

# **MINUTES- JIC Executive Session**

Friday, 25 October 2013 - 15.00 - 17.00

Sydney, Australia in the main room following TC215 closing plenary https://iso-meetings.webex.com/iso-meetings/j.php?J=958914377 Meeting Number: 958 914 377 - No password needed Richard Dixon Hughes, Chair | Lisa Spellman, Secretary

- 1. Welcome, roll call, agenda approval
  - Roster: Please see last page
  - Agenda was approved with no changes
  - Minutes approved with no changes

**2. Presentation:** A proposal for a high visibility demonstration of International uptake of health informatics standard - a proposal for a high visibility demonstration of International uptake of health informatics standards

- Mr. Michael Nusbaum, IHE International
- Mike Nusbaum presented a proposal for an idea that he has that he believes could positively impact and extend Trillium Bridge and other such information exchanges.
- "This could help demonstrate Trillium Bridge and how information exchange might work. How do we take this collaborative work and help foster adoption? How to best adopt the output of Trillium Bridge? If we set up just one information exchange limited environment? How do we open the door more widely to all? Send one person to Europe? That of course will not work so we need to find something highly visible where we can do a demonstration. Idea came about when Mike and Steve Kay were at the Trillium Bridge meeting in Cambridge in September. Take a meaningful exchange of a patient summary and how about including diagnostic imaging, lab results, and more.
- Proposal connect to the Medical Model in the Olympics: Mike was a volunteer with the medical team when the games were in Vancouver. Olympics has about 5,000 athletes, another several thousand of the "Olympic Family" – coaches, support staff, family, and thousands of spectators. When games were in Vancouver, Canada went into "disaster mode" and set up "poly-clinics" portable hospitals; there were two in Vancouver
- Connect to the Olympic Games: They foster innovation and demonstration and provide a showcase of our work. What if 3 or 4 nations enabled their teams with patient summary data? For the US Team, GE provides and EMRs in other nations enable patient summaries; Canada has some options so when the sports teams d go to Rio have basic info; if Olympic enabled poly-clinic which has a very thin EMR what if enabled this able to receive a CDA document would bring patients, IOC could show their commitment to patient care, host city can show their health system and others able to show commitment, political sensitivities, technical expertise use this to promote our expertise start w/a task force w/members from those nations;

# Discussion

*Next step*: Task Force, funding, communications, marketing

- Question: Funding source?
- **Reply**: Hopefully the host nation for athletes; IOC already has to do some work, and maybe new/extended sponsor such as GE; and others. This kind of a project will need political support

- **Beatriz de Faria Leão**: Mike invites Beatriz to say a few words on the proposal since the Olympics will be in Brazil in 2016. GE has a research center in Rio; IHE just starting in Brazil; could be an opportunity
- Christian Hay: GS1 might be interested in such a project. He asked "What is JIC's possible role in this?
- *Chris Chut*e: Could include standardized value set, consolidated CDA and other types of mechanisms; would involve many JIC members; could be "spiffy"
- **Don Newsham:** This has some real potential but also some capacity issues to pull this off; he thinks we should explore in more detail to see what this means;
- **Steve Kay**: Replace "spiffy" with "Iffy" have to think about what we can and cannot deliver; the timeline to launch such an activity is quite short
- *Mike Nusbaum:* Yes, the timeline would be very tight.
- John Quinn for HL7: Given the current workload within HL7, if he came up w/something that included CDA its possible, but HL7 already at full capacity with various projects
- Action> Next step: Mike Nusbaum seeking volunteers to form a Task Force please contact Mike if you are interested to assist <u>michael@mhnusbaum.com</u>

# 2. JIC new member application from DICOM - discussion & next steps

- Only feedback on the application to date was from HTSDO
- Christian Hay: I have two concerns:
- DICOM is a consortium we need to know a person and an entity
- Lack of a current JIC charter: Nothing against DICOM, we still do not have the updated charter so we cannot support another new member as long as we have not signed a charter together. We need a formal understanding of what we are doing. The charter was signed prior to GS1 joining so GS1 has not yet been able to sign, IHE has not signed – this is not a good way to continue. Let's get the Charter done regarding what we wish to do and achieve and then we can consider adding new members.

**Richard Dixon Hughes**: Agreed that charter is not current. Need a process and a piece of paper.

# Mike Glickman:

- His comment on behalf of CDISC; he does not disagree and adding new members without a charter
- DICOM is a registered trademark of NEMA; would prefer that we get the charter matter resolved

Mike Nusbaum:

— Thinks they are similar to IHE with regard to qualification. Agree that need to get a charter in place, but need to ensure not turn into a club. Thinks would be a good idea to allow DICOM to move ahead.

