

# Governing Healthcare's Most Valuable Asset—Data

[Save to myBoK](#)

By Mary G. Reeves, RHIA, and Rita Bowen, MA, RHIA, CHPS, SSGB

Many individuals have a high degree of confidence in the validity and integrity of data if it comes from a computer. When they encounter data in this form, the assumption is the data has been vetted, scrubbed, and signed off by a reliable source. In truth, however, this is rarely the case.

In today's ever-expanding world of "Big Data," the need for careful superintendence of digitized health information data has emerged. Data are a corporate asset and yet often overlooked in the world of corporate controls. In the paper world, medical record supervision was the responsibility of HIM professionals. The same should be true in an electronic health record (EHR) environment.

Data are healthcare's most valuable assets. Yet it is an industry "hot potato," and there is real risk in handling it. HIM professionals understand these risks and are well-positioned to manage them. Vanderbilt Medical Center understood HIM's expertise, and established a best practice data governance program with HIM professionals at the helm. Details on how and why Vanderbilt, a leading academic medical center based in Nashville, TN, created this program and the HIM professional's role are discussed below.

## Data Governance Defined

Healthcare organizations inventory almost all of their assets, from beds and chairs to drugs and surgical equipment. But organizations should also inventory their data. Data inventory, called data governance, defines where data comes from, where it goes, and who maintains its stewardship.

Technically defined, data governance is the exercise of authority and control over the management of data assets—including planning and monitoring data, and the enforcement of data rules. Data governance is a system of decision rights and accountability related to the processing of information.

Vanderbilt University Medical Center is comprised of three hospitals and The Vanderbilt Clinic. With 918 licensed beds, 53,000 annual discharges, and 1.6 million annual clinic visits, the medical center maintains an 83 percent occupancy rate and has achieved HIMSS stage 6 hospital EHR adoption—an advanced level. Having begun their EHR efforts in 1997, the organization had abundant data after only a few years.

By fall 2009, the need for stronger data management was clear and initial steps were taken to build a data governance infrastructure. Vanderbilt's experience, while specific to their organization, provides other HIM professionals with a framework to emulate. The lessons learned by Vanderbilt's staff are applicable to all organizations.

## Revamping Data Governance

As Vanderbilt moved through the electronic world, they quickly discovered that stronger data policies were needed. Informatics tools had evolved at a rapid pace but lacked correlation with HIM policies and procedures. As more and more of the medical record became electronic, information became easier to transmit and share. Newer and greater uses of the electronic information emerged along with increasing secondary use of the data. Initial questions raised by HIM professionals centered on who in the organization could do what to which data.

Vanderbilt leadership began addressing these process and workflow issues through their traditional medical records committee. This method proved to be a long and difficult road. Eventually, leadership enlisted a top consulting group to develop a data governance structure. This involved a new Health Record Executive Committee (HREC) that was established to sit at the top of the structure.

## Seven Data Governance Questions HIM Professionals Should Ask

Do you know where the data are?

Who controls the data?

Do you know who will use the data?

Does your organization need to better safeguard information?

Does your organization need to keep auditors and regulators satisfied?

Does your organization need to improve data quality?

Are you ready for meaningful use and data sharing?

## Governance Considered a “Top Job”

The HREC oversees data governance throughout the organization. The committee reports up to the center’s medical board and clinical enterprise executive committee, ensuring executive involvement and sponsorship.

Data governance is considered a top job at Vanderbilt. The HREC’s primary focus is to develop a strategy for enhancing standardization of health record practices while reducing risk and enhancing compliance. Their charter is twofold:

- Set strategy and guiding principles for the creation and use of the health record
- Hold responsibility for the continued migration and evolution of the health record

The members of HREC include the CMIO, CIO, and legal counsel. In addition, the committee has representatives from the medical staff, nursing informatics, HIM, administration, risk management, compliance, accreditation and standards, and advanced practice nursing departments. Subcommittees have also been established around policies, migration, and deployment of the EHR.

## HIM and Data Governance

Most organizations have focused on IT systems in an effort to automate and respond to governmental programs and initiatives. They may even have IT governance structures in place to determine which systems are bought and implemented. What most institutions do not have is a structure to govern the data that flows into and out of those systems.

The enterprise focus is where HIM professionals are equipped to help solve governance issues. This requires HIM professionals to broaden what they already know about other vertical structures within the organization. And it requires data governance authority, granted to them from the executive steering group. HIM professionals know how to ensure data integrity, accuracy, completeness, and privacy of information contained in medical records. They are trained in ROI, privacy, security, and HIPAA-essential elements of data governance.

