

IAIMS Planning Aid: Features and Functions



	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	Gap	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	Gap	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented	1- Very Little Progress 2- Partially Present 3- Mostly Present 4- Fully Implemented
	Leadership Council N=7	Leadership Council N=10	Leadership Council	Advisory Council N=11	Advisory Council N=11	Advisory Council	OMT N=4	OMT N=4	OMT N=4	KMIT OPS N=6	Combined Groups N=27	Combined Groups N=25	Combined Groups	Combined Groups	Combined Groups	Combined Groups	Combined Groups	Combined Groups
	2002 - Average	2000 - Average	Gap	2002 - Average	2000 - Average	Gap	2002 - Average	2000 - Average	Gap	2002 - Average	2002 - Average	2000 - Average	Gap	2002 - Average	2000 - Average	Gap	2002 - Average	2000 - Average
<b>Information Culture of the Institution</b>																		
Education, research & clinical resources are accessible from a single desktop display.	2.67	2.00	0.67	2.30	2.09	0.21	2.75	2.50	0.25	2.57		2.57	2.20	0.38				
There is an organizational structure for information that is recognized and accepted.	3.14	2.20	0.94	2.50	2.45	0.05	2.40	1.67	0.73	2.14	2.55	2.11	0.44					
IAIMS issues are a regular feature of senior management and board discussions.	2.43	2.57	-0.14	2.56	2.00	0.56	3.00	2.50	0.50	2.71	2.67	2.36	0.32					
The information infrastructure is recognized as a fundamental tool for meeting business (mission) goals.	2.86	2.88	-0.02	2.63	2.55	0.08	2.60	2.00	0.60	3.00	2.77	2.47	0.30					
There is an institutional strategy for Internet-based commerce.	2.17	2.00	0.17	1.67	2.00	-0.33	1.80	2.00	-0.20	1.57	1.80	2.00	-0.20					
There are institutional strategic initiatives that depend on information infrastructure.	2.86	2.22	0.63	2.90	2.40	0.50	2.75	3.00	-0.25	2.86	2.84	2.54	0.30					
Access to library, research and clinical information systems is time, place, and platform independent.	2.86	2.63	0.23	2.80	2.45	0.35	2.75	2.75	0.00	2.14	2.64	2.61	0.03					
Information policies reflect input from all affected parties.	3.00	2.38	0.63	2.20	2.11	0.09	2.20	2.25	-0.05	2.43	2.46	2.25	0.21					
The IAIMS effort is supported by stable institutional funds.	2.25	2.00	0.25	2.33	1.89	0.44	2.00	2.67	-0.67	2.33	2.23	2.19	0.04					
Faculty, students and staff can view information about themselves stored in the institution's information systems.	2.17	2.00	0.17	1.80	1.50	0.30	1.60	1.50	0.10	1.83	1.85	1.67	0.18					
There is a zero-tolerance policy regarding violations of security/confidentiality of personal information.	3.14	2.57	0.57	2.18	2.09	0.09	1.67	2.00	-0.33	2.50	2.37	2.22	0.15					
There is a designation of IAIMS leadership with proper background and status.	3.50	2.50	1.00	2.64	2.50	0.14	1.83	2.25	-0.42	2.80	2.69	2.42	0.28					
There is evidence of institutional unity/commitment to the IAIMS program.	3.20	2.50	0.70	2.40	2.55	-0.15	1.60	2.20	-0.60	3.00	2.55	2.42	0.13					
There is leadership appreciation of the importance of information technology to the goals of the	3.60	2.50	1.10	2.90	2.80	0.10	2.91	2.50	0.41	3.00	3.10	2.60	0.50					
There are training and policy awareness programs for all users of information systems.	2.43	1.75	0.68	2.30	2.67	-0.37	2.00	2.25	-0.25	2.50	2.31	2.22	0.08					
All major organizational components are involved in IAIMS planning and operations management.	2.71	2.25	0.46	2.40	1.90	0.50	2.00	2.00	0.00	2.67	2.45	2.05	0.40					
<b>Average Score across section within group</b>	<b>2.81</b>	<b>2.31</b>	<b>0.50</b>	<b>2.41</b>	<b>2.25</b>	<b>0.16</b>	<b>2.24</b>	<b>2.25</b>	<b>-0.01</b>	<b>2.50</b>	<b>2.49</b>	<b>2.27</b>	<b>0.22</b>					
