

# Adaptive Leadership in Information Governance

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By Patty Thierry Sheridan, MBA, RHIA, FAHIMA, and Valerie Watzlaf, PhD, MPH, RHIA, FAHIMA

Information governance (IG) captures the soul of health information management (HIM), yet many HIM professionals may not engage in IG due to a lack of knowledge, inexperience, or a misunderstanding of all that IG entails. Because of this, experts in IG leadership took part in a focus group study to determine the qualities, characteristics, and skills they possess that led them to become leaders in IG and determine what advice they can give to others hoping to also become an IG leader.

Given the extraordinary impact IG has across an organization, a leadership framework that guides individuals toward exercising IG leadership is essential. After reviewing the results of the focus group, the study developers determined that “adaptive leadership” is a framework that would work well in fostering IG leadership.

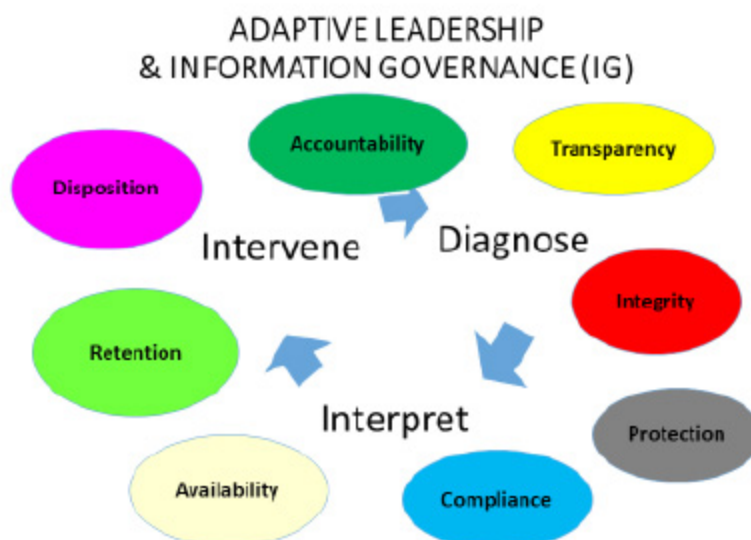
Adaptive leadership was developed at Harvard University by Dr. Ron Heifetz and Marty Linsky from their 30-plus years of research, consulting, and teaching leadership. Adaptive leadership is the practice of mobilizing people to tackle tough challenges and thrive.<sup>1</sup> Leading adaptively requires leaders to address stakeholder priorities and work with them to define how the organization will realize its aspirations for information management and develop a culture of shared IG ownership.

Promoting an environment that embraces IG concepts and principles requires major change in the management of information assets, and sometimes that change causes friction and challenges in an organization. In order to not only survive but thrive in this type of environment, leaders can utilize the adaptive leadership framework to more effectively:

- Diagnose and observe the system they function within
- Interpret what they are observing in the system
- Intervene more effectively within the IG system informed by their observations and interpretations (see Figure 1 below)

## Figure 1: Adaptive Leadership and IG

As illustrated in this graphic, leaders can utilize the adaptive leadership framework in IG and can diagnose, interpret, and intervene within the IG system based on their observations and interpretations.



# IG Focus Group Study Design

The purpose of this IG focus group study was to determine how leaders in HIM incorporate IG principles into their organizations. Adaptive leadership principles were incorporated into the study to determine if the HIM leader used these concepts and how they relate to being a leader in IG. This study gathered data from focus groups of HIM leaders to learn how they currently work with IG, and view the adaptive leadership framework to solve IG challenges.

The specific aims for the study included:

1. Describe what IG is and the role HIM professionals should play in IG.
2. Learn what characteristics and qualities are necessary in order to become leaders in IG.
3. Discuss the adaptive leadership concepts and how they relate to being a leader in IG.
4. Provide challenges HIM professionals face as they move towards becoming leaders in IG and how they can tackle those challenges.

