El Monte Union High School District - Career Technical Education

7932 ADVANCED HEALTHCARE ADMINISTRATIVE SERVICES

DATE:

INDUSTRY SECTOR: Health Science and Medical Technology Sector

PATHWAY: Healthcare Administrative Services

CALPADS TITLE: Advanced Healthcare Administrative Services (Capstone)

CALPADS CODE: 7932

HOURS:

Total	Classroom	Laboratory/CC/CVE
340	150	190

JOB TITLE	O*NET CODE	JOB TITLE	O*NET CODE
Medical and Health Services Managers	11-9111.00	Medical Records and Health Information Technicians	29-2071.00
Medical Transcriptionists	31-9094.00	Information Technology Project Managers	15-1199.09

COURSE DESCRIPTION:

This capstone course prepares students within a specific career in various areas of Healthcare Administrative Services that will enable them to complete the requirements for licensure, certification, or other industry recognized credentials; or students are prepared to enter into postsecondary education training programs in the selected Healthcare Administrative Services pathway. If applicable, course content will provide the knowledge and skills consistent with legislative requirements and the level of proficiency to perform skills within their identified scope of practice specific to employment.

A-G APPROVAL: No

ARTICULATION: None

DUAL ENROLLMENT: None

PREREQUISITES: Prerequisite

7931 Intermediate Healthcare Administrative Services

7930 Introduction to Healthcare Administrative Services

METHODS OF INSTRUCTION

- Direct instruction
- Group and individual applied projects
- Multimedia
- Demonstration
- Field trips
- Guest speakers

STUDENT EVALUATION:

- Student projects
- Written work
- Exams
- Observation record of student performance
- Completion of assignment

INDUSTRY CERTIFICATION:

- Registered Health Information Technician (RHIT) Cetrification
 Registered Healthcare Documentation Specialist (RHDS) Certification
- Registered Health Information Administrator (RHIA) Certification

RECOMMENDED TEXTS:

• Health Information Management Technology: An Applied Approach 5th edition by Leslie L Gordon & Nanette B. Sayles ISBN# 9781584265177

PROGRAM OF STUDY

Grade	Fall	Spring	Year	Course Type	Course Name
9, 10, 11				Introductory	7930 Introduction to Healthcare Administrative Services
10, 11, 12				Concentrator	7931 Intermediate Healthcare Administrative Services
10, 11, 12				Capstone	7932 Advanced Healthcare Administrative Services

l.	ELECTRONIC HEALTH SYSTEMS AND HIT	CR	Lab/	Standards
	Introduction to Computers – Impact of Computers, History of Computers in Healthcare, Hardware/Software, Communication and Internet technologies. System Selection and Implimentation – Planning, Organization of a Project, Project Identification, System Analysis, System Selection, Contract Regiotation, System Design, System implimentation, Conversion/Training/Testing Plan, Conversation/Go-live/SystemEvaluation/Post Implimentation. S. Computers in Health Information Management (HiM) — Release of Information System / Disclosure Management, Encoder/Grouper c, Canver and Other Registries, Chart Locator , Birth Certificate, Chart Deficiency , Transcription, Data Quality Indicator, Dictation Systems — Financial information System, Human Resources Information System, Decision Support System, Master Patient Index, Patient Registration, Scheduling System, Practice Management, Materials management System, Facilities Management. 5. Clinical Information Systems — Radiology Information System, Laboratory Information System, Nursing Information Systems on HiM (Health Information Management). 6. Electronic Health Records (EHR) — Components of EHR, Benefits of EHR/Barriers to the EHR, Functionality / Signatures, Classification Systems, Standards / Vocabulary Standards, Massaging Standards, Data Structures, EHR Tools/Legal Issues / EHR Data _ Interoperability/Transition Period, Impact of (EHR) Electronic Health Records on (HIM) Health Information Management. 7. Speech Recognition — History of Speech Recognition, Benefits of Speech Recognition, Speech Recognition, Speech Recognition, Period, Impact of (EHR) — Components of EHR, Period, Period, Impact of (EHR) — Components of EHR, Period,	10	15	Academic: LS: 11-12.1, 11-12.2, 11-12.3, 11-12.4, 11-12.5, RSIT: 11-12.1, 11-12.4, 11-12.5, 11-12.6 RLST: 11-12.1, 11-12.2, 11-12.3, 11-12.4, 11-12.5, 11-12.2, 11-12.3, 11-12.4, 11-12.5, 11-12.4, 11-12.5, 11-12.4, 11-12.6, 11-12.2, 11-12.2a, 11-12.2a, 11-12.2a, 11-12.2a, 11-12.7, 11-12.8, 11-12.9 WHSST: 11-12.1, 11-12.4, 11-12.6, 11-12.7, 11-12.8, 11-12.9 CTE Anchor: Communications: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7 Career Planning and Management: 3.1, 3.3, 3.6 Technology: 4.1, 4.2, 4.3, 4.4, 4.5 Problem Solving and Critical Thinking: 5.1, 5.2, 5.3, 5.4 Responsibility and Flexibility: 7.3 Leadership and Teamwork: 9.7 Technical Knowledge and Skills: 10.1, 10.3 CTE Pathway: C1.1, C1.2, C1.5, C2.4, C5.2, C8.1, C8.2, C8.4, C12.1, C12.4
II.	HEALTH INFORMATICS	CR	Lab/ CC	Standards
	 What is Health infomatics? Ways in which Health Information technology (HIT) has evolved to improve quality or enhance patient safety. Types of Health Infomatics Drivers and Trends. Health Level 7 (HL-7) in the OSI Model [Common Protecol for Exchange of Helahtcare Information] Office of the National Coordinator for Health Information Technology (ONC) Health IT Standards Commitee. Compare and Contrast Electronic Medicla Record with Electronic Helath Record. How principals of Healthcare data Exchange and Healthcare data standards relate to Patient Care, Productivity and Data Analysis. Fundamental requirements for an Effective Clinical Decision Support System How Mental Workload, Selective Attention and Information Overload affect Health information Usability. Cognitive Support advantages and disadvantages of Clinical Descission Suport System (CDSS). 	10	10	Academic: LS: 11-12.1, 11-12.2, 11-12.3, 11-12.4 RSIT: 11-12.1, 11-12.4, 11-12.5 RLST: 11-12.1, 11-12.2, 11-12.3, 11-12.4, 11-12.5, 11-12.9 WS: 11-12.2, 11-12.2b, 11-12.2f, 11-12.4, 11-12.6, 11-12.8, 11-12.9 WHSST: 11-12.4, 11-12.6, 11-12.8, 11-12.9

