

CLINICIAN/PRACTITIONER CONSULTANT EXAM BLUEPRINT

General Description

Workers in this role assist in reorganizing the work of a provider to take full advantage of the features of Health IT to improve health and care, and bring to bear the background and experience of a licensed clinical professional or public health professional.

Number of Questions on the Exam:

125 Multiple-Choice Questions

Exam Time:

3 Hours

Domain I: Fundamentals of Health Workflow Process Analysis and Redesign

20%

Competency Statements:

1. Given a scenario, outline the elements involved in providing care within a complex health care system that reflect an understanding of workflow processes.
2. Document clinic processes to facilitate workflow analysis and redesign.
3. Develop a process map for given clinical process workflows within a complex health care system.
4. Facilitate decision-making necessary for optimizing health care processes.
5. Critically analyze the workflow processes in a selected clinical setting, taking into account potential gaps, areas of redundancy, delays, manual work, work volume, task time, and elapsed time.
6. Design processes and information flows for the practice that accommodate quality improvement and reporting.
7. Develop a plan for a revised and optimized clinical workflow within a health care system that integrates meaningful use of information technology.
8. Propose ways in which quality improvement methods and tools can be applied in order to improve workflow processes in a health care setting.
9. Develop and present an implementation plan for a process change.
10. Working with practice staff, develop a set of plans to keep the practice running if the EHR system fails.
11. Working with practice staff, evaluate the new processes as implemented, identify problems and changes that are needed, and develop and present plans for these process changes.
12. Apply to these activities an understanding of health IT, meaningful use, and the challenges practice settings will encounter in achieving meaningful use.

Domain II: Quality Improvement

20%

Competency Statements:

1. Analyze clinical decision-making requirements, including who, what, when, how, and where information is needed.
2. Design and implement information technology that supports effective teamwork, fosters open communication and enables shared decision-making to achieve quality patient care.
3. Analyze clinical workflows to design information technology that supports clinical decision-making and care coordination.
4. Design and apply information technology and standardized practices that support safety and quality.
5. Formulate activation planning that supports and maintains safety and quality.
6. Select and apply quality measures for incorporation into information systems to enable review of outcomes of care and identification of improvement opportunities.

7. Assess findings from quality reviews of reported events to design and implement clinical information system improvements.
8. Select improvement tools to assist clinical teams in improving the quality and safety of the electronic health record.
9. Monitor use of information technology for inappropriate use leading to hazards and errors.
10. Design an information technology culture conducive to highly reliable processes built on human factors research.
11. Design and implement effective strategies to use information technology to decrease reliance on memory.

Domain III: Working with HIT Systems

20%

Competency Statements:

1. Identify common components of an HIT system and types of HIT applications (E-Mar, POE, PACS, ADT, Lab, DSS, Registries, Billing/Coding, etc, and acute care, community health, public health, small provider practices, etc.).
2. Describe data flows across HIT systems and implication of standards.
3. Identify root causes of HIT-induced error (i.e. usability, workflow interference, system error, etc.) and suggest solutions.
4. Assess the strengths and weaknesses of identified solutions to identified HIT problems (to emphasize the reality of “solutions” and illustrate the frequent domino effect/unintended consequences of change of an HIT system).
5. Defines usability, describes general usability principles, and relates usability to adoption in relation to HIT.
6. Define and differentiate security, confidentiality, and privacy and identify common threats.
7. Demonstrate beginning level competency in general HIT system use.

Domain IV: Health Information Management Systems

20%

Competency Statements:

1. Describe general functions, purposes and benefits of health information systems, why they are needed, and the benefits they provide in different healthcare and public health settings.
2. Describe the significant developments and federal initiatives that have influenced the evolution and adoption of health information systems.
3. Compare/Contrast different types of health information systems in terms of their ability to support the requirements of a health care enterprise.
4. Understand how electronic health records affect patient safety, quality, efficiency and patient care, productivity, and reporting outcomes.
5. Propose strategies to minimize major barriers to the adoption of electronic health records.
6. Understand the principles of healthcare data exchange and standards, workflow design and assessment, and their relationship to patient care.

Domain V: Planning, Management, and Leadership for Health IT

20%

Competency Statements:

1. Explain leadership traits and theories.
2. Recognize leadership’s role in IT and EHR project success and project failure.
3. Describe importance of effective leadership of teams.
4. Demonstrate team leadership competencies.

100%

Note: All competency statements are tested on the exam, and are equally important.