PLAN 2028:

Beyond the Data

Canadian College of Health Information Management &
Canadian Health Information Management Association

2023 – 2028 Strategic Plan

Land acknowledgement

As the Canadian College of Health Information Management and the Canadian Health Information Management Association work toward better health outcomes for all people in Canada, we acknowledge that we live and work on the traditional territories of First Nations, Inuit, and Métis Peoples.

Beyond the data

The value of our profession is found in the intersection between clinical knowledge, professional leadership, and service that is empathetic, compassionate, and respectful.

The substance of our work provides us the opportunity and responsibility to increase health equity, serve marginalized populations, and support all people living in this country, including First Nations, Inuit, and Métis peoples, to achieve their desired health outcomes.

Because of certified health information professionals, relevant and complete data is leveraged to improve clinical care, public and population health interventions, and research and analysis.

The future of health care will require certified professionals who understand data. Relevant knowledge on the handling, protection, and implementation of health data will become increasingly necessary.

As we look to the future with Plan 2028, we continue to see beyond the data. This five-year plan is grounded in our dedication to bring visibility and recognition to our professionals, empowering them to make positive impacts to the quality of care and quality of life for all people across this country.

We are motivated by a clear vision of the future, a relevant mission to uphold, strong values to live by, and strategic priorities to fulfill.

Explore the components of Plan 2028 and the data supporting it on page 11.

Who we are

THE COLLEGE

The Canadian College of Health Information Management (College) is a national, not-for-profit corporation that sets the accreditation standards for educational institutions and certification standards for health information professionals in Canada.

The College, incorporated in 1972, protects the public interest by governing and regulating the professional practice of more than 4,600 certified health information member registrants. In enhancing its status as a regulatory body, the College advances the professionalization of the health information industry and acknowledgment of its professionals as a key driver of policy, funding, and the care that Canadians receive.

THE ASSOCIATION

The Canadian Health Information Management Association (CHIMA) is the national professional association for the health information profession in Canada.

CHIMA represents more than 5,800 health information members from coast to coast to coast. It advocates for the health information profession, monitors industry trends, creates networking opportunities, and facilitates continuing education for our members. CHIMA also connects members with employment opportunities at organizations within health care and beyond.

20-year vision

We envision an equitable country where quality health information empowers people to make better decisions.

Learn how we developed our vision and see the supporting data on page 18.

Our mission is
to elevate health
information
professionals to
be more recognized
and impactful.

See how we crafted our 5-year
mission and explore the
supporting data on page 20.

2028 objective

By 2028, we will be recognized as a trusted leader of the health information profession.

See how we determined our 2028 objective and explore the supporting data on page 22.

Values

The values of the College and CHIMA underpin the health information profession in Canada. These guide our actions and strengthen our relationships.

See how our values compare to industry standards on page 23.

Setting the bar

We strive toward excellence in everything we do.

Challenging the status quo

We lead with curiosity and think critically to identify better ways of achieving outcomes.

Putting people first

We create a service-oriented environment in support of professionals who are at the heart of handling peoples' health information.

Earning trust

We believe knowledge and reliability are essential to the profession we represent.

Leading by example

We hold ourselves accountable to act as stewards and inspire collaboration in an evolving profession.

5-year priorities

Four priorities have been designed to help us act on our mission and move us closer to our vision of an equitable country where quality health information empowers people to make better decisions.

See the supporting research on page 26.

01 Awareness and advocacy

We are focused on elevating the public knowledge, reputation, and perceived value of the profession.

02 Life-long learning

We are dedicated to advancing standards and professional practice for the ongoing pursuit of knowledge for the profession.

03 Equity

We aim to reduce disparities and promote equality.

04 Value

We are working to grow the profession toward a sustainable future.

Strategic goals

Four long-term goals have been designed that are aligned with our mission and vision. They help the direction and overall destination of the College and CHIMA.

See the research behind our strategic goals on page 29.

01 Secure the role of the certified health information professional for the future

Measure: Our certified health information professionals are recognized and valued by employers

02 Contribute to the conversations around health information in Canada

Measure: Our participation in health information conversations is visible or consequential

03 Be the trusted source of health information education standards

Measure: Our academic partner ecosystem is relevant and expanding

04 Connect the communities of health information professionals in Canada

Measure: Our members have influence in a diverse set of communities and stakeholder groups

Behind the plan

Explore the methodology and supporting data of Plan 2028

Methodology

Introduction

Beyond the data, health information is used to tell Canadians' most sensitive and powerful stories—their health stories

In service to all of the people behind these stories, we undertook a meaningful exploration filled with diverse voices, data-driven analysis, and human-centred motivations. Through this journey, we discovered, articulated, and planned for the future of the health information profession, drawing a road map which supports our professionals, engages our partners, and strengthens Canadians from coast-to-coast-to-coast.

The College and CHIMA engaged RSM and Aubs & Mugg to facilitate the creation of a 2023-2028 strategic plan. The purpose of this plan is to help position the health information profession in a place for growth, success, and collaboration, identify the roles of the College and CHIMA within this positioning, and articulate the future state of the health information profession.

Structure and approach

The table below provides a high-level overview of the project structure and approach for each phase of the engagement.

	Phase 1		Phase 2	
Our structure	Design the strategic planning methodology in collaboration with the College and CHIMA		• Engage with stakeholders, perform analysis, and present insights • Develop recommendations to inform three to four strategic directions and measures of the College and CHIMA's 2023–2028 Strategic Plan • Develop recommendations to bridge the existing strategic plan	
Our approach	1A	1B	2A	2B
	Design the strategic planning methodology in collaboration with the College and CHIMA	Strategic planning methodology framework design	Discovery and analysis	Recommendations

Framework for Phase 1

Our board of directors and leadership team, in collaboration with RSM and Aubs & Mugg, developed a unique project framework for our strategic planning initiatives. For the purposes of this project's framework, we will focus on the following areas:
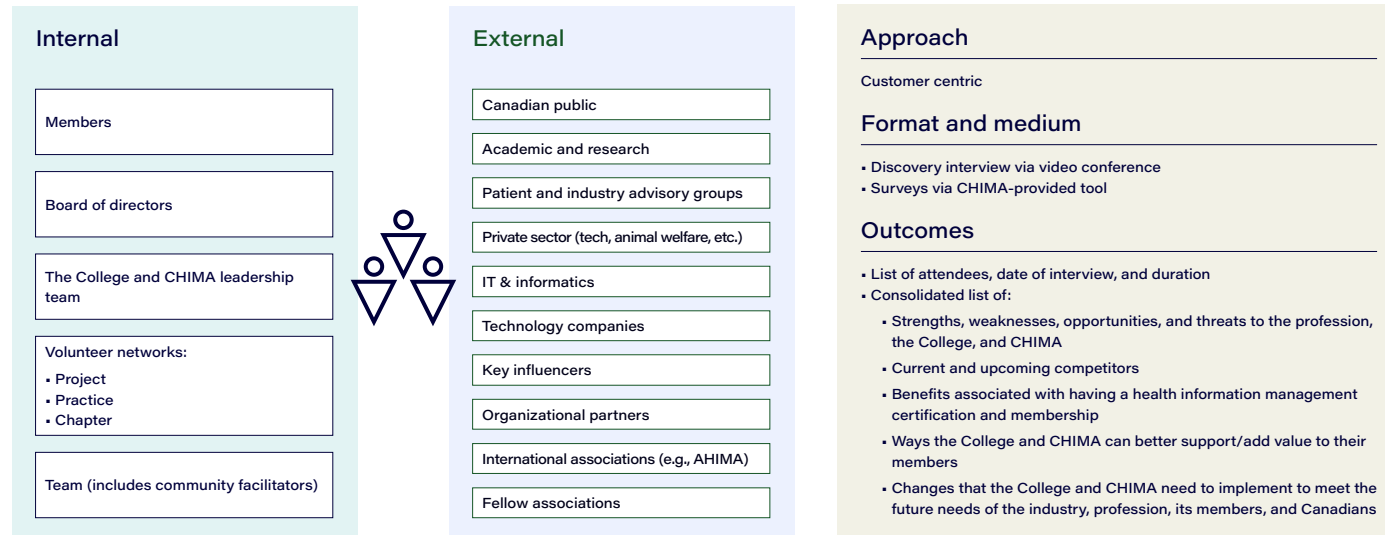
Discovery: Structure and approach

