Clinical Informatics Practice

Levels of Practice

Key Roles

Top Leader that Values, Invests in, and Supports Interprofessional Informatics

Chief Officers (e.g., Nursing, Medical)

Centralized and Strategic Leader with Decision-making Authority and Operational Oversight

Chief Information Officers (e.g., Nursing, Medical)

Experts to Evaluate and Optimize System Design and Align and Enhance Interprofessional Informatics Practice

Director of Professional Competencies
Director of Clinical Process Transformation
Clinical Informaticians

Respected Leaders to Manage Projects, Make Decisions, and Engage Clinicians to Ensure Strategic Goals, Practice Goals, and End-User Needs are Met

Clinical Informatics Managers
Clinical Informatics Champions

Expert Clinicians and End-Users that Communicate Clinical Relevance for System Design

Training Specialists
Clinical Informatics Coordinator
Super Users
Subject Matter Experts


The second component is shown in Figure 6. It delineates key nursing informatics roles stratified within the five levels of a health care organization identified in the first component. In addition, it shows key interprofessional partnerships for each of the nursing roles identified.

Figure 6: Model of Clinical Informatics Governance for Nursing: Interprofessional Partnerships

Key Nursing Informatics Roles

Key Interprofessional Partnerships*

Chief Nursing Officers

Chief Medical Officer
Chief Information Officer
Chief Analytics/Knowledge Officer

Chief Nursing Information Officer

Chief Medical Informatics Officer
Chief Application Officer

Director of Professional Competencies
Director of Clinical Process Transformation
Nurse Informatician
Medical Informatician
Director of Clinical Systems
Director of Analytics Knowledge Management

Clinical Informatics Managers
Nurse Informatics Champions
Physician Informatics Champions
Clinical Systems Managers

Training Specialist
Clinical Informatics Coordinator
Super Users
Nursing Subject Matter Experts
Medical Subject Matter Experts
Builders
Clinical Analysts

*Example interprofessional partnerships are shown and not intended to be exhaustive of all roles and titles

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The third and final component of the Model, the interprofessional clinical informatics governance structure, is shown in Figure 7. This component demonstrates how the interprofessional clinical informatics governance structure may be integrated within the existing clinical infrastructure of a typical (but simplified) hospital governance structure to form councils. This approach facilitates transparent decision-making and shared governance that ensures successful implementation and adoption of an eHealth solution.

**Figure 7: Model of Clinical Informatics Governance for Nursing: Shared Governance Council Structure**

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The Model of Clinical Informatics Governance for Nursing reinforces the need for interprofessional governance structures to lead and support eHealth solution implementation projects. The literature reveals that while these interprofessional governance structures are considered a best practice for large health care institutions with access to such expertise and resources, smaller health care institutions typically lack these knowledgeable experts and resources. There is no evidence in the literature concerning best practices for governance structures in smaller health care organizations. In these instances, the expert panel recommends that smaller health care organizations in geographical areas or sectors that do not have access to the key roles identified in the Model replace them with comparable roles that exist in their organizations (where feasible).

A generic project governance structure with corresponding roles and responsibilities is provided in Appendix E. It can be tailored to any organizational context and used to guide the formation of the temporary governance structure. Table E1 (also in Appendix E) describes each of the roles shown in the generic project governance structure.