

## Foundations of Health Information: Management and Practice

### MIBC Certificate Program HIM101 Course Syllabus

#### COURSE DESCRIPTION:

This course provides an overview of the health information environment, including the content, structure, and processing of the information. Students explore the maintenance and analysis of health information, as well as legal and supervisory issues related to HIM [in an interactive technology-based environment].

**CONTACT HOURS:** 6 weeks; 75 contact hours

#### TEXTBOOK:

Davis and LaCour, Health Information Technology, Pearson.

#### OBJECTIVES:

At the end of this course, the student will be able to:

1. List and explain the components of the U.S. health care delivery system, including roles of health care professions, the delivery setting, and the influence of government regulations, provider licensing, and accreditation standards.
2. Identify and define reimbursement methods in the U.S. health care delivery system and the impact of those methods on professional practice and patient care.
3. Implement strategies to process health data, including coding for reimbursement purposes.
4. List and explain principles for storing health data.
5. Apply strategies to analyze health data to improve health care delivery.
6. Integrate legal and regulatory issues in the management of health information.

#### COURSE POLICIES

##### Attendance and Make-Up Hours

The Institution is preparing students for employment. Employers will not tolerate excessive absence. The student will learn being present and prepared is critical for academic and professional success.

##### Code of Conduct & Academic Integrity

The foundation of any educational experience is an open and respectful learning environment. Students are always expected to act respectfully and professionally regarding your online course must always meet the standards of the SCHOOL's Code of Conduct. Academic integrity is the moral compass of the SCHOOL. Each student learner has the primary responsibility for being academically honest, students are advised to read and understand the

**Commented [k1]: Standards:** The name of the course should clearly identify the learning level and content.

**Commented [k2]: Standards:** It is important to establish clear expectations for students as to the focus on management and practical strategies that align with real-world learning contexts.

**Commented [k3]: Standards:** The purpose of the course is to motivate adult learners and reinforce practical, behavior-based learning outcomes (Kirkpatrick, 2006).

**Commented [k4]: Standards:** Today's technology-driven health information environment requires the use of practical and competent learning and development skills. Therefore:

- Choose technology that best supports the instructional strategies necessary for success in HIM.
- Plan instructional strategies relevant for digital-age proposed HIM future.

**Commented [k5]: Baseline:** Six weeks is best suited for students with a previous health management experience (within the last 12 months). The willingness of adults to learn is associated with perceiving the "relevance of the knowledge" (Knowles, 2015). They desire practical ways learning will help them better their lives and learn best knowing the new knowledge has an applicable value. A suggestion to achieve the above learning goal is to extend the course to 12 weeks. Two weeks allotted for student learners to complete the module coursework. This redesigned course includes a 12-week teaching plan.

**Commented [k6]: Change:** The textbook changes to Foundations of Health Information Management. Pearson. This is the authors' most current edition.

**Commented [k7]: Standards:** It is important that the objectives outlined in this course easily assemble with the other courses in the HIM program. It is also necessary to review the objectives presented in the accompanying materials: textbook and interactive AHIMA student lab.

**Commented [k8]: Standards:** Clear explanations and section headers work to make the student syllabus readable. It is important to documented consistent standards for all student learners.

**Commented [k9]: Standards:** Clear easy to digest information regarding the school's standards should be identified.

following information: Academic dishonesty includes, but is not limited to:

**Plagiarism** –Plagiarism occurs when writers fail to enclose direct quotations (of other’s written or oral works) in quotation marks; failure to include citations in your writing (or as footnotes); and/or failure to furnish a reference or cited works list to accompany your writing.

**Cheating** – this occurs when the integrity of an activity or examination is compromised through dishonesty or deceit. Cheating includes unsanctioned student collaboration or the use of unsanctioned resources or materials to complete your work.

**Misrepresentation** involves providing false information in an academic assignment, furnishing false or misleading information to instructors or other Allen School personnel, or presenting misleading or fabricated data as valid.

