UNIVERSITY OF KANSAS MEDICAL CENTER’S INTERPROFESSIONAL EDUCATION FOSTERING ‘HIM WITHOUT WALLS’

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A FACULTY MEMBER in the health information management (HIM) department at the University of Kansas Medical Center (KUMC) attended a campus retreat in June 2011 that not only energized his personal perspective of HIM, but also shed new light on the future of HIM at the university.

Norbert Belz, PhD, MHSA, RHIA, attended the interprofessional education (IPE) retreat not so much because he thought HIM would be a key player in the medical center’s journey to IPE, but because he had been asked by the dean to attend. It wasn’t long before a light bulb lit in Belz’s mind as he realized not only would HIM be involved in IPE at KUMC, but that HIM is essential to IPE because most of the activities surrounding patient care rely on coordination and collaboration of patients’ health information. The following is a look at how the technique of IPE is being utilized at KUMC and the benefits both students and educators have seen from the program.

Interprofessional Education Prepares Students for the ‘New HIM’

The World Health Organization (WHO) defines IPE as an approach to education that “occurs when two or more professions learn about, from, and with each other to enable effective collaboration to improve health outcomes.” The retreat in-
spired Belz and KUMC to embrace a culture of collaboration, resulting in the creation of the Center for Interprofessional Education and Simulation (CIPES) on campus.  

Planning for CIPES began in early 2012, around the time Belz was named HIM’s program director, and later department chair. As chair, Belz played a key role on several initial CIPES planning committees, and he believed so wholeheartedly in KUMC’s plan that he charged HIM faculty with immersing themselves in IPE. “The early vision of the HIM leadership and others across KUMC were really the impetus for much of our future success in making this program required curriculum for our student population,” says Kristy Johnston, MSW, CIPES program director.  

The IPE environment encourages HIM professionals to work outside the traditional walls that partition them from their clinical healthcare colleagues. IPE is relevant to AHIMA’s recent call and other industry initiatives focused on a new era of “HIM without walls”—which is also the theme of AHIMA’s 87th Annual Convention and Exhibit taking place this month in New Orleans, LA. This shift to managing health information outside traditional HIM departments marks a turning point for the profession, signifying that HIM expertise is needed in countless roles within various departments alongside a multitude of health professionals. Therefore, KUMC felt it was essential for students to be ready to work in an interprofessional environment.

Healthcare Needs IPE

Increased demands on healthcare providers to lower healthcare costs while improving the quality of service, enhancing patient outcomes, and improving the overall health of the population challenges industry leaders to rethink their approach to daily operations. Tackling today’s healthcare challenges requires a collaborative team of clinical and non-clinical professionals learning and working together while appreciating the contributions each member brings to the table.  

*Foundations of Interprofessional Collaboration: Introduction to TeamSTEPPS* is one of the first exposures that HIM students have to IPE training at KUMC. TeamSTEPPS, developed by the Department of Defense’s Patient Safety Program and the Agency for Healthcare Research and Quality, is “an evidence-based set of teamwork tools aimed at optimizing patient outcomes by improving communications and teamwork skills among healthcare professionals, which includes a comprehensive set of ready-to-use materials and a training curriculum to successfully integrate teamwork principles into any healthcare system.”

During the activity—which involves more than 1,000 students from medicine, nursing, physical therapy, occupational therapy, clinical laboratory sciences, pharmacy, audiology, health policy, and other departments—HIM students are introduced to teamwork and communications concepts.

Students gain an appreciation for the various roles healthcare professionals play in the treatment of patients and how each contributes to the interprofessional team. KUMC HIM faculty member Lauren Pulino, RHIA, serves as a facilitator for the training. Students have been responsive to the interdepartmental training. One non-HIM student shared on her evaluation that she found it fascinating to learn about the role of HIM professionals through the IPE program.  

