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Conference Co-Chairs' Message

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Conference Co-Chairs' Message

Bernard Han, Ph.D. and Sharie Falan, Ph.D., RN-BC, CPHIMS

It has been a turbulent ride for healthcare reform over the past three years since the health care reform bill (i.e., the Patient Protection and Affordable Care Act) was signed off on March 23, 2010. Yet, the actual progress in adopting *Health Information Technology* (HIT) for health care reform is still very slow. With our understanding based on many studies and reports from the health care industry, two major factors were recognized as “potential barriers” to the expedition of health care reform via meaningful use of HIT: 1) the lack of service innovations that truly match user needs and behaviors of their unique work environments; and 2) the lack of incentives that will motivate and engage health care stakeholders (e.g., service providers, practitioners, consumers, etc.) in adopting/using HIT solutions. We are also aware HIT solutions are not the panacea in solving all issues encountered by the Health Care Reform. Given this understanding, we truly believe that a dedicated *Conference* shall be provided a commonly-accessible forum for all health care professionals, including *physicians, clinicians, HIT solution providers, scholars, and consumers* to share research findings that are critical to the expedition of Health Care Reform, in particular, with a focus on *service innovation* and *stakeholder engagement* - the theme of this year's conference.

We are very pleased that since the release of *Call-for-Papers for ICHITA-2013* in October 2012, we have received more research papers than what can be accommodated for presentations in our conference. Finally, twenty-two (22) papers were accepted after a blind review process with at least two reviewers for each paper. While some papers were not accepted, we sincerely hope all authors of papers submitted to the Conference are benefitted by this process and will continue to conduct research that will produce more meaningful findings to expedite health care reform. To assist the readers of this *Transactions of ICHITA*, a quick summary of accepted papers with respect to their contributions and research foci is given below.

In brief, the twenty-two accepted papers can be classified into seven categories:

Emerging Health Information Technology and Applications. Four papers are classified in this area. Abouzahra and Tan investigate the role of mobile technology in enhancing the use of personal health records. Samhan, Dadgar, and Joshi give a very thorough research review on how mobile health information technology can be used to support patient care. Their research provides general findings toward methods, themes, and potential research topics in this area. Along the same line toward the use of emerging technologies, Ryan, Doster, Daily, and Lewis study the process management practices of balanced scorecard and dashboards to monitor and improve the perioperative process that has been aligned to overall hospital goals at strategic, tactical, and operational levels. Another paper by Lee and Chen addressed the impacts of “Big Data” applications that may be created on health information systems.

Health Care Communication, Literacy, and Patient Care Quality. In this category, three papers are accepted. Han and Wiley investigated on how “social media” is liked by patients to communicate about their health challenges and gain support through an online community that has become reality in the digital world. Falan and Han presented a case study that demonstrates errors may exist in the electronic health care records that subsequently cause confusion and result in near misses which may create huge “negative” impacts on the relationships between the health provider and patients. The third paper by Sun and Falan provides a solid analysis on the reliability of a nursing informatics self-assessment tool that could be effectively used by nursing students in acquiring knowledge in health informatics.

Health Information Standardization and Interoperability. Three papers are related to this category. Skrocki presented a research to highlight the importance of health data standardization and how it may affect health

care quality assessment, decision support, and the exchange of health information for patients served by multiple health care providers. Berryman, Yost, Dunn, and Edwards investigate the complexity and security issues related to health information systems interoperability and potential challenges in this area. Lastly, D. O’Toole, S. O’Toole, and Steely look into the implementation of Michigan Health Information Network (MiHIN) by comparing it with what have been done by other states. Their study provides a solid understanding about how these statewide networks could be connected to create a nationwide health information network.

Health Information Security and Regulation. Security and privacy are two critical concerns in information sharing, and it is even more true for health care information sharing than others. Three research papers have addressed issues in this area. Pendergrass, Ranganathan, Heart, and Venkatakrisnan focused the study of using a “Threat Table-Based” approach to resolving the security concerns imposed by telemedicine. Schymik and Shoemaker argue that a well-established standard approach can be easily adapted to achieve Federal Compliance to satisfy all legal and regulatory requirements for protection of patient information in health organizations. Future challenges to the use of mobile technologies and their associated application security issues are presented in Rea’s study.

Health Care Management and Administration. Efficiency in health care services delivery and administration has long been recognized as one possible area for improvement. Three papers are found in this area. Cure provides an overview of how in-patient work flow scheduling can be optimized by a mathematical model. Gau, France, Moutinho, Smith, and Wang propose a predictive model to assist insurance agents in dealing with risks and uncertainties that are to be faced by all insurers in the post-reform marketplace. The third paper by Islam investigates potential cost savings through a state policy change in promoting the reimbursement for generic prescription substitution for name brand medicine.

Health Information Technology Quality Assessment and Medical Services Delivery. Meaningful use of HIT for health services is key to the success of health care reform. There are three papers fall into this category. Dohan and Tan present theoretical and methodological challenges in evaluating personal eHealth tools that are used for disease symptom tracking. Targowski’s paper addresses the principles of good health in the U.S. Findings show the state of health care of the Americans is in a state that is not appropriate for sustainability. Fisher’s research opens up an interesting debate on “how health care shall be covered – by either a government-centered or a patient-centered model,” in which more issues than answers are provided.

Health Information Technology in Medical Practice. Three real-world medical practices are investigated. Lavariega, Córdova, Gómez, and Avila reported rural maternity-infant care by using mobile devices and wireless sensors such as ECG (electrocardiogram). Alaiad, Zhou, and Koru study the key factors that influence the adoption of health care robots in a homecare facility. Finally, Pinto-Valverde, Pérez-Guardado, Gomez-Martinez, Corrales-Estrada, and Lavariega-Jarquín developed an evaluation model to measure Data Quality based on maturity and it is currently under testing in a healthcare cluster in Mexico.

Compared to the research outcomes in ICHITA-2011, there is an obvious improvement in both quality and quantity of papers reported herein. We do want to direct our thanks to all paper reviewers (see Page 208) for your tireless efforts in reviewing papers. Without your time and professional critiques, it will never be possible for us to complete this volume of intellectual discoveries to be shared by readers who will carry on the research work to benefit the health care reform.

Bernard Han & Sharie Falan
Conference Co-Chairs, ICHITA-2013