaining acceptance by building awareness. In developing your IG program, identify your key stakeholders, develop a project plan, and begin by focusing or limiting the issues or areas to be addressed before expanding IG.

One of the first steps to an information governance program is to assess the readiness or lack thereof within an organization by conducting a current state analysis. The assessment or gap

analysis could and *should* start with the HIM department.

Perhaps the most important item in a readiness assessment is identifying the information governance Champion and there should be a group or committee that helps oversee the information governance planning and implementation. Furthermore, it is important that a representative of the information governance committee be involved in the organization's strategic planning. Information governance and strategic planning should go hand-in-hand. Some of the strategic goals may align with or impact information governance. It is important then, to have knowledge of strategic plans as well as the information governance plans of an organization to ensure alignment.

HIM can be important in helping the executive leadership team identify the need for an information governance program within their organizations. HIM Professionals have a vast wealth of knowledge to leverage regarding regulations governing health information. HIM professionals' knowledge of coding, data analytics, regulatory requirements, privacy and security make these professionals key to leading information governance. HIM professionals understand the "clinical terminology and language necessary to navigate complicated health information issues within organizations, particularly from a regulatory and compliance perspective" (Warner, 2013).

The importance of information governance cannot be over emphasized. "Information governance ensures that accurate information gets to the right person, for the right reason, at the right time to make the right decisions" (Warner, 2013). Building the process of information governance takes time and is an ongoing project. In addition, maintaining relevant and efficient information governance processes should be a permanent part of strategic planning in healthcare organizations.

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IFHIMA
International Federation of
Health Information Management Associations

Our Regions (please click and follow)





Yukiko Yokobori and Angelika Haendel announcing the 18th IFHIMA congress

IFHIMA meeting

at the AHIMA 2015 Annual Convention in New Orleans, Louisiana, USA

September 2015

*Margaret A. Skurka, MS, RHIA, CCS, FAHIMA
Immediate Past President, IFHIMA*

IFHIMA members and interested others were able to attend an IFHIMA meeting held during the AHIMA Annual Convention in New Orleans, Louisiana. On Tuesday, September 29, during the convention, interested individuals gathered for an hour long meeting.

The attendance was over 35 individuals, and the room was at capacity. Agenda items included an overview of IFHIMA, current priorities and an update by IFHIMA President Angelika Haendel, as well as an invitation from Yukiko Yokobori to attend the next IFHIMA Congress, in Tokyo, on Oct. 12-14, 2016. Assisting in the meeting were Lorraine Fernandes of California, current IFHIMA representative for the Americas, and Margaret Skurka, also of the US, and Immediate Past President of IFHIMA .

A good discussion was held regarding potential work groups for IFHIMA with several important messages. Working groups and thought leadership papers will hopefully be developed before the Tokyo Congress in areas such as Information Governance, Patient Access to Health Data, and Coding. Leaders were established for papers and input is welcomed from all IFHIMA members and interested parties. These groups will be integrated to activities that will also emanate from the Health Information Management Association of Australia (HIMAA) meeting in Sydney in late October.

A short discussion was held regarding death certificate completion education in various countries, the quality of coded data with ICD, and connecting HIM students around the world. Support was voiced for the Global HIM curriculum recently developed by the Global Workforce Council. The meeting concluded with a discussion of the importance of Global News and current articles, as well as using social media for IFHIMA communication. A closed group on LinkedIn, www.linkedin.com, will likely be formed.

An IFHIMA meeting will also be held next year in Baltimore during the AHIMA Annual Convention—which is the week following the 2016 IFHIMA Congress in Tokyo. Hope to see you there!!



AHIMA recently honored Carol Lewis as she reached the 60 year mark as a member of AHIMA and also for her many international contributions throughout the years.

The recognition took place at the annual meeting of the House of Delegates on Sunday, September 27, 2015, in New Orleans.

Congratulations from all of us!