**Resolve:** Failure to meet either of these standards may result in lowered grades, being placed on academic probation, and possibly dismissal from the program. Refer to the Code of Conduct you signed at the start of your program or the catalog for more information.

**Copyright:** All materials within this course are copyrighted by your textbook publisher or by the SCHOOL. No materials in this course should be distributed or re-used in any manner, printed or electronic, without express written permission from the textbook publisher.

## GRADING

See the School’s Online Catalog for the grading scale.

Points	Graded Item
25	Participation (5 points per day)
150	6 Discussion Questions (25 points/discussion)
250	Completion of 1 Chart Prototypes
125	Analyze a Health Record
200	One Chapter Application for grading
250	Completion of a SuperBill
<b>1000</b>	<b>Total Points</b>

**Grading and Instructor Response Time:** All graded activities will be returned to the student by the following Monday after submission.

**Commented [k10]: Standards:** This legal notice is important and remains to at the beginning of the student learner syllabus.

**Commented [k11]: Change:** These points will be reduced to 25 points that the instructor/educator can use with discretion.

**Commented [k12]: Change:** Remove live online participation as a mandatory requirement to create relevance by mapping courses with perceived learner needs. Replace with online office hours to answer questions in a live interactive collaborative workspace. “Adults are self-directed individuals” who value the ability to take charge of the learning journey. They are independent beings who want to feel in control of their time (Knowles, 2015). This student learner activity will continue to be graded. Up to 5 points total for each visit are given at the instructor’s discretion. Engaging the student learners, as a mentor, in an online environment prepares them to work remotely and create online learning communities.

**Commented [k13]: Change:** The current assignment changes to Current EHR Activities located in chapter 3 of the textbook to demonstrate strategies that align with real learning contexts. Student learners are learning to familiarize themselves with healthcare delivery systems, how they collect and share data through electronic health record systems (EHR). Student will purchase and use AHIMA interactive student lab to complete assignments along with the textbook.

**Commented [k14]: Change:** Add this interactive lab assignment for practical and theoretical development and assessment. The assignment details are explained in module two.

**Commented [k15]: Change:** The current assignment changes to Timely Billing and Quality Coding located in chapter 7 to demonstrate strategies that align with real learning contexts. Student learners are introduced to a patient chart, which is comprehensive enough to create an engaging experience but simple enough to avoid paralysis by analysis.

**Commented [k16]: Change:** The current assignment changes to Completion of Encounter Form to demonstrate strategies that align with real learning contexts. The term superbill is rarely used in the current (HIM) terminology Student learners are taught the current process of medical claim submission to transfer knowledge, skills, and attitude to the workplace.

**Commented [k17]: Baseline:** Change to within 72 hours of submission for current assignments and 1 calendar week from submission date for late assignments. As a student learner, feedback is a large part of development. Educators are tasked to help student learners make connections, perceive relevance, and derive inspiration with respect to the workflow and process designed.

### Late Work Policy

Students who have missing work should complete their missing work within 2 weeks from the end of the week in which work was missed. **Assignment(s) will NOT be accepted 2 weeks after the date on which the assignment was due.**

