

Healthcare Informatics and Health Information Technology: A Discussion on Content and Educational Strategies

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1

Objectives

- The use of health information technology
 - The use of electronic records
 - Other important roles HIT plays**
- Fundamentals of healthcare informatics
 - Basic content and concepts
 - A quick crash course**
- Teaching strategies: basic healthcare informatics
 - Sample learning activities
 - Real world examples
 - Integrating concepts across multiple classes



2

HIT: Defined

- The use of hardware and software to store, retrieve, and share health information
 - Goal: improve communication and clinical decisions (Brailer, 2006)
- Types of HIT
 - Computerized physician order entry, clinical decision support
 - Computers, electronic medical records, Internet
 - Emerging technologies: mobile devices (smartphones, tablets), text messaging, “apps”, social media sites



3

Informatics: Defined

- The study of the application of computer and statistical techniques to manage data
- The science and art of turning data into information for the purposes of problem-solving and decision-making
 - This includes collecting, analyzing, and using data to inform decisions



4

A Brief History

- Global health care needs
- Targeted initiatives
- Athletic training efforts



5

A Brief History: Global Health Care Needs

- Crossing the Quality Chasm (IOM, 2001)
 - Landmark document identifying the gap between the care we should receive and the care we do receive
 - A call for systems change including use of health information technology (HIT) and informatics
- Health Profession Education (IOM, 2003)
 - Identification of core competencies for health care education
 - Evidence-based practice, interprofessional practice, professionalism, quality improvement, informatics



6

A Brief History: Targeted Initiatives

- HITECH Act
 - Part of the 2009 American Recovery and Reinvestment Act (ie, “Stimulus package” in response to Great Recession)
 - Earmarked \$34 billion to incentivize use of electronic health records
 - Aim was to create a national health information network to collect large amounts of data (eg, big data) to then use to improve quality of care, improve patient safety, and lower costs
- TIGER Initiative
 - Nursing profession established specific competencies for practicing nurses to work in a “new system” supported by HIT and use of informatics



7

A Brief History: Athletic Training Efforts

- Athletic Training Education Competencies
 - Use of health care informatics identified as core competency for post-professional education in 2013 (CAATE, 2013)
 - Use of health care informatics identified as core competency for professional education in 2020 standards (CAATE, 2018)
- Professional Calls to Action
 - Athletic Training Research Agenda: calls for research in areas of HIT (including the generation of “big data”) and health care economics (Eberman, 2018)
 - “Research at the point of care: using electronic medical record systems to generate clinically meaningful evidence” (Marshall and Lam, JAT, 2020)



8

ATSU Perspective: HIT and informatics

- Our program views HIT and informatics as foundational to the core competencies
- That is, HIT and informatics are integral to achieving the remaining core competencies
 1. Evidence-based practice
 2. Patient-centered care
 3. Interdisciplinary collaboration
 4. Professionalism
 5. Quality improvement



9

HIT: Evidence-Based Practice

- Literature search
 - Identify appropriate search engines and databases
 - Systematic approach to searches
 - Appropriate use of keywords
 - Search techniques (eg, Boolean)
- Information and knowledge management
 - Use of appropriate software (eg, reference software)
 - Ensure that evidence is available at point-of-care



10

HIT: Patient-Centered Care

- Patient engagement
 - Inclusion of patient as an active member of the health care team (Coulter, 2012)
 - Benefits: enhanced decisions, improved safety, and better outcomes (Longtin, 2010; Davis, 2011; Stewart 2009)
 - **Two-way communication** is key (Katzmuller, 2012)
 - Frames clinician-patient relationship as a partnership
 - Challenges*
 - Lack of time (clinician) and health literacy (patient)



11

HIT: Patient-Centered Care

- Bridging the gap between clinician and patient
 - Internet: patient decision tools
 - Dartmouth Decision Points, Choosingwisely.org
- Bridging the gap between clinician and patient
 - Emerging technologies: text messaging, mobile devices, smart phone apps, social media
- Telehealth
 - Use of technology to provide patient care
 - Benefits: reduce travel time, reduce costs, reduce disparity for underserved and/or rural communities



12

HIT: Interdisciplinary Collaboration

- Like patient-centered care, communication is key
 - This gets at the sub-competency of effective communications
 - Rich discussions to be had regarding communicating with other healthcare professionals



13

HIT: Professionalism

- Privacy
 - HIPAA and FERPA regulations
 - Management and storage of protected health information
- Ethics
 - Maintaining professionalism in a **digital** world
 - Communications using email and **texting**
 - Blurring the personal-professional lines in social media