Analysis

Outcomes and success factors

Discovery: Structure and approach

At the outset of the discovery phase, a preliminary list of participant categories were identified. This collection was continually refined throughout the project.

Internal	External	Approach
Members	Canadian public	Customer centric
Board of directors	Academic and research	**Format and medium**
The College and CHIMA leadership team	Patient and industry advisory groups	• Discovery interview via video conference • Surveys via CHIMA-provided tool
Volunteer networks: • Project • Practice • Chapter	Private sector (tech, animal welfare, etc.)	**Outcomes**
	IT & informatics	• List of attendees, date of interview, and duration
	Technology companies	• Consolidated list of:
	Key influencers	• Strengths, weaknesses, opportunities, and threats to the profession, the College, and CHIMA
Team (includes community facilitators)	Organizational partners	• Current and upcoming competitors
	International associations (e.g., AHIMA)	• Benefits associated with having a health information management certification and membership
	Fellow associations	• Ways the College and CHIMA can better support/add value to their members
		• Changes that the College and CHIMA need to implement to meet the future needs of the industry, profession, its members, and Canadians

Analysis

The framework report recommendations were designed using the inputs of the following methods of analysis:

Discovery findings and data

• Provide primary insights into the organization, and health information industry and profession

Industry trend analysis

• Develop qualitative and quantitative reports on the health information industry and profession
• Gain insights on the performance of the College and CHIMA relative to industry and profession standards

Benchmarking analysis

• Measure the College and CHIMA's performance against other organizations considered to be best in the industry and profession
• Identify internal, external, performance and practice gaps and opportunities

Industry comparison

Gain insights into three key elements:
• Underlying forces at work in the health information industry and profession
• Overall attractiveness of the health information industry and profession
• Critical factors that determine the College and CHIMA's success within the health information industry and profession

Outcomes and success factors

The College and CHIMA measured the impact and success of the engagement in the following ways:

Stakeholder/SMEs engagement

Engage with key internal and external stakeholders/SMEs, perform relevant analysis and present insights.

Recommendations

RSM will present a comprehensive list of strategic direction and measure recommendations to the College and CHIMA's leadership team and the Board and collaborate to prioritize three to four key recommendations.

Bridge current and new strategic plan

RSM will provide actionable next steps, including relevant insights, estimated budget, and impact assessment/change management considerations to bridge between the current and new strategic plan and directions of the College and CHIMA.

Research and engagement collaboration

Plan 2028 was developed using primary and secondary research.

Primary research involved engagement with the direct and peripheral health information community: CHIMA members, industry partners, academic partners, the board of directors, the general public, and other contributors with an association to the profession. The primary research provided a broad overview of the profession from numerous perspectives. Secondary research focused on industry trends, benchmarking, and industry comparisons specific to the components of the strategic plan.

Anatomy of Plan 2028

Component definitions

The components of Plan 2028 were analyzed in relation to industry benchmarks and best practices for successful and informed strategic plans.

Vision: Gives the organization direction for next twenty years, focusing on goals and aspirations.

Mission: Underlying motivation and purpose for being in business. The mission is aimed to create focus.

Objective: A statement that summarizes the purpose of the strategic plan.

Values: Describes organizational culture and beliefs, and guides how to do business internally and externally.

Priorities: Referred to as 'levers' to strategic goals—what the organization will focus on thematically to achieve the strategic goals and mission of the organization.

Strategic goals: Long term goals that are aligned with the mission and vision and help define the direction and overall destination of your company.

Strategic plan: A document to showcase an organization's vision for the future and identify its goals and objectives.

Operating plan: A document that is produced as a subset of a strategic plan. It describes short-term ways of achieving milestones and explains how, or what portion of, a strategic plan will be put into operation during a given fiscal year.

Strategic plan and operating plan

The outcomes of Plan 2028's development have been appropriately categorized within it and the FY23 Operating Plan.

Strategic plan

Mission
Vision
Objective
Values
Priorities
Strategic goals

Operating plan

Operational goals
Objectives
Outcomes

Summary: Industry trend analysis

Findings gathered from this industry trend analysis contribute to identifying key insights into the current and future state of the health information profession. The following information presented is a summary of key findings. Full details can be found in the Secondary Analysis PowerPoint.

The industry trend analysis has been created using insights gathered from the following notable sources:

• World Health Organization

• ABC Life Literacy Canada

• Government of Canada

• Statistics Canada

• Public Health Ontario

• Canadian Public Health Association

• Organization for Economic Co-operation and Development

• Canadian Institute for Health Information, Canada Health Infoway, Physician Sense, Becker's Hospital Review

Technology & expanding applications

• COVID-19 has caused health care organizations around the world to rapidly adopt digital health care solutions (i.e., remote consultations, monitoring and personal health care records). A key concern is maintaining the integrity of health care data systems while scaling and sustaining these digital interactions.

• Expanding applications of data use as a result of emerging technologies (i.e., AI, Telehealth, Smart technology/Digital Health) raise concerns about adequate educational resources to bridge knowledge gaps.

• Health information is becoming increasingly fragmented and disparities are seen between quality vs. quantity and timeliness of health data.

Social issues

• Social trends emphasize a growing need for advocacy (data privacy and anonymity) as there is disruption in health care stemmed by the pandemic.

• Common recurring social trends focus on diversity, equity, and human rights, resulting in a push for health data policies and accountable alliances that illustrate strong stance for transparency, inclusiveness and patient understandability.

• Source of care and health visit data clearly illustrate the need for better health care access, and health systems have the insight to improve care across underserved race and ethnicity categories.

Economic volatility stemming health policy changes

• COVID-19 exposed vulnerability across the globe on critical issues, including safety, equipment, data availability and management, and infrastructure.

• Increasing shifts from growth-oriented to survival-oriented outlooks result in increasing pressures for aggressive health care policy changes.

• Consumerism is one of the biggest disruptors in health care as there is a growing demand for value-based care and quality care for less; a consumer-driven health care landscape puts pressure on the health system to develop programs to sustain such infrastructure.

Summary: Benchmarking and industry comparison

Findings gathered from this exercise contributed to the understanding of the structure and leading practices of strategic plans in the industry. The following information is a summary of key findings. Full details can be found in the Secondary Analysis PowerPoint.

