

# PRINTOUT

VOLUME 13 No. 3

MAY/JUNE 2005

## A Word From the President

Hi everyone! I hope that you are enjoying our beautiful Spring. Many of us are likely starting to think about vacations. Don't forget to include September 15 – 17 in Kelowna in your plans. We are looking forward to a great conference there.

Disappointing News – It is with great disappointment that I tell you that our request to change the association name to the British Columbia Health Information Management Association (BCHIMA) has been rejected by the Ministry responsible. The proposed name was considered to be too similar to the British Columbia Health Information Management Professionals Society. As BCHIMA was the only potential name that was approved by the membership at the last AGM, we will now have to wait to make another motion at the AGM in September in order to pursue other name possibilities. As a result of this name rejection, the logo contest is cancelled for the time being.

Other things we've been working on:

Membership – We are pulling together some information on membership numbers over the years to prove or disprove our theory of dwindling membership. We are also looking at better ways to deal with membership renewals in a timely manner.

Conference 2005 – planning continues for the 2005 Conference. We have a great committee who are actively putting together plans for another successful conference with a lot of useful information and a terrific opportunity to network with your peers. The Coast Capri in Kelowna has been chosen as this year's site. Mark your calendars for September 15 – 17. We hope to see you all there.

Electronic Printout – we are very close to having the Printout available in electronic form. The Printout will be accessed by a members only section on the HRABC website. We anticipate that any cost savings associated with this change (decrease in mailing fees, etc.) will be redirected to cover such costs as website changes, and eventually the association name change.

New Look Website – The HRABC website has been redesigned and now includes a members only section that will be accessible with a password. Have a look at it. We think you'll be impressed.

Policy and Procedure Updates – it has been determined that the policies and procedures of the Association need further review and revision. There is a lot of information that is historically known by some members, but it is not in writing. We are planning to tighten up these procedures so that new incoming members find them easier to follow.

I will be attending the CHIMA conference in Winnipeg at the beginning of June so I will let you know what I find out there in the next issue. I am really looking forward to the pre-conference workshop on "Turning Theory into Practice: The Next Steps for e-HIM" being presented by AHIMA Professional Practice. They will be offering new insight and enhanced comprehension of:

- Achieving the EHR in the context of organizational changes
- Migration path to the EHR
- Fundamentals of EHR technology
- Practical e-HIM tools

We will keep you up to date on our activities throughout the year. If you have any comments, questions, or concerns for myself or any of the Executive members, please do let us know. Have a great Summer.



Sharon Baigent  
HRABC President 2005-2006

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# PRINTOUT

## DISCLAIMER

*The information contained in this newsletter does not necessarily reflect the views of the Membership or the Editor, but is offered as a source of information only.*

DATE FOR NEXT  
SUBMISSION IN 2005  
July 5th ... July/Aug edition

2004 - 2005 HRABC  
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## Nominations for the 2005-2006 Executive

Do you want to contribute your talents and energy to be part of a spirited organization that promotes excellence in health information management and professional practice? Do you want to increase your networking potential? Do you have ideas and expertise that you would like to share with your colleagues? Then consider serving on the Executive in one of the following positions:

### President Elect

This position is a one-year commitment that ends when the incumbent steps into the role of President. The year spent, as President Elect is a period in which the member can become familiar with the objectives, goals and strategic plans of the HRABC.

### Treasurer

The term of office is two years, to commence following the AGM - 2005 at which the Treasurer is appointed and to expire following the combined Executive Meeting immediately following the second subsequent AGM - 2007. The main duties of the treasurer are to maintain all of the financial records of the Association.

### Public Relations/Publications Committee, Chair

The term of office is two years and will commence following the AGM in September 2005. The major function of this committee is to publish the PrintOut in order to relay information to all members of the Association and to provide a consistent means of communication for the membership. This committee will be going through an exciting time as the PrintOut changes its format from paper to electronic.

### Programs & Arrangements Committee, Chair

The term of office is one year, to commence following the AGM - 2005. The main function of this committee is to prepare and arrange a complete Convention program and shall make all arrangements for the AGM.

### Data Quality Committee, Chair

The term of office is one year, to commence following the AGM - 2005. The main functions of the Data Quality Committee are:

- To act as a resource centre to the HRABC membership for the collection and correlation and promotion of data quality topics.
- To use the Printout as the prime communication tool to disseminate information to the membership on matters pertaining to data quality.