## Methods

The core of the study’s methodology was derived from the utilization of the adaptive leadership framework in the context of IG. The use of adaptive leadership includes taking an ecosystem perspective on the patterns and trends of an organization and the relationships between professionals as they address IG initiatives. Focus group questions were designed to enable conversations with HIM professionals about their strengths using their own personal assessment along with the assessment of their organization. Subsequently, these conversations enabled the study’s researchers to build the blueprint for effective IG leadership using concepts drawn from the adaptive leadership framework.

## Population and Sample

Thirty HIM professionals who are leaders in IG were contacted to participate in the study. Nineteen HIM professionals agreed to participate—a 63.3 percent response rate. Four 90-minute focus group sessions were provided via conference call and with approximately four to six participants on each call. The researchers developed a pool of 21 questions to choose from during the focus group sessions. Questions were adapted from a previous study that examined HIM leadership.<sup>2</sup> Focus group participants were also provided reading material on adaptive leadership principles before the calls.<sup>3,4</sup>

Participant backgrounds included four consultants, six practitioners working in healthcare organizations, four AHIMA staff, and five HIM faculty/educators working in HIM programs at colleges or universities. The education and training in IG for all of the participants included self-education and learning from information provided by the American Records Management Association (ARMA) and AHIMA, attending webinars and conferences and through reading books by other HIM professionals on the subject of IG.

**Table 1: IG Expert Characteristics in Relation to IG Principles**

Characteristics:	IG Principles:
Collaborator (breaking down silos; builds relationships; team builder)	Accountability
Dedicated initiative to IG	All eight principles (Accountability, Transparency, Integrity, Protection, Compliance, Availability, Retention, and Disposition)

Strategic, visionary, innovator, change agent, project manager	Accountability
Good listener, good communicator (influential; persuasive; confident)	Accountability
Balance between protecting the information and being able to put it to work (compliance)	Compliance, Protection, Availability, Transparency
Knowledgeable of all types of data and information created and maintained within the healthcare ecosystem	All eight principles (Accountability, Transparency, Integrity, Protection, Compliance, Availability, Retention, and Disposition)

## Study Defines Leadership in IG

When respondents were asked what leadership characteristics they believe are essential in order to be an expert in IG, several areas emerged. The top characteristics (in no particular order) for IG leaders and how they relate to the eight IG Principles for Healthcare™, developed by AHIMA through adaptation of ARMA International's Generally Accepted Recordkeeping Principles, are shown in Table 1 (at left).

Focus group participants were asked how they would define IG. Those responses were entered into word graphic software, the result of which is shown in Figure 2 below. The more often the word was used by participants in their answer, the bigger it appears in the word graphic. Data and information emerged as the main items in the word graphic, which was expected when defining IG.

### Figure 2: Defining Information Governance



## Emerging Themes: What Does IG Mean to You?

When participants were asked what IG means to them, the following four major themes surfaced:

**Data Governance:** All types of data should be governed, not just health information, including, but not limited to: financial, community, research, education, and registry information. Data governance is a key component of overall information governance.

**Ecosystem Imperative:** All groups across the healthcare ecosystem are vital to include in an information governance program. Breaking down silos across these groups is imperative for success in IG.

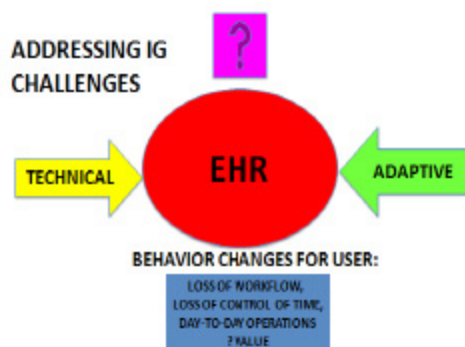
**Information Economics:** It is important to educate an organization on the economics of information, such as how data is an asset in incentive programs like the “meaningful use” Electronic Health Record (EHR) Incentive Program and other quality initiatives, as well as in reimbursement via quality coding and the support of population health and planning.

**Analytics Framework:** Data needs to be collected, compiled, analyzed, and protected so that it can be trusted and has integrity. Quality-based data mining efforts provide realistic results needed to answer essential healthcare clinical, financial, and operational questions.