<b>The Information Management Plan</b>																		
There is an IAIMS Plan and a process for keeping it updated.	2.71	2.88	-0.16	3.10	2.40	0.70	3.00	2.75	0.25	3.43	3.06	2.68	0.39					
There are IAIMS activities that support national information goals(outreach, NGI, training, underserved).	2.67	2.71	-0.05	2.70	2.18	0.52	2.50	1.00	1.50	2.33	2.55	1.97	0.58					
Administrative computing for health care, education and research is represented in the IAIMS plan.	2.83	2.71	0.12	2.90	2.55	0.35	2.67	2.00	0.67	3.00	2.85	2.42	0.43					
There is a component of the IAIMS plan that promotes and rewards innovation.	2.60	2.50	0.10	2.08	2.09	-0.01	2.00	1.67	0.33	1.75	2.11	2.09	0.02					
There is a strategic architecture document - (see Hripcsak article in JAMIA).	2.67	1.67	1.00	2.33	1.70	0.63	0.00	2.50	-2.50	2.40	1.85	1.96	-0.11					
There are evaluation methods in place to assess progress toward/achievement of IAIMS goals.	3.00	1.83	1.17	2.40	2.18	0.22	3.00	2.00	1.00	2.50	2.73	2.01	0.72					
There are milestones for reaching key elements of the IAIMS plan.	3.00	2.00	1.00	2.50	2.30	0.20	3.00	2.75	0.25	2.71	2.80	2.35	0.45					
<b>Average Score across section within group</b>	<b>2.78</b>	<b>2.33</b>	<b>0.45</b>	<b>2.57</b>	<b>2.20</b>	<b>0.37</b>	<b>2.31</b>	<b>2.10</b>	<b>0.21</b>	<b>2.59</b>	<b>2.56</b>	<b>2.21</b>	<b>0.36</b>					
<b>Information Management and Administration</b>																		
There is a program for assessing security vulnerabilities (e.g., run 'hacker scripts').	2.50	1.67	0.83	2.40	1.91	0.49	2.00	1.33	0.67	2.00	2.23	1.64	0.59					
There is designated leadership with appropriate background and status.	3.33	2.43	0.90	2.73	2.45	0.27	2.60	3.00	-0.40	3.33	3.00	2.63	0.37					
There are sanctions for violation of confidentiality/security that are enforced.	2.33	2.50	-0.17	1.90	1.90	0.00	3.00	2.00	1.00	2.50	2.43	2.13	0.30					
Every individual has a unique identifier or logon-ID.	3.43	3.33	0.10	3.00	3.09	-0.09	3.33	3.25	0.08	2.88	3.16	3.22	-0.07					
There are confidentiality and security protections for computer based information about individuals.	2.71	2.86	-0.14	2.33	2.70	-0.37	3.25	2.00	1.25	2.71	2.75	2.52	0.23					
There are limits to unauthorized physical access to computer systems.	2.40	2.67	-0.27	2.50	2.55	-0.05	3.00	2.33	0.67	2.50	2.60	2.52	0.08					
The use and efficiency of systems and services is measured.	2.67	2.00	0.67	2.10	2.09	0.01	2.33	1.50	0.83	1.75	2.21	1.86	0.35					
Input is gathered from system users, including patients and students, about the cost and benefits of IT applications.	2.80	1.75	1.05	1.80	1.64	0.16	2.00	1.00	1.00	2.00	2.15	1.46	0.69					
The institution has adopted standards for hardware, network design.	3.33	2.90	0.43	2.70	2.64	0.06	2.67	3.25	-0.58	3.17	2.97	2.93	0.04					
The institution has adopted standards for software and integration.	3.33	3.33	0.00	2.40	3.50	-1.10	2.67	3.25	-0.58	2.13	2.63	3.36	-0.73					
Virus checking programs are installed on all servers.	3.33	3.17	0.17	2.80	3.27	-0.47	3.20	3.00	0.20	2.83	3.04	3.15	-0.10					
There is a current inventory of technological status and capabilities.	3.33	2.20	1.13	2.44	2.45	-0.01	2.33	2.25	0.08	2.40	2.63	2.30	0.33					
There is secure authentication for remote and mobile users.	2.80	3.17	-0.37	2.75	2.67	0.08	2.00	2.33	-0.33	1.86	2.35	2.72	-0.37					
There is substantial involvement of the library in overall management of information.	3.40	3.14	0.26	3.00	3.18	-0.18	2.67	3.25	-0.58	2.17	2.81	3.19	-0.38					
There is a firewall that bars access by outsiders to all but systems critical to them.	2.83	3.00	-0.17	2.13	2.20	-0.08	2.67	1.33	1.33	1.83	2.36	2.18	0.19					
