



Editorial

Right-placing health information management education in Nigeria: the assent, investment and emerging issues

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In December 2022, the National Universities Commission (NUC) published her revised Core Curriculum Minimum Academic Standards (CCMAS) featuring the (approval to run) Bachelor of Health Information Management (B.HIM) in Nigeria universities among other newly approved and revised programmes¹. The Commission (NUC) is the sole federal government agency responsible for accreditation and re-accreditation of university academic programme in Nigeria.

Over the years, education for HIM has been domiciled in few teaching hospitals and mostly at colleges of health sciences and technologies, training and issuing higher and national diplomas². In addition to these diplomas, are training for HIM technicians and until early millennium, HIM Assistants were trained in these colleges. It is noteworthy to say that most HIM Professionals, who hold the basic university degree are among the few, who were government- or self-sponsored to UK, USA and Australia between the '60s and early 80s. In the year 2010/2011, vibrancy, patriotism, passion and the quest for professional growth led the professional body to carve a niche and encouraged hundreds of HND holders and later, ND/Technician holders to leave the shore of Nigeria to the Republic of Benin for 6-semester and 8-semester top-up for HND and ND holders respectively.

Years later, more HIM Compatriots travelled to Niger Republic for the same quest. A host of others are those, who attended some Nigerian universities, mostly privately-owned, where the programme was hosted in faculties other than allied health. These efforts put forward, all in a bid to move away from their comfort zones and revamp the HIM image.

This recent development of NUC's assent has taken HIM profession off the shackles of backwardness and it right-places it as the fulcrum around which other health professions revolve. Indeed, the 57-year old vicious cycle of lagging in the comity of health professions in Nigeria is gone for good. The development would also mean more expectations and pressure on our erudite editors, reviewers and contributors to IJHRIM as more manuscripts flow in from our potential HIM academics.

Since the December 2022 assent, there have been concerns and concerted efforts by the regulatory agency (HRORBN), professional body (AHRIMPN) and resourceful individuals to ensure a wholesome takeoff. Notable among these was the contribution made by Dr Kayode Adepoju of Ondo University of Medical Sciences, who served as a 'Commisioned' HIM Consultant to NUC during the development of the new CCMAS. These frantic efforts, among others, include development of B.HIM Reading Series, the 30% remaining offer to be filled by the respective universities in collaboration with the profession, accreditation of universities for the programs, pressure on the few HIM Scholars to oversee B.HIM programs in various accredited universities, profiteering HIM program through multitudes of satellite campuses by some newly accredited universities and so on.

In this 'scholarly' spirited series of our historical publishing, Muhibi 's commentary on the newly approved B.HIM Program epitomizes the enthusiasm abound in the healthcare system for the long awaited NUC approval for one of the oldest professions in Nigeria. Similarly, Babagana *et al.*, examined the new CCMAS for general overview and appreciation, while Oweghoro took

to the invaluable inputs made in the same December 2022 by the HRORBN and the National Board for Technical Education in ensuring the existing ND and HND curricular stand the test of time considering the unfolding challenges in our education system^{3,4}. Similarly, Magaji, in his letter also examined the possible challenges and prospects of the new B.HIM curriculum, the reviewed HND/ND curricular and the responsibilities of the HRORBN.

Digital health, health analytics and health data quality improvement are three major concepts taking the current stage in health information management in Nigeria. It is in this light that Adeleke *et al.*, reiterate the importance of discharge summary, while transiting care in their qualitative and quantitative analysis of inpatient health records at a public tertiary hospital in North-Central. It was a followup to an earlier study from the same healthcare centre⁵. Kehinde *et al.* took to the fundamentals of statistical analysis by dissecting the performance of ordinary least square estimator as one of the fundamentals of hospital statistics that HIM professionals profess to care for.

Other scholars in this series are Suleiman *et al.* and their investigation into the patterns of cases and mortality from cervical cancer at National Hospital Abuja, using the health records of patients with cervical cancer. Adio *et al.* appraises sections and units in an ideal Health Records Department and Kaze opens a talk on Artificial Intelligence and its relevance to HIM. Casmir gave a preliminary reports on their ongoing studies on the influence of capacity building in EMR adoption, while Adoghe *et al.*, gave similar reports on impacts of mathematical modeling in optimization of EMR systems. Albert *et al.* explored possible causes and effects of industrial actions on hospital administrations and healthcare services in a Nigerian hospital.

To our esteem readers and contributors, this 6th Volume of IJHRIM features the beginning of our professional resolve to profile heroes and heroines of HIM profession in Nigeria. The first of these icons to be recognized is the Doyen of Health Records in Nigeria popularly referred to as ‘Baba Akanji’. A one-time, five-terms National Secretary of the professional association and one-time Chairman, Governing Council of the regulatory body. As we welcome you to the world of scholarly publishing with IJHRIM the 6th time, we wish you happy scholarly reading!

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