If you or anyone you know are interested in serving on the Executive, or if you would like additional information, please contact Michelle Bamford at michelle.bamford@viha.ca, or e-mail any member of the current executive. Conversely, a nomination form can be found at the HRABC website - www.hrabc.net under member services, nomination form, and can be filled out and mailed to me. Terms of reference are also available to interested members.

# FROM MY DESK

Gary B Arnold, CCHRA(C)

President-Elect/Chair, Public Relations & Publications Committee

I have been reflecting recently on the brief time I have spent as a Health Information Management professional. This year I am celebrating my tenth anniversary since graduation and I have certainly notice how quickly the pages have been ripped from the calendar. I've thought about the opportunities to learn, the many wonderful people I have worked with and the different facilities who have granted me desk space and a pay cheque during this time. Without a doubt, it has been some of the best years of my working life [and there have been quite a few of them]

I believe the high point though, has been the people I have encountered – peers, supervisors, co-workers from the allied skills and professions, nurses and physicians. Many of them have helped to forge the level of experiences that I associate with my profession.

My background, when I entered Douglas College was, to say the least, diverse. I'd had many opportunities to sample a variety of employment opportunities – all of which had left me thirsting for something better – the challenge, the stimulus, had simply never been satisfactory to sustain me.

I needed a challenge which would empower me to really want to take a bite out of a task and become completely absorbed in savouring the experience. So my acceptance into the Health Information Services Program [HISP] not only became my mountain to climb and also the opportunity to encounter a truly unique guide on my profession path.

For me, **Joy Fletcher** painted our profession in a dazzling array of colour and lights – exposing to me a world I'd never have dreamed existed – with the technology, the complexities and the opportunities available for anyone who dared “reach for the brass ring” and treat the opportunity as more than just a job.

Equally important was her parallel invitation to “become involved” in the richly rewarding aspects of our professional associations. Joy sowed the seeds – and I found both the challenge and stimulus I'd been seeking in this garden. After the initial thoughts

of “what have I got to offer” evolved into a greater realization of professional confidence – I began to not only cherish my career more, but I came to find the stimulation of seeking new opportunities to grow personally.

All of this comes as a result of meeting this incredible educator. But, I don't feel my connection with Joy is unique – as she has influenced hundreds of students and working professionals in her years at Douglas College – and also in the time she spent in the field.

But, an era is coming to an end, and Joy is cleaning out her desk at Douglas College in preparation for her renewed challenges in Ontario. [See **Laurie Kenward**'s Douglas College Update in this issue] We will miss her involvement, her salient wit, her open humour and genuine care and concern for the profession. Our loss is Ontario's gain.

Keep in touch Ms. Fletcher – and once again, I thank you... personally and on behalf of the many others on whom your veil of influence has fallen. Best wishes on this new chapter of your career.

But it is not just the loss of Joy from our ranks in British Columbia that signals change. The other era which is concluding is being held in your hand at this moment... there are two more paper copies of **the Printout** before it becomes an electronic entity – and readable in a members only section of the website. Not only is it a technologically sound choice to look in this direction, but will be a great cost-saving initiative for the association as a whole.

Currently, the Printout costs about \$8,000 per year to produce and mail out – and even with a modest increase in web fees, your executive is looking at the most appropriate use of the funds currently diverted to the Printout – to provide enhanced benefits of membership. Some ideas which have been suggested are educational seminars or membership fee reductions. At this point though, the exact budgetary impact is unknown, but be aware that it is in the works... and if you have any workable ideas – forward them along to our President, **Sharon Baigent**.

I hope that each of you will also look very closely at the executive positions which are open for the next executive year and consider the incredible opportunity for personal and professional growth that these positions can offer. **Michelle Bamford**, Past President, HRABC is seeking at least five individuals to step forward to fill these offices. Don't worry about lack of experience – as you will be guided along the way by others... it is an experience unlike any you can gain in your normal work environment – and in most cases, a very valuable addition to your resume.

Your Printout often struggles for ideas for story lines, contributions or other related material which would be useful to the membership as a whole. In order to stay current with industry trends, each issue requires input from you – the reader. Remember, we are a volunteer organization with absolutely no paid staff members... so we depend on **you** to bolster the material that our members read. Don't like what you are reading? Please feel free to sit down at your PC and prepare some journalistic delight to tickle the appetite of our membership...