Course Outline	
<b>Week 1: Health Care Delivery Systems; Collecting Health Care Data -- 4 hours</b>	
<b>Presentations</b>	Instructor Presentation: Health Care Delivery System Health Care Professionals Comparison of Facilities Legal and Regulatory Requirement Collecting Health Care Data Basic Concepts of Collecting Health Care Data Key Data Categories Medical Decision Making Describing Data Organization of Data Elements in a Health Record Data Quality Data Sets  <ul style="list-style-type: none"> <li>• <b>Discussion Question:</b> What do you think are the advantages and disadvantages of the U.S. Health Care Delivery System? [Prep: .5 hour]</li> <li>• <b>Discussion Questions (In Class):</b> What is the impact of incorrect or conflicting data within a health record? [Prep: .5 hour]</li> <li>• <b>Discussion Question (In Class):</b> Who is responsible for the quality of the health record? What is the specific responsibility of the Health Record Administrators? [Prep: .5 hour]</li> </ul>
<b>Readings</b>	1. Davis and LaCour: Chapters 1, 2, and 3 [Prep: 1.5 hours] 2. Interactive ethical dilemma case study in Chapter 1 p. 33 [Prep: .5 hour] 3. Creating a Data Dictionary case study in Chapter 2 p. 70 [Prep: .5 hour]
<b>Assignment</b>	<ul style="list-style-type: none"> <li>• Current EHR Activities create a patient record identifying the correct legal protocols using the data elements in a health record. This assignment uses an interactive lab that accompanies the textbook found in chapter 3 p. 98 [Prep: 1 hour]</li> </ul>
<b>Week 2: Electronic Health Records; Acute Care Records -- 4 hours</b>	
<b>Presentations</b>	Instructor Presentation: Electronic Health Records <ul style="list-style-type: none"> <li>• The Evolution of the Electronic Health Record</li> <li>• Government and Private Sector Intervention</li> <li>• Implementing an Electronic Health Record</li> </ul> Acute Care Records <ul style="list-style-type: none"> <li>• Clinical Flow of Data</li> </ul>

**Commented [k18]: Change:** Delete redundant task. It is very similar to Basic Concepts of Collection Health Care Data listed beneath.

**Commented [k19]: Change:** The order of presentations must align with the textbook and focus on specific instruction necessary for the transfer of learning to the workplace. It should include:

- Health Care Delivery System
- Health Care Professionals
- Comparison of Facilities
- Basic Concepts of Collecting Health Care Data
- Describing Data
- Data Quality
- Data Sets
- Organization of Data Elements in a Health Record
- Patient demographics
- Legal and Regulatory Requirement

**Commented [k20]: Standards:** There will be no live classes in the new course. Instead, offer one, two, or three discussion questions to be answered by student learners to increase motivation and engagement. The number of discussion question vary by module in relation to the coursework assigned.

**Commented [k21]: Baseline:** Cognitive knowledge is developed through reading (Merriam and Bierema, 2014). It is important to ensure the E-textbook is available with an interactive reader to maximize the learner's intake of information (visual and audio). Merriam and Bierema (2014) agreed, "Learning activities that draw upon our creative, emotive, and physical sides along with verbal and analytical assignments generates brain activity in both hemispheres (p. 171).

**Commented [k22]: Change:** Add Current EHR assignment for week 1. This assignment is interactive to prepare the student learner with the skills necessary to utilize the technology taught throughout the course.

**Commented [k23]: Standards:** Incorporate HIM brand standards including the use of terminology, visuals and known writing standards. Make regular updates to the standards in response to results brought up on the summative report.

**Commented [k24]: Change:** Replace the module objective of Acute Care Records with Content of the Health Record presented in chapter 4. The record content should be studied to focus on the EHR and allow for interactive practical application.

**Commented [k25]: Change:** In order to stay on topic with chapters 4 & 5 objectives the list of instructor presentation topics include:

- Clinical Flow of Data
- Clinical Data
- Discharge Data Set
- Government and Private Sector Intervention
- History of the Electronic Health Record (EHR)
- Implementing an EHR
- Patient Demographic Entry
- Data Quality
- Other Health Information Management Roles