Notable sources

- American Health Infomation Management Association (AHIMA), European Health Management Association (EHMA), Health Information Management Association of Australia (HIMAA), International Federation of Health Information Management Associations (IFHIMA)

- Royal College of Physicians and Surgeons of Canada, Canadian College of Health Leaders, College of Medical Laboratory Technologists of Ontario, and the Medical Council of Canada

- Digital Health Canada, Canada Lung Association, Canadian Psychiatric Association (CPA), Accreditation Council for Continuing Medical Education (ACCME)

- Canadian Association of Radiologists (CAR), Canadian Association of Physicists (CAP), Canadian Association of Fire Chiefs (CAFC), and Chartered Professional Accountants of Ontario (CPA)

Summary of impactful benchmarks

Directly comparable associations

- 'Support' and 'Excellence' had the highest overall percentages, appearing in 19% of the missions of all comparable associations.
- 25% of comparable associations included 'Quality' in their mission.
- 'Leadership' was present in the vision across 4 or 5 (80%) of all comparable associations.
- 50% of comparable associations included 'Leadership' in their values.
- 'Influence' appears in the strategic plans of all comparable associations.
- 50% of comparable associations included 'Advocate' in their priorities and 25% in their strategic goals.

Comparable health-related associations and colleges

- 75% of comparable organizations included a defined target audience—who they serve, with 56% of comparable organizations overall who included a defined target audience in their mission statement.
- 25% of comparable organizations included 'Leadership' in their values.
- 75% of comparable organizations included 'Advocate' and 25% include 'Education' in their priorities.
- 25% of comparable organizations included 'Influence' in their strategic goals.

Comparable non-health related associations and colleges

- 71% of total comparable organizations take a customer-oriented approach and include 'who they serve.'
- 33% of comparable organizations included 'excellence' in their mission and 25% in their vision.
- 25% of comparable organizations included 'diversity' or 'education' in their values.
- 25% of comparable organizations included 'engagement' in their priorities.
- 25% of comparable organizations included 'advocate' in their strategic goals.

SWOT analysis

A high-level summary of the SWOT analysis conducted based on industry trends, comparisons, and benchmarking to relevant organizations.

	Strengths	Weaknesses	Opportunities	Threats
Summary	• Canada's only organization that provides the industry with **certified** health information professionals (5500+ members to date) • Synonymous with **excellence in health** information and education • Strong external **relationships** and connections • Comprised of a **progressive team** • Strong **product- and service-led** culture • **Member**-focused	• Need to clearly **define** health information, health information management, and the health information profession • Increasing **need for resources** to both deepen and scale the impact of the profession • Organization is **large in scope** and **ecosystem is expanding**	• Emerging **technologies and digital health** — AI, block chain, AR/VR, telehealth, wearable technology [1][6] • Movement toward **human-centric health and wellbeing** (i.e., knowledge-driven, human-empowered, tech-enabled) [2] • **Standardization of health care education** and need for newer educational solutions (i.e., e-Learning) [3][4]	• Emerging technologies and digital health increase the need to **bridge knowledge gaps** across populations [1] • Technology innovation and advancement stems threats related to **accessibility, security, privacy, information misuse** [1] • Major **divide** between consumer health data and health care industry data (technology vs. data quality) [5][6] • Increased **health care economic volatility and policy changes** — shifts from growth-oriented to survival-oriented outlooks (disruption by Amazon/Google etc.) [5][6]
Strategic plan application	We will leverage CHIMA and the College's strengths and reflect them in core values and **strategic priorities**	Understanding CHIMA's weaknesses will contribute to **strategic goals** that will aim toward overcoming these weaknesses	Understanding emerging tech, social trends and the future of health care education will contribute to: • **Vision:** what CHIMA wants to solve for the greater good/advancement of the profession • **Mission:** focus of the organization • **Priorities/Strategic goals:** insight into where the organization will be/should go, setting the stage for goals	Understanding the threats to CHIMA, the College and profession will contribute to **strategic goals** that will aim toward mitigating these threats

(1) Tsymbal, O. (2021). Technology trends in healthcare in 2021: The rise of AI. MobiDev. Retrieved from https://mobidev.biz/blog/technology-trends-healthcare-digital-transformation
(2) NTT. (2021). Reimagining and redesigning the future of health and wellbeing. Retrieved from https://www.global.ntt/healthandwellbeing/article-0.html
(3) Caduceus International Publishing. (2021). 5 trends influencing health education today. Retrieved from https://www.cipcourses.com/health-cience-education-trends-today/
(4) Statistics Canada. (2020). Adults with a health education but not working in health occupations. Retrieved from https://www150.statcan.gc.ca/n1/pub/45-28-0001/2020001/article/00004-eng.htm
(5) Allen, S. (2021). 2021 Global health care outlook. *Deloitte*. Retrieved from https://www2.deloitte.com/global/en/pages/life-sciences-and-healthcare/articles/global-health-care-sector-outlook.html
(6) PhysicianSense (2021). The biggest threats to the healthcare business in the next decade. Retrieved from https://www.mdlinx.com/physiciansense/the-biggest-threats-to-the-healthcare-business-in-the-next-decade/

Supporting data:
20-year vision

What problem are we solving for the greater good?
Who and what are we inspiring to change?

An equitable country where quality health information empowers people to make better decisions.

Analysis of key words used in strategic plan visions across all comparable organizations.
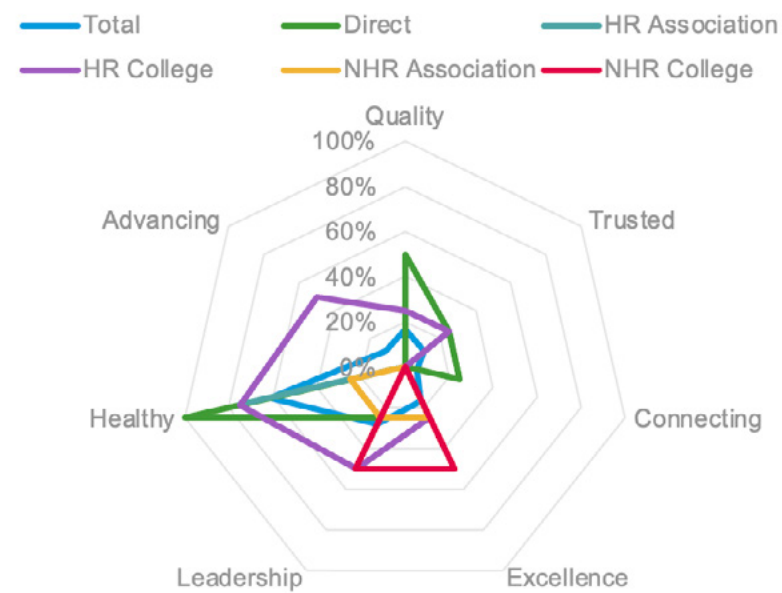
Key research findings

Primary

• 64.5% of surveyed public want their health information to inform scientific research and development.

• 48.5% of surveyed public identified "it impacts the quality of care I receive" as the top reason health information is important to them (note: 27.3% identified "it helps me understand my health" as their top reason).