Work groups specific to HIM’s core health record functions were established as part of Vanderbilt’s HREC. These work groups included forms management, release of information policy, inpatient concurrent scanning implementation, and health record retention policy.

## Patient Safety and Data Integrity

As each data element is defined, verified, edited, and transported between systems, data governance ensures that the correct data gets into a patient’s record and enhances compliance, patient safety, and outcomes. The goal behind any data governance program must be patient safety, and data must be reviewed simultaneously for integrity.

HIM professionals can help organizations accomplish this by implementing accurate documentation practices and ensuring practices are followed through training, education, and monitoring. Policies for standardization across Vanderbilt’s organization were developed and the data governance team took a closer look at documentation practices and data integrity.

**Data Stewards Needed**

Data stewardship is perhaps the most important role in data governance. Data stewards are typically business leaders or subject matter experts for a given healthcare domain. They manage data assets on behalf of others, working for the best interests of the organization. Strong team building and people skills are a must for employees in this position.

Data stewards define the procedures, data meanings, and policies for data in their area of competence, and work to ensure data integrity. They also help provide data definitions, establish quality expectations for data, and monitor staff use of data to ensure compliance with established rules. HIM professionals are well-positioned to serve in this role.

**Eliminating Duplicate Medical Record Numbers**

At Vanderbilt a legal medical record (LMR) team was established to support additions, corrections, and deletions within the EHR-including how users submit requests for retractions and how they move documentation in the EHR. The LMR team has 24-hour coverage and provides an immediate response to requests. At Vanderbilt, the team receives approximately 1,000 requests per month from all the various EHR users. From a data integrity perspective, Vanderbilt focused on mitigating duplicate medical record numbers.

An enterprise master patient index integrity team was established and charged with monitoring duplicate medical record number creation rates by registration and scheduling areas. These rates and data discrepancies causing duplicates will be reported to the Health Record Executive Committee. The organization’s best practice goal is to keep the rate of duplicate medical record numbers to less than one percent.

**Standardizing Data Policies**

Below are several data integrity and information use policies a healthcare organization should ensure are standardized across their health system.

Data Integrity	Information Use
Carry forward clinical information	Definition of legal medical record
Additions, corrections, and deletions in the medical record	Naming convention standards
Electronic signature	Release of Information policy
Primary medical record number	Health record retention policy

**Benefits of Strong Data Governance**

In healthcare today, there is rarely a single consumer of data. Data will be used by multiple clinicians, case management, risk management, quality researchers, external bodies, finance, and other parties. They all need to know that the data are valid and

that they are working with well-defined, universally understood data packets.

The role of HIM professionals is to ensure EHRs have information integrity that supports patient safety and quality of care. Peter Aiken, PhD, an associate professor of information systems at Virginia Commonwealth University, states that much of the data an organization maintains are redundant, obsolete, or trivial. HIM professionals can play a key role in analyzing health record data and ultimately help reduce, reuse, or recycle information. As Aiken once said during a conference, “data management must mature and organization thinking must change, transitioning from a quality versus quantity perspective.”<sup>1</sup>

### Crawl, Walk, then Run with Data Governance

There is no easy solution for data governance. It is important for HIM professionals to embrace a “crawl, then walk, then run” mentality. But the benefits of data governance are many and include:

- Making data accurate, timely, relevant, and high quality (information integrity)
- Reducing duplication and association costs, including potential errors (information use)
- Increasing confidence in data

Data governance, like many important initiatives in healthcare, requires an ongoing education and governance process. Given the changing organizational environment in hospital departments and physician offices, and recent developments in mergers and acquisitions, data warehouses, federal and state audits and reporting requirements, and release of information avenues, it is clear that governance is another continuous process. An organization is never done, and there is no destination—just a journey. HIM can lead that journey.

### Note

1. Aiken, Peter. “Data – It Shouldn’t Be This Hard. Lessons from the Trenches.” Healthcare Analytics Symposium & Expo. July 24, 2012.

Mary G. Reeves ([mary.reeves@vanderbilt.edu](mailto:mary.reeves@vanderbilt.edu)) is administrative director, medical information services at Vanderbilt University Medical Center, based in Nashville, TN, and Rita Bowen ([rita.bowen@comcast.net](mailto:rita.bowen@comcast.net)) is senior vice president of HIM and privacy officer at HealthPort.

---

**Article citation:**

Reeves, Mary G; Bowen, Rita K.. "Governing Healthcare's Most Valuable Asset—Data" *Journal of AHIMA* 83, no.10 (October 2012): 62-65.

---

### Driving the Power of Knowledge

Copyright 2022 by The American Health Information Management Association. All Rights Reserved.