Health Information Technology Advisory Board Meeting Minutes May 12th, 2017 12-1:00

1. Attendance at meeting

- 1. Marcie Wright
- 2. Timothy Morgan
- 3. Amie Musk
- 4. Kathy Sturgeon
- 5. Ashley Hollen
- 6. Shannan Ford
- 7. Tammy Hoskins
- 8. Cindy Davis
- 9. Nicole Carter
- 10. Kathy Ferguson
- 11. Susan Freed
- 12. Kitty Koers
- 13. Jason Tipton
- 14. Art Reeves
- 15. Michele Duke
- 16. Casie High
- 17. Laura Williams

2. Approval of 2016 minutes from last meeting

Provided for review; no objection or changes reported.

3. Reports

- a. Agenda
- b. 2016-17 Advisory Meeting Minutes
- c. AHIMA RHIT Summary Report from 1/1/2016-12/1/2016
- d. Registered health Information Technician (RHIT) Certification Exam Information
- e. CAHIIM 2014 Learning Domain Changes to begin this fall 2017
- f. Newly developed Health Data Analyst Certificate

4. Welcome/members and instructors

Kathy Sturgeon, Dean of Math, Science, & Health Professions; welcomed everyone and thanked all for attending and giving feedback. Marcie welcomed all as well and everyone introduced themselves.

5. Review 2016-17 minutes

There were changes made to the HIT curriculum based on the input from last year's advisory meeting.

- The Illinois Community College Board (ICCB) approved the Health Data Analyst Certificate proposal. Coursework was discussed. In addition to courses within the HIT program two additional courses covering Database Design and SQL are required to obtain the certificate. The DACC HIT program now offers the Associate's in HIT, Medical Coding Certificate, and the Health Data Analyst Certificate. This certificate was developed by the director of the program based on a strong recommendation from the AHIMA Council on Education Excellence. They recommended adding certificates that focused on specific skills such as cancer registry, data analysis, medical coding, clinical documentation specialist, privacy and security, or EHR implementation as part of their HIM Reimagined initiative.
- BIOL 136 Anatomy and Physiology became a prerequisite due to students failing the course multiple times.
- It was suggested at the last meeting to use a capstone to study for the RHIT exam which would use a study guide that bundled the exam fee to alleviate the problem of students waiting too long to take the exam/failing. A capstone course was not created but the RHIT study guide that bundles the cost of the exam (\$299.00) is added as a book requirement to the 2017 HITT 260 course. This will help low income students substantially by making Pell grant/scholarship dollars available to help pay for their exam.
- Adding a capstone course is still under consideration from the recommendation last year. It would need to be proposed and approved by the college and ICCB.

6. Practicum/Clinical

- HIT coding lab is set up to provide coding experience. AHIMA's Virtual Lab
 offers over 200 charts. A large number of charts were also redacted and donated
 from Carle and Presence Health. Due to coding departments becoming remote,
 more coding will be done on campus. This is being integrated into the HITT 106
 HITT 125, & HITT 235 courses.
- HITT 125 has transitioned to a virtual PPE that teaches students how to use
 common software in a health information department. AHIMA's Virtual Lab is
 now integrated into a full Blackboard course. This includes a virtual tour of a HIM
 department which interviews each HIM position. The software applications they
 learn are 3M encoder, CIOX release of information, Nuance Clintegrity, EDCO
 document management system, ARGO master patient index, several inpatient and
 outpatient electronic health records, and Tableau. This transition has been out of
 necessity due to HIM departments merging (less sites) and becoming remote.
- HITT 250 is the onsite professional practice experience. Student go to the Veterans Affairs, Presence Health, Carle Hospital, Presence Cancer Center, Mills Institute, Iroquois Memorial Hospital, Helping Hands, and The Family Medical Center. These sites have hosted students every year and at times multiple students at once which is so appreciated. More sites are needed, the director places a dozen or so students each year.

7. Feedback/ Recommendations from PPE sites

- Casie High recommended looking at local nursing homes for additional PPE sites.
- Kathy Ferguson recommended the Polyclinic.
- Art Reeves is going to check at Blue Cross for a possible student site and job recommendations.
- Susan Freed came to campus to speak to the class preparing to do their clinical rotations and gave important tips on having a successful PPE.

8. RHIT School Score Report

- RHIT School Score Report was reviewed. 300 is passing. Marcie stresses to the students that they need to test within 6 months after graduation. Those that wait too long to take the exam fail.
- The national pass rate for 2016 was 60%, with only 5 graduates taking the exam with two that failed. One failed right after graduation and the other fail was a student that took the over 6 months after graduation. A large portion of this class did not take the exam.

9. Community of Interest

- Under Marcie's direction students were very active within smaller clinics in the
 community. Students helped trouble shoot application problems, created
 encounter forms with commonly used ICD-10 codes, helped providers run reports
 for Meaningful Use data. The clinics involved were Helping Hands, The Family
 Medical Center in Danville and Georgetown, and the Central Illinois Family
 Practice.
- Marcie asked for suggestions from advisory members for any other community education opportunities the program could provide. None were given.

10. Electronic Health Care Record

• Marcie demonstrated AHIMA's Virtual Lab a web based professional practice software that allows students to learn all of the most commonly used applications in a health information department. It also contains a coding lab with real medical records to use in the coding courses. Kathy Ferguson was impressed that the students receive the opportunity to learn Tableau in the Virtual Lab but also stated in her experience the students in this DACC program are not proficient enough with Excel.

11. Implementing the New curriculum requirement

- Reviewed Gap Analysis accomplishments and remaining gaps
- Still have a gap in Computer Assisted Coding (CAC) software at a Blooms 5 level. It has proven very difficult to come up with activities at a Blooms 5 when the HIT program does not have access to that software.
 - i. Director tried to find demo software from CACT, 3M, and/or Quatim for students to use. Also requested a local facility create an assignment using screen shots but due to 3M copyright restrictions this request was denied.
- **Closing** -Marcie thanked all for attending and for their feedback.