There is a process for evaluating success/failure/lessons learned.	3.00	2.00	1.00	2.00	1.80	0.20	3.20	2.00	1.20	2.00	2.55	1.93	0.62					
The inventory of users, devices and usage is used for ongoing management of the information environment.	3.00	2.00	1.00	2.30	2.45	-0.15	2.00	2.00	0.00	1.83	2.28	2.15	0.13					
There are data marts or data warehouses for administrative and research needs.	2.33	2.33	0.00	1.90	2.00	-0.10	1.67	1.00	0.67	2.17	2.02	1.78	0.24					
There is desktop access to full text materials and digital images stored on institutional servers.	2.40	2.17	0.23	2.30	2.33	-0.03	2.33	1.33	1.00	2.33	2.34	1.94	0.40					
There are role-based access controls to confidential information.	2.50	2.33	0.17	2.22	2.36	-0.14	2.75	2.00	0.75	2.33	2.45	2.23	0.22					
There is an emergency access plan for the EMR.	2.25	2.67	-0.42	2.43	2.30	0.13	4.00	2.33	1.67	3.00	2.92	2.43	0.49					
<b>Average Score across section within group</b>	<b>2.86</b>	<b>2.55</b>	<b>0.31</b>	<b>2.39</b>	<b>2.45</b>	<b>-0.06</b>	<b>2.65</b>	<b>2.18</b>	<b>0.47</b>	<b>2.37</b>	<b>2.57</b>	<b>2.39</b>	<b>0.17</b>					
<b>Education Mission</b>																		

Computers and the Internet are fundamental to the success of education programs.	3.50	2.88	0.63	2.90	2.64	0.26	3.25	3.00	0.25	2.50		3.04	2.84	0.20
Health professions instruction includes information/informatics specialists.	3.29	2.50	0.79	2.30	2.10	0.20	2.17	1.67	0.50	2.50		2.56	2.09	0.47
Health professions education programs have informatics competency requirements.	2.71	1.60	1.11	1.90	1.60	0.30	2.00	1.00	1.00	1.00		1.90	1.40	0.50
There is a curriculum management system for use by educational administrators and instructors.	2.86	2.17	0.69	1.80	2.09	-0.29	2.60	1.33	1.27	2.00		2.31	1.86	0.45
All required curriculum materials are available in electronic form.	2.67	2.67	0.00	2.17	1.90	0.27	2.60	1.33	1.27	2.00		2.36	1.97	0.39
There are academic faculty involved in IT development for education.	3.40	1.67	1.73	2.30	2.10	0.20	2.20	1.33	0.87	1.50		2.35	1.70	0.65
The medical education research portfolio includes informatics-related topics.	3.17	1.50	1.67	1.90	2.00	-0.10	2.00	1.67	0.33	1.00		2.02	1.72	0.29
The effects of IT applications on teaching and learning are measured.	2.80	2.00	0.80	1.60	1.70	-0.10	2.00	1.00	1.00	1.00		1.85	1.57	0.28
There are academic rewards for IT-related innovation.	2.20	2.50	-0.30	1.40	1.30	0.10	2.00	1.00	1.00	1.00		1.65	1.60	0.05
There is an integrated electronic student record.	2.20	1.20	1.00	1.67	1.60	0.07	2.00	1.00	1.00	1.00		1.72	1.27	0.45
IAIMS costs related to education are budgeted and monitored.	2.75	1.25	1.50	1.56	1.89	-0.33	3.50	1.33	2.17	1.00		2.20	1.49	0.71
<b>Average Score across section within group</b>	<b>2.87</b>	<b>1.99</b>	<b>0.87</b>	<b>1.95</b>	<b>1.90</b>	<b>0.05</b>	<b>2.39</b>	<b>1.42</b>	<b>0.97</b>	<b>1.50</b>		<b>2.18</b>	<b>1.77</b>	<b>0.41</b>
<b>Clinical Mission</b>														
An audit log is maintained of accesses to patient-related information.	3.00	2.60	0.40	2.50	2.10	0.40	3.50	2.00	1.50	3.00		3.00	2.23	0.77
Affiliates in remote clinics have comparable access to the institution's clinical information systems.	2.40	2.50	-0.10	2.50	1.80	0.70	4.00	2.00	2.00	3.20		3.03	2.10	0.93
All data applicable to one patient can be obtained through the same interface.	2.25	2.00	0.25	1.90	1.44	0.46	2.50	1.75	0.75	3.20		2.46	1.73	0.73
New information about patients is stored in electronic form.	2.50	2.00	0.50	2.30	2.22	0.08	3.00	2.00	1.00	3.20		2.75	2.07	0.68
The clinical information system has decision support (e.g. alerts, literature links, etc.).	2.75	2.00	0.75	1.88	2.38	-0.50	3.00	1.50	1.50	2.33		2.49	1.96	0.53