			Lab/	CTE Anchor: Communications 2.1, 2.2, 2.3, 2.4, 2.5, 2.6 Career Planning and Management: 3.1 Technology: 4.1, 4.2, 4.3, 4.5, 4.6 Problem Solving and Critical Thinking: 5.1, 5.3, 5.4 CTE Pathway: C1.1, C1.2
II. I	HEALTH INFORMATION TECHNOLOGY	CR	CC	Standards
	1. The Health Information management (HIM) Profession	20	16	Academic:
	2. Healthcare Delivery System			LS: 11-12.1,
	Purpose and Function of the Health Record Health Record Content and Documentation— Documentation Standards, General Documentation Guidelines,			11-12.2, 11-12.3
	Documentation by Setting, Health Information Media, Role of Healthcare Professionals in Documentation.			RLST: 11-12.1, 11-12.4, 11-12.5,
	5. Clinical Terminologies, Classifications and Code System			11-12.6
	6. Data Management— Data Sources, Data Management, Data Governance, Data Quality, Data Management and Bylaws.			WS: 11-12.2,
	7. Secondary Data Sources — Differences between Primary and Secondary Data Sources, Purposes and Uses of	1		11-12.2a,
	Secodary Data Sources, Types of Secondary Data Sources, Healthcare Databases. 8. Health law Basic Legal Concepts, Patient's Rights Regarding Healthcare Decisions, The Legal Health Record.			11-12.2b,
	9. Data Privacy and Confidentiality— Use and Disclosure, State Laws-Privacy, HIPAA Privacy Rule and ARRA, HIPAA	1		11-12.2d, 11-12.2e,
l	Privacy Rule Documents, Uses and Disclosures of Health Information, HIPAA Privacy Rule Administrative Requirements,			11-12.6, 11-12.8
1	Enforcement of Federal Privacy Legislation and Rules, Medical Identity Theft, Patient Verfication, Patient Advocacy and			WHSST:
ļ	Compliance, (ROI) Release of Information.			11-12.1, 11-12.4
ľ	 Data Security— Protecting the Privacy of Data, Ensuring the Integrity of Data, Data Security Threats, Components of a Security Program, Coordianted Security Program, HIPAA Security Provisions, ARRA Security Provisions, Computer Data 			11-12.5, 11-12.6
1	Forensics.			11-12.8, 11-12.9
1	1. Health Information— The Role of Data Analytics in healthcare Information, Strategic Uses of Helathcare Information,			CTE Anchor: Communications
L	Consumers and Healthcare Information, Health Information Exchange (HIE).			2.1, 2.2, 2.3, 2.4
	 Healthcare Information— Systems Development Life-cycle. Resrarch and Data Analysis— Presentation of Statistical Data, Descriptive Statistics, Nominal Distribution, How to 			2.5, 2.6, 2.7, 2.8
ľ	Analyze Information, Research Methodologies, Healthcare Research Organizations, Institutional Review Board (IRB) for			Career Planning
1	Human Research Subjects.			and
	4. Healthcare Statistics— Discrete vs. Continuous Data, Common Statistical Measures in Used in Healthcare.			Management: 3.1, 3.2, 3.3, 3.9
- 1	5. Revenue Management and Reimbursement— Utilization Management, Case management.			Technology: 4.1
ľ	 Fraud and Abuse Compliance — Federal Regulations and Initiatives, Compliance Program, Coding and Fraud and Abuse, Clinical Documentation Improvement. 			4.3, 4.4, 4.5
1	7. Leadership – Leadership Theories, Leadership Styles, Change Management, Critical Thinking Skills, Team Leadership,			Problem Solving
1	Team Meetings, Busienss Related Partnerships, Leadership Roles.			and Critical
1	8. Performance Improvement — Performance Measurement and Quality Improvement, Quality Dimensions of Performance			Thinking: 5.1,
1	Improvement, Fundamental principals of Continuous Performance Improvement, Formal Performance Improvement			5.2, 5.3, 5.4, 5.6 Health and
	Activities, Team-Based Performance Improvement, Clinical Quality Managment Initiatives, Shared Governance. 9. Management— What is Management?, organizational behavior, Organizational Structure, Strategic and Operational			Safety: 6.1, 6.2,
ľ	Planning, Work Analysis, Change Movement and Project Management, Project Management, Financial Management,			6.3
l	Management of Resources and Allocation, Management of Vendors and Contracts, Management of Mergers, Enterprise			Responsibility
	Information Management, Management of Corporate Compliance and Patient Safety.			and Flexibility:
ľ	 Human Resources Management and Profesional Development Employment Law, Ethics and Labor Relations, Labor Relations, Human Resources Management Roles and Responsibilities, Training and Development. 			7.2, 7.3, 7.4, 7.6
2	1. Ethical Issues in HIM – Moral Values and Ethical Principals, Cultural Competence in the Healthcare Environment, Ethical	1		7.7, 7.8 Ethics and Lega
	Foundations of HIM, Ethical Issues related to Medical Identity Theft, Ethical Decision Making, Breach of Healthcare Ethics,			Responsibilities:
ı	Important Health Information Ethical Problems.			8.1, 8.2, 8.3, 8.4
		1		8.5, 8.6, 8.7
				Leadership and
		1		Teamwork: 9.1,
				9.2, 9.3, 9.4, 9.5 9.6, 9.7
				Technical
		1		Knowledge and
				Skills: 10.1, 10.2
				CTE Pathway:
				C1.1, C1.2,
				C1.3, C1.8,
		1		C2.3, C2.4, C3.1, C3.2,
-		1		C6.1, C6.3,
- 1		1	ı	C6.4, C6.6,

