

Patient Engagement Roles Emerging in Healthcare

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By Michelle Millen, MSCPM, RHIT

The discharge nurse asked Anna, a 70-year-old female recovering from a cholecystectomy, “Do you have any questions? Are the discharge instructions clear?” and added “You need to follow up with your doctor in two weeks and call them if you begin to feel worse.” Anna was overwhelmed by all the terms. What did it all mean? She didn’t want to appear to ask a “dumb” question, so she asked no questions. The hospital staff kept talking about her “health record on the computer” and how she could see everything through a “portal.” None of it made any sense to Anna.

The above example illustrates the importance of healthcare professionals engaging with patients in a meaningful way. Patient engagement, a movement many believe is the key to true healthcare transformation, requires healthcare professionals who understand the healthcare system and healthcare tools to facilitate engagement.

Various initiatives, like Open Notes and consumer devices generating health data, encourage patients to become involved in their own care. Many patients need a translator, or guide, with the abilities and skills necessary to assist patients with their health information. Enter the health information management (HIM) professional.

Educating patients regarding the healthcare system, how it works, how it is paid for, and the resources available, requires a broad knowledge base. The role of HIM in the patient engagement space is to encourage the development of competent healthcare consumers. Good care requires much more than the time spent with the physician. It relies on empowered patients becoming involved in their care through vetted information sources—and most patients need a navigator to help them get started. John Lynn, a healthcare blogger, defines this role as a “trusted content curator.”¹

Patient Centeredness Occurs Before, During, After Treatment

The opportunity to assist patients across the care delivery spectrum with aspects of their healthcare has manifested into new roles such as patient navigator, patient portal coordinator, patient advocate, and care coordinator—among others. The goals of value-driven, quality-focused, patient-centered healthcare require all healthcare professionals to work together, drawing on each discipline’s strengths.

In the scenario described above, Anna should have received education in the hospital to assist her with understanding all the moving pieces of her care and the proper use of the patient portal. However, hospital stays are getting shorter and patients may not be in the best frame of mind to process information. Providing education to patients before, during, and after their stay benefits the patient and the organization. An informed patient makes for a better partner in the healthcare relationship. In a 2013 *Healthcare IT News* article, David Wright, chief outcomes officer for GetWellNetwork, pointed to three improvements attributed to patient engagement:²

- **Improved patient satisfaction**—Leveraging technology to engage patients and improve the care process
- **Improved quality and safety**—Educating patients about their responsibility to take necessary precautions, particularly when addressing the incidence of falls
- **Improved financial and operations efficiency**—Providing a “checklist of things patients need to do to get out on time” and referring to the checklist throughout the stay, as well as providing education along the way, will allow for a timely discharge

In the article, Wright said the “benefit of interactive care tools are applicable across multiple care settings.” Using these tools to increase patient activation and demonstrate value to healthcare consumers is a role well suited for the HIM professional.

HIM Naturally Accessible to Patients

Patient activation describes the “skills and confidence that equip patients to become actively engaged in their health care,” according to a 2013 article in *Health Affairs*.³ Understanding the level of patient activation will assist with the healthcare organization’s ability to improve outcomes and lower costs, the article states.

In 2013, Children’s Health, based in Dallas, TX, launched a pilot project designed to engage patients and their families using an untethered personal health record (PHR). The intention was to measure medication adherence and readmission rates among a specific population. Michelle Basco, RHIA, the manager of release of information at Children’s Health, was responsible for educating patients and their families on the PHR system. Leadership at Children’s Health determined one-on-one interaction would be the most effective strategy in demonstrating the PHR and all its components of care. The study was a resounding success. Adherence rates improved and readmission rates dropped.

An added benefit of the project was the change they saw in their study population. Basco states that it was “success through empowerment.” “HIM professionals don’t wear lab coats and that makes us accessible,” Basco says. A less intimidating environment provided a positive learning atmosphere for patients and their families, another consideration for organizations when selecting appropriate roles to involve in the activation and engagement process.

New opportunities for HIM professionals may require educational preparation. The 2014 HIM education competencies have added areas specific to patient involvement. Consumer informatics, enhanced health information exchange competencies, fraud surveillance, leadership, change management, and other management competencies support the demands of an emerging healthcare system that values a team approach representing clinical and non-clinical roles.

The leadership component to the new curriculum is especially important as HIM professionals may find themselves in undefined territory. There are no rules in the patient engagement space. HIM professionals should be able to see a need, identify their value, and assert themselves to the benefit of the practice and the patient.

Patient Advocate Roles Growing Fast

Patient advocacy roles have exploded as patients and practices acknowledge the need for a patient liaison. Stephanie Timiney, a veteran medical transcriptionist, was hired as a medical scribe in a busy physician practice. She quickly realized there was an opportunity to assist patients in processing medication authorizations more quickly. Patient satisfaction is impacted when authorizations aren’t processed in a timely fashion. Her ability to see areas of need has led to her role as a self-described patient advocate within the practice.

Realizing she needed education to be more effective in her role led her to return to school to pursue an AAS-HIM and eventually an RHIT credential. Her willingness to work with clinicians in the practice, as well as the value her skills contributed to the organization, was vital in bringing this role into the practice, Timiney says. Care coordination is another role that directly benefits the patient and the organization as it promotes positive outcomes. A care coordinator is someone who follows up with a patient or their caregiver to confirm the clinician’s instructions have been followed.

For example, the patient in the initial scenario, Anna, may have been given a nutrition pamphlet. However, it would be helpful to know if there is a web- or paper-based resource that will help her create meals for her specialized diet. The care coordinator can help her access that information when she comes in for her post-op visit.

But what if she doesn’t come in for the visit? Does anyone follow up or are patients slipping through the cracks? The care coordinator would follow up and help patients like Anna re-schedule if necessary. Following up on ordered tests, prescribed medications, exercise regimens (such as classes available at the practice) takes time but is a necessary function for a practice to efficiently and effectively facilitate care.

The skill sets of an HIM professional are critical to accomplishing the goal of patient engagement. Increasing health literacy and enhancing HIM education fills the gap left in transitioning to a system based on value-driven, quality-focused, patient-centered care.

Notes

¹ Lynn, John. "Restoring Humanity to Health Care—My Experience, Part 2." EMR and HIPAA. February 27, 2015. www.emrandhipaa.com/emr-and-hipaa/2015/02/27/restoring-humanity-to-health-care-my-experience-part-2/.

² Rowe, Jeff. "Top 3 Perks of Patient Engagement." *Healthcare IT News*. June 17, 2013. www.healthcareitnews.com/news/top-3-perks-patient-engagement.

³ Hibbard, Judith H., Jessica Greene, and Valerie Overton. "Patients with Lower Activation Associated with Higher Costs; Delivery Systems Should Know Their Patients' 'Scores.'" *Health Affairs* 32, no. 2 (February 2013): 216-222. <http://content.healthaffairs.org/content/32/2/216.abstract>.

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