	<ul style="list-style-type: none"> <li>Clinical Data</li> <li>Discharge Data Set</li> <li><b>Discussion Question:</b> What is considered better—Placing information in a physical chart or the present state of converting information into the Electronic Health Record? [Prep: .5 hours]</li> <li><b>Discussion Question (In Class):</b> Why does Medicare require a specific list data elements to be collected when a patient is discharged from an acute care facility? Why is this so critical? [Prep: .5 hour]</li> <li><b>Discussion Question (In Class):</b> How long do you keep acute care records on file? How often are they reviewed? [Prep: .5 hour]</li> </ul>
<b>Readings</b>	<ol style="list-style-type: none"> <li>Davis and LaCour: Chapters 4 and 5 [Prep: 1.5 hours]</li> <li>Does Computerization Reduce the use of Paper case study in Chapter 4 p. 12 [Prep: .5 hour]</li> <li>Merging Expectations case study in Chapter 5 p. 155 [Prep: .5 hour]</li> </ol>
<b>Assignments</b>	<ul style="list-style-type: none"> <li>Analyze a health record; identify incomplete or missing health record data (file is provided by the instructor). Develop a plan to correct the gaps in the incomplete record. Patient Record.pdf [Prep: 1 hour]</li> </ul>
<b>Week 3: HIM Code Sets -- 4 hours</b>	
<b>Presentations</b>	<p>Instructor Presentation</p> <p>Health Information Management Processes</p> <ul style="list-style-type: none"> <li>Data Quality</li> <li>Post Discharge Processing</li> <li>Electronic Health Record Management</li> <li>Other Health Information Management Roles</li> </ul> <p>Code Sets</p> <ul style="list-style-type: none"> <li>Coding</li> <li>General Purpose Code Sets</li> <li>Special Purpose Code Sets</li> <li>Used for Coded Clinical Data</li> <li><b>Discussion Question:</b> Why is it so important to ensure coding is done accurately? [Prep: .5 hour]</li> </ul>
<b>Readings</b>	<ol style="list-style-type: none"> <li>Davis and LaCour: Chapters 6 [Prep: 1.5 hours]</li> <li>Standards of Ethical Coding case study in Chapter 6 p. 18 [Prep: .5 hour]</li> </ol>
<b>Assignments</b>	<ul style="list-style-type: none"> <li>Complete the accompanying coding lab application in Chapter 6 p. 187 [Prep: 1.5 hours]</li> </ul>
<b>MID-MODULE</b>	REFLECTION requires students to complete a mid-module survey
<b>Week 4: Reimbursement -- 4 hours</b>	
<b>Presentation</b>	<p>Instructor Presentation:</p> <p>Reimbursement</p> <ul style="list-style-type: none"> <li>Paying for Health care</li> <li>Reimbursement methodologies</li> <li>Billing</li> </ul> <p>Health Information Management Issues in Other Care Settings</p> <ul style="list-style-type: none"> <li>Ambulatory Care</li> </ul>

**Commented [k26]:** Change: Physical charts are no longer encouraged in HIM. An encounter form is the standard electronic format. Change the question to -- What are some obstacles encountered when converting information from paper to the EHR?

**Commented [k27]:** Change: Change the Medicare question from a required discussion question to a thought-provoking question to encourage interaction and engagement with peers.

**Commented [k28]:** Change: Change the acute care question from a required discussion question to a thought-provoking question to encourage interaction and engagement with peers.

**Commented [k29]:** Change: The assignment in module two includes both practical and theoretical application of the level 2 learned materials (Kirkpatrick, 2006). It will help to establish a change in behavior that can effectively transfer to the workplace. It is not one of the three major project assignments.

**Commented [k30]:** Change: Remove HIM processes from this module. Students require repetitious practical application for behavior to change (Merriam and Bierema, 2014). To increase data retention of student learner results, these concepts are studied in chapter 5 within module two.

**Commented [k31]:** Change: Chapter 5 is moved into week 2 to allow students to focus on code sets in chapter 6 because the work skill level increases in chapter 6.

**Commented [k32]:** Standards: Incorporate HIM brand standards including the use of terminology, visuals and known writing standards. Make regular updates to the standards in response to results brought up on the summative report.

**Commented [k33]:** Change: Technology offers multiple learning tools, which can be personalized or utilized in learning groups. When teaching coding, an effective method is to provide smaller bite-size chunks of online learning, how-to videos, or shorter classes bookended by self-study prerequisite learning and post-class learning tools.