Have a good summer everyone – we will be back in July with the second-to-last paper copy of your professional journal.

Good Bye for now  
**Joy Fletcher**  
Your contributions  
will be missed!

# British Columbia Perinatal Database Registry

## YOUR PROVINCIAL PERINATAL DATABASE REGISTRY

### ... in the Spotlight

Written by  
**Lisa Miyazaki and the BCPDR Staff**

The British Columbia Reproductive Care Program (BCRCP), in collaboration with the HRABC Data Quality Committee, will be presenting articles pertaining to the British Columbia Perinatal Database Registry's (BCPDR) approach to data quality. The current editorial will familiarize the audience with the complexities of the program and briefly introduce the BCPDR data quality initiatives.

In 1988, the British Columbia Reproductive Care Program (BCRCP) was initiated by the Ministry of Health (Hospital Programs) and the British Columbia Medical Association (BCMA) under the auspices of the Continuing Advisory Subcommittee on Perinatal Care with a goal to provide information to facilitate in the improvement of perinatal outcomes, care processes and resources in the province of British Columbia. The BCRCP is administered by the Provincial Perinatal Steering Committee with representation from the Ministry of Health Services (MOHS), the Provincial Health Services Authority (PHSA), Children's and Women's Health Centre of BC, health care providers, health authorities and academic organizations. Included in this committee are a number of perinatal consultants (e.g., obstetrician, family practice physician, neonatologist, etc), whose counsel and advice have been invaluable in administrative decision-making issues of the BCRCP.

The British Columbia Perinatal Database Registry (BCPDR) was launched in 1994 with collection of data initially from a small number of hospitals. In 1997, an independent database was created for Whitehorse General Hospital. On January 1, 1998, collection of data on births occurring at home attended by BC Registered Midwives was initiated. Participation in the registry steadily increased until 2000/2001 when full provincial data collection commenced.

Currently, with complete provincial data, the BCPDR is increasingly being recognized as a reliable source of perinatal data and acknowledged as a provincial resource. The information in the registry has been used in a variety of circumstances including individual requests for data (e.g., clients, health care professionals, researchers), use in administrative planning and quality assurance, ad hoc statistical requests, use in educational sessions and conferences as well as for the development of clinical practice guidelines. Perinatal Nurse consultants at BCRCP has allied with the BCPDR to develop and revise the *Perinatal Clinical Practice Guidelines*<sup>1</sup> as well as to use the data for educational purposes and editorials. Additionally, the *Show Me The Evidence workshop*<sup>2</sup> conducted by the BCRCP in conjunction with clinical

consultants focuses on how the data from the database is incorporated into the clinical administrative process. Furthermore, the information from the Registry is used to generate several products issued by the BCRCP including the *BCPDR Annual Report*, *BC Perinatal Facility Comparison Reports* and *BC Perinatal Reporting Tool*.

**BCPDR Annual Report** – describes the current state of perinatal health in British Columbia. The BCPDR 2004 Annual Report consists of data from three fiscal years (2000/2001 to 2002/2003). The information in the Annual Report can be used to monitor trends for the selected indicators, the analysis of which may suggest changes in care delivery. The Annual Report is distributed to delegates of the Health Authorities of BC. The Annual Report is also available for viewing at the recently updated BCRCP website, located at: [www.rcp.gov.bc.ca](http://www.rcp.gov.bc.ca).

**BC Perinatal Reporting Tool (PRT)** – is an interactive CD with summarized data extracted from the BCPDR. The PRT consists of non-identifiable aggregate data from three fiscal years (1999/2000 to 2001/2002) and can be used for analysis of population based and comparative reporting between institutions, Health Authorities, Health Service Delivery Areas as well as against provincial totals. The PRT is distributed to delegates of the Health Authorities of BC. To ensure patient confidentiality, the institution numbers have been encrypted and the identity of the facility is only available to authorized personnel.

**BC Perinatal Facility Comparison Reports** – allows individual facilities to compare and benchmark selected maternal and newborn events and outcomes with data from similar-sized hospitals as well as provincial data. For the hospitals with <500 births/year, the Comparison Reports contain data from the fiscal years 1997/1998 to 2002/2003. For the hospitals with >500 births/years, the Comparison Reports contain data from 1999/2000 to 2002/2003. These reports are distributed to representatives from the individual Health Authorities and Health Service Delivery Areas.

