DEPARTMENT OF THE ARMY
MADIGAN ARMY MEDICAL CENTER
9040 FITZSIMMONS AVENUE
JOINT BASE LEWIS-MCCHORD, WA 98431-1100

REPLY TO ATTENTION OF:

MCHJ-I DATE

MEMORANDUM THRU

Commander, (MCHJ-CO), Madigan Army Medical Center, Fort Lewis, WA 98431-1100
Informatics Consultant to the Surgeon General, Skyline 6, 5109 Leesburg Pike, Falls Church, VA 22041-3258
Commander, U.S. Army Medical Command, (MCHO-CL-C), 2050 Worth Road, Suite 10, Fort Sam Houston, TX 78234-6010

FOR HQDA, Office of the Surgeon General (DASG-PSZ—MG/Ms. Susan Reed), Skyline 6, Suite 291, 5109 Leesburg Pike, Falls Church, VA 22041-3258

SUBJECT: Proposal for the Establishment of a Clinical Informatics Fellowship at Madigan Army Medical Center

1. This is to request approval for Madigan Army Medical Center to establish a two year Clinical Informatics Fellowship with a proposed start date of Summer, 2011.

2. Justification for a Clinical Informatics Fellowship.

a. Documentation of the need for a Clinical Informatics Fellowship:

(1) Clinical Informatics is a discipline that is emergent in the medical field and established as an Additional Skill Identifier (ASI) since November, 2007 within the Army Medical Department. Informatics provides a clinical interface between end users and technical solutions and focuses on shaping and leveraging technology to support clinical workflow, improve patient safety, enhance clinical care delivery, increase access to care, support clinical and business decision support and promote improved health outcomes.

(2) The International Medical Informatics Association states that there is increasing evidence that Health Information Technology (HIT) improves health, health care, public health and medical research. It further cites evidence that Informatics improves clinical decision support, information and communication technology interventions and telemedicine. These claims are supported by the April, 2010 Health Affairs article. “The Value From Investments in Health Information Technology At The U.S. Department Of Veterans Affairs” (enclosed).

(3) Two ad hoc queries designed by the Clinical Informatics department at Madigan Army Medical Center, one focused on capturing relative value units (RVUs) for

outpatient care performed on inpatients and the other focused on capturing individual orders for care that could be billed to 3rd party bill payers have returned hundreds of thousands of dollars to the facility each year.

(4) Clinical Informatics has shaped behavioral health care and traumatic brain injury diagnostics through the use of algorithmic patient surveys, electronic triage and tools to deliver information to multiple systems for viewing and action by providers and commanders.

(5) The increased reliance on electronic health records and their ancillary electronic systems has made health care data more accessible and also created a plethora of locations where the data is stored and accessed. Clinical Informatics can bridge the gaps between systems and leverage reports, databases, web enabled graphic user interfaces and other technologies to collect and distribute information to user groups in ways that are much more accessible and easily consumable.

3. The Army Medical Department (AMEDD) has supported Long Term Health Education and Training for Clinical Informatics for many years, primarily for nurses but in the last five years by sending clinicians to various programs within the continental United States. These programs provide a good knowledge base of Clinical Informatics but do not tailor any of their content toward military medicine nor the systems and processes that support military medicine. With the early adoption of health information technology by the military and the advanced capabilities HIT provides, it is necessary to train the emerging workforce in the discipline of Informatics with an orientation to Military Clinical Information Systems (CIS).

4. Establishing a Clinical Informatics Fellowship provides an opportunity for recruitment and retention of providers in the Army Medical Department as the need for leaders in this discipline is emerging in all healthcare organizations. With an established fellowship, in addition to the ASI designators for Informatics personnel it will be possible to establish a career path and plan to manage and utilize these specialized professionals for the benefit of the AMEDD, assigning them based on the needs and requirements of the organization.

a. Define the specialty and the proposed number of trainees.

(1) Clinical Informatics is recognized by the International Medical Informatics Association and the American Medical Informatics Association.

(2) Number of fellows to be selected: Propose 2 slots for physicians with additional slots for Medical Service Clinicians (dieticians, optometrists, pharmacists and so on) as they define an educational need and path within their Corps.

(3) Individuals selected will be board certified clinicians, Medical Corps Officers (0-3 to 0-6) who currently practice in their respective discipline. Senior 0-6 personnel may

not apply for this fellowship; it is expected that any applicant will incur two years of service in Clinical Informatics after the fellowship. Clinicians will also maintain a limited medical practice during the fellowship.

5. Accepted fellows will incur an obligation on completion of the fellowship IAW AR 351-3, Chapter 10 and DoD Instruction 6000-13. Selectees must maintain standards for Army physical fitness test and height/weight standards throughout fellowship training IAW current Army regulations.

a. Define the curriculum

(1) The length of the Clinical Informatics Fellowship will be approximately two years.

(2) The fellowship will be conducted at Madigan Army Medical Center under the direction of the fellowship director in conjunction with various academic centers that will provide a Masters Degree on successful completion of the program.

(3) There is no current ACGME accrediting body for a Clinical Informatics Specialty The Fellowship will be established with a vision to incorporate ACGME accreditation as the specialty is formally recognized and boarded by the ACGME.

