The HIMAA Professional Credentialling Scheme

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Background to the scheme
The establishment of the HIMAA Professional Credentialling Scheme (PCS) arose from a series of events over the period between 2004 and 2006. A strategic planning workshop in January 2004 identified professional development/continuing education as a significant component of HIMAA's strategic plan. An initial response to this strategic objective was the establishment of the HIMAA Professional Development Program (PDP), which was launched in October 2004. The PDP is explained later in this article, but it will suffice at this stage to describe the PDP as a scheme to provide financial support, albeit constrained, to HIMAA members seeking to pursue personal professional development.

At around the same time that the PDP was launched Alex Toth, who was at the time a HIMAA Board member, had returned from a joint International Federation of Health Record Organisations (IFHRO) congress and American Health Information Management Association (AHIMA) conference in the USA. Alex observed that AHIMA conducted an extensive program of registration and continuing professional development for Health Information Managers and associated health information management practitioners. This was not new information, but what was noteworthy was the fact that those wishing to practice in the field were expected to achieve the appropriate AHIMA registration and then maintain their registration via continuing professional development. The reality of the employment market in the USA was that unless an individual had current AHIMA registration status it was a case of 'don't bother applying' for virtually any position.

Health Information Managers consistently present themselves as a profession within the
In the area of strategic contribution to national policy direction HIMAA has consistently struggled both in gaining representation on relevant committees and in identifying representatives when access is achieved. The problem of gaining representation on committees is, it is believed, largely a function of the Association’s low professional profile.

Many of the characteristics of a profession are, as Kerin Robinson identifies, interdependent, either positively or negatively, for example:

- A sense of lack of relevance impacts upon membership.
- Low membership combined with a low professional profile weakens the argument for representation on committees, which in turn contributes to a perceived lack of relevance among potential members.
- The lack of a nationally consistent professional development program contributes to a low professional profile and impacts the perception of the profession by others in the healthcare industry.

A second strategic planning workshop was held in April 2006. Again, professional development/continuing education was identified as a strategic objective.

With the above factors in mind the decision was taken to establish the PCS, with the stated aims of:

- promoting the professional development of HIMAA members
- providing employers with evidence that HIMAA members have maintained currency in their profession.

Ideally, in the medium to long term, it is envisaged a situation similar to the USA will develop, in which HIMs will have to demonstrate currency of their professional development in order to be considered for a position. Such a situation will have a marked impact on the shortcomings identified above, for example:

- The profession’s standing and profile will be enhanced, with the ‘knock-on’ effect of gaining greater representation on policy making committees.
- The sense of relevance of HIMAA membership will be enhanced.
- HIMAA membership will increase.

In summary, there exist absolutely critical, interdependent links between HIMAA as a powerful, dynamic and well-supported professional body comprising all graduates of our discipline, and the universities that educate future members of the profession, the professional journal, profession-based continuing education, the profession’s strategic contribution to national policy direction in health information management, and the graduate competency standards. The structures are in place for the profession to leap ahead; however, if graduate health information managers continue not to join the professional association then the Australian health information management profession, as we know it, will not continue to exist as a profession.

The paper’s conclusion correctly emphasises the issue of membership support but also identifies as other characteristics of a ‘profession’:

- ‘… profession – based continuing education …’, and
- ‘… strategic contribution to national policy direction …’

In the area of profession-based continuing education, State Branches try, as best they can, to provide professional development seminars and workshops, but this is somewhat ad hoc and varies significantly from state to state. In addition, the HIMAA National Office provides support to a volunteer committee in organising an annual national conference or symposium.

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3 A rough estimate places HIMAA’s membership at 15-20% of the eligible HIM population in Australia.
Increased membership will enhance HIMAA’s capacity to gain representation on policy making committees.

Whilst the PDP and PCS were developed and implemented separately they do complement each other, for example attendance on a training course subsidised via the PDP can be used to accrue Continuing Professional Development (CPD) points for use in the PCS.