• 94% of the surveyed public would allow their health information to be used to help family, friends, and Canadians. 6% stated "no". Of those who said yes, 57.6% selected "yes, if I am anonymous" whereas, 36.4% said, "absolutely."

• 100% of business-to-business (B2B) or business-to-consumer (B2C) industry interviews referenced the role of health information is to inform their product development or empower their customers/users.

• The concern of non-certified professionals taking jobs meant for certified health information professionals was voiced throughout the survey and conversations with members—48% of those members interviewed spoke to the threat to quality this creates.

Secondary

Keyword: Quality

• Technological health care advancements have contributed to an increasingly fragmented health data ecosystem, raising concerns about the accuracy, validity, and reliability of health information and impacts on quality care.

Keyword: People

• With a surge in telehealth and digital health (i.e., smart devices, wearable technology, etc.), this has shifted the priorities of the health information profession from systems to people.

Supporting data: 20-year vision

Industry trends and
Benchmarking and industry comparison

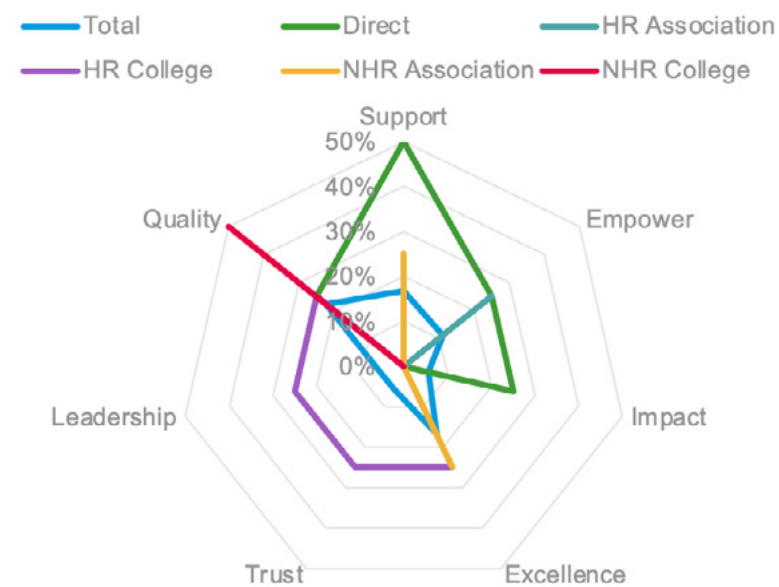| 1. Industry trends	2. Benchmarking and industry comparison				
Secondary research	Direct associations	Health-related		Non-health related	
		Associations and accreditations	Professional colleges	Associations and accreditations	Professional colleges
• Opportunity: Industry trends show a significant push toward data accessibility and eventually a fully integrated health data ecosystem where all Canadians can have access • Pan-Canada Strategy reflects a vision of a fully integrated and optimized health data ecosystem (ownership and quality) • Social trends reflect a need for privacy and security over data, with skepticism regarding reliability	• 100% of comparable associations include healthy • Healthy had the highest percentage overall, appearing in 65% of all comparable organizations (4 of 5 groups) • 50% of comparable associations include quality • 25% of comparable associations include trusted • 25% of comparable associations include connecting • 25% of comparable associations include leadership • Leadership is present across 4 of 5 (80%) comparable groups	• 75% of comparable associations use the word healthy	• 50% of comparable colleges include advancing • 75% of comparable colleges include healthy • 25% of comparable colleges include quality • 25% of comparable colleges include trusted • 25% of comparable associations include excellence • 50% of comparable associations include leadership	• 25% of comparable organizations include excellence • 25% of comparable organizations include leadership • 25% of comparable organizations include healthy	• 50% of comparable organizations include excellence • 50% of comparable colleges include leadership

Summary of high-level key findings and gaps identified in the current state.

Supporting data:
5-year mission

Whom do we serve? How do we serve them?

Elevate health information professionals to be more recognized and impactful.

Analysis of key words used in strategic plan mission across all comparable organizations.

Supporting data: 5-year mission

Industry trends and
Benchmarking and industry comparison

1. Industry trends	2. Benchmarking and industry comparison				
Secondary research	Direct associations	Health-related		Non-health related	
		Associations and accreditations	Professional colleges	Associations and accreditations	Professional colleges
• 71% of total comparable organizations take a customer-oriented approach and include 'who they serve' • Gap: ~60% of most inspiring mission statements start with an action, example: "To create..", "To inspire...", "To become...", "To be..." and sets a stage to direct actions and activities[1] • Opportunity of focus—information literacy: Highest level of health literacy is empowerment—strengthening active citizenship, understanding rights, acting as informed consumers and advocating • Gap: Low levels of health literacy means that a person is unable to manage their own health effectively. Current industry trend show need for health education • Opportunity/Gap: HIM practitioners are defined as group of individuals who classify and code, prepare medical records and supervise HIM technicians and related workers (potential opportunity to broaden). Industry trends show a push to broaden scope • Opportunity: Large movement toward health and technology • Google Health: mission to organize the world's information and make it universally accessible/useful (Google Cloud Healthcare Data Engine) • Apple and wearable technology, and interpolation of health data	• 50% of comparable associations include support • 25% of comparable associations include empower • 25% of comparable associations include impact • 25% of comparable associations include quality • Support and Excellence have the highest overall percentages, appearing in 19% of all comparable organizations	• 25% of comparable organizations include empower • 25% of comparable organizations include excellence • 25% of comparable organizations include quality • 19% of comparable health- and non-health-related organizations and health-related colleges include excellence • 75% of comparable organizations include a defined target audience—who they serve, with 56% of comparable organizations overall who included a defined target audience in their mission statement	• 25% of comparable colleges include excellence • 25% of comparable colleges include trust • 25% of comparable colleges include leadership • 25% of comparable colleges include quality • 50% of comparable organizations include a defined target audience—who they serve	• 25% of comparable colleges include support • 33% of comparable colleges include excellence • 25% of comparable organizations include a defined target audience—who they serve	• 50% of comparable colleges include quality • 100% of comparable organizations include a defined target audience—who they serve

Summary of high-level key findings and gaps identified in the current state.

(1) Wright, T. (2021). The 101 Most Inspiring Vision Statement Examples We've Ever Seen. Retrieved from Cascade: https://www.cascade.app/blog/examples-good-vision-statements

Supporting data: 2028 objective

What is the strategic plan trying to accomplish?
What is the purpose of the strategic plan?

By 2028, we will be recognized as a trusted leader of the health information profession.

"

Being recognized as relevant to the industry and valued for our knowledge is critical for our profession's success."

— Plan 2028 research participant

Key research findings

Primary

Recognized

- "Sentiment toward the profession" and "awareness" were identified as two of the primary barriers to the growth of the health information profession.
- While the public has a desire for certified professionals, they have little awareness of any certifications.

Trusted leader

- Members and internal stakeholders identified the need for CHIMA to be "at the table" for meaningful and consequential discussions involving health information.
- The identification of "sentiment toward the profession," "awareness" and "advocacy" all require leadership.

Secondary

Recognized

- Rapid changes in technology stemming the wide-spread production, management, and usage of health data has resulted in an increased need for organizations to influence positive, impactful change and be a dependable and recognized truthful leader for people of the profession.

