

Legislative aspects of nursing informatics

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LEGISLATIVE ASPECTS OF NURSING INFORMATICS Intent of HITECH Act The legislation foresees and extensive expansion in the sharing of health information stored electronically, and aims to expand the span of privacy and security protections offered by HIPAA. To this effect, it increases the potential legal liability for breach of contract and lays ground for better enforcement of the same.

To begin with, Ciampa and Revels (2013) note that the HITECH Act provides that individuals (patients) receive prompt notification when unauthorized use or disclosure of unsecured PHI takes place. In addition, it provides that in the event that the breach involves more than 500 patients, then it is imperative that the Department of Health and Human Services (HHS) also receive similar notification.

Secondly, the act also establishes the necessity for health institutions through HER system to make it possible for individuals to access their PHI in an electronic format. In line with this, the act establishes that those who receive incentives should ensure that the system is of meaningful use, failure to which results in withdrawal of the said incentives.

The act has also specified that vendors providing HER system directly qualify as business associates. To this end, the act intends to make it possible for more vendor/provider dialogue regarding matter of mutual interest, so that service provision becomes more effective.

These reforms have potential impact in the practice of psychiatry. For instance, the act provides quality measure incentives through the Maintenance of Certification Program (MOCP), (American Academy of Child and Adolescent Psychiatry, 2013). In addition to participation in MOCP for up

to one year, the law requires that physicians must submit data on quality measures through the MOCP under PQRI.

Topical Issues Surrounding Personal Health Information

McGinigle and Mastrian (2013) observe three topical issues that are encountered in health informatics namely leadership challenges, limited functionality in clinical practice and education in terms of necessary competencies. Regarding leadership challenges, McGinigle and Mastrian note that there exists a knowledge gap within leadership in the sector, and more specific the nursing industry. IN the nursing context, the two advance that there is need for nurse leaders to acquire current skill set and knowledge that will allow them to understand and adopt modern information technologies imperative to delivery of quality care. It is therefore important for nurses and other medical practitioners alike to gain the necessary knowledge.

On limited functionality in clinical practice, McGinigle and Mastrian observe that despite the recent implementation of comprehensive CIS throughout the country, many organizations with limited online functionality to nurses still exist. Statistics show that a vast majority of providers are still at the acquisition and implementation stage with regards to modern healthcare informatics. In addition to this, statistics also show that the current mean age of health practitioners is relatively high, a situation that implies difficulty in adopting computer usage among many of them. However, while this might be a challenge at present, it offers a potent opportunity for health practitioners to get involved in the developmental procedure of IT solutions in their respective fields of practice.

Finally, McGinige and Mastrian note that informatics competency among health workers is still at a record low compared to other sectors. Specifically, the two observe that nursing education programs across the country are yet to include comprehensive concepts of informatics within their core curricula. Nevertheless, there is hope that future graduates will be more knowledgeable with computers, and might receive significant reinforcement from embedding the information technology concepts in the curriculum.

References

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