14

HIT: Quality Improvement

- The use of informatics to support QI initiatives
 - Collect practice data
 - Analyze data and identify practice gaps
 - Implement a QI effort to address gaps



15

The Data-to-Wisdom Continuum

- Data
 - Raw characters without meaning
- Information
 - Processed data that identifies patterns and/or that creates meaning
- Knowledge
 - Connecting interrelated concepts to form one concept
- Wisdom
 - Applying knowledge at the right place and at the right time



16

Context: The Use of Data by Businesses

- Examples
 - Google
 - Facebook
 - Netflix
 - UPS
 - Amazon
- Benefits
 - Inform and improve decision making
 - Revamp and refine operations
 - Improve performance



17

Context The Use of Data in Health Care

- Similar benefits to businesses
 - Inform and improve clinical decisions
 - Improve performance at point-of-care
 - Enhancing overall quality of care
- Long-term goals in healthcare
 - Predictive analytics
 - Personalized medicine
- Example
 - Atul Gawande's book, "Better"
 - Use of patient data led to improvement in patient health and safety



18

Using Patient Data to Improve Care

- Patient documentation can be an excellent source of data
- Major considerations
 - High-quality data relies on the clinician's ability to document patient care in a systematic, structured, and standardized manner
 - Privacy and confidentiality
 - Best to follow HIPAA guidelines: eg, remove protected health information to de-identify patient records



19

Methods for Collecting Data

- Spreadsheet software (eg, Excel)
 - Can use functions (eg, drop-down menus) and formulas to support data collection and analysis
- Electronic medical records (EMR) can be a 2-for-1
 - A good EMR will allow for:
 - #1: comprehensive clinical documentation of patient care
 - #2: analyses of clinical practice characteristics
 - Should incorporate and capture all practice characteristic variables
 - eg, sport, injury, ICD codes, CPT codes, fee schedules



20

Real-Life Example: Practice Characterization

- Informatics assignment
- Primary objective: learn how to **turn data into information**
 - Get into the habit of **collecting** data: basis for quality improvement
 - Frame as a practice characterization project



21

Step 1: Identify a Practice Component

- Basic components of clinical practice
 - Injury characteristics
 - Treatment characteristics
 - Value characteristics
- Pose a SIMPLE but clinically important question
 - What **types** of (and how many) **injuries** do I manage annually?
 - What is the **average duration** of care per injury?
 - What are the **outcomes** at return-to-play for patients with ankle sprain injuries?



22

Step 2: Identify the Variables Needed

- What variables are needed to answer your question?
- Injury characteristics
 - Patient demographics
 - Age, sex, sport
 - Injury demographics
 - MOI, body part, side, diagnosis (ICD-9/ICD-10 codes)



23

Step 3: Create a System and Process for Data Collection

- System
 - Spreadsheet software
 - Electronic medical record
- Process
 - When and how will the data be collected?
 - Must ensure data quality and integrity



24

Step 4: Collect and Analyze the Data

- Basic Excel functions can facilitate data collection and analysis
- Data validation
 - Drop-down menus for stock variables
 - eg, gender: male, female; sport: soccer, volleyball, etc.
 - Preserves data integrity for analysis
- Pivot table
 - Aggregates data to produce basic reports



25

Step 4: Collect and Analyze the Data

- Mathematical functions
 - Frequency counts (sum)
 - Averages (avg)
 - Calculations between columns (eg, multiplication)
- When in doubt, use YouTube as a reference



26

Step 5: Reflect on Findings

- Presentation of findings
 - Demonstrate ability to turn data to information
- What did you learn about your clinical practice?
 - How can you use the information in a meaningful way?
- What challenges did you face while collecting data and how can you address them moving forward?
 - Workflow issues: improve systems and processes



27

Linking Informatics and QI

- STEEP: six aims of improvement
 - Using patient data to assess STEEP
- Case study: Athletic Training Practice-Based Research Network
 - Use of Ottawa Ankle Rules
 - Example of studying clinical practice using real-life patient documentation and implementing a solution to address the problem



28

Turning Data into Information

Other avenues to access sport-related injury data: sport-specific databases

- National Electronic Injury Surveillance System (NEISS)
- NCAA Injury Surveillance System (DataIyst)
- Athletic Training Practice-Based Research Network (AT-PBRN)



29

Summary

- The use of health information technology
 - Goes beyond electronic records
 - Be on the lookout for academic EMRs
- Fundamentals of healthcare informatics
 - Start with the data-to-wisdom continuum
 - Use real-life examples
- Teaching strategies: basic healthcare informatics
 - Get their hands dirty → Go COUNT something interesting!
 - Collect, extract, process, and/or analyze data



30

Thank You!

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31