Reports are also accessible at the hospital installation sites. Hospital Reports are hospital-specific, pre-programmed reports executed by users at the installation site. Ad Hoc Reports are reports created at the installation site and/or at the Provincial Registry to answer specific requests through user-defined queries.

<sup>1</sup> The BCRCP has developed, distributed and implemented perinatal guidelines since 1990 for the province of British Columbia. The Perinatal Clinical Practice Guidelines have recently been updated (March 2005) and are available in printed versions (usually found in the Labour & Delivery area of the hospital) and are also available for download from the recently updated BCRCP website ([www.rcp.gov.bc.ca](http://www.rcp.gov.bc.ca)).

<sup>2</sup> This half-day workshop focuses on utilizing perinatal data from the Perinatal Database Registry (BCPDR) in order to evaluate outcomes and trends in local practice for the purpose of improving care. The workshop includes examples of the integration of evidence-based information into the clinical decision making process. Participants are provided with a demonstration of the PDR interactive reporting tool and shown how the PRT may be used to identify and compare your hospital with similar sites or with provincial trends. For more information see the BCRCP web site at [www.rcp.gov.bc.ca](http://www.rcp.gov.bc.ca)

The source of the data in the BCPDR is the clinical chart. The perinatal forms within these charts (e.g., Antenatal Record Part 1 and Part 2, Labour and Birth Summary Record, Newborn Record Part 1 and Part 2, etc) were prepared and are revised at the BCRCP. These forms were used as the foundation for the design of the Provincial Registry with each data element selected based on requirements for outcome analysis and health care indicators. Standard data definitions were used in the fundamental design of the database. Although data definitions seldom change, clinical practice may dictate unforeseen alterations.

Accordingly, amendments and modifications to the data definitions are communicated to users of the BCPDR to ensure uniformity in data collection and to corroborate that a provincial standard is being maintained.

Due to the widespread use of the information in the BCPDR, the precision and consistency in recording clinical information on the perinatal forms within the clinical chart by responsible clinicians (physicians, nurses and registered midwives) is imperative. The accuracy of the clinical information extracted from the chart and entered into the database is also essential in achieving a complete registry with reliable, accurate, comparable and valid data.

Recommended qualifications for the health record practitioner abstracting this information are experience in perinatal and obstetrical settings, working knowledge of Windows and basic computer skills, as well as the ability to attend to detail.

To ascertain that quality of the data in the BCPDR is accurate and valid, numerous initiatives have been undertaken by the BCPDR staff. Some of these data quality initiatives include:

- Re-abstraction study - partnership with the Fraser Health Authority to re abstract a pre-determined selection of perinatal records in an effort to assess the reliability of the abstraction of the paper records. At the same time, this project will analyze the reliability of the data fields in the BCPDR and confirm that the data is being collected in a consistent manner in accordance with the conventions of the reference manual. This pilot study will be

followed by a province-wide Validation Study conducted by the BCPDR.

- Educational Needs Assessment – some of the continuing education topics presented by BCPDR are: PDR Data Abstraction Level 1 (This workshop is provided to new users of the database and is offered on an as needed basis); PDR Reporting Level 1 – (This workshop is in progress and will be available in the near future); Delivering a Baby - How Complicated Can It Be? (This workshop will be presented in Kelowna on Thursday, September 15, 2005 prior to the HRABC conference).
- BCPDR Helpline – in the fiscal year 1999/2000, the BCPDR On-Line Help service was implemented to aid in client support. This service assists users with problems associated with the database such as data definition clarifications, data collection process and procedures as well as technical concerns within a short period of time, thereby avoiding potential data inaccuracies.
- BCPDR Reference Manual – a reference manual is provided to users of the database with step-by-step instructions in conjunction with screen shots to facilitate in the data collection process. Standardized data elements and data definitions are included to ensure consistency in data collection. Tables and charts, in addition to, perinatal forms used to collect the information on the paper record supplement the manual.
- Newsletters – articles are submitted to both the BCPDR Newsletter<sup>3</sup> as well as the BCRCP Perspectives<sup>4</sup> to remind the audience of explicit data quality issues and/or data recording discrepancies as well as to present current topics of interest and information on recent updates.
- Data Quality checks – over 400 validation checks are built into the BCPDR system (e.g., Range Checks – Apgar scores can only be in the range of 0 to 10; Check Digits – checks for a valid PHN; Sequencing – events must occur in a specific order, etc). Additionally, the CIHI data can be used by the collecting site to identify omitted records. The Period End Reports can be used by the collecting site to identify specific errors that