(4) The curriculum is derived from the current Clinical Informatics board certification standards (a work in progress, attached).

a. Fellows will receive a competency based education that focuses on Clinical Informatics core competencies.

b. Fellows will complete a curriculum that satisfies educational requirements, projects and thesis in accordance with defined criteria (attached).

c. Fellows will develop a comprehensive understanding of Clinical Informatics, including the techniques, technology, limitations and scope of this discipline.

d. Fellows will acquire knowledge of and skill in educating Military Treatment Facility (MTF) staff in Clinical Informatics.

e. Fellows will demonstrate an understanding of the practice and application of Clinical Informatics at all levels of clinical practice and within the enterprise.

f. Fellows will demonstrate competence in the technical, writing and cognitive skills to leverage Clinical Informatics safely, objectively, securely, cost effectively and decisively.

6. Fellows will receive formal instruction and experience in Clinical Informatics topics and projects. Instruction and practical application will be documented in each fellow's record

and will include appropriate quality indicators. The director and trainers will teach, supervise and assess each competency. Competencies will not be based solely on a minimum number of projects performed. Competence will be assessed and determined through a formal evaluation process which includes objective performance criteria. During the fellowship the fellows will meet academic requirements for the associated Masters Degree as well as practical work within Informatics at Madigan Army Medical Center (MAMC) which delivers solutions for MAMC, the Western Regional Medical Command (WRMC) and subordinate MTFs, other regional MTFs, the AMEDD, the Military Health System (MHS), DoD-VA sharing projects and Health Information Exchange (HIE) projects, providing a broad spectrum of experience that other programs cannot offer.

a. Fellows will receive extensive didactic and hands on training in Clinical Informatics, Nursing Informatics, Bioinformatics, Research Informatics, Project Management, security requirements and clinical workflow analysis.

b. Fellows will perform the following scholarly activities: write a review article on an area of Clinical Informatics, write an online publication, participate in ongoing research and organize an Informatics workshop (audience?).

c. Fellows will learn effective techniques for training Informatics personnel and contribute to educational lectures and seminars for Madigan staff.

d. Fellows will practice a limited practice in their clinical discipline.

7. Conduct of the Training

a. Access to care at Madigan Army Medical Center will not be negatively affected by the establishment of a Clinical Informatics Fellowship and the ongoing contributions of Clinical Informatics to the clinical and business performance of MAMC and other MTFs will be enhanced.

b. Madigan Army Medical Center has a diverse patient population and a large compliment of services as well as a tri-service and VA mission that will contribute to the educations, experience and opportunities of the fellows.

c. One additional staff member is required to initiate the fellowship.

d. Additional office space will be required for the fellowship director and the Fellows.. .

e. Office furniture and laptops/tablets will be needed for personnel as well as phones and or a blackberry per person.

f. Estimated annual TDY costs for professional conferences and presentations are summarized in the appendix.

8. Positive and negative effects on other training programs

   a. The fellowship will positively impact the other training programs and care at Madigan Army Medical Center through the increased availability of expertise and personnel for providing Informatics service and support to the facility, staff and patients.

9. Why training should take place in a military facility

   a. No military focused Clinical Informatics fellowships exist today.

   b. MAMC, to a large extent, has the assets, expertise and leadership necessary to establish an Army Clinical Informatics Fellowship.

   c. The development of a Clinical Informatics Fellowship will allow for increased education, recruitment and retention of Clinical Informaticians and can retain mid-career clinicians who are proven in their specialty and desire to contribute to the emerging discipline of Informatics as a mid-career transition. Additionally, those who want to develop their executive leadership skills can obtain a Masters Degree, serve in a role that provide experience similar to that of a Deputy Commander for Clinical Services and carry that experience forward to inform senior level command and staff jobs and, for some, future service as Flag Officers.

   d. Clinical Informaticians will provide a valuable service to the Army Medical Department, their staff and beneficiaries by enhancing the emerging automated support systems that are driving the transformation of healthcare delivery and clinical-business decision support. AMEDD leaders in Informatics will drive improvement in future MHS and Federal Healthcare delivery.

   e. Madigan Army Medical Center has the ability and desire to conduct this training. Then Informatics Division has already trained several residents in rotations as well as partnered with the University of Washington and other colleges to support internships in Informatics.

10. Attachments included.

11. POC is the undersigned at 253-968-3255.

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COL MC
Chief, Informatics Division, MAMC/WRMC
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Proposal for the Establishment of a Clinical Informatics Fellowship at Madigan Army Medical Center

Approvals

Director of Medical Education, Madigan Army Medical Center

I approve I disapprove

Comments:

STEPHEN SALERNO, MD, MPH
COL, MC
Director, Medical Education

Proposal for the Establishment of a Clinical Informatics Fellowship at Madigan Army Medical Center

Commander, Madigan Army Medical Center

I approve I disapprove

Comments:

JEROME PENNER III
COL, MS
Commanding

Clinical Informatics Consultant to the Surgeon General, MEDCOM

I approve I disapprove

Comments:

HON PAK, MD
COL, MC
CI Consultant to the Surgeon General

Proposal for the Establishment of a Clinical Informatics Fellowship at Madigan Army Medical Center

Chief, US Army Medical Corps

I approve I disapprove

Comments:

CARLA G. HAWLEY-BOWLAND, MD
MAJOR GENERAL, USA
Commanding

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Commander, US Army Medical Command

I approve I disapprove

Comments:

ERIC B. SCHOOMAKER, MD
LIEUTENANT GENERAL, USA
Commanding