•Adult student learners want delivery medium that works for their needs including technology-driven training.  
•Adult student learners come from all generations, with diverse backgrounds.

**Commented [k34]:** Change: At least one discussion is necessary to help learners build a solid foundation in coding and code set communication.

**Commented [k35]:** Standards: Peer interaction is necessary for collaborative learning and exchange of acquired knowledge, skills, and attitude (Knowles, 2015).

**Commented [k36]:** Standards: Assignments are provided with specific contextual information to contribute to the student learner's enjoyment (Reaction Level) (Kirkpatrick, 2006). This detailed

**Commented [k37]:** Baseline: Performance-based activities that require repetitive practice act as a change agent to help strengthen motor skills needed in practical coding application. The amount of

**Commented [k38]:** Change: Add interactive student lab activity. Student learners will be required to use acquired

**Commented [k39]:** Baseline: Iterative evaluation is an important approach to assess student enjoyment (Reaction Level) (Kirkpatrick, 2006). To hold students accountable, they will be

**Commented [k40]:** Change: Renamed title of week 4 to Claims Management and Reimbursement to focus on the important topic of claims management

**Commented [k41]:** Standards: Incorporate HIM brand standards including the use of terminology, visuals and known

	<ul style="list-style-type: none"> <li>• Other Inpatient Health Care Settings</li> <li>• <b>Discussion Question:</b> Discuss the meaning of managed care and the process of the pure physician patient relationship. What are some types of managed care plans? [Prep: .5 hour]</li> </ul>
<b>Readings</b>	<ol style="list-style-type: none"> <li>1. Davis and LaCour: Chapter 7 [Prep: 1.5 hours]</li> <li>2. Review the professional profile in Chapter 7 p. 238 [Prep: .5 hour]</li> </ol>
<b>Assignments</b>	<ul style="list-style-type: none"> <li>• Complete the Timely Billing and Quality Coding Chapter 7 p. 239 [Prep: 1.5 hours]</li> </ul>

**Commented [k42]: Change:** Remove this information from the module four to focus on the complexity of details necessary for practical use of reimbursement processes. This positions us to understand what and how student learner results can be better transferred to a dynamic HIM environment.

**Commented [k43]: Baseline:** Performance-based activities that require repetitive practice act as a change agent to help strengthen motor skills needed in practical coding application.

<b>Week 5: Managing Health Records and Issues in Other Care Settings -- 2 hours</b>	
<b>Presentation</b>	<p>Instructor Presentation: Managing Health Records</p> <ul style="list-style-type: none"> <li>• Master Patient Index</li> <li>• Identification of Physical Files</li> <li>• Legacy Systems</li> <li>• Chart Locator Systems</li> <li>• Information Systems</li> <li>• Security of Health Information</li> <li>• Record Retention</li> </ul> <p>Statistics</p> <ul style="list-style-type: none"> <li>• Organized Collection of Data</li> <li>• Data Retrieval</li> <li>• Reporting of Data</li> <li>• Statistical Analysis of Patient Information</li> <li>• Presentation</li> <li>• Routine Institutional Statistics</li> <li>• Registries</li> </ul> <ul style="list-style-type: none"> <li>• <b>Discussion Question (In-Class):</b> Why is the reporting of data so critical in the healthcare environment? [Prep: .5 hour]</li> <li>• <b>Discussion Question:</b> What is the Master Patient Index and how is it helpful? [Prep: .5 hour]</li> </ul>
<b>Readings</b>	Davis and LaCour: Chapters 8, 9, 10 and 11 [Prep: 1.5 hours]

**Commented [k44]: Standards:** Incorporate HIM brand standards including the use of terminology, visuals and known writing standards. Make regular updates to the standards in response to results brought up on the summative report.