can be edited before submitting the file to the PDR (e.g., clear to send flag is "N", Mom and Baby are not linked, CIHI data not transferred, etc). There may be occasions when the users at the installation sites will question the information transferred from the ADT system, which is prudent as the data can only be as accurate as the source of data entry and may be the potential root of the error.

Subsequent to the submission of the data to the Registry, additional data integrity and data quality checks are routinely performed by the BCPDR staff.

Remarkable diligence is exercised by the BCPDR to ensure accuracy and quality of the data in the registry not only because the data is used extensively for reporting purposes, but also because the data is accessible and available to be used by the facilities contributing this information. Moreover, the registry partners with various provincial agencies for data validation purposes. The BCPDR cohorts with the University of BC's BC Linked Health Database on specific projects. In collaboration with BC Vital Statistics Agency, all births and stillbirths in BC are identified. Comparisons are made to determine if the information in the registry matches the information sent by the healthcare facilities to BC Vital Statistics Agency.

The difficult task of maintaining a Provincial Registry with the ultimate goal to obtain consistent, reliable, accurate and valid data can only be accomplished through the assistance and dedication of the health records staff at the participating hospitals throughout the province of British Columbia. It is through the concerted efforts of these individuals that the registry is able to share this valuable information with various persons and agencies and represent the province as a perinatal resource. As a provincial registry, the BCPDR has been solicited by other reproductive care programs regarding the specifications requisite in establishing a provincial database (registry). The BCRCP has also been approached by interested parties regarding the measures required in

<sup>3</sup> The BCPDR Newsletter is a publication issued by the BC Perinatal Database Registry. This newsletter is distributed to the main contact person of Health Records Departments in BC. Selected articles are available online at the BCRCP website at [www.rcp.bc.ca](http://www.rcp.bc.ca).

<sup>4</sup> The BCRCP Perspectives is a quarterly publication of the BC Reproductive Care Program. This newsletter is distributed to all hospitals (nursing managers) and health units of BC and is available online at the BCRCP website at [www.rcp.bc.ca](http://www.rcp.bc.ca).

**British Columbia Perinatal Database Registry  
YOUR PROVINCIAL PERINATAL DATABASE REGISTRY  
... in the Spotlight ( Con't)**

instituting a perinatal reproductive care program. The BCPDR also participates at the national level as an active member in the Canadian Perinatal Database Committee (CPDC). The CPDC reports to the Canadian Perinatal Programs Coalition (CPPC). The CPPC is a coalition of established Reproductive Care Programs as well as individuals who have interest in perinatal issues. Involvement with a national committee provides an opportunity for the BCRCP/BCPDR to develop national partnerships, investigate data sharing, collaborate on outcome analysis, rationalize limited resources and follow national trends.

**BCPDR Staff**

Sheryll Dale, Acting Director, BCRCP and Manager, BC Perinatal Database Registry  
Susan Barker, Special Projects Analyst, BC Perinatal Database Registry  
Kenny Der, Client Support Analyst, BC Perinatal Database Registry  
Cathe Johnson, Client Support Analyst, BC Perinatal Database Registry

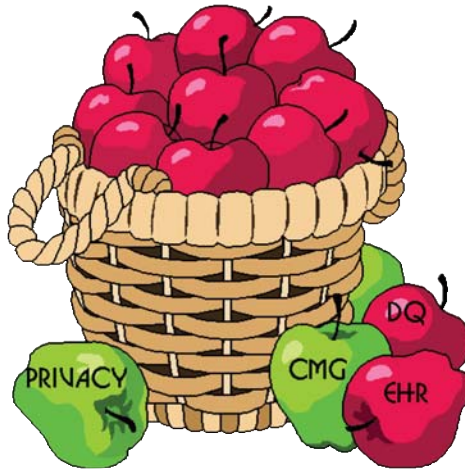
Romy McMaster, Special Projects Analyst, BC Perinatal Database Registry  
Lisa Miyazaki, Client Support Analyst, BC Perinatal Database Registry  
Tanuja Verhoven, Client Support Analyst, BC Perinatal Database Registry  
Linda Cholette, Program Assistant, British Columbia Perinatal Database Registry

