

Toward a Web-enabled HIM Profession

Save to myBoK

by Margaret A. Skurka, MS, RHIA, CCS

I begin this month's column with three questions: Do you have access to the Internet? Do you use it as a tool in your work? Are you regularly using the professional development information on AHIMA's Web site? If your answer to any of these questions is "no," I urge you to consider what you are missing—now and in the near future.

In recent discussions, the AHIMA Board of Directors and the House of Delegates have explored ways in which the Web will affect our lives as citizens, as AHIMA members, and as HIM professionals. Our conclusion is this: within a very short time, any HIM professional who is not Internet-savvy will lose his/her professional edge. Two factors support this conclusion. First, health records and HIM are moving to the Web. Second, AHIMA is strategically shifting more and more of its resources to the Web as a way of meeting your changing needs and values.

AHIMA's most recent membership data tells us that 82 percent of members have access to the Internet from work, home, or both. Just two years ago, only 22 percent reported Internet access. So while the number has soared, we won't rest until it is 100 percent.

HIM Practice and the Internet

We have our radar on the e-health movement in general, specifically on health record applications. Consumers are using the Internet to access health information and to form online support groups. They are encouraged to maintain their own health records and use e-mail to exchange information with caregivers. Healthcare organizations will use the Internet for communications, transaction support, and front-end clinical systems.

This is a trend that has had explosive growth and it will be the subject of March's *Journal* feature articles.

AHIMA's Web Strategies

AHIMA's Web site currently contains more than 3,000 pages of resource materials. You can communicate with other members in a variety of forums and participate in scheduled cyberforums. You can register for the National Convention and soon you will be able to order publications and register for audio conferences. You can submit your continuing education reports online, and take CE quizzes for credit. You can have HIM practice information and job bank listings delivered to you by e-mail. If you are a student member of AHIMA or an HIM educator, you can use the resources of the Institute for HIM Learning Excellence, a special site which was designed to meet your needs.

AHIMA's Interactive Learning Campus was unveiled at the Convention last October. To see a preview, go to www.universalcampus.com/ahimacampus. This is your new continuing education resource. You can register for and take Web-based courses at your convenience and in the comfort of your own home. A new Web-based coding assessment and training program is also now available from AHIMA for use by healthcare organizations.

We will very quickly see more product and information being delivered to us via the Internet and it will be imperative to be connected. For example, the Ohio Health Information Management Association is the first state association to discontinue its paper newsletter in favor of a Web-based newsletter. Members in Ohio who are not connected to the Internet can go to a local library, obtain a copy from a colleague, or perhaps request a paper copy to be downloaded and sent to them. But, for the most part, the paper newsletter we are all so very familiar with has disappeared. Will other states follow suit? What about section and society newsletters? We are anxious to hear the reaction in Ohio.

Will AHIMA pursue an expanded electronic publishing agenda? Undoubtedly. Electronic publishing will save money and time and will improve your ability to search and retrieve information when you need it. Newsletter and Journal articles already

appear on our site and it is inevitable that more and more information that once was printed and mailed will instead be published electronically as member preference and access grows.

The promise of the Internet for associations is far more than information dissemination. Its real benefit is in bringing people together around topics of common interest. Thus, we are undertaking an "expedition" to create communities of practice for AHIMA members and other stakeholders, such as the vendors who serve our industry. Communities of practice are a natural evolution of the association experience made possible by technology. Geography is no longer a barrier to getting together with others with common interests. How communities will help shape the look of the Association in the future is by no means clear at present. But the expedition has begun.

The board has identified three other important expeditions that, aided by the Internet, will shape our future. First, there is the "body of knowledge" expedition, where the continuing changes in the theory and practice of HIM will be readily available for you to tap into on the Web. Next, we will develop innovative ways to support and acknowledge specialty advancement. Finally, we will pursue a leadership role for HIM in evolving medical vocabularies, natural language processing, and the other issues described in the report of the Coding Futures Task Force presented in the January issue of the Journal. You'll hear more about these expeditions at Team Talks in March. I'd love to see you there.

In my state updates last year, I challenged you to look 10 years back, think about the changes in your professional life, and use that as an impetus to look 10 years forward. Keep doing that. It will keep you aware of how rapidly we are moving forward.

Get connected. Embrace change. Let AHIMA know your e-mail address. Plan your future in this profession. Don't get left behind. Network more than you ever have before. Let the Association, especially me, know what you think. Take a risk. Be strong willed. Move ahead and remember: nothing is permanent, except change.

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