Trusted leader

- Significant shifts are being made from transactional leadership to transformational leadership. Ethics, diversity, and inclusion are clearly made visible and at the centre for organizations both from an internal and external positioning.

Supporting data: Values

What do we believe in as an organization?
*How do we want to conduct business internally a*nd externally?

Setting the bar
We strive toward excellence in everything we do.

Challenging the status quo
We lead with curiosity and think critically to identify better ways of achieving outcomes.

Putting people first
We create a service-oriented environment in support of professionals who are at the heart of handling peoples' health information.
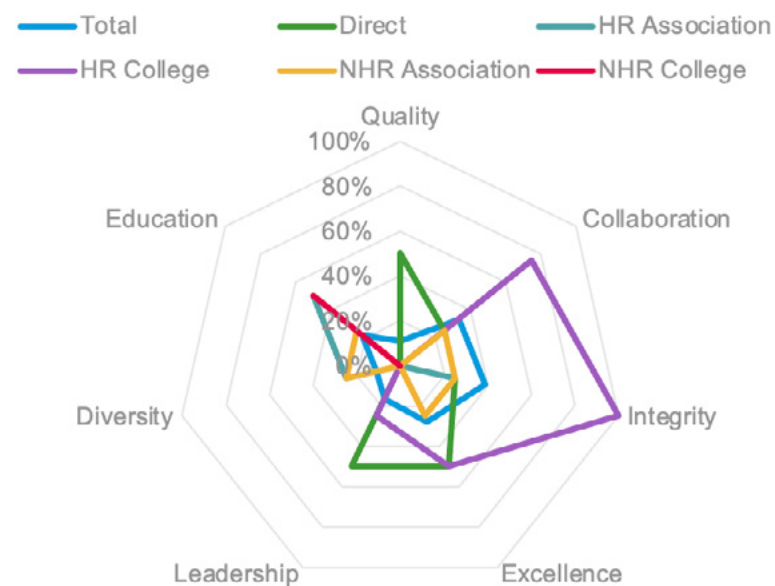
Earning trust
We believe knowledge and reliability are essential to the profession we represent.

Leading by example
We hold ourselves accountable to act as stewards and inspire collaboration in an evolving profession.

Analysis of key words used in strategic plan values across all comparable organizations.

Key research findings

Primary

Keyword: Quality

• 75.8% of surveyed public identified "ensuring my health information is recorded accurately" as an important aspect of health information to them.

Keyword: Innovation

• 32 % of members were concerned about technological advances and identified this as one of the top three barriers to the growth of the health information profession.

• 83.4% of members believe the importance of health information will increase in the future (9.5% believe it will stay the same, 4.5% believe its importance will decrease, 2.5% have no opinion).

Keyword: People-centric

• Surveyed public connect their health information back to themselves and their communities. When asked if there's a connection between personal health and health information, 87.9% stated "yes"; when asked if there's a connection between the community's health and your health information, 45.5% stated "yes" (27.3% stated "unsure").

• When CHIMA members were asked to define "health information," "patient" was the 7th most weighted word used. "Individual" and "personal" tied for the 11th most weighted word (out of 722 weight-worthy words).

Keyword: Trust

• 81.8% of surveyed public identified "ensuring my personal information is kept private" as an important aspect of health information to them.

• 45.5% of surveyed public stated they have had a conversation about their health data in the past year. Of those, 93.3% identified the topic of that conversation as COVID-19 and 86.7% identified the topic as vaccines. Anecdote: follow-up engagements identified those conversations to be on the top of their trust in the vaccine.

• When asked "in general, do you trust how your health information is handled?" 84.8% of surveyed public stated "yes".

Keyword: Leadership

• 46.7 % of members believe the current government policies around health information are inadequate (38.2% feel they are adequate, and 15.1% are unsure).

• 83.4% of members believe the importance of health information will increase in the future (9.5% believe it will stay the same, 4.5% believe its importance will decrease, 2.5% have no opinion).

Secondary

Keyword: Quality

- There is an increase in demand for data accuracy by social media and media outlets, which points to an elevated need for organizations to be extra diligent in the accuracy of data.

- There is an increased public awareness of the risks of data privacy. There is an elevated need for data to be protected, which refers to quality.

Keyword: Innovation

- Information technology is one of the fastest growing industries in Canada, showing the need for innovation to be a core value for a sustainable future.

- The pandemic exposed vulnerabilities across the globe on critical issues at an alarming rate. This exposed the need to be dynamic and adaptive critical thinkers.

Keyword: People-centric

- There has been a rapid increase of personal data collected through innovations like wearables and IoT, highlighting the need to advocate and represent the people behind the data.

- There is a trend toward a data-driven mindset in the decision-making process that is explicitly recognized both by the public and within organizations. People aim to remain at the forefront of data as they continue to be an integral part of every stage of the information lifecycle.

Keyword: Trust

- Technological advancements have increased accessibility of health information and as a result, it is difficult for the public to know which sources are reliable.

- With an increased volume and quantity of data accessible by the public and organizations, there is a strong need to lead the effort in educating the public on quality, trusted information and alignment with action vs. quantity of information and misdirection.

Keyword: Leadership

- There is currently a lack of visible leadership within the profession in terms of advocacy and setting standards as shown in the gap between the Government of Canada's (GOC) understanding of the profession and what CHIMA defines it as.

- There is a significant shift from transactional leadership toward transformational leadership, where ethics, diversity, and inclusion are clearly made visible and are at the centre for organizations.

> The values and culture of this profession are going to change as the world comes to Canada. We need to look at information not through a Canadian lens, but a global lens."
>
> – Plan 2028 research participant

Supporting data: Values

Industry trends and
Benchmarking and industry comparison

1. Industry trends	2. Benchmarking and industry comparison				
Secondary research	Direct associations	Health-related		Non-health related	
		Associations and accreditations	Professional colleges	Associations and accreditations	Professional colleges

• Gaps: Streamlining and integrating health data (moving to the cloud) results in the following issues:
  • Lack of trust/accountability/reliability (privacy and security)
  • Culture of risk aversion
  • Antiquated data policy environment
  • Failure to spread and scale excellence
• Opportunity: Public, academics, activist groups, community, etc. are looking for organizations to act as leaders and bridge transparency and information gap. Movement toward a need for reliable and trusted data and data sources.
  • Opportunity: create awareness for the health information profession and value of certification across breadth of profession
• Gaps: Social trends are moving toward diversity, equity, human rights, culture, inclusion. These trends shifting from a 'nice to have' to a 'need to have'
	• 50% of direct comparable associations include quality
	• 25% of direct comparable associations include collaboration
	• 25% of comparable associations include integrity
	• 50% of comparable associations include excellence
	• 50% of comparable associations include leadership
	• Integrity has the highest overall percentages, appearing in 41% across all comparable organizations and 4 out 5 groups
		• 25% of comparable organizations include collaboration
		• 25% of comparable organizations include integrity
		• 25% of comparable organizations include diversity
		• 50% of comparable organizations include education
			• 75% of comparable colleges include collaboration
			• 100% of comparable colleges include integrity
			• 50% of comparable colleges include excellence
			• 25% of comparable colleges include leadership
				• 25% of comparable associations include collaboration
				• 25% of comparable associations include integrity
				• 25% of comparable associations include excellence
				• 25% of comparable associations include diversity
				• 25% of comparable associations include education
					• 50% of comparable colleges include education

Summary of high-level key findings and gaps identified in the current state.

