

# Will IG replace HIM?

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By Lydia Washington, MS, RHIA

I hear this question all the time from new as well as veteran HIM professionals. Especially now that the implementation of ICD-10-CM has come and gone (mostly with nothing more than a whimper, I might add, largely due to the exceptional planning and organization skills of great HIM professionals), many are trying to determine their next career move or, in the case of HIM consultants, new product offerings and business models. It seems to be a question that is accompanied by a bit of anxiety, primarily because we may still not be quite sure of what is meant by “information governance” (IG). After all, haven’t we always done this? And isn’t this just a new buzzword for HIM?

Well, as with every fallacy, there is a grain of truth—some of it *does* relate to things we’ve always done. For example, we have always been about effective business process design/re-design, not to mention strong on policy/procedure development, workforce training, and collaboration with our health information stakeholders. We have a deep understanding of topics related to compliance, privacy and security, and records management. These things are all critical for starting and sustaining an IG initiative and are what makes some HIM professionals a natural choice and fit to head up such an initiative in their organization. But while these things may begin to position some HIM professionals to lead in IG, we should look a bit deeper for what it will really take to assume a leadership posture/position for IG. This starts, I think, with understanding the fundamental differences between IG and HIM (or IM, for information management). Indeed, in her presentation at AHIMA’s recent IG Summit, Linda Kloss, MA, RHIA, FAHIMA, pointed out that what makes the value of IG so challenging to communicate is that “governance is a murky concept” and “information management is poorly understood.”

While the differences between IG and IM could be the subject of many blogs, articles, and presentations, I think one critical difference to recognize is that IG is strategic and fundamentally addresses the WHAT and WHY questions related to enterprise information, while IM is primarily concerned with the HOW or tactical questions. As an example, IG might ask questions such as “WHY is our information not perceived to be accurate and therefore not trustworthy and WHAT can we do to change that perception.” Meanwhile, IM might swing into action and say “here’s HOW we’re going to make sure people can trust it.” I’m sure there are many other questions/examples that express this difference.

Assuming an IG leadership posture/position will depend not only on our ability to understand these distinctions, but to also skillfully communicate the differences and unique value that IG and IM/HIM each bring to the organization.

So my answer to the question “Will IG will replace HIM?” would be “No.” They are two very different things and both are essential in complex healthcare organizations, which grow even more complex each day. We will always need strong tacticians who implement and carry out the actions to make things right or better, but increasingly we also need the strategists who have the broad enterprise view of information as an asset to be exploited to achieve the business goals of the organization. Whether your organization has a designated leader who works on strategy or strategy development is more the purview of a small group of executives, if you want to become an IG leader, align yourself and collaborate with this person/persons who will no doubt have an interest in IG.

What do you think? Please share your thoughts [on the [Journal of AHIMA website](#)].

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