				C6.7, C7.1, C8.1, C8.2, C8.3, C8.4, C9.5, C12.2, C12.3, C12.4, C13.2, C13.4, C14.1, C14.2, C14.3, C15.3, C15.7
IV.	HEALTHCARE LEGAL AND ETHICAL ISSUES	CR	Lab/ CC	Standards
	1. Introduction to Fundamentals of Law for Health Infomatics and Information Management 2. Law and Ethics 3. The Legal System in the United States 4. Legal Proceeding 5. Evidence 6. Tort laws 7. Corporations, Contracts and Antitrust Legal Issues 8. Consent to Treatment 9. Legal Health Record 10. HIPAA Privacy Rule 11. HIPAA Security Rule 12. Security Threats and Controls (Vulnerabilities) 13. Paient Rights and Responsibilities 14. Access, Use and Disclosure and Release of Information 15. Required Reporting and Mandatory Disclosure Laws 16. Risk Management, Quality Improvement and Patient Safety 17. Corporate Compliance laws 18. Medical Staff (Organizational Laws and Legal Laws governing Medical Staff) 19. Workplace Laws — (OSHA)Occupational Health and Safety Administration (Act)	26	38	Academic: LS: 11-12.1, 11-12.2, 11-12.3, 11-12.4, 11-12.5 RSIT: 11-12.1, 11-12.4, 11-12.5 RLST: 11-12.1, 11-12.2, 11-12.6, 11-12.9 WS: 11-12.2, 11-12.2, 11-12.2, 11-12.2, 11-12.2, 11-12.8, 11-12.9 WHSST: 11-12.1, 11-12.9 WHSST: 11-12.1, 11-12.9,
V.	INTERMEDIATE HEALTHCARE STATISTICS (HEALTHCARE STATISTICS II)	CR	Lab/ CC	Standards
	 Mathmatical Review Review of Basic Mathmatical Functions, Fractions, Decimals, Percentages, Rates/Ratio/Proportion, Averaging, Rounding Data Probability Calculations of Census taking of Hospital Patient's, Hospital Units and Services, Beds and Bassinets, Hospital Departments and Review Census Calculation Tips. Calculate Percent of Occupancy Bed/Bassinet Count Terms, Occupancy Ratio & Percentages of Beds and Bassinets, Rate Formulas, Occupancy Percentage for a Specified Period of Time. Calculate Hospital Mortality Rates Death rates, Gross Death Rate, New Death Rate, Newborn Death rate, Surgical Death Rates. Calculate Miscellaneous RatesInfection Rates, Consultation Rates, Patient Complication Rate, Comorbidity Rate, Bed Turnover Rates. Calculate Vital Statistics Data/Rates Frequency Distribution Rates - Create a Frequency Distribution, Ranks/Percentiles Measure of Tendency and Variation Curves of Frequency Distribution, Measures of Tendency and Variability. 	28	26	Academic: LS: 11-12.1, 11-12.2, 11-12.3, 11-12.4 RSIT: 11-12.1, 11-12.4, 11-12.5, 11-12.6 RLST: 11-12.1, 11-12.2, 11-12.3, 11-12.4, 11-12.5, 11-12.6, 11-12.8, 11-12.9 WS: 11-12.2, 11-12.2a,

