Building the NHII: From the Ground Up and the Top Down

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It took the US just 11 years from the time NASA was set up to put a man on the moon. It took 18 years from conception to a completed map of the human genome. Now, the US and other countries are embarking on national healthcare initiatives similar to space travel and genomics in their complexity and impact on the way we live.

In the US, our vision is a national health information infrastructure; in Canada, it's the Canada Health Infoway. Many nations are pursuing fundamental change in healthcare through a national health information strategy. These efforts are urgently needed, and health information managers should be able to explain this urgency as we do our part to build the overall mosaic.

The National View

Helga Rippen and William Yasnoff from the US Department of Health and Human Services define the US vision in "Building the National Health Information Infrastructure." The authors describe the NHII imperative in terms of patient safety, quality improvement, and cost savings. They also help us understand why, with so many compelling benefits, this infrastructure isn't already in place. They describe how public and private sector involvement is key in this initiative, particularly in our pluralistic healthcare system. Yet the US NHII is sorely underfunded. While healthcare organizations are investing in as much essential technology as they can, we have not yet achieved a consensus on how best to move this vision forward.

In "Canada Hits the Infoway" we learn that Infoway is more clearly defined, its targets in place, and its initiatives funded. Canada has a bold goal of having interoperable health record systems in place in half of Canada by 2010.

The Local View

Rippen and Yasnoff describe one model for building the NHII—that of interconnected local health information infrastructures. This model involves connecting information exchange networks built at the community level, because most of us get our medical care from various providers in our community. Michael Schrader describes a community project that has gained national attention in "Santa Barbara Blueprint."

HIM directors across the country are updating systems and information management processes. In "What CFOs Want," Mark Hagland presents the best advice of finance officers about how to succeed in getting your plans funded.

The Dialogue Continues

At this spring's Team Talks and state association meetings, HIM colleagues are talking about e-HIMTM, AHIMA's national initiative to advance change in HIM practice as part of the NHII efforts. The national and community focus on improving health information gives us an opportunity to advocate for changes to eradicate age-old information problems such as inadequate and illegible documentation, conflicting payer practices, and inconsistent data requirements. Help us by being an e-HIM advocate in your organization and community and share your achievements with your colleagues.

As we migrate from paper to electronic information, HIM work involves designing the processes for information integrity, real-time access to the right information, sound privacy and security protections, and the effective use of information for a variety of purposes from quality improvement to clinical trials. The new work of HIM professionals will be critical to the NHII—and to the people it serves.

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