**Commented [k45]: Change:** Students are required to post a discussion in both threads this week only. This dynamic interaction keeps students engaged in the classroom environment throughout the week. It also changes the routine and separates the responsible students from the ones who need some attention prior to the close of the module.

**Commented [k46]: Change:** Add additional chapter to finish unit III in the textbook. No lab assignments students can prepare for the final assignment and maintain engagement using a discussion board posting. Students will be required to post to both discussions for module five.

<b>Week 6: Regulatory Compliance, Quality and Uses of Confidentiality -- 4 hours</b>	
<b>Presentation</b>	<p>Instructor Presentation</p> <p>Quality and Uses of Health Information</p> <ul style="list-style-type: none"> <li>• Quality Management Theory</li> <li>• Minimum standards for medical records</li> <li>• Benchmarking, Record Review</li> <li>• Policies, Regulations, and Litigation</li> <li>• Improving Patient Care</li> </ul> <p>Confidentiality and Compliance</p> <ul style="list-style-type: none"> <li>• Confidentiality</li> <li>• Health Insurance Portability and Accountability Act</li> <li>• Access</li> </ul>

**Commented [k47]: Standards:** Incorporate HIM brand standards including the use of terminology, visuals and known writing standards. Make regular updates to the standards in response to results brought up on the summative report.

	<ul style="list-style-type: none"> <li>• Consent</li> <li>• Release of Information</li> <li>• Preparing a Record for Release</li> <li>• Internal Requests for Information</li> <li>• Sensitive Records</li> <li>• Federal, Corporate, and Facility Compliance</li> </ul> <ul style="list-style-type: none"> <li>• <b>Discussion Questions:</b> What are the factors which influence the quality of the health record? What impact can the health record administrator have in improving the quality? [Prep: .5 hour]</li> <li>• <b>Discussion Question (In-Class):</b> What is the difference between privacy and confidentiality? [Prep: .5 hour]</li> </ul>
<b>Readings</b>	1. Davis and LaCour: Chapters 12, 13, and 14 [Prep: 1.5 hours]
<b>Assignments</b>	Final interactive lab: student enter patient demographic, use appropriate code sets to create an encounter using the EHR. Reimburse the physician and run an aging analysis report. [Prep: 3.0 hours]

**Commented [k48]:** Change: Add a summative evaluation discussion question such as, what was the most memorable function of HIM? What was the least desirable? Why?

**Commented [k49]:** Change: Remove one discussion question to allow for ample time to complete all assignments. Final is due this week. Students like to manage their time and should be given opportunities to manage a busy work schedule with advance notice (Knowles, 2015).

**Commented [k50]:** Change: Final assignment is a collaboration of all activities the learner was exposed to throughout the course term. The success of the activities identifies learner behavior has changed as a result of the instruction. These skills must be transferable to the workplace and experiential in approach to offer useful opportunities to learn and change behaviors.

### Course Evaluation Assessment

The following evaluation process will be used by the instructor/educator to benchmark levels 1- reaction, 2- learning, and 3- behavior (Kirkpatrick, 2006, p. 278). SCHOOL will use the same evaluation methods to assess, analyze and report training evaluations for course instructors/educators following this process:

1. Reaction: student enjoyment and learning logistics (prerequisites, facilities and equipment)
2. Learning: content (understood the objectives, the objectives were met); design (method of delivery, materials, length of class time, organization); instruction (satisfaction with instructor)
3. Behavior: instruction (satisfaction with instructor); perceived impact (knowledge and skills increased; applicability to current job; applicability for preparing participant for other jobs in the company; training helped toward other jobs in the company)

### Conclusion

In summary, the changes, standards, and baselines provide suggestions to redesign and improve the current Health Information Management (HIM) course at SCHOOL. The redesign is necessary to equip student learners with the knowledge, skills, and attitudes they need to be successful in the dynamic HIM work environment. Kirkpatrick (2006) identified four levels of sequence to evaluate programs: Reaction, Learning, Behavior, and Results. "Each level is important and has an impact on the next level" (Kirkpatrick, 2006, p. 21). Additionally, it is important to incorporate an agile toolkit to ensure iteration becomes part of SCHOOL's methodology to deliver collaborative cross-course content. However, the redesign must be reviewed alongside the pre-requisite and post-requisite courses for maximum effectiveness. It is suggested the course textbook is replaced with the newest interactive version of **Foundations of Health Information Management by Davis and LaCour, 2017**.

