



**Just Associates**

MASTERING PATIENT IDENTITY

# ***The Pressing Need for Data Governance***

**White Paper**

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## ***The Pressing Need for Data Governance***

### **Part One: Strong Internal Governance Policies Set the Stage for Collaboration**

#### **Introduction**

Healthcare organizations are drowning in a deepening sea of patient data, the volume of which is expanding by as much as 50 percent annually. That equals 60 terabytes of information every year in most organizations—about 1,000 times more than a decade ago.<sup>i</sup>

Exacerbating the challenge are the multiple channels through which data, both structured and unstructured, flows into a growing number of interfaced information systems. A few short years ago, data was largely contained within a handful of clinical and administrative systems, including registration, coding, billing, purchasing, laboratory, radiology and some electronic health record (EHR) systems. Today, it also flows in and out of a plethora of mobile devices and applications, email and instant messaging software, patient and physicians portals and health information organizations (HIOs).

For the typical hospital this means that one piece of dirty data entering the system from any of dozens of possible channels could impact 50 or more downstream and external systems before it is identified and corrected—assuming it ever is. Data quality problems compromise patient care, impact patient and clinician satisfaction and jeopardize expensive IT initiatives. They also translate into real costs. For instance, duplicate records in a master patient index (MPI) database can cost organizations anywhere from \$20 to several hundred dollars each.

Another factor driving the need for enhanced data integrity is the significant role patient information now plays in the regulatory and competitive landscape. A study by McKinsey found that if healthcare organizations used “big data creatively and effectively to drive efficiency and quality,” it would add “more than \$300 billion in value every year, two-thirds of which would be in the form of reducing national healthcare expenditures by about 8 percent.”<sup>ii</sup>

The ability to access and exchange clean, comprehensive and accurate patient information across unrelated provider organizations is also at the heart of collaborative care and performance-based models, as well as in federal initiatives, including Meaningful Use, Readmission Reduction and Value-Based Purchasing. It is also imperative to the success of any number of population health initiatives.

#### **Why Data Governance**

Data integrity is critical if healthcare organizations are to remain competitive and compliant and achieve the expected improvements in costs and outcomes in today’s evolving landscape. That is why a strong data governance policy is no longer optional. It is the only way to ensure short- and long-term data integrity and compliant information exchange. This is particularly true for any organization that is contemplating participation in an Accountable Care Organization (ACO) or HIO or that expects to be party to a merger or acquisition.

HFMA defines data governance as “the exercise of authority and control over the management of data assets across an entire enterprise,” including “all the policies and procedures to guide, manage, protect, and govern the electronic information under the control of a hospital or health

system.” In healthcare organizations, this also includes “monitoring and enforcing the security of critical health information.”<sup>iii</sup>

Unfortunately, many healthcare organizations struggle with data governance. Fewer than 10 percent actually succeed at their first attempts due to cultural barriers and a lack of senior-level sponsorship. According to Information Builders, the most common barriers to data governance success are:

- Organization
- Data quality, management and migration integration
- Accountability and ownership
- Cost or unrecognized business value<sup>iv</sup>

It is imperative that these obstacles are overcome. A comprehensive, well-planned data governance policy ensures that data are collected, maintained and managed in compliance with HIPAA and state privacy regulations. It also ensures that data is accurate and duplicate- and overlay-free—in both internal and external systems.

Data governance enables hospitals to prioritize, validate and manage ongoing data usage, as well as:

- Understand and manage strategic and tactical data, project ownership and priority setting
- Define day-to-day data creation, use and retirement activities
- Implement data cleansing, transformation, integration and enrichment processes
- Provide a logical structure for classifying, organizing and communicating complex activities involved in making decisions about and taking action on enterprise data<sup>v</sup>

### **Crafting a Solid Data Governance Policy**

In the past, health information management (HIM) was the primary keeper of data integrity. While it remains the custodian of the legal medical record, today it shares that role with IT. Together, they are responsible for addressing challenges, maximizing opportunities and mitigating risks.<sup>vi</sup>

Nonetheless, a comprehensive and effective data governance policy cannot be developed in an IT or HIM vacuum. It needs to be driven by business and clinical stakeholders or it will fail as a long-term strategy.<sup>vii</sup> This is because in today’s healthcare organization, data is a core element of nearly every aspect of operations. It impacts, and is impacted by, multiple departments and disciplines, all of which must undergo careful review to determine data entry and storage points, how data is utilized and shared across the enterprise and, most importantly, when, how and by whom data is accessed and maintained.