Supporting data:
5-year priorities

What should the organization focus on thematically to achieve the strategic goals and mission of the organization? What do we need to take care of in order to accomplish our goals?

Awareness and advocacy
Elevate the public knowledge, reputation, and perceived value of the profession.

Life-long learning
Advance standards and professional practice for the ongoing pursuit of knowledge for the health information profession.
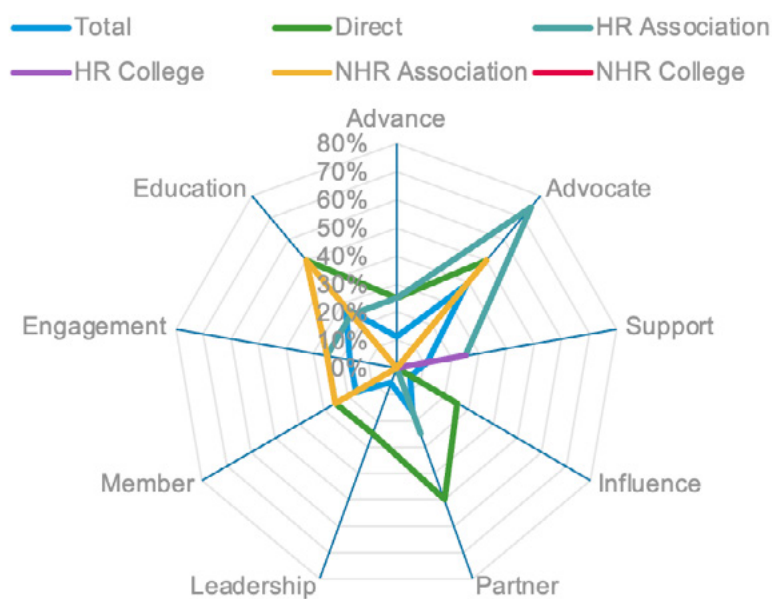
Equity
Aim to reduce disparities and promote equality.

Value
Grow the profession toward a sustainable future.

Analysis of key words used in strategic plan priorities across all comparable organizations.

Key research findings

Primary

Priority: Awareness and advocacy

- 75% of members identified "awareness" as one of the top three barriers to the growth of the health information profession (1st: 43%, 2nd: 18%, 3rd: 14%).

- 78.1% of members assume only 0-20% of the public are aware of their certification; 67.6% of members believe their employers (current or prospective) have less than a 60% chance of knowing or understanding the value of their certification.

- 82% of internal stakeholders identified "advocacy" as the primary purpose of CHIMA.

- 62% of members interviewed identified advocacy as a primary purpose of CHIMA (note: the definition of advocacy and/or intent of it varied with each participant).

- 71.9% of surveyed public are unaware of any health information certifications in Canada.

Priority: Life-long learning

- 32% of members identified technological advances as one of their top three barriers to growth of the health information profession.

- 74.5% identified "professional development" as one of the most important benefits of holding a health information certification. 60% identified "educational pathways and advancement."

Priority: Ethics

- Note: no members directly identified ethics as a necessary consideration within the health information profession.

- The majority of CHIMA's leadership team identified DE&I as a worthwhile consideration.

- The surveyed public addressed ethics-related themes such as privacy and anonymity (81.8% identified privacy as the top priority for their health information).

- When asked why certification in health information is important to them, 60% of surveyed public identified "I believe certified professionals will handle my information ethically."

Priority: Value

- In many interviews with members, "membership value" was important to them. Its inclusion was often spoken of as a reason for certain initiatives (e.g., an initiative should take place because it will demonstrate value for members).

- When asked "To what extent do you benefit from being a member of CHIMA?" on a scale from 1-10, the average rating is 6.5.

- When asked "Do you believe the value of health information certifications are well defined and communicated?" 53.5% of members answered "No."

Secondary

Priority: Awareness and advocacy

• The GOC has a very narrow scope of what it classifies as health information professions, and the information provided to the public on government websites needs to be aligned with the true definitions and prevalence within the job market. This gap highlights the need for awareness and advocacy.

• There isn't currently a standard measure of health or health information literacy in Canada, so this is difficult to measure. It highlights the need for health information literacy and awareness advocacy.

Priority: Life-long learning

• Technological advancements in health care is rapidly growing, and the pandemic has accelerated this growth, highlighting the need to stay on top of education and learning.

• There is a need for health information professionals to be supported at every stage of the health information lifecycle, so they are continuously well-informed and equipped with up-to-date information.

Priority: Ethics

• Organizational best practices in ethics, equity, diversity, and inclusion are moving away from a 'nice-to-have' to a 'need-to-have' culture.

• The increased accessibility to information by way of social media has highlighted key social issues and major disparities among populations and communities.

• It is now critical for organizations to act on ethical principles that are underpinned by respect, equity, diversity, and inclusion, in the pursuit to strengthen the quality and impact of the individuals that make up the profession and those affected (i.e., the public and broader community).

Priority: Value

• The Canadian job bank (managed by the GOC) identifies the future outlook for the health information management profession to be only 'fair.' This highlights the need to focus on value and sustainability for the profession.

"

Advocacy needs to go beyond the people of this profession. CHIMA needs to be an advocate for the data as well. Information needs to be trusted, and the people handling that information need to be trusted."