Several examples of how HIM experts address IG challenges were discussed during the focus group. One of the examples relates to treating the implementation of an EHR system as a technical challenge—a challenge for which there are agreed upon practices and known solutions. Treating an EHR implementation as only a technical challenge is fraught with failure. While the technology of EHRs has improved over the years, the work of implementing an EHR is adaptive work requiring an understanding of what stakeholders value, how to best reconcile differences of perceptions around the use of EHRs, addressing the loss that stakeholders experience, and generating new norms for creating, using, storing, and protecting information (see Figure 3 below).

### Figure 3: Technical vs. Adaptive Challenges

This figure demonstrates that EHR implementation should be treated as both a technical and adaptive challenge since it is adaptive work that includes understanding the many behavior changes the user must endure.



There are several required behavioral changes that need to take place in order to adopt an EHR that can affect users. These include: questioning the value of the system due to major changes in workflow and less perceived face time with patients, loss of control of the user's time, and changes in the user's day-to-day operations. Therefore, it is important to not only stress the technical aspects of the EHR implementation but also its effect on individuals from an adaptive leadership perspective.

This requires leaders to examine fears and losses and focus on competing values to create a space to address conflicts and aspirations that will make the implementation a success. For example, if key stakeholders value their current workflow and the use of paper records, then involving them in workflow redesign and providing real life use cases on how their life will positively change is necessary for stakeholders to see any value in adapting to something different. Being clear on what is changing and what is not and being less reactive to individuals throughout the process of implementing an EHR is also important.

## Working through Contentious IG Issues

Focus group participants were asked “What happens when you turn up the heat on IG issues?” and “What happens when you allow conflicts to emerge and the space for people to work through conflicting values and perceptions?” For example, one area of conflict that was discussed was related to patient identity, which is aligned with the IG principles of accountability, integrity, and reliability. Participants said it is challenging to make adaptive changes in this area. One participant said, “I could point out the risks, the errors, the duplicate MRNs and how that impacted patient care, but I never could get people to understand how important that was. When I try to turn up the heat in certain IG issues, I couldn’t quite get my message in, couldn’t get an effective plan put in place as a result of that. What was needed was an ‘interdisciplinary committee (shared ownership)’... to help get the message across to the entire organization. In recognition that you can’t do it all, we have to have both executive and physician leadership throughout our organizations to help us get this [IG] out, but it’s our role to educate them.”

One of the areas that the adaptive leadership framework focuses on are the values and loyalties that are at stake when implementing any kind of change. Three value conflicts materialized during the focus group research.

The first was transparency, which includes having the organizational processes and activities that are related to IG be documented clearly, openly, and be verifiable to legitimately interested parties. One of the participants said, “We need to build a monogram of transparency to show that it is about managing the whole information life cycle, and we need to let patients, the public, and other stakeholders know that IG is important.”

Another participant said, “Sometimes we don’t want to talk about the bad stuff; but if you are transparent you can help your organization move forward to get better. It can’t just be about the things that we’re successful at because there will be failures and that can certainly make an impact on patient care.”

For example, if an IG program is implemented and transparency is heavily valued by some but not by others, a value conflict will emerge that the IG leader would need to address. In order to lead change, identifying and reconciling the differences of how stakeholders value transparency is vital. Leading adaptively requires leaders to observe patterns of behaviors that are influenced by individual and organizational values and assumptions. Identifying and discussing what people value is important. And as one of the participants said, once they are identified, “weave those core values throughout the entire organization to strengthen the purpose.”

A common example of value conflicts related to transparency includes key stakeholders not wanting to share results with others because the results are not favorable. In this actual scenario the IG leader observed that this group of stakeholders value acting responsibly and take pride in their reputation. Given this, the IG leader focuses on stakeholder values and gets agreement on how sharing information and being more transparent demonstrates that they are living up to their responsibility and how being transparent improves their reputation within the organization because they are open, honest, responsible, and ready to use data to improve healthcare delivery and organizational outcomes.