< ACTION> Lisa and RDH to request additional information and let them know we are updating our charter

# 3. Consideration of JIC project proposal

ISO/18528, Health informatics, Functional classification of health informatics standards

- No feedback has yet been received from any JIC member from the original sending of these materials
- Steve Kay: Recommends that the JIC support this project. Is relevant about classification; structure; it is foundational to ask NMBs about their priorities and how do we ask that question now? Andrew Grant needs resources to help;
- Don Newsham: JIC should accept the proposal
- **RDH**: Indicated we could accept the project today but need to make sure that we do something with it.
- Chris Chute: Also agree should accept. This is a great fit and should be of interest to our members; the JIC bandwidth is slim; risk is that if we accept, what happens next? He suggests vote with comment but will be another effort without resource allocation and that is a worse problem.
- John Quinn: HL7 would support

# RDH:

- Link to SKMT; need to confirm this by an email ballot that we link to SKMT Governance Committee going to assist / work together.... Put on the schedule of projects of interest;
- Proposal: We go to our SDOs and have their SKMT Governance person oversee?

Christian Hay: GS1 we support this and SKMT a key

Steve Kay: Emphasized that they are struggling and this and SKMT are not going to succeed

# Gary Dickenson:

- Made a comments about the relevance of JIC and TC215
- Gary said it took ISO/HL7 10781 trying to use this process but ultimately felt that it was not useful it added a year; the ultimate role of all organizations to get ISO recognition are the top of the pyramid

# Mike Glickman:

- Mechanism to coordinate voting which is a challenge
- In TC215 you don't get the heads of the organizations, don't lose sight of this, when we needed to "twist arms" we were dealing w/SDO leadership, if we do not do that idea is to create cooperation

# Motion made to accept the project to the JIC work program: ISO/18528, Health informatics, Functional classification of health informatics standards

# Unanimous of those present

Opposed: None; Abstentions: None; Motion carries

- Discussion:
- Will be balloted within TC215 but we need to ask our member organizations to be recognized we asked our member to put up a member and support
- Add to the JIC "Recognized JIC Project"

# Action> Each JIC member will be asked to nominate a resource to serve on the project team – give reminder at next meeting and then ask for name and commitment

# 5. Feedback / balloting procedure for ISO/HL7 10781, EHR-S FM

- RDH: Distributed to the JIC members
- Mike G: We should be sure to reply
- We need clear statement of what we do and how we do it
- Mike Nusbaum: Suffering from a lack of process, we are large enough and we need to define how to operate; Provide support for 2<sup>nd</sup> DIS closes 3 December 2013

# Copy of the email that was sent 2x to JIC members

Dear JIC colleagues: Per our discussion in JIC Executive Council meeting, this email is your reminder to please review and submit comment on ISO/HL7 10781 EHR-S FM. **Process: CDISC, CEN, GS1, HL7, IHE International**: Please submit ballot and comments form directly to the TC215 Secretary – <u>Standards@ahima.org</u>

Deadline: Please submit to me no later than 30 November 2013.

<ACTION> Steve Kay requested form/paperwork for ISO 13606 paperwork - Lisa to send to Steve

# 6. JIC XSDO Project Review & Advisory Group (ISO/TC215/CAG3) general comments

- RDH: Since a public review was just held this week that another is not needed, however, Don / Elizabeth may wish to make comments
- Don and Elizabeth felt that holding the CAG03 meeting on the evening of the opening day worked very well; there was a strong turnout with 40+ people attending
- There was good and frank discussion about the JIC
- Nicholas Oughtibridge expressed significant frustration with the JIC process and felt it was more of a hindrance than a help. Suggest read the CAG03 minutes for the details
- Gary Dickenson also commented that he agreed and has been frustrated with the JIC process.

# LMIC initiative update: Don Newsham

- PHTF requested the creation of a new Ad Hoc Group or work group has been identified in ISO/TC215
- Training education, capacity-building: IMIA can assist with some of these tasks but not all; LMIC access to standards continues to be an issue
- There was a brief discussion regarding communication and promotion of standards;
- One of the things that could help would be to hold meetings in LMIC regions to help improve awareness and uptake; we need to be cognizant of capacity and bandwidth
- IMIA and WHO Regional Network as a roadmap.
- Comment from the floor: The JIC does not have the bandwidth or capacity to take this on
- There was not a conclusion for a next step

# 7. Scheduling of meeting in Japan:

— Lisa asked the group for their feedback on the schedule for the JIC meeting today [on Friday] following the ISO closing plenary.

