Reflections on AMIA—looking to the future

On December 31, 2013, I will complete a 2-year term as AMIA Board Chair. I wanted to reflect on some impressions of the past 2 years and what I see as areas of opportunity for AMIA going forward.

To say this is a dynamic time for AMIA would be a woeful understatement. The increasing presence of information technology in the life of the citizenry is creating new opportunities for approaches to health assessment and health improvement. Biomedical science has access to rapidly increasing amounts of data, and new techniques for the analysis of those data are being developed. New educational techniques that take advantage of information technology are being developed. Governments around the world are developing policies to increase the adoption of interoperable electronic health record (EHR) systems among healthcare providers. At the same time, cost pressures are instigating wrenching changes in approaches to the delivery of healthcare.

Even though EHRs represent only one facet of the interest and energy of the AMIA membership, the US government’s Meaningful Use (MU) program to advance the adoption of EHRs has had a significant influence over AMIA’s activities for the last few years. The MU program represents an unparalleled opportunity to place information technology at the point of clinical care, where it can be most effective. EHRs can guide care delivery, and they also can be used to collect computable health data about the patient. In just a few years, the MU program has dramatically increased the adoption of EHRs among providers in the US. The program also has highlighted limitations of the current generation of EHRs in terms of usability, safety, interoperability, and support for effective and efficient workflows. The work of many AMIA members has been influenced in one way or another by the MU program and the increasing prevalence of EHRs.

The workforce needed to support the increasing prevalence of EHRs is maturing as well, and AMIA has been at the heart of activities designed to increase the informatics workforce and create a rational model of training and certification for informatics professionals. Membership in AMIA’s Academic Forum—representing organizations dedicated to graduate training in informatics—has been increasing. AMIA led the development of Clinical Informatics as a subspecialty recognized by the American Board of Medical Specialties (ABMS). The first Clinical Informatics Board Certification examination was given this fall and AMIA offered a preparatory course. The Accreditation Council for Graduate Medical Education (ACGME) has released requirements for Clinical Informatics fellowship programs. AMIA is working on an Advanced Inter-Professional Informatics Certification (AIIC), since the majority of AMIA members will not be eligible for the ABMS certification. AMIA also working to understand to what extent accreditation of graduate informatics programs would help to advance the profession of informatics and what AMIA’s role in those accreditation processes should be.

A key part of AMIA’s mission is to advance the science of informatics. AMIA continues to refine its program of conferences, to provide opportunities for communication among scientists, and to disseminate scientific findings to a broader audience. Besides AMIA’s Annual Symposium, AMIA offers the Translational Bioinformatics/Clinical Research Informatics Joint Summits, and an annual invitational Policy Conference. In 2014 AMIA will hold its first iHealth Conference, with a focus on the operational aspects of informatics. AMIA has set up a task force looking at JAMIA’s publication model to determine whether there are opportunities to increase the journal’s capabilities to disseminate scientific knowledge. That report is expected at the end of 2013.

Looking ahead, AMIA has many opportunities to advance informatics-related issues. Indeed, the challenge for AMIA will be one of focus and priority. Besides promotion of the informatics workforce, advancement of informatics-related science, and support for its members in general, opportunities for AMIA and its members include increasing discussion and development of solutions for how to (i) assure that EHRs are safe, usable, and promote efficient and effective care, (ii) advance the use of health-related data to support a better understanding of health, health delivery, and disease, (iii) integrate molecular and clinical data, (iv) advance the terminologies and standards that are necessary for the automated manipulation of data, (v) advance health information exchange and interoperability in a way that promotes coordinated and team-based care, and (vi) promote the role of the consumer in the informatics landscape.

Lastly, with increasing pressures on government funding, AMIA needs to be an advocate for adequate and increased funding for informatics research and an organization that promotes an understanding of the role of informatics in advancing biomedical science.

It has been my honor to serve as the AMIA Board Chair for these 2 years. I look forward to many more years of involvement with the organization.

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