In addition to Pulino’s role as a facilitator, HIM faculty members Judy Bielby, MBA, RHIA, CPHQ, CCS, FAHIMA, and Murad Moqbel, PhD, MBA, underwent training in TeamSTEPPS through the Kansas Reynolds Program in Aging Interprofessional Faculty Scholars Retreat. The retreat was funded by the Donald W. Reynolds Foundation, which is particularly interested in efforts that have a transformational effect on “improving the quality of life of America’s growing elderly population through better training of physicians in geriatrics.”

The goal of the retreat, which included three two-day sessions, was to improve the ability of doctors to work with other healthcare professionals in a “team-based” rather than “silo-based” environment in order to provide better care for older adults. Participants were from a range of professions, including HIM, geriatric and family medicine, pharmacy, law, dietetics and nutrition, occupational therapy, and speech-language pathology. Attendees took what they learned at the retreat and implemented it in interprofessional education, especially in caring for older adults.

A portion of the retreat focused on curriculum development and the content was based off a book titled *Curriculum Development for Medical Education*, which explains a six-step approach to curriculum development. An activity during this segment of the retreat included identifying a problem that could be addressed in curriculum and completing a needs assessment. This activity led to the current planning of an IPE activity which will be spearheaded by HIM faculty pertaining to documentation issues surrounding transition of care from acute settings to long-term and post-acute care settings.
was happy to be invited to participate in developing this simulation,” Bielby says. “Transitioning a patient from one care setting to another requires collaboration with the various professions involved, including HIM. I knew this simulation would help the students from the various professions learn about other professions—side by side.

By the time University of Kansas (KU) HIM students graduate, they will have participated in a variety of simulations and learning activities with students in nursing, medicine, PT, OT, and pharmacy programs. For example, the HIM students have conducted workflow analyses for clinics on campus and provided recommendations for change, as well as participated in root cause analyses, interprofessional care planning, etc. One area the faculty at KU are hoping to explore further is simulation between HIM students and clinical lab science students, since so much data interfaces from lab information systems into electronic health records.

A more recent IPOC-SEEDS simulation entailed caring for a patient in an ambulatory setting. The patient had fallen at home and complained of pain during a doctor’s office visit subsequent to the fall, where it was determined the patient suffered a broken rib. During the visit, a variety of unmet needs were also revealed, including medication compliance, fall risks, and dietary concerns.

The interprofessional teams collaborated and each member contributed to the patient’s care, while helping to educate their peers. HIM students, under the mentorship of HIM clinical assistant professor Kay Folck, RHIA, CPEHR, CPHIT, reviewed clinical documentation created by the students in each profession to determine the quality of documentation from the perspectives of reimbursement as well as the stage 2 “meaningful use” EHR Incentive Program.

Feedback from the simulation was overwhelmingly positive and students from clinical disciplines found the HIM contributions to be eye-opening. Faculty from other departments on campus also appreciated the contributions of HIM and expressed interest in expanded opportunities for HIM to contribute to IPOC-SEEDS.

“Currently, the HIM students function as part of the care team supporting technology use and observing how the care team collaborates. In future simulation rounds we hope to fully utilize the HIM students’ expertise by asking them to provide feedback on uni-professional and team documentation to improve communication skills as well as billing and coding knowledge,” says Kelli Kramer-Jackman, PhD, APRN, FNP, BC, clinical assistant professor of nursing.

In another clinical simulation, HIM students demonstrated risk management knowledge. During this activity, nursing students were placed in a simulated acute care unit to practice clinical, patient management, and interpersonal skills while caring for multiple patients. HIM students observed clinical processes performed by nursing students to identify areas of potential risk or liability. This simulation enhanced HIM student exposure to the frontlines of healthcare. “I think the best part about the simulation was simply being able to see the ‘action,’” says Kaitlyn Brown, an HIM student who took part in the IPE program. “Being able to see what the basis of healthcare is all about.”