When it comes to governance policy design and development, the first step is to assemble a multi-functional planning committee or workgroup. At minimum, this should represent:

- Health Information Management
- Information systems
- Medical staff leadership
- Nursing executives and case management
- Privacy/security
- Corporate compliance

- Quality improvement
- Key senior clinical and ancillary department representatives

Once atypical, a growing number of organizations now find it beneficial to include representation by data management. When the workgroup is assembled, consensus should be reached on roles and responsibilities and a structure for decision-making processes established to ensure transparency.

The workgroup will need to first undertake an extensive survey to determine what currently exists that could be brought together to form the framework for a strong enterprise-wide data governance policy. This entails identifying existing governance policies within individual departments and across participating entities, evaluating the strength and adherence rates of each and determining if and how existing policies can be interfaced to form enterprise-wide governance. This information can then be used to identify gaps in policies and areas where policies need to be bridged to be applicable across the enterprise.

When developing the final data governance policies, five broad areas should be addressed:

- Information design and data capture
- Content and records management
- Information analysis and exchange
- Data integrity and quality
- Security and confidentiality<sup>viii</sup>

Narrowing these areas down, strong governance policies will take into account any new automated processes, inferences, metrics and monitoring tools, especially those provided by big data solutions. The policies should clearly define required actions and quality control processes and optimize, secure and leverage data as an enterprise asset by aligning the objectives of multiple functions.<sup>ix</sup>

In terms of security and privacy, a smart approach is to follow existing best practices, such as the Federal Trade Commission's Fair Information Practice Principles. These are "industry-agnostic, basic information privacy principles that can guide the thorny discussions that may be required when analytic projects cross industries, data sources, and data types."<sup>x</sup>

Finally, strategies for enforcement—and improvement—are paramount. Thus, it is important to build monitoring and feedback mechanisms into processes. This will help provide a clear picture of how policies are performing and where corrections are necessary.<sup>xi</sup>

## **Conclusion**

Data is the lifeblood of today's healthcare system. Not only are hospitals and other healthcare organizations now responsible for managing and maintaining terabytes of patient information, but they must do so in a way that ensures integrity.

As new care and reimbursement models roll out, their success or failure will hinge on the quality of the data they exchange. Until individual organizations have their data integrity houses in order—including the establishment of solid data governance policies—they will be stuck on the sidelines of healthcare's transformation.

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<sup>i</sup> Richmond, R. (2012, February 1). Why hospitals continue to fail in “connecting the dots” with their data, and what they can do to change. *The Health Care Blog*. Retrieved from <http://thehealthcareblog.com/blog/2012/02/01/why-hospitals-continue-to-fail-in-%E2%80%98connecting-the-dots%E2%80%99-with-their-data-and-what-they-can-do-to-ch/>

<sup>i</sup> Reeves, M. G. and Bowen, R. (2013, February 1). Developing a data governance model in health care. HFMA. Retrieved from <http://www.hfma.org/Content.aspx?id=15470>

<sup>i</sup> Information Builders. (2011, July). Seven steps to effective data governance for healthcare organizations [white paper]. Retrieved from <http://tdwi.org/whitepapers/2011/07/seven-steps-to-effective-data-governance-for-healthcare-organizations.aspx>

<sup>i</sup> Arredondo, R. (2013, May 9). Data governance in healthcare. CedarCrestone Inc. Retrieved from: <http://www.cedarcrestone.com/blog/?p=664>

<sup>i</sup> Rath, D. (2013, March 7). Data governance takes a higher profile. *Healthcare Informatics*. Retrieved from: <http://www.healthcare-informatics.com/blogs/david-raths/data-governance-takes-higher-profile>

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<sup>i</sup> Hagland, M. (2012, April 15). Optimizing data governance. *Healthcare Informatics*. Retrieved from <http://www.healthcare-informatics.com/article/optimizing-data-governance>

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<sup>i</sup> Information Builders. (2011, July). Seven steps to effective data governance for healthcare organizations [white paper]. Retrieved from <http://tdwi.org/whitepapers/2011/07/seven-steps-to-effective-data-governance-for-healthcare-organizations.aspx>