National Conference of the Health Information Management Association of Australia (HIMAA)



Under the theme “Diversify, Innovate and Transform” HIMAA held its annual conference in the Sydney Masonic Conference and Function Centre, October 27-29, 2015. The HIMAA annual conferences are the networking event of the year for Health Information Management Professionals, Clinical Coders and other professionals with an interest in health information management. Around 350 delegates attended including board members of the International Federation of Health Information Management Associations (IFHIMA) and other overseas delegates giving the event a truly international flavour.

The conference included the latest and the best in professional development. With two streams, the first covering Health Information Management topics and the second Clinical Coding and Classification, Costing and Funding. In addition, four workshops were held on the following: Research; Performance Measurement; Clinical Coding; and SNOMED CT.

The Program themes included the most important current topics in the field of health information management:

- eHealth – eHealth and EMR challenges and opportunities
- Funding – the latest news on activity based funding and other casemix and costing work

- Performance reporting and analytics – to improve performance, transparency and accountability
- Management – addressing human resource issues and change management
- Medico-legal issues – privacy principles and policies, documentation
- Research – building on last year’s stand-out workshop and keynote presentations
- International Perspectives – including speakers from IFHIMA
- Workforce – training, professional pathways – and positioning the profession

Phyllis Watson, IFHIMA Past President and a highly recognized national and international advocate for the health information management profession welcomed delegates and opened the conference with a brief summary on the development of HIMAA. Sallyanne Wissman, President of HIMAA and IFHIMA Board Member welcomed attendees and shared industry drivers in Australia and the globe that are requiring higher skills from health information management (HIM) professionals and creating new opportunities for HIM professionals.

Following the official opening, Angelika Haendel, IFHIMA President, gave the keynote address on the current and future challenges of health

information management. The next five years a number of technological and societal trends will add complexity to the management of health information. The trends include an increase in electronic data volume and therefore increasing the complexity of data, further development of consumer engagement, and cloud computing. As healthcare systems become more multidisciplinary and much more complex, health information professionals need to continue to address the changes to meet the demands of an increasingly digital workplace. There will be the need for higher qualified HIM professionals who can take on more management tasks such as assisting in planning and the implementation of electronic health records.

Following the opening the first Keynote speaker was Associate Professor Rosemary Roberts, AM who spoke about the ICD 11 Revision Review, followed by the second keynote speaker, Dr Christopher Chute, Chair, ICD 11 Steering Group who gave an update on the progress of ICD 11.

The afternoon general session was devoted to an International Health Information Workforce Panel (pictured below) which included Julie Brophy (Australia), Margaret Skurka (USA), Marci McDonald (Canada), Yukiko Yokobori (Japan) and Angelika Haendel (Germany). The panel discussed the need to Diversify, Innovate and Transform from an International perspective.



International Health Workforce Panel

The theme continued on the second day with the two streams Health Information Management and Coding and Classification, again with an international flavor with excellent papers on HIM presented by Wole Ajayi, (Nigeria); Arturo Ongkeko (Philippines); and Paras Pokharel (Nepal). Margaret Skurka (USA) gave an excellent paper on “Clinical Document Improvement Tips: all the physician needs to know and great accurate coding will follow”.

Social functions through the conference, including a special reception for international visitors on the evening before the commencement of the conference, formal welcome reception, conference dinner, and afternoon teas. The functions gave everyone the opportunity to relax, network, meet old friends and interact with the many international visitors.

The last day was given to papers on Health Data Usage and Legal Matters in the HIM stream and Activity Based Funding in the Coding and Classification stream.

The final keynote paper was presented by Lorraine Fernandes (USA) on “Information Governance: HIM Meets the Challenge”. Lorraine shared the principles and practical application of information governance and how HIM can develop and execute this strategic priority in healthcare organizations.



The Dancing Queens of the HIMAA Gala Event – Phyllis Watson, Yukiko Yokobori, Jenny Gilder

