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Re-imagining primary healthcare in the light of health data management in Nigeria: the roles of Health Information Management Professionals

Ibrahim Taiwo Adeleke¹⁻², Abdul-Lateef Adisa Adebisi²
¹Editor-in-Chief, International Journal of Health Records & Information Management; ²Department of Health Records, Federal Medical Centre, Bida, Nigeria

Corresponding author: E-mail: ijhrim.nigeria@yahoo.com, aitofiseyin@yahoo.com

Quality health data is essential to good healthcare processes and the lack of it might mean poor healthcare. No wonder, the foremost American by birth and later, Australian by advanced practice, Lady Edna Kal Huffman emphasized the essentials of good health data management in her much sought after book *Medical Records Management*. In her wisdom and scholarly work, Huffman berated poor health data as she opined that it may lead to poor healthcare delivery¹. Though late, her works have been revised, reprinted and republished severally. She was indeed our forebear in scholarly works in health information management.

Quality health data is as important to quality healthcare delivery the way blood is essential to human body systems. Management of this vital healthcare tool (data) has been somewhat sub-optimal in Nigeria. This is especially at the primary healthcare level. It is one of the major concerns identified during the March 2002 Healthcare Summit organized by by the Federal Ministry of Health in collaboration with one of her agencies, the National Primary Healthcare Development Agency (NPHCDA). The Summit set a 10-year Strategic Plan to revitalize primary healthcare delivery with four-points agenda.

Prominent among the agenda is to ensure that the right enablers and capabilities are in place to support the delivery of the strategy. Behold, information and data management is one major cornerstone of these enablers².

Healthcare stakeholders in Nigeria have not given enough attention to data management at

primary healthcare level. The HIM Professionals, who are the traditionally trained and recognized managers of this vital ingredient of effective care process, play 'Nigeria' attitude toward quality health data management. Most times, every graduate of HIM prefers job at "federal' level for a fixed mind that there is better arrangements for negotiations.

Worst still, the middle level HIM manpower trained at schools or colleges of health technology, who purposely to man PHC data management prefer to compete for the inadequately provided established positions at 'federal' level. This has obviously left management of primary healthcare data in Nigeria either in the hands of 'quacks' due to role substitution or at best, in the corridors of unmotivated HIM Professionals.

The Editorial Board welcomes our readers and contributors to the 5th edition in the World of IJHRIM. Our contributors and readers far and near, have kept faith with IJHRIM as the foremost core HIM Journal in Africa to have triumphed and scaled the hurdles of predatory. This 5th volume comes with a new dimension in the writings and publishing style. We have adopted advanced technologies in publishing as our healthcare system too migrates into electronic health records technologies. The balancing positioning of the three insignia of HIM on the Journal's cover indicate our commitment to embrace EHR and points to the consistency and stability of scholarly publishing in the Nigerian HIM space.

In this 5th edition, Sani *et al.* reviewed the psychosocial impacts of COVID-19 on our populations,

Sani *et al.* identified factors associated with health service utilization among Diabetes patients and Oweghoro & Oluwole reviewed already coded patients' health records in UCH Ibadan for clinical coding accurac³⁻⁵.

Dogiye *et al.* investigated the state of ICT application at two public tertiary hospitals in South-Southern states and Adeoye in an abstract, briefly looked at the possibilities of developing a Biometric platform for patient registration^{6,7}. Adeleke *et al.* reviewed the current state of policies regarding health information

management in Nigeria, Kilgori & Ladan appraised the challenges and prospects of health data management at our primary levels of healthcare and Omole *et al.* assures hope of a brighter future for health information management profession in Nigeria.

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ORCID iD

Ibrahim Taiwo Adeleke

https://orcid.org/0000-0001-9118-2089