Collaboration, Conversation, and Coding Evolution

Save to myBoK

By Lynne Thomas Gordon, MBA, RHIA, FACHE, CAE, FAHIMA, chief executive officer

Collaboration is a word that's used-and overused-so much lately, it's hard to remember what it really means.

But it's a word that occurred to me as I read the best-selling book *Crucial Conversations: Tools for Talking When Stakes Are High.*

The book focuses particularly on the "crucial conversations" we have when stakes are high or emotions run strong. But it seems to me that when we're collaborating, we're having crucial conversations every day.

These kinds of conversations are essential steps to "get at what others think in order to understand why they're feeling the way they're feeling and doing what they're doing," as the book's authors put it.[1] They recommend simple tactics like asking people to share their views, mirroring others' actions to confirm their feelings, and paraphrasing to acknowledge the stories of others.

The Ground Work for Change

These tactics can be useful tools-not just at high-stakes moments, but at other times too. Like right now-as technologies, skills, and responsibilities are changing for everyone. This principle is true in the world of HIM and particularly in coding, the subject of this month's *Journal of AHIMA* issue.

We've seen these basic principles at work for a long time. Now, as HIM prepares for its next evolutionary step, coders must become even greater collaborators. On a daily basis, it's particularly important to partner with physicians and their office staff, of course. But we see this principle at work in projects such as ICD-10-CM/PCS implementation, in the ongoing efforts of clinical documentation improvement, and even in game-changing developments like computer-assisted coding (CAC). All of these require a greater degree of partnership and collaboration.

Real World Tools

This month's features offer great examples of the principle of collaboration in action.

The cover story, "The Truth About Computer-Assisted Coding" by Mark Crawford, tracks the impact of CAC first hand, with stories from the field about improvements and benefits. Those who have implemented CAC find that a coder's expertise is still vital to healthcare organizations, especially after they move toward ICD-10-CM/PCS. "Once coders understand they are still needed, they usually embrace the technology," one manager says in the article.

In "Clinical Documentation Improvement-A Physician Perspective," Dr. Adele Towers offers tips on how to promote CDI programs to members of the medical staff and engage their active participation in the process. "The key is to correlate how clinical documentation provides an opportunity to demonstrate the quality of care that was provided," Towers writes.

Minnette Terlep and Carol Person give us a tale of coder transformation in "Transitioning Transcriptionists." And Judy Bielby offers a number of resources and recommendations for coders, including AHIMA resources, in "Coding with Integrity."

Through collaboration-and seeing other points of view-we all can move forward. This issue is a great place to start.

Note

1. Patterson, Kerry et al. *Crucial Conversations: Tools for Talking When Stakes Are High*, 2nd ed. New York: McGraw Hill, 2012.

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