**Other BCRCP Staff**

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Debra O'Flaherty, Neonatal Resuscitation Program, Nurse Consultant, BC Reproductive Care Program  
Diane Sawchuck, Perinatal Nurse Consultant, BC Reproductive Care Program  
Barbara Selwood, Community Perinatal Nurse Consultant, BC Reproductive Care Program  
Unita Hans, Program Assistant, BC Reproductive Care Program  
Sharon Marshall, Program Assistant, BC Reproductive Care Program

... Stayed tuned for a future article in the PrintOut for an in-depth look at Data Quality initiatives at the BCRCP...

# HARVESTING OUR INNOVATIONS



## HEALTH RECORD ASSOCIATION

## ANNUAL PROFESSIONAL DEVELOPMENT CONFERENCE & GENERAL MEETING

SEPTEMBER 15,17, 2005

# HEALTH INFORMATION SERVICES PROGRAM UPDATE REPORT

Laurie Kenward, BHRS, CCHRA (C); Coordinator HISP

I was surprised to find that I had not submitted an update report to the PRINTOUT in awhile, so needless to say a lot has and is happening!

Probably the **biggest news** (and the saddest from my perspective) is that Joy Fletcher will be leaving Douglas College (and me) to move to Ottawa. Yes, I do hope to hold a "wake" for Joy. We are tentatively looking at the idea of gathering for dinner at a local restaurant most likely to be held on Friday June 24th. I will send out a more formal invitation to everyone via the HIPLIST once details are confirmed.

In September 2004, we took in a small (but vibrant) **class of 20 students**. The class representative is Rose Caday-Malcolm. In addition, Rose and her classmate, Joyce Guedes, have agreed to be student liaisons between the College and the HRABC.

Students recently completed their two-week coding extramural at Lions Gate Hospital. I was pleased to have **Mary Lum** join our faculty as a contract instructor for this experience. Many thanks to all of the staff at LGH for their continued support of our program and students. **Frances McBean** also briefly joined our faculty for a specific contract. I hope to have the opportunity to work with both of these individuals again in the future.

In the previous semester, students participated in their one week **clerical/ technical practicum**. In total, students went to 14 sites. This included four students going to facilities in the Interior or on the Island. Three students went to Vancouver General Hospital. We welcomed new participation for this First-Year practicum from Squamish General, G.F. Strong, the BC Cancer Agency and the Forensic Psychiatric Hospital.

Students enjoyed several **guest speakers** during their first year including:

- Sue Joly Burnaby Hospital Optical Imaging
- Helen Williams Spacesaver storage solutions and safety issues
- Fern Beairsto PHSA Role of PHSA within the HCDS
- Traci De Pape Vancouver Coastal Access to and Disclosure of health information

Employment of our **2004 graduates** has steadily improved with almost all working in temporary full time to part time to casual positions. HRA vs HRT positions is almost evenly split. Six grads are now in a permanent HRA position. Four graduates obtained employment outside of the Lower Mainland.

The David Lam campus in Coquitlam has received 32 million dollars to expand their facilities which will include "a new state-of-the-art centre of health sciences and a degree-granting institution for applied studies." Anticipated completion date is November 2007. **HISP will be moving** from the New Westminster campus along with most of the other Health Sciences programs.

Earlier this year, Douglas College welcomed **Jan Lindsay** as the new Vice President, Instruction.

All **course numbers** in the College have moved from a 3 to 4 digits to reflect the addition of degree programs at Douglas College. Generally speaking, a first digit of "1" indicates a first year course and a first digit of "2" indicates a second year course. EG: HISP 120 is now HISP 1120 and HISP 320 is now HISP 2320.

New donated software includes an anonymized **hospital database**

containing 2 years' worth of data which was prepared for us by Cactus. *Thank you!*

Progress is being made regarding the building of a "**virtual record**" database which will provide online access to health records by health information students across Canada. This initiative began as a CHIMA Task Team on which Joy Fletcher is a member. It has now evolved to the point where seven programs (including Douglas) have financially committed to the project and two successful pilots have taken place testing both the Viewer and the Viewer Input screens. We are looking at an initial database of approximately 300 records (inpatient, daycare, and emergency). This initiative was created to respond to the need for HIS students to have access to current health records for coding practice. While we have been fortunate in BC to have long term relationships with Royal Columbian Hospital and Lion's Gate Hospital for this purpose, other HIS programs have not enjoyed the same level of commitment from their local facilities. Roll out of the final project is expected for September 2005.

**Preferential admission requirements** have been implemented in many of the College programs including HISP. These recommended admission requirements are in addition to the minimum required admission criteria needed to be accepted into our Program. This means that students are admitted to a program based on points earned versus the traditional method of date of application. FYI, our criteria is as follows:

- University Degree (6 points)
- Diploma (4 points)
- Post secondary education - successful (Certificate/citation/no credential conferred) (2 points)
- Related work experience - successful (Minimum 6 months) (2 points)
- Math 12 or higher within the past 4 years (2 points)
- Biology 12 or higher within the past 4 years (2 points)

## HEALTH INFORMATION SERVICES PROGRAM UPDATE REPORT (CON'T)

Last Fall, Joy and I both attended a ½ day forum on **Primary Health Care**. The forum focused on the theory and application of the Primary Care Results-Based Logic Model which has been developed as part of the Primary Health Care Transition Fund. I also attended a full day **Practice Summit** sponsored by the BC Academic Health Council. The purpose of the day was to agree on action steps that need to be taken in order to “untangle the student practice placement knot”. Participants were given an exhaustive set of recommendations categorized into four sections (Guidelines/Standards; Preceptor/Mentor Support; Practice Education Models; and Communication /Planning). An action plan is being developed.

As you know from the last issue of the PRINTOUT, HISP was successful in establishing a formal articulation agreement with **Athabasca University**. All Douglas College HISP graduates who graduated in the year 2000 or later will receive a minimum of 42 credits towards their 90 credit Health Administration degree.

In September we will begin year 2 of our program. This means that the next full time intake of 30 students will be September 2006. **Word of mouth** still seems to be the number one marketing tool for our program. Feel free to direct potential students to our web page ([www.douglas.bc.ca/healthsci](http://www.douglas.bc.ca/healthsci)) and then click on health information. If you require any program brochures or further information, please contact me at [kenwardl@douglas.bc.ca](mailto:kenwardl@douglas.bc.ca)

Hope everyone has a great summer. Hope to see you either at the CHIMA conference in Winnipeg or the HRABC conference in Kelowna!

# Confidentiality Awareness Week – April 10 -16th Health Information Privacy – It’s Good Medicine

By *Seana-Lee Hamilton, Coordinator  
Information Privacy, e-Health Information & Privacy  
Fraser Health Authority*

During the week of April 10th, 2005 Health Information Services offered information sessions on confidentiality and privacy throughout Fraser Health. Six different sites through the region were selected to try and maximize audience availability. The theme selected for the Confidentiality Awareness Week was “Health Information Privacy – It’s Good Medicine”. Postings on the Fraser Health Authority Intranet provided information to staff that may not have been able to attend the sessions.

- Did you know that you must complete a Fraser Health Authorization for Release of Information form in order to access your own health record?
- Did you know that you should not access your own electronic or physical health record and that Fraser Health is required by legislation to audit access to the electronic health record?
- Did you know that we are legally and ethically bound to hold personal information in confidence? We are also obligated to only access personal information that we need to do our jobs?
- Would you know how to respond if the police asked you to comment on the condition of a patient, client or resident? And did you know that Fraser Health is developing a policy on Release of Information to Law Enforcement?
- Did you know the Freedom of Information and Protection of Privacy Act (FOIPPA) has been amended to include protection for employees, volunteers who deny an unauthorized request for personal information? Did you know that Fraser Health will be sending all employees updated new Employee Confidentiality Acknowledgements that outlines this legislated “whistle blower” protection?
- Did you know that personal information should not be sent in an email and that an internet connection is not a secure method for transmitting personal information?
- It is important to remember that we are legally and ethically bound to hold personal information in confidence. But, just as important is the fact that we are also obligated to only access personal information that we need to do our jobs.

If you would like more information or would like to book an education session for your department, please contact the Information Privacy Office at (604) 587-4726.

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