There are 'time-out' programs that log out registered users after idle periods.	3.00	2.00	1.00	2.67	1.33	1.33	3.50	2.67	0.83	2.75		2.98	2.00	0.98
Patients have the right to request and view audits of access to their medical records.	2.40	2.00	0.40	2.67	1.67	1.00	1.50	-0.50	2.20	2.07		2.07	1.72	0.34
The authorization form for patients improves their understanding of options and has a limited life span.	2.20	1.50	0.70	2.00	2.00	0.00	2.50	2.00	0.50	2.00		2.18	1.83	0.34
Patient-identifiable information is encrypted before it is sent over public networks.	2.50	1.67	0.83	2.00	1.89	0.11	2.00	2.33	-0.33	1.60		2.03	1.96	0.06
There are procedures for moving patient information from print to electronic form.	2.50	1.33	1.17	1.88	1.63	0.25	2.00	1.50	0.50	2.40		2.19	1.49	0.71
There are linkages between clinical and academic informatics groups.	2.25	1.75	0.50	1.90	2.22	-0.32	2.00	2.00	0.00	2.50		2.16	1.99	0.17
The effects of IT applications on the clinical process of care are measured.	2.25	1.67	0.58	1.44	1.88	-0.43	3.00	1.50	1.50	2.00		2.17	1.68	0.49
The effects of IT applications on health outcomes are measured.	2.25	1.25	1.00	1.38	1.88	-0.50	3.00	1.50	1.50	2.00		2.16	1.54	0.61
The effects of IT applications on the timeliness of care are measured.	2.25	1.25	1.00	1.56	1.88	-0.32	3.00	1.25	1.75	2.00		2.20	1.46	0.74
There are established telemedicine activities.	3.00	2.00	1.00	2.44	2.89	-0.44	3.00	2.25	0.75	2.00		2.61	2.38	0.23
IAIMS costs relating to clinical care are budgeted and monitored.	2.50	2.00	0.50	1.67	2.00	-0.33	3.00	2.00	1.00	1.00		2.04	2.00	0.04
<b>Average Score across section within group</b>	<b>2.50</b>	<b>1.84</b>	<b>0.66</b>	<b>2.04</b>	<b>1.95</b>	<b>0.09</b>	<b>2.75</b>	<b>1.86</b>	<b>0.89</b>	<b>2.34</b>		<b>2.41</b>	<b>1.88</b>	<b>0.52</b>
<b>Research Mission</b>														
There are academic faculty with primary roles in informatics research.	2.80	1.60	1.20	1.75	1.78	-0.03	1.25	2.33	-1.08	1.33		1.78	1.90	-0.12
The basic research portfolio includes informatics topics.	2.60	1.60	1.00	1.38	1.56	-0.18	1.33	1.75	-0.42	1.50		1.70	1.64	0.07
Basic researchers have access to clinical information stored institutional systems resources.	2.60	1.57	1.03	1.43	1.56	-0.13	1.50	1.75	-0.25	2.00		1.88	1.63	0.26
There is a system for electronic grants management, including approvals and submissions.	1.33	1.57	-0.24	1.89	1.78	0.11	2.00	2.50	-0.50	1.92		1.78	1.95	-0.17
Informatics support (e.g., database design, terminology, decision support, etc) is available to researchers.	2.50	1.57	0.93	1.86	1.78	0.08	2.50	2.00	0.50	1.67		2.13	1.78	0.35
There is a process for providing basic researchers with access to clinical information in institutional systems.	2.50	1.25	1.25	1.50	1.89	-0.39	2.50	2.25	0.25	1.67		2.04	1.80	0.25
There are mechanisms for protecting security and integrity of research data in electronic form.	2.00	2.00	0.00	2.00	2.22	-0.22	2.50	2.25	0.25	1.67		2.04	2.16	-0.12
IAIMS costs relating to research are budgeted and monitored.	2.50	1.75	0.75	1.50	2.00	-0.50	2.50	2.50	0.00	1.50		2.00	2.08	-0.08
The number of externally funded informatics projects has increased.	3.00	2.25	0.75	2.00	2.29	-0.29	2.50	2.33	0.17	2.00		2.38	2.29	0.09
<b>Average Score across section within group</b>	<b>2.43</b>	<b>1.68</b>	<b>0.74</b>	<b>1.70</b>	<b>1.87</b>	<b>-0.17</b>	<b>2.06</b>	<b>2.19</b>	<b>-0.12</b>	<b>1.69</b>		<b>1.97</b>	<b>1.91</b>	<b>0.06</b>
<b>Average Score across all questions within group</b>	<b>2.72</b>	<b>2.17</b>	<b>0.55</b>	<b>2.20</b>	<b>2.15</b>	<b>0.05</b>	<b>2.46</b>	<b>2.02</b>	<b>0.44</b>	<b>2.21</b>		<b>2.40</b>	<b>2.11</b>	<b>0.29</b>