**What is Interprofessional Education?**

**INTERPROFESSIONAL EDUCATION IS** when students from two or more professions in healthcare learn together during their professional training. The objective is to diversify one’s understanding of healthcare for the sake of collaboration and patient-centeredness once they enter the workforce. In a sense, it is a formalized “walk a mile in another person’s shoes” within an education program, allowing students studying different areas of healthcare to come together and learn their respective skills as well as the skills of other disciplines—side by side.

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**HIM Shows Its Value**

HIM students have also shown the value of effective workflow analysis and quality management techniques by completing process improvement projects as part of IPE embedded into KUMC clinics.

Last summer, leaders from the Geriatric Interprofessional Teaching Clinic (GITC) approached HIM faculty because they were faced with myriad challenges related to reimbursement, volume, time constraints, and technology that were limiting the achievement of goals related to growth and expansion. HIM faculty member Folck seized the opportunity to work with colleagues in GITC and created a process improvement project in her quality management course.

During the project, each HIM student in the class rotated through the GITC and subsequently shadowed in amyotrophic lateral sclerosis (ALS), child health and development, and family medicine interprofessional teaching clinics. HIM students worked alongside staff, clinicians, and other students in the clinics to learn about clinic operations, evaluate processes and workflow, and draw comparisons among the clinics. From there, the students were placed in small groups and assigned one of the clinics. The groups presented their findings to the clinics, including what appeared to be working effectively and modifications that might improve daily workflow.

Shelley Bhattacharya, DO, MPH, assistant professor of geriatric medicine at KUMC, who provides leadership and clinical service in the GITC, indicated that “the quality improvement project conducted by HIM students was thorough, analytical and thought-provoking.”

“The project helped us see where each minute was spent during the 90- to 120-minute patient visit in our clinic. It gave us insight into how we could improve the patient experience,” Bhattacharya says. “Since the completion of their project, the GITC core faculty have met monthly to discuss how best to optimize the clinic.

“We have reduced our patient’s ‘down-time’ by having other team members engage the patient with physical therapy exercises, further memory/depression testing, or gathering a deeper social history while the care team is developing their treatment plan. We have found this not only keeps the patient active with a
team member, but also helps us further solidify our plan.”

Faculty from across KUMC have noted the contributions made by HIM, and the department routinely receives requests to participate in IPE activities, simulations, and trainings. “The IPE efforts have been instrumental in helping other health professions to understand the value and skillset that HIM professionals contribute to patient care,” Belz says. “Our department now receives requests from colleagues across campus to participate in clinical and interprofessional learning activities because of our recognized expertise.”

HIM faculty is also increasingly sought out for scholarly collaborations by faculty in other departments. During the 2014-2015 academic year, Moqbel from HIM and Lauren Little, PhD, OTR/L, from the occupational therapy department presented their research titled “Social Networking Site Use among Caregivers of Children with Autism Spectrum Disorders” at the International Conference on Information Systems. Recently, Rosann O’Dell, DHSc, MS, RHIA, CDIP, clinical assistant professor in HIM, and Dory Sabata, OTD, OTR/L, SCEM, from the occupational therapy department finalized a manuscript titled “Interprofessional Collaboration to Maximize Documentation of Health Outcomes in a Digital Age.” This manuscript was developed for an organization that creates modules for continuing education credits for various health professions, including occupational therapy.

HIM Continuing to Grow

The HIM faculty at KUMC believes that the more other healthcare professionals understand the variety of things HIM can contribute, the more widely utilized health information professionals will become throughout the healthcare ecosystem. As the profession progresses into an era of “HIM without walls,” there will be challenges as colleagues struggle to understand health information management. But these challenges are opportunities for emerging and existing professionals to take the lead in demonstrating the many ways a person with an HIM skillset can contribute to an interprofessional healthcare team.

Now that the value of HIM is beginning to be understood in an environment of collaboration across the spectrum of healthcare professions, health information management has the opportunity to grow and thrive in places never considered possible in the past.

Notes