ı	IIU. Data Presentations of the Calculations and Data Results/Concludions— Lables and Charts/Graphics and Essays			11-12.2b,
1				11-12.2c,
				11-12.2d,
1				11-12.2f,
l				11-12.4, 11-12.6,
l				11-12.7, 11-12.8,
l				11-12.9
1				WHSST:
1				11-12.1, 11-12.2,
1				11-12.3, 11-12.4, 11-12.5, 11-12.7,
1				11-12.8, 11-12.9
1				A-SSE: 1, 1a,
1				1b, 4
1				A-CED: 1, 1.1, 2
1				A-APR: 1, 5
1				A-REI: 1, 10, 11,
1				12, 2, 3, 5, 6
1				F-IF: 1, 2, 4, 5,
1				6, 7, 7a, 7b, 7c,
1				7d, 8a, 8
1				F-BF: 1, 1a, 1b,
1				1c
1				F-LE: 1a, 1b, 1c,
1				1, 2, 3
1				N-Q: 1, 2
				S-IC: 1, 2, 3, 5, 6
				S-ID: 1, 2, 6, 6c
				S-MD: 1, 5, 5a, 5b, 6, 7
				APPS: 10.0, 7.0
				CTE Anchor:
				Communications:
				2.1, 2.2, 2.3, 2.4,
				2.5, 2.7, 2.8
				Career Planning
				and
				Management:
				3.1, 3.2, 3.4
				Technology: 4.1,
				4.3 Problem Solving
1				and Critical
1				Thinking: 5.1,
1				5.2, 5.3, 5.4, 5.5,
				5.6
				Responsibility
1				and Flexibility:
				7.1, 7.5, 7.7, 7.8
				Ethics and Legal
1				Responsibilities: 8.5
				Technical
				Knowledge and
1				Skills: 10.1, 10.2,
1				10.3
				CTE Pathway:
				C1.1, C1.2,
1				C1.3, C1.6,
				C1.8, C3.2, C3.3, C3.6,
1				C3.3, C3.6, C12.1, C12.2,
1				C12.3, C12.4,
1				C15.3
\"	UEAL THOADE MANAGEMENT AND CUDEDWICION	0.5	Lab/	Chandanda
VI.	HEALTHCARE MANAGEMENT AND SUPERVISION	CR	СС	Standards
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A.Traditional Theroeies of Management and Leadership 2. Management Functions in Health Information Management 3. Leadership Concepts in Health Information Management 4. Change Management in Health Information Management 5. Legal Aspects of Healthcare Management 6. Job Descriptions and Roles in Health Information Management 7. Recruitment, Selection and Retention in Health Information Management 8. Performance Mangement in Health Information Management 9. Training and Development in Health Information Management 10. Organizational Structure of Health Information Management 11. Professional Organization for HIM (Health Information Management) – (AHIMA) American Health Information Management Association.	16		Academic: LS: 11-12.1, 11-12.2, 11-12.1 11-12.4 RLST: 11-12.4 RLST: 11-12.4 11-12.9 WS: 11-12.2, 11-12.2d, 11-12.4, 11-12.1 11-12.8, 11-12.7 WHSST: 11-12.1, 11-12.5, 11-12.7 11-12.5, 11-12.7 11-12.5, 11-12.7 11-12.5, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.6, 11-13 11-12.7, 11-13 11-12.8,
			C6.3, C6.4, C6.5, C6.7, C8.1, C8.3, C
. HEALTHCARE QUALITY AND PERFORMANCE IMPROVEMENT	CR	Lab	C6.5, C6.7, C8.1, C8.3, C
. HEALTHCARE QUALITY AND PERFORMANCE IMPROVEMENT A.Introduction and History of Performance Improvement	CR 20		C6.5, C6.7, C8.1, C8.3, C
		СС	C6.5, C6.7, C8.1, C8.3, C Standards Academic: LS: 11-12.1,
A.Introduction and History of Performance Improvement		СС	C6.5, C6.7, C8.1, C8.3, C Standards Academic: LS: 11-12.1, 11-12.2, 11-1: 11-12.4, 11-1:
A.Introduction and History of Performance Improvement 1. Trace the Historical Events that have Contributed to Modern performance improvement Programs. 2. Identify key Legislation that has influenced the healthcare quality initiatives 3. Describe key individualsand organizations that have shaped the theory of performance improvement and develope		СС	C6.5, C6.7, C8.1, C8.3, C Standards Academic: LS: 11-12.1, 11-12.2, 11-1: 11-12.4, 11-1: 11-12.6
A.Introduction and History of Performance Improvement 1. Trace the Historical Events that have Contributed to Modern performance improvement Programs. 2. Identify key Legislation that has influenced the healthcare quality initiatives		СС	C6.5, C6.7, C8.1, C8.3, C Standards Academic: LS: 11-12.1, 11-12.2, 11-1 11-12.4, 11-1 11-12.6 RSIT: 11-12.1 11-12.4, 11-1
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A.Introduction and History of Performance Improvement 1. Trace the Historical Events that have Contributed to Modern performance improvement Programs. 2. Identify key Legislation that has influenced the healthcare quality initiatives 3. Describe key individualsand organizations that have shaped the theory of performance improvement and develope models for use inperformance activities. 2. Defining Performance Improvement (PI) Model 3. Identifying Improvement Opportunities Based on Performance Measurements 4. Using Teamwork in Performance Improvement 5. Aggregating and Analyzing Performance Improvement Data 6. Communicating Performance improvement Activities and Recommendations 7. Measuring Customer Satisfaction 8. Refining the Continum of Care 9. Improving the Providion of Care, Treatment and Services 10. Preventing and Controlling Infectious Diseases 11. Decreasing Risk Exposure 12. Building a Safe Medication Management System		СС	C6.5, C6.7, C8.1, C8.3, C7 C8.1, C8.3, C8.1, C8.3, C9.1, C8.3, C9.1, C9.