— Plan 2028 research participant
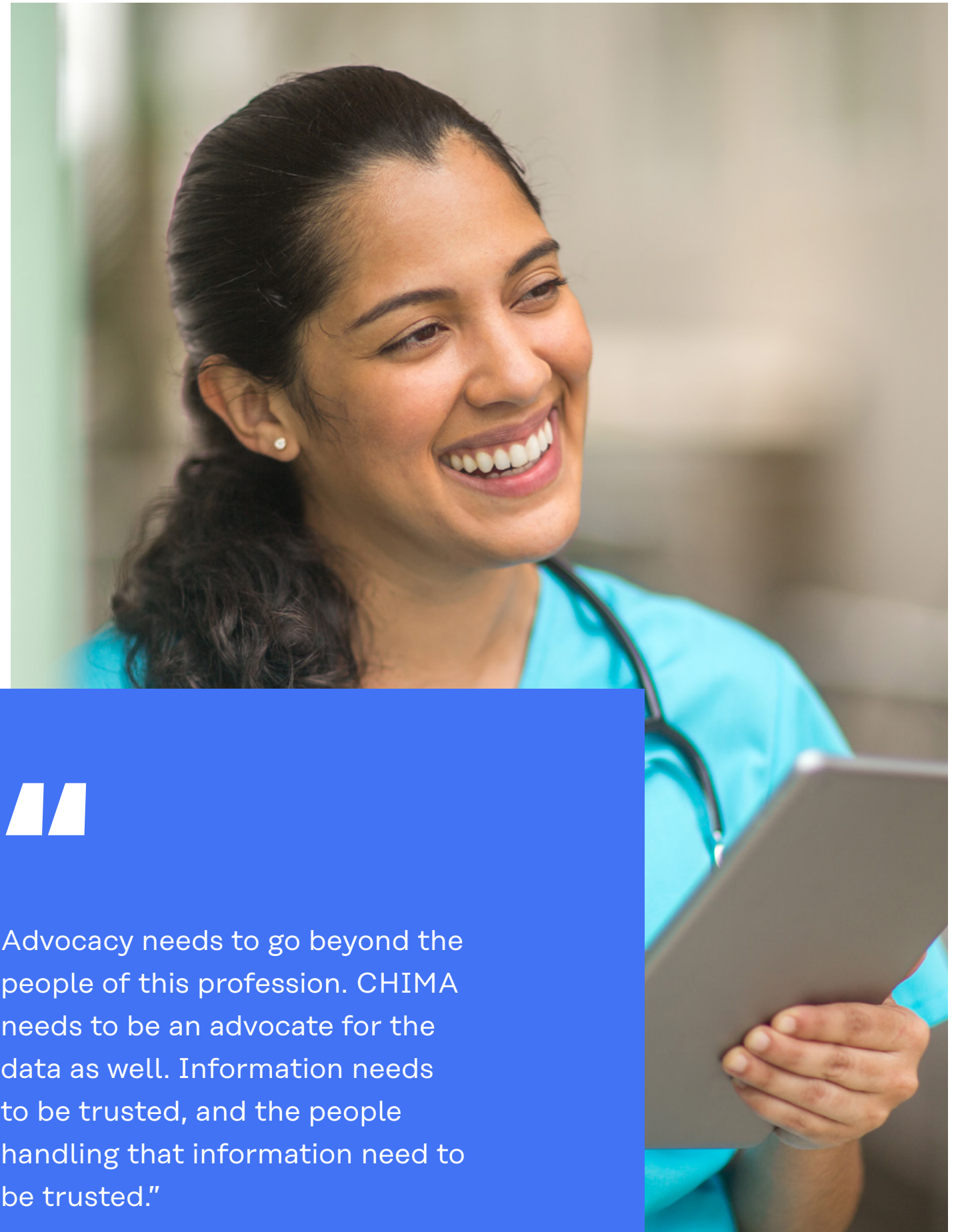
Supporting data: 5-year priorities

Industry trends and
Benchmarking and industry comparison

1. Industry trends	2. Benchmarking and industry comparison				
Secondary research	Direct associations	Health-related		Non-health related	
		Associations and accreditations	Professional colleges	Associations and accreditations	Professional colleges
• Opportunity/Gap: Social trends emphasize a growing need for advocacy (data privacy and anonymity) as there is disruption in health care stemmed by the pandemic • Opportunity: Accessibility to education is essential as the downside to emerging technologies and digital health is wider knowledge gaps (i.e., consider communities and different demographic groups) • Opportunity: Associations are member-centric as they will play a large part in the advancement of the organization • Refer to SWOT	• 25% of comparable associations include advance • 50% of comparable associations include advocate • 25% of comparable associations include influence • 50% of comparable associations include partner • 25% of comparable associations include leadership • 25% of comparable associations include member • 25% of comparable associations include engagement • 50% of comparable associations include education • Influence has the highest overall percentages, appearing in 29% across all comparable organizations • Influence appears across all comparable groups	• 25% of comparable associations include advance • 75% of comparable associations include advocate • 25% of comparable associations include support • 25% of comparable associations include partner • 25% of comparable associations include member • 25% of comparable associations include engagement • 25% of comparable associations include education	• 25% of comparable colleges include support	• 50% of comparable associations include advocate • 25% of comparable associations include member • 25% of comparable associations include engagement • 25% of comparable associations include education	• N/A

Summary of high-level key findings and gaps identified in the current state.

Supporting data: Strategic goals

What needs to be accomplished?
How do we know the strategic plan is successful?

Secure the role of the certified health information professional for the future
Measure: Our certified health information professionals are recognized and valued by employers.

Contribute to the conversation of health information in Canada
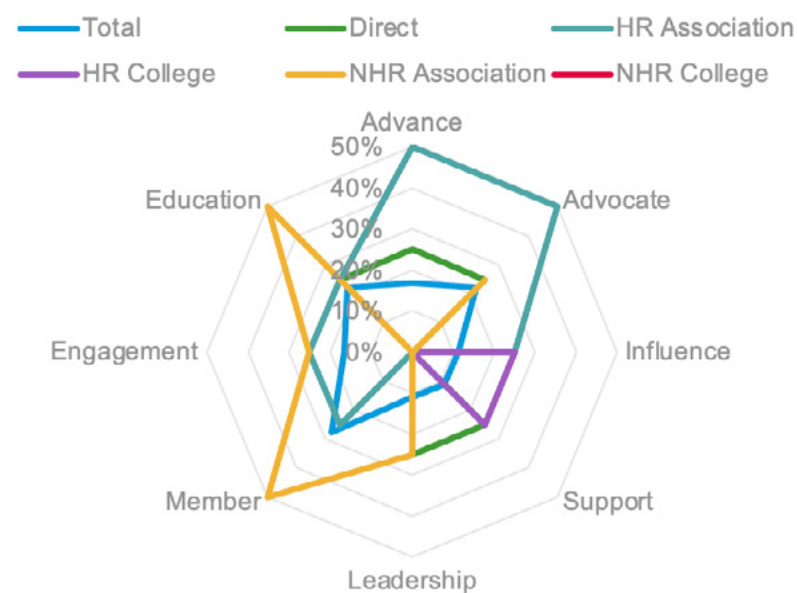Measure: Our participation in health information conversations is visible or consequential.

Be the trusted source of health information education standards
Measure: Our academic partner ecosystem is relevant and expanding.

Connect the communities of health information professionals in Canada
Measure: Our members have influence in a diverse set of communities and stakeholder groups.

Analysis of key words used in strategic plan goals across all comparable organizations.

Legend:
- Total
- Direct
- HR Association
- HR College
- NHR Association
- NHR College

Axes: Advance, Advocate, Influence, Support, Leadership, Member, Engagement, Education (scale 0%–50%)

Key research findings

Primary

Goal: Secure the role of the certified health information professional for the future

- Representatives from established technology and health care companies identified health information as one of the most exciting types of data as it is "all encompassing."

- 87.5% of surveyed public identified the importance of only certified professionals handing their health information as either "important" or "very important."

- > 80% of members interviewed identified the pandemic as having an impact on the visibility and appetite for health information (note: few went as far to say it will have a long-term impact on the profession).

Goal: Contribute to the conversation of health information in Canada

- When asked about "metrics that matter," 47% of members identified "sentiment toward the profession" as a top three barrier to the profession moving forward.

Goal: Be the trusted source of health information standards

- When asked "Do you know how to access your health information?" 36.4% of surveyed public stated "no," 33.3% stated "yes," and 30.3% stated "I'm not sure."

- When surveyed members were asked, "How likely are you to recommend that people join the health information profession?" the average member response was 7.7 (on a scale from 1-10).

Goal: Connect the communities of health information professionals in Canada

- In interviews, more than 80% of members identified "community" as a primary purpose for CHIMA's existence.

- In interviews with "community leaders" of CHIMA (past chapter chairs and community facilitators), more than 80% identified the profession as being "quiet" or "introverted" and addressed it as a barrier to engagement.

