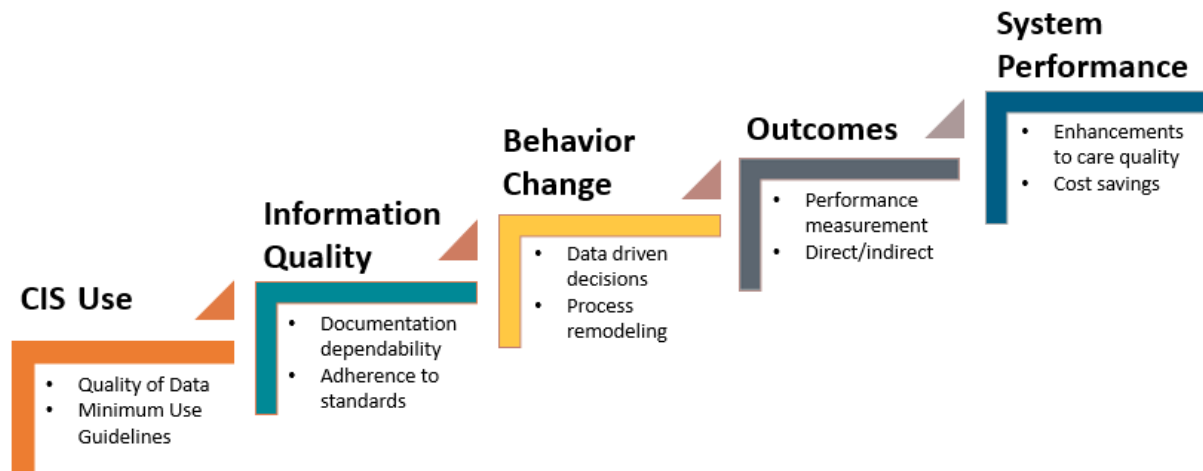




Reporting Maturity Levels

As part of Reporting Content Review, Alberta Health Services (AHS) analysts help clinical information system (CIS) users design reports, dashboards and visualizations that will be deployed through self-serve, in-system, analytics tools supporting decision making. The following hierarchy highlights increasingly mature analytics capabilities from the AHS analytics roadmap. These align with the Health Information Management Systems Society (HIMSS) [Electronic Medical Record Adoption Model](#).



CIS Meaningful Use (HIMSS Level 3)

Good reporting needs good data. Before health processes and outcomes can be informed by CIS data, the CIS needs to be used consistently and well. CIS Meaningful Use reporting focuses on markers of chart completion, order-entry compliance, data review (e.g., problem lists) and accurate encounter diagnoses. These metrics are available to individuals and groups, allowing identification and remediation of areas of incomplete or inappropriate use. Adherence to [CIS minimal use norms](#) is necessary for reliable decision and documentation supports and so is emphasized in early feedback reports.

Information Quality (HIMSS Level 4)

Given high minimum use compliance, more advanced information behavior monitoring is introduced. Markers of documentation quality and case complexity are introduced.

Behaviour Change (HIMSS Level 6)

With more reliable information both patient characteristics and clinician choices and plans, attention can shift to markers of resource use and clinical performance.

Outcomes Awareness (HIMSS Level 7)

Clinicians, operational leaders, and executives can answer more complex questions with reports that detail direct and indirect outcomes. Direct outcomes are measurable within the application, and may include such things as “no-show” rates. Indirect outcomes may include data available outside the application such as social determinants of health.

System Performance (HIMSS Level 7)

Patients, providers and AHS generate, understand and leverage internal evidence to improve system wide performance. Active management of outcomes becomes possible at this level.