

History of the Health Information Profession

From the archives of CAMRL, CHRA, and CHIMA

In 1912, the American Medical Association and American Hospital Association realized that improvements to documentation quality were required to support physician and surgeon accountability. Given the absence of localized formal expertise, a group of interested individuals met at Massachusetts General Hospital to examine and study clinical records as they then existed. Together with a group of physicians, the Club of Record Clerks was formed to “evaluate the standards of clinical records in the hospital, dispensaries or other distinctly medical institutions” (Abdelhak et al. 1996, 53).

The following year, the American College of Surgeons was founded with the stated goal of enhancing the quality of surgeries performed through better surgical training. As part of efforts to standardize surgical training, high-quality health records were deemed essential. To further this goal, the College of Surgeons urged collaboration among leaders in patient record management. In October 1928, a meeting of American and Canadian leaders working with patient records led to the establishment of the Association of Record Librarians of North America (ARLNA)—and by the end of the charter year, 58 members were admitted from 25 states, the District of Columbia, and Canada.

In 1942, the Canadian contingent created its own association and formed the Canadian Association of Medical Record Librarians (CAMRL). Though the federal letters patent were not received until 1949, CHIMA considers 1942 the anniversary date of the Association.

An excerpt from the Association’s bulletin in July 1944 set the stage:

We are living in an age of progress — a scientific age — where the work of every department in the hospital has evolved into a science and nowhere in the hospital is this more apparent than in the medical record department. A special department in a hospital for the explicit purpose of accumulating, preserving, and using the scientific data contained in the medical records of the patient... [has set] a new standard for hospital records, and today an institution which fails to measure up to that standard cannot receive the highest rating (CAMRL 1944, 2).

The mission and goal of CAMRL was to provide membership services. As the organization matured, it established a formal College and pursued the standardization of entry-level skill requirements for practice. In the late 1960s, the CAMRL Board of Directors made the decision to apply for College status and grant a credential to identify the unique skill set of health record professionals. In 1972, a second charter was obtained to register the Canadian College of Health Record Administrators (CCHRA) with its own corporate letters patent. The College had a board of directors, bylaws, and formal policies and procedures. In 1976, the Association and College amalgamated and thereafter functioned under one leadership. To be consistent with progressive and proactive international information-based health care, CAMRL changed its name to the Canadian Health Record Association (CHRA) in 1976.



The rapidly expanding need for and use of health information in the 21st century again resulted in changes to the Association. A re-branding was initiated to reflect and communicate the enhanced role of the HIM profession in health care. In 2003, the CHRA became the Canadian Health Information Management Association (CHIMA). The CHIMA Board of Directors identified a new strategic direction and implemented a marketing and communications framework to chart a new course for the Association. The board and the Council on Education set new priorities to advance the association, market HIM professionals' unique skill sets, and position members as key players in quality health care delivery in Canada.

CHIMA now represents all certified health information management (HIM) professionals across Canada. In the 70 years that CHIMA and its predecessor organizations have existed, the organization has certainly changed—and so, too, have the titles used to define the profession. They have evolved in tandem with the expanding roles and have included medical record librarian, health record technician (HRT), health record administrator (HRA), and health record practitioner.

Revitalizing the Association image and expanding the scope of practice has positioned CHIMA members as health information management professionals. In 2007, to align the name of the College with that of the Association, CHIMA membership voted on a name change from the Canadian College of Health Record Administrators to the Canadian College of Health Information Management (CCHIM). The organization's past represents a legacy of strength that will pave the way for a vital future.

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