Accountability was the second value conflict that surfaced from the focus group when asked about what values are at stake when implementing IG. Accountability should be a collaborative approach, where clear procedures are in place so that employees understand their responsibilities to IG. As one of the focus group participants said, “Accountability is another value that is at stake. There has to be clear processes in place so that it’s known which department, which people are accountable for doing certain things and if that isn’t clear, if it’s implemented poorly, that [accountability] certainly could be at stake.”

Therefore, an IG leader must appreciate that strategies need to be developed on what should be implemented as part of an IG program and then hold assigned people accountable. This is especially challenging to lead in environments where people are not held accountable. Certainly there are personal principles or values that will drive many stakeholders to be accountable

even in an organization that does not focus on accountability. But through the lens of an adaptive leadership framework, it is important to think through the various commitments and beliefs that guide an organization's decision making process.

Determining what an employee may fear they will lose if they are held accountable is also key. Employees held accountable in IG could fear losing their job if they are not able to measure up to the set performance standards. Therefore, an IG leader will need to not only develop performance standards but also have an IG charter that explains the purpose and principles of the work, a communication plan, and training so that employees thrive and meet established performance standards.<sup>5</sup>

The third value conflict that emerged from the focus group when asked about what values and loyalties are at stake when implementing IG was protection. Every IG program should work very hard to ensure that there are appropriate levels of protection from surrounding information that is confidential and private. One of the participants said, "Thinking beyond health information to broader information and governance, that is a value where we are fiercely protective and loyal, and we think in terms of the health record and health information."

But sometimes HIM professionals' loyalties are to health information, and they are not always thinking about other types of information such as financial, human resource management, research, community, education information, and so forth. Governing all types of information—the entire information lifecycle—is crucial in order to have a successful IG program. And being fiercely protective of information can get in the way of making decisions in the best interest of consumers, researchers, and organizations.

## IG Leaders' Top Priorities

The top five IG priorities of the focus group participants were:

1. Educate members and stakeholders on IG
2. Collaborate and cooperate; break down silos
3. Demonstrate the value, relevance, and importance of IG
4. Create IG resources, grow the body of knowledge
5. Communicate; discuss the importance of IG, share stories

One IG leader participant summed up their top priorities by saying: "I've worked with [the department of] compliance more than I ever have this past year because of IG, but it has been really good, because, again, it has led to more of an integration with [compliance]. They realize a lot more of the value [HIM] brings and they are asking us now to do a lot more things for them, where we never did that, even a year ago. This kind of cooperation or working with these other silos, if you will, to integrate more and more with them [enables us] to try and achieve these bigger IG type initiatives."

One key to breaking down silos within a healthcare organization is to replace isolation and competition with cooperation and communication.<sup>6</sup> Building relationships is not something that happens overnight and takes years to develop. Understanding stakeholders' values and perceptions, leading adaptively, persevering, and taking the time to communicate can move IG leaders forward. Leading adaptively can be considered a top IG priority—with leaders continuing to educate, collaborate, cooperate, communicate, establish relationships, and work with other departments to promote IG.

## Acknowledgements

The authors wish to acknowledge *CAREinnoLab*, a research entity between HealthPort-IOD and the University of Pittsburgh's Department of Health Information Management, School of Health and Rehabilitation Sciences, which supported the research study this article is based on. *CAREinnoLab* conducts ongoing research and objective analysis in the field of healthcare data quality and HIM.

AHIMA thanks ARMA International for use of the following in adapting and creating materials for healthcare industry use in IG adoption: Generally Accepted Recordkeeping Principles® and the Information Governance Maturity Model. [www.arma.org/principles](http://www.arma.org/principles). ARMA International 2013.

## Notes

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Patty Thierry Sheridan ([ptsheridan@care-communications.com](mailto:ptsheridan@care-communications.com)) is senior vice president, HIM services division, at HealthPort-  
IOD. Valerie Watzlaf ([valgeo@pitt.edu](mailto:valgeo@pitt.edu)) is associate professor, department of health information management, school of health  
and rehabilitation sciences, at the University of Pittsburgh.

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**Article citation:**

Thierry Sheridan, Patty; Watzlaf, Valerie J.M.. "Adaptive Leadership in Information Governance"  
*Journal of AHIMA* 87, no.2 (February 2016): 20-25.

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