<b>Module 1 Week 1-2: Health Care Delivery System; Collecting Health Care Data</b>
<b>Objectives:</b>
1. Define the U.S. health care environment in terms of delivery sites, professional roles, and legal and regulatory requirements.
2. List the individual data elements that are collected and apply how the data is captured in computer-based environments.
<b>Lesson Focus:</b>
This unit provides a framework for understanding the health care environment. This understanding will inform students' implementation of their role in health care.
<b>Readings</b>
Davis and LaCour: Chapters 1, 2, and 3

<b>Module 2 Week 3-4: Electronic Health Records; Acute Care Records</b>
<b>Objectives:</b>
1. List and define the characteristics, functions, cost, and regulations related to an Electronic Health Record.
2. Analyze a health record for completeness.
3. Introduce and define the management process for a health information record including clinical data and ensuring data quality.
<b>Lesson Focus:</b>
The unit provides an overview of content of a health record and introduces students to health information management processes.
<b>Readings:</b>
Davis and LaCour: Chapters 4 and 5

<b>Module 3 Week 5-6: Health Information Management Processes; Code Sets</b>
<b>Objectives:</b>
1. List and explain the elements of data quality and controls
2. List and explain the major functions of a health information management department.
3. Apply principles of coding in a selected application case.
<b>Lesson Focus:</b>
The unit introduces students to coding processes, data quality and controls, and the major functions of a health information management department.
<b>Reading:</b>
Davis and LaCour: Chapters 6

<b>Module 4 Chapter 7-8: Reimbursement; HIM Issues in Other Care Settings</b>
<b>Objectives:</b>
1. Compare and contrast the data collected in acute care facilities with data collected in non-acute care facilities.
2. List and explain storage strategies for health records.
3. Analyze the relative effectiveness of various types of reimbursement and related risk in the U.S. Health-care system.
<b>Lesson Focus:</b>
The unit provides beginning strategies to protect, analyze, and present aggregate data extracted from health records and presents an overview of common health care settings.
<b>Readings:</b>
Davis and LaCour: Chapters 7

<b>Module 5 Week 9-10: Managing Health Records; Statistics</b>
<b>Objectives:</b>
1. Apply selected strategies to analyze and present aggregate data extracted from health records.
<b>Lesson Focus:</b>
The unit focuses on strategies to maintain and improve the quality of health records and emphasizes maintenance of confidentiality of the health record by complying with health record regulations.
<b>Readings:</b>
Davis and LaCour: Chapters 8, 9, and 10, 11

<b>Module 6 Week 11-12: Quality and Uses of Health Information; Confidentiality and Compliance</b>
<b>Objectives:</b>
1. List, explain, and integrate methods to maintain confidentiality through compliance with appropriate regulations.
2. Define and apply strategies to evaluate the quality of health records.
<b>Lesson Focus:</b>
This unit introduces the student to the Electronic Health Records and addresses management, training, and development from the perspective of a Health information Department.
<b>Readings:</b>
Davis and LaCour: Chapters 12, 13, and 14



### References

- Kirkpatrick, Donald, Kirkpatrick, James. (2006). Evaluating Training Programs. [VitalSource]. Retrieved from <https://bookshelf.vitalsource.com/#/books/CSM19781576753484/>
- Knowles, S., M., III, H., F., E., Swanson, A., R. The Adult Learner: The definitive classic in adult education and human resource development. [VitalSource]. Retrieved from <https://bookshelf.vitalsource.com/#/books/9781317812173/>
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