**Professional Development Program**

The PDP is designed to assist HIMAA members in extending their professional, managerial and technical competencies. The PDP is managed by the HIMAA Executive Committee and administered by the HIMAA National Office. The program operates as follows:

- The HIMAA Executive and Board of Directors develop an annual budget, which has a quarterly allocation of funds for the PDP.
- The Executive maintains and regularly reviews a list of courses approved for the expenditure of PDP funds.
- Members nominate themselves for attendance at one of the approved courses. If sufficient funds are available, and eligibility criteria are satisfied, the member is advised that their attendance will be subsidised by the PDP and they may proceed to register for the course.
- The member must pay the course registration fee in advance to the course provider and claim reimbursement of part of the fee from the PDP on completion of the course.
- The PDP operates on the basis that applications will be processed in order of receipt for each quarter of funding; that is, once the funds for a quarter have been allocated or expended no more nominations can be accepted for courses in that quarter.
- Full and Affiliate Members who are financial at both the time of application and the time of the course are eligible to participate in the PDP.
- The subsidy available is $200 per day; for example, a two-day course will attract a total PDP reimbursement of $400, and a three-day course attracts $600.
- Members can only receive the PDP subsidy once in each financial year.
- The subsidy is still payable if attendance at the course is funded from a combination of sources e.g. employer/member, member/HIMAA or employer/HIMAA.

Since its launch in October 2004 the PDP has been utilised by three members.

Further information on the PDP is available on the HIMAA website www.himaa.org.au.

**Professional Credentialling Scheme**

The HIMAA Professional Credentialling Scheme is designed to:

- promote the professional development of HIMAA members
- provide employers with evidence that HIMAA members have maintained currency in their profession.

Members who satisfy the requirements of the scheme are entitled to use the post-nominal of:

- CHIM (Certified Health Information Manager) – Full members, or
- CHIP (Certified Health Information Practitioner) – Affiliate Members.

The scheme is based on:

- the principle that professional development is an individual responsibility, and
- the honesty and integrity of members in completing their professional development diaries.

Full and Affiliate Members are eligible to participate in the scheme if they:

- have been financial throughout the qualification period
- remain financial for the period of certification
- attain the requisite CPD points during the qualification period.

The operation of the scheme is as follows:

- Members maintain a diary of activities that attract CPD points, over the qualification period.
- Members submit their diary to the HIMAA Executive for verification.
- Upon verification by the HIMAA Executive, the member is authorised to use the post-nominal of CHIM or CHIP, as appropriate, for the next two years.

4 An introductory arrangement has been put in place in which acquisition of 75 CPD points in a 12 month period prior to diary submission provides credentialling for the following two years. The introductory period is 1 September 2006–31 August 2007. After 31 August 2007, 150 CPD points acquired in the two year period immediately prior to diary submission will be required to gain credentialling, which is then valid for the following two years.
The process is repeated each two years.

If members become non-financial:

- They cannot use the post-nominal of CHIM of CHIP whilst non-financial.
- CPD points cannot be accrued until such time as the member becomes financial again.

To qualify, members must have accrued the requisite CPD points in the qualification period immediately prior to submission of their diary.

It is the responsibility of members to submit their diaries in a timely manner.

The HIMAA Executive has authority to determine what constitutes a relevant qualification/activity.

The HIMAA Executive has authority to request evidence to substantiate claims made in a member's diary.

The CPD points allocated to certain activities are doubled for members in rural and remote localities. A rural or remote locality is one that is more than 150 km (straight line distance) from the location of the activity (where appropriate). The HIMAA Executive has authority to accept or reject a member's claim of rural or remote status.

Since its launch in August 2006 the PCS has been utilised by twelve members.

Further information on the PCS is available on the HIMAA website www.himaa.org.au.

**Conclusion**

Even allowing for the fact that some members receive professional development support from their employer organisation, the numbers utilising the PDP and PCS indicate that members place a low priority on their personal professional development and its recognition. As discussed previously, such a situation only serves to reinforce shortcomings in the criteria that serve to define a group as being members of a profession.

It is hoped that over time the PCS in particular will have a significant impact on how HIMs view their professional standing, and on how others view their profession.

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