# **Discussion comments**

- Some felt it was helpful to meet later in the week because events from the week were useful to have before this meeting; others felt it made the week too long; Took a vote for Japan meeting to meet on the Operations Day or on the last day after the closing plenary
- Vote split 3 for before and 3 for after.

<Action> Assess Japan schedule – Lisa

# 4. Status update on progression of strategic initiatives

- Initiative #1. Managing status and addressing issues of current JIC work program
   plan for completion of process documentation of processes
- Initiative #2. JIC Communication update
  - Lisa has completed updates with webmaster
- Initiative #3. Bring a project through entire process from end-to-end documenting steps.
  - Brief outlining scope and steps is awaited. Now includes lessons learned and criteria for success.
- Initiative #4. Understand respective customers wants and need;s identify common ground between SDOs
   Brief outlining scope and steps is awaited.
- Initiative #5. Explore harmonizing value sets
  Brief outlining scope and steps is awaited.

- Initiative #6. Use and implementation of SKMT). In progress
- Initiative #7. Standards for Low and Middle Income Countries (LMICs). Covered at item Error! Reference source not found.
- Initiative #8. Understand shared view of standards impacting Medical Devices
- Initiative #9. Resolution of distribution, publication and dissemination of joint standards e.g. IP, formatting.
   In progress
- Initiative #10. Affirm adapted charter and by-laws across member SDOs. In progress
- Initiative #11. Assessment and impact with other key HIT initiatives outside JIC e.g. CIMI
   Brief outlining scope and steps is awaited.
- Initiative #12. Coordinate standards implementation and adoption across members SDOs to reduce variability. Awaiting prioritization
- Initiative #13. Collaborate to address quality criteria for testing and certification. Awaiting prioritization
- Initiative #14. Concurrent use of architectures and frameworks.
- Initiative #15. Proactive analysis of SDO members' standards to identify gaps (and synergies), overlaps and counterproductive, choosing top 5-6 potential JIC activities. Awaiting prioritization

# 5. Other previous business:

- Steve Kay: Gave an update on the progress of ContSys + ISO 13606 + HISA
- It is moving forward; project lead Dipak Kalra conducted a survey and had some good feedback which is useful as the project moves forward
- There was a productive workshop held in Delft on 8-9 August and a report has been made available "Towards concurrent use of ContSYS, 13606 and HISA; contact Steve or Shirin if you would like a copy
- Actions/business for next meeting suggestions for stakeholder (re-) engagement –Possible theme/topics/aims(s):
  - feedback on standards implementation & assessment EU, WHO, others
  - support for national eHealth strategy development (& WHO/LMIC initiatives)
  - emerging trends & stakeholder priorities for standards work (supporting the above)
  - mechanisms for practical engagement and ongoing feedback

< Action > JIC member survey: Steve Kay, Don Newsham and Mike Nusbaum will conduct a survey with JIC members to get feedback — will launch soon so will have useful information that can be acted upon in 2014

6. Other business

# Dates for upcoming teleconferences and meetings

- List meeting dates once identified
- Note: We had to vacate the meeting room before we were able to calendar for next meeting dates.

<Action> Next meeting date: Lisa will send a Doodle to identify next possible meeting date and then we will schedule at least a couple of months into 2014

7. Meeting adjourned at 16:15

# Potential topics for future meetings

- 1. CEN outcomes/proposals arising from ContSys + ISO 13606 + HISA harmonisation & transatlantic impacts
- 2. CIMI outcomes/proposals arising from CIMI
- 3. All progress in implementation & use of SKMT
- 4. HL7 update on FHIR role and impact on harmonization of standards
- 5. After 20 years what are the core eHealth standards that are actually implemented today?

|           |               |           | 25-Oct-13 |
|-----------|---------------|-----------|-----------|
| Bron      | Kisler        | CDISC     |           |
| Becky     | Kush          | CDISC     |           |
| Mike      | Glickman      | CDISC     | Y         |
| Richard   | Dixon Hughes  | TC215     | Y         |
| Stephen   | Кау           | CEN251    | Y         |
| Shirin    | Golyardi      | CEN251    | Y         |
| Chuck     | Jaffee        | HL7       | Y         |
| John      | Quinn         | HL7       | Y         |
| Catherine | Chronaki      | HL7       | Y         |
| Chris     | Chute         | TC215     | Y         |
| Christian | Нау           | GS1       | Y         |
| Mike      | Nusbaum       | IHE       | Y         |
| Jane      | Millar        | IHTSDO    | Y         |
| Don       | Newsham       | CAG03     | Y         |
| Elizabeth | Keller        | CAG03     | Y         |
| Lisa      | Spellman      | Secretary | Y         |
| Gary      | Dickenson     | Observer  | Y         |
| Beