

Tips for Successful Training

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By Chris Dimick

Without a doubt, the transition to ICD-10-CM/PCS will impact patient care and revenue. Whether that impact is positive or negative, however, comes down to the quality of the training that organizations provide their clinical and coding staff.

Omar Rosario, PMP, and Patricia Hildebrand, MSN, RN, CPHQ, CCS-P, FACHE-designate, discussed ICD-10 training tips in their presentation “One Size Does Not Fit All.” Managers must design training plans that work for each department and all types of learners, they stressed.

Notes and Quotes

Establish roles and expectations. The first step in training is ensuring that everyone understands their roles in the transition, said Rosario, a lead associate with Booz Allen Hamilton. Staff members need their own “expectations of the job moving forward, as well as your expectations of them moving forward.”

Employers need to understand what motivates the individual employee before trying to motivate a team. Employees want to know the bottom line—“how does this make my job better or easier?” or “what’s in it for me?” It will be helpful for managers to be clear on the positive and negative outcomes associated with employee performance in the transition.

Habits will be hard to break. A major training challenge will be breaking down the “old schema to create new ones,” Rosario said. ICD-9 has been in use since the 1970s, and the code set is engrained in many job roles. That needs to change.

“We bring to the table all of our experiences—all we know and all we don’t know,” Rosario said. “We bring all our baggage—whether it applies or not, we are bringing it.” Trainers have to manage those personal experiences in order to deliver successful training.

Make a plan. Training this significant requires a strategy, Rosario said. He recommended the following broad steps:

- Conduct a training needs analysis. “Determine what the audience needs to know and how they will need to know it.” Training needs will differ depending on the trainee’s location, role, and level of expertise.
- Offer a variety of formal and informal learning programs. Some people learn better by talking to the experienced coder next to them than by attending a highly structured class. Identify department champions and get them on board with ICD-10 to teach others informally.
- Communicate. Communicating change is important to keep morale high and ease people into the change.
- Continuously evaluate outcomes. Measure the effectiveness of your program and adapt it as necessary.

Patricia Hildebrand, of Hildebrand Healthcare Consulting, discussed the differences between training physicians, nurses and direct care clinicians, and coders. For all, having an educational design and motivational approach to training will mitigate many challenges.

Work to engage nonstaff physicians. Physicians who are not employed by the hospital can be hard to train, because they aren’t required to heed requests for training. But they are a very important group to include.

“They need more of an understanding of why you are doing this—not just that you are,” Hildebrand said. “You want to train them on the fundamentals of ICD-10, and do so through short, one-page examples and pocket-pal cheat sheets that list the new ICD-10 codes for hot hospital diagnoses like hypertension.

“Give them training in small bites. Don’t give them the history of ICD,” she said.

Find a physician champion. Getting one physician on board can help bring along the rest. Sometimes champions can be found in unlikely places. “Find the youngest partner in the organization, one who is looking to make a name for himself, and get him to become a champion,” Hildebrand advised. Or “look for the loudest complainer in the group, the one throwing charts. They are passionate—tell them that this is important, and we need your help.”

Stress quality improvement. If you tie the ICD upgrade to the potential for improved care, you will have more takers on training. “If you show how ICD-10 will lead to better clinical care and quality, you will have won them based on their pride in delivering quality care,” Hildebrand said.

Seek continuing education credit for nurses. Nurses will require the fundamentals of ICD as well as an analysis of the new coded data system. To entice their participation, set up the sessions as continuing education training by working with the state professional associations. Earning CE credits can be a motivator.

Start coding professionals with the basics this year. Coders need specific training, including the code structure and conventions and refreshers on anatomy and physiology. Even though intense coding training shouldn’t begin until 2013, managers should begin introducing ICD-10 concepts.

“Put up posters and other visual materials about the ICD-10 structure, roots, and other basics,” Hildebrand said. “Do it now before we get into the hardcore training.” Find the best coders in the group, and get them on board with training early.

Take training in bits. For coding professionals, focus first on the areas of coding that have the highest volume and largest ties to reimbursement—the high risk areas that would cripple the facility if it didn’t have them down cold come implementation time.

The training requirement “is huge, but it is possible,” Hildebrand told attendees. “If you take it in small bits.”

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