Secondary

Goal: Secure the role of the certified health information professional for the future

- Advancements with information technology and analytics have stemmed a shift toward precision specialization and away from the generalization of skills, adding value to professional certifications. This highlights the opportunity the profession has for the future, and the need for our organization to help secure what role certified professionals will play.

- Movement toward cloud-based applications pertaining to the management and storage of health information and data highlight growing concerns around data integrity, privacy, security, and management. This highlights the need for leadership to help professionals navigate such environment.

Goal: Contribute to the conversation of health information in Canada

- The pandemic has disrupted the conversation of health care around the world, highlighting the need to be a voice and leader on the topic of health information management.

- Organizations are quickly learning from the rapid response of others to the COVID-19 crisis and have placed unparalleled demand on modern health care systems, highlighting the need to participate, contribute, and lead conversations.

- Organizations that have demonstrated their participation in the space show a resilience and ability to bring innovations and thought-leadership to the market. CHIMA should follow this leading practice.

Goal: Be the trusted source of health information standards

- Health information is becoming increasingly fragmented as a result of growing online/remote applications and accessibility. Currently, ways to 'correctly' manage this information is unclear for individuals who handle the data. This highlights the need to become the 'go-to', consolidated source.

- Standardization in fields like health information management promote best industry practices that emphasize quality control, shared values, aspirations, and responsibilities among individuals who are part of the profession and those looking to join.

Goal: Connect the communities of health information professionals in Canada

- Industry reports show the promising and sustained value of connected communities, especially in a rapidly growing digital age. CHIMA should follow this leading practice.

- The strength behind community-centred connection can result in an array of advantages for both the organization and the individuals it represents (i.e., knowledge-sharing, support and unification, shared values and goals, etc.). This will provide benefits to CHIMA as an organization, to members, and to the public.

> **"**
>
> We need to prioritize the vital advocacy work for our profession and the citizens who charge us to understand, manage, and protect their health information."
>
> — Plan 2028 research participant
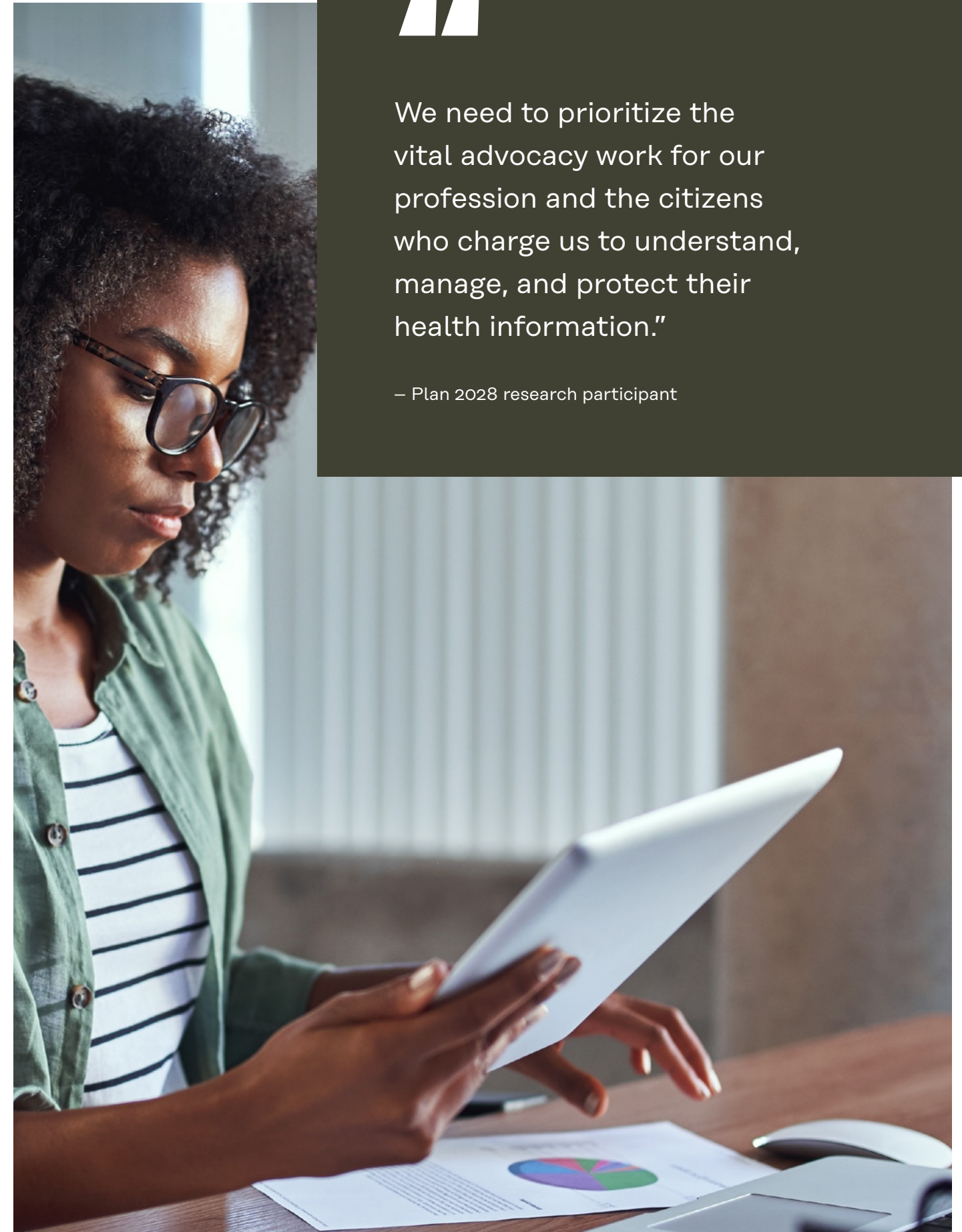
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1. Industry trends	2. Benchmarking and industry comparison				
Secondary research	Direct associations	Health-related		Non-health related	
		Associations and accreditations	Professional colleges	Associations and accreditations	Professional colleges
• Opportunity/Gap: Emerging social trends: diversity, equity, human rights, resulting in a push for health data policies and accountable alliances including, transparency, inclusiveness, and understandability • Opportunity: Member-driven focus influences advancement of the profession (push for quality partnerships, leadership, and continuous education) • Opportunity: Technology movement is pushing for increased knowledge on how ehealth and digital health will impact direct end users • Refer to SWOT	• 25% of comparable associations include advance • 25% of comparable associations include advocate • 50% of comparable associations include member • 25% of comparable associations include support • 50% of comparable associations include leadership • 25% of comparable associations include engagement • 25% of comparable associations include education • Member has the highest overall percentages, appearing in 18% across all comparable organizations • Member appears across 60% of all comparable groups of all comparable organizations	• 50% of comparable associations include advance • 50% of comparable associations include advocate • 25% of comparable associations include influence • 25% of comparable associations include member • 25% of comparable associations include education • 25% of comparable associations include engagement	• 25% of comparable colleges include support • 25% of comparable colleges include influence	• 25% of comparable associations include advocate • 25% of comparable associations include leadership • 50% of comparable associations include member • 50% of comparable associations include education • 50% of comparable associations include engagement	• N/A

Summary of high-level key findings and gaps identified in the current state.

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Please contact us at general@echima.ca if you have any questions about the information found in this plan.

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