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A.Introduction and History of Performance Improvement 1. Trace the Historical Events that have Contributed to Modern performance improvement Programs. 2. Identify key Legislation that has influenced the healthcare quality initiatives 3. Describe key individualsand organizations that have shaped the theory of performance improvement and develope models for use inperformance activities. 2. Defining Performance Improvement (PI) Model 3. Identifying Improvement Opportunities Based on Performance Measurements 4. Using Teamwork in Performance Improvement 5. Aggregating and Analyzing Performance Improvement Data 6. Communicating Performance improvement Activities and Recommendations 7. Measuring Customer Satisfaction 8. Refining the Continum of Care 9. Improving the Providion of Care, Treatment and Services 10. Preventing and Controlling Infectious Diseases 11. Decreasing Risk Exposure 12. Building a Safe Medication Management System 13. Managing the Environment of Care 14. Developing Staff and Human Resources 15. Organizing the Performance Improvement 16. Navigating the Accreditation, Certification , or Licensure Process 17. Implimenting Effective Information Management Tools for Performance Improvement 18. Managing Healthcare Performance Improvement Projects		СС	C6.5, C6.7, C8.1, C8.3, C Academic: LS: 11-12.1, 11-12.4, 11-12.6 RSIT: 11-12.4, 11-12.6, 11-12.8 RLST: 11-12.8 RLST: 11-12.11-12.6, 11-12.4, 11-12.4, 11-12.4, 11-12.4, 11-12.2, 11-12.2a, 11-12.2a, 11-12.2a, 11-12.2b, 11-12.2c, 11-12.4, 11-12.
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A.Introduction and History of Performance Improvement 1. Trace the Historical Events that have Contributed to Modern performance improvement Programs. 2. Identify key Legislation that has influenced the healthcare quality initiatives 3. Describe key individualsand organizations that have shaped the theory of performance improvement and develope models for use inperformance activities. 2. Defining Performance Improvement (PI) Model 3. Identifying Improvement Opportunities Based on Performance Measurements 4. Using Teamwork in Performance Improvement 5. Aggregating and Analyzing Performance Improvement Data 6. Communicating Performance improvement Activities and Recommendations 7. Measuring Customer Satisfaction 8. Refining the Continum of Care 9. Improving the Providion of Care, Treatment and Services 10. Preventing and Controlling Infectious Diseases 11. Decreasing Risk Exposure 12. Building a Safe Medication Management System 13. Managing the Environment of Care 14. Developing Staff and Human Resources 15. Organizing the Performance Improvement 16. Navigating the Accreditation, Certification , or Licensure Process 17. Implimenting Effective Information Management Tools for Performance Improvement 18. Managing Healthcare Performance Improvement Projects		СС	C6.5, C6.7, C8.1, C8.3, C.7, C8.1, C8.3, C.7, C8.1, C8.3, C.7 Academic: LS: 11-12.1, 11-12.4, 11-12.6 RSIT: 11-12.4, 11-12.1, 11-12.6, 11-12.8 RLST: 11-12.7, 11-12.8, 11-12.9, 11-12.20, 11-12.20, 11-12.20, 11-12.20, 11-12.20, 11-12.20, 11-12.20, 11-12.20, 11-12.20, 11-12.20, 11-12.20, 11-12.21
A.Introduction and History of Performance Improvement 1. Trace the Historical Events that have Contributed to Modern performance improvement Programs. 2. Identify key Legislation that has influenced the healthcare quality initiatives 3. Describe key individualsand organizations that have shaped the theory of performance improvement and develope models for use inperformance activities. 2. Defining Performance Improvement (PI) Model 3. Identifying Improvement Opportunities Based on Performance Measurements 4. Using Teamwork in Performance Improvement 5. Aggregating and Analyzing Performance Improvement Data 6. Communicating Performance improvement Activities and Recommendations 7. Measuring Customer Satisfaction 8. Refining the Continum of Care 9. Improving the Providion of Care, Treatment and Services 10. Preventing and Controlling Infectious Diseases 11. Decreasing Risk Exposure 12. Building a Safe Medication Management System 13. Managing the Environment of Care 14. Developing Staff and Human Resources 15. Organizing the Performance Improvement 16. Navigating the Accreditation, Certification, or Licensure Process 17. Implimenting Effective Information Management Tools for Performance Improvement 18. Managing the Human Side of Change (Procedures, Proceses, Personel etc.) 20. Developing the Performance Improvement Plan for the Healthcare Organization		СС	C6.5, C6.7, C8.1, C8.3, C.7, C8.1, C8.3, C
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A-SSE: 1, 1a, 1b, 4 A-REI: 10, 11, 12 F-IF: 1, 10, 2, 4, 5, 6, 7, 7a, 7b, 7d N-Q: 1, 2, 3 S-IC: 1, 2, 3, 5, 6 S-ID: 1, 2, 3, 4, 5, 6, 6a, 6b, 6c, 7, 8, 9 S-CP: 1 S-MD: 5, 5a, 5b, 6.7 APPS: 10.0, 7.0 CTE Anchor: Communications: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8 Career Planning Management: 3.1, 3.2, 3.4, 3.5, 3.6 Technology: 4.1, 4.2, 4.3, 4.4, 4.5, 4.6 Problem Solving and Critical Thinking: 5.1, $5.2, \, 5.3, \, 5.4, \, 5.5,$ 5.6 Health and Safety: 6.2, 6.5, 6.6, 6.7, 6.8 Ethics and Legal Responsibilities: 8.4 Leadership and Teamwork: 9.1, 9.2, 9.3, 9.4, 9.5, 9.7 Demonstration and Application: 11.2 CTE Pathway: C1.1, C1.2, C1.3, C1.5, C1.6, C1.8, C2.3, C3.1, C3.2, C3.3, C3.4, C3.6, C4.1, C4.2, C4.3, C4.4, C5.1, C5.2, C6.1, C6.2, C6.3, C6.4, C6.5, C6.6, C6.7, C7.1, C7.2, C7.3, C7.4, C8.1, C8.2, C8.3, C8.4, C12.2, C12.3, C12.4, C13.1, C13.2, C13.3, C13.4, C14.1, C14.2, C14.3, C15.3, C15.7 VIII. MEDICAL TRANSCRIPTIONIST & HEALTH INFORMATION TECHNOLOGY PRACTICE CR **Standards** CC

1. DRAGON Medical Practice 4 Software Plus Headset [Health Information Technology] 1.) Data Entry Tool for Medicsion Advanced Case Sudies, Create Office Documents, Medical Transcription Practice using Yoke Recognition Software for the Medicial Office. Scan in Documents Using a Scanner directly into a medical Database/ Electronic Health Record [HIT Skills] Use a PAD or cell phone with an App. to Transfer data directly into a Medical Database/ Electronic Health Record [HIT Skills] Medical Transcriptionist Career Opportunities and Skills			Academic: LS: 11-12.1, 11-12.2, 11-12.3, 11-12.4 RSIT: 11-12.1, 11-12.4, 11-12.7, RLST: 11-12.1, 11-12.5, 11-12.6, 11-12.9, WS: 11-12.2, 11-12.2d, 11-12.2d, 11-12.2d, 11-12.2d, 11-12.2d, 11-12.2d, 11-12.2d, 11-12.2d, 11-12.1, 11-12.8 WHSST: 11-12.1, 11-12.6, 11-12.7, 11-12.8, 11-12.9 WHSST: 11-12.1, 11-12.6, 11-12.7, 11-12.8, 11-12.9 WHSST: 11-12.1, 11-12.1, 11-12.8, 11-12.9 CTE Anchor: Communications 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8 Career Planning and Management: 3.1, 3.2, 3.3, 3.4, 3.6 Technology: 4.1, 4.2, 4.3, 4.4, 4.5, 4.6 Problem Solving and Critical Thinking: 5.1, 5.2, 5.3, 5.4, 5.6 Technical Knowledge and Skills: 10.1, 10.2, 10.3 Demonstration and Application: 11.1, 11.2, 11.3, 11.5 CTE Pathway: C1.1, C1.2, C2.1, C2.2, C4.3, C7.1, C8.2, C9.2, C9.4, C10.1, C10.2, C10.3, C10.4, C10.5, C15.2, C15.3
EEVIEW FOR RHIT (REGISTERED HEALTH INFORMATION TECHNICIAN) CERTIFICATION EXAM PREP		_ab/ CC	Standards
.Review for the RHIT Certification Exam 4. Date Content. Structure and Information Covernance. 24.28% of the Test	٠ ،	10	Academic: LS: 11-12.1,
Data Content, Structure and Information Governance 24-28% of the Test			11-12.2, 11-12.3 11-12.4
2. Access, Disclosure, Privacy and Security 12-16% of the Test			RSIT: 11-12.1,
 Access, Disclosure, Privacy and Security 12-16% of the Test Data Analytics and Use 14-18% of the Test 	- 1		11-12.4, 11-12. 11-12.6
3. Data Analytics and Use 14-18% of the Test			
3. Data Analytics and Use 14-18% of the Test 4. Revenue Cycle Management 14-18% of the Test			RLST: 11-12.1,
3. Data Analytics and Use 14-18% of the Test			RLST: 11-12.1, 11-12.2, 11-12. 11-12.5, 11-12.

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1				11-12.4, 11-12.8,
1				11-12.9
				WHSST: 11-12.4, 11-12.8,
				11-12.4, 11-12.8,
l				CTE Anchor:
l				Communications:
				2.1, 2.2, 2.4, 2.5,
l			1	2.7, 2.8
				Career Planning
				and
				Management:
				3.6, 3.9
				Technology: 4.3
				Problem Solving
				and Critical
				Thinking: 5.1, 5.2, 5.3, 5.4, 5.5,
				5.6
				Ethics and Legal
				Responsibilities:
				8.1, 8.2, 8.3, 8.4,
			1	8.5, 8.7
				Leadership and
				Teamwork: 9.1,
				9.2, 9.3, 9.4
				Technical
				Knowledge and Skills: 10.1, 10.2,
l				10.3
				Demonstration
				and Application:
				11.1, 11.2
				CTE Pathway:
				C1.1, C1.2,
				C1.3, C1.4,
				C1.5, C1.6,
				C1.7, C1.8, C2.1, C2.2,
				C2.1, C2.2, C2.3, C2.4,
				C3.1, C3.2,
				C3.3, C3.4,
				C3.5, C3.6,
				C4.1, C4.2,
				C4.3, C4.4,
				C5.1, C5.2,
				C6.1, C6.2, C6.3, C6.4,
				C6.5, C6.6,
				C6.7, C7.1,
				C7.2, C7.3,
				C7.4, C8.1,
				C8.2, C8.3,
				C8.4, C9.1, C9.2, C9.3,
				C9.4, C9.5,
				C10.1, C10.2,
				C10.3, C10.4,
			1	C10.5, C11.1,
				C11.2, C11.3,
				C11.4, C11.5,
				C12.1, C12.2, C12.3, C12.4,
				C12.3, C12.4, C13.1, C13.2,
				C13.3, C13.4,
				C14.1, C14.2,
				C14.3, C15.1,
				C15.2, C15.3,
				C15.4, C15.5,
				C15.6, C15.7
X.	REVIEW FOR THE REGISTERED HEALTHCARE DOCUMENTATION SPECIALIST (RHDS) CERTIFICATION EXAM PREP	CR	Lab	Standards
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A. Review for the RHDS (Registered Healthcare Documentation Specialist) Certification Exam

Test Sections from the Registered Healthcare Documentanation Specialist Certification Exam

- 1. Multiple Choice Questions---- The majority of objectives involve assessment via a multiple-choice question type whereby the candidate will be asked to select an appropriate answer from a choice of 3-4 options, depending on the nature and scope of content.
- 2. Transcription with Audio---Some objectives require assessment via practical application. Candidates will be given an audio clip with transcribed text containing "blank" fields that must be filled in by the candidate. Excerpts may contain one or more blanks, and all blanks must be filled in correctly to receive credit for the question.
- 3. Speech Recognized Draft of Text (SRT) Edition Against Audio--- For this section of the exam, candidates will be provided with a speech-recognized draft of text and the accompanying dictated audio. The candidate will need to identify the word or phrase captured in error by the SRT engine and transcribe the correct word or phrase in the field
- 4. Clinical Medicine Questions--- Questions in this section will assess the candidate's understanding of clinical terms, definitions, standards, and processes deemed to be level 2 concepts, ie, those common to the transcription experience of an acute-care transcriptionist or editor.
- 5. Health Information Technology Questions --- Questions in this section will assess the candidate's understanding of technology terms and definitions deemed to be level 2 concepts, ie, those that reflect the MT's understanding of trends, drivers, and standards in the health information management domain.
- B. Students perform a simulated practice Test Timed for each part of the Registered Healthcare Documentation Specialist) Certification Exam. This way the student find out what score they would have obtained and it been an actual RHDS Examination.

10 Academic: LS: 11-12.1. 11-12.2, 11-12.4 RSIT: 11-12.1, 11-12.4 RLST: 11-12.1, 11-12.2, 11-12.4, 11-12.5, 11-12.6, 11-12.8, 11-12.9 WS: 11-12.2, 11-12.2a, 11-12.2b, 11-12.2c, 11-12.2d, 11-12.8, 11-12.9 WHSST: 11-12.2, 11-12.4, 11-12.6. 11-12.8. 11-12.9 CTE Anchor:

Communications: 2.1, 2.2, 2.4, 2.5, 2.6, 2.7, 2.8 Career Planning and Management: 3.1. 3.2. 3.3. 3.4 Technology: 4.1, $4.2,\,4.3,\,4.4,\,4.5$ Problem Solving and Critical Thinking: 5.1, $5.2, \, 5.3, \, 5.4, \, 5.5,$ 5.6 Health and Safety: 6.8 Responsibility and Flexibility:

7.1, 7.2, 7.3, 7.4, 7.6, 7.7 Ethics and Legal Responsibilities: 8.1, 8.2, 8.3, 8.4, 8.5, 8.6, 8.7 Leadership and Teamwork: 9.2 9.3, 9.4, 9.5 Technical Knowledge and Skills: 10.1, 10.2, 10.3, 10.4, 10.5 Demonstration and Application: 11.1, 11.2

CTE Pathway:

C1.1, C1.2, C1.3, C1.4, C1.5, C1.6, C1.7, C1.8, C2.1, C2.2, C2.3, C2.4, C3.1, C3.2, C3.3, C3.4, C3.5, C3.6, C4.1, C4.2, C4.3, C4.4, C5.1, C5.2, C6.1, C6.2, C6.3. C6.4. C6.5, C6.6, C6.7, C7.1, C7.2, C7.3,

C7.4, C8.1, C8.2, C8.3,

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			C9.2, C9.3,
			C9.4, C9.5,
			C10.1, C10.2,
			C10.3, C10.4,
			C10.5, C11.1,
			C11.2, C11.3,
			C11.4, C11.5,
			C12.1, C12.2,
			C12.3, C12.4,
			C13.1, C13.2,
			C13.3, C13.4,
			C14.1, C14.2,
			C14.3, C15.1,
			C15.2, C15.3,
			C15.4, C15.5,
			C15.6, C15.7

Entered by:

District:

El Monte Union High School District Hillary Wolfe, Director, Research and Curriculum (626) 444 9005 x9925 Contact:

Phone: Email: Hillary.wolfe@emuhsd.org