

Facilitator No Stranger to Cyberspace

Save to myBoK

by Anne Zender, MA, director of communications

“Privacy and security are big issues for consumers. Many e-health sites are not covered by HIPAA, so even though they think they don’t need privacy and security, we need to make them aware of it. We need to work with organizations to make sure data collected by health sites or by Internet applications is good data. We need to help design systems and work with the key players to make it happen.”

—*E-health Community facilitator Lynda Mitchell, RHIA, CPHQ, on the challenges e-health presents to HIM*

Lynda Mitchell, RHIA, CPHQ, is no stranger to cyberspace. Mitchell, who is facilitator of the E-health Community of Practice, has spent plenty of time at the keyboard in recent years. She’s a graduate student earning her master’s degree at the College of St. Scholastica and learning about the information technology aspects of HIM. In addition, she serves on AHIMA’s E-health Task Force. And, on her own, she’s a facilitator of an online health support group.

All of these interests have helped Mitchell, who lives in Doylestown, PA, step into one of AHIMA’s newest volunteer roles—that of a Communities of Practice (CoP) facilitator. CoP is the Association’s online community and networking tool, found at www.ahima.org.

New Role? No Problem

Mitchell was inspired to participate after attending AHIMA’s National Convention in October, where CoP was launched. She suggested the creation of an e-health community and volunteered to be its facilitator.

Because she was already an online facilitator, stepping into a CoP role was no problem. Among her tasks are keeping the community up to date by adding resources, links, and discussion topics. “If I find something new on the Web, I’ll post it there,” she says. “I also encourage people to share their experiences working with e-health. The whole point is to share knowledge that helps us do better at our jobs.”

From Newbie to Netizen

Mitchell wasn’t always so computer savvy. She realized in the 1990s that she didn’t know enough about computers. “I made the conscious decision to become computer literate,” she says.

So she took classes, bought a PC for her home, and learned how to use it. As the Internet and the Web became household words, she understood the effect that these technological developments—and the fledgling field of e-health—would have on HIM. “That’s where we are headed professionally,” she says.

Although she had enjoyed her job as a manager for a peer review organization, going back to school to learn more about technology seemed like the natural thing to do, Mitchell says. Now a full-time student, she is studying topics like designing a computer-based record, decision support systems, ethics, risk management, and statistics.

She says that her graduate program “is a real eye-opener in terms of making me aware of the computer-related aspects of HIM. It’s made me more aware of the role I play and the competencies I need.”

Mitchell’s interest in e-health has also been fueled by her personal interest in consumer informatics. “The whole consumer health informatics field has captivated me,” she says. For several years, she has facilitated an online health support listserv for parents of chronically ill children. Over time, she found, she has played a role similar to the patient information coordinator role forecast by Vision 2006. “I try to help the parents become more informed healthcare consumers,” she says.

The volunteer role ties into her studies well; for example, she is working on a school project focusing on consumers finding health information on the Web.

Keeping Up with Communities

Mitchell believes her CoP facilitator role will become more important over time, as the community becomes more active. “People don’t know quite what to talk about yet, but they will begin to consider the implications of e-health for their organizations and their careers,” she says.

She also enjoys keeping up with other communities, such as the HIPAA Community of Practice and the AHIMA Community. “The information I want to know is on the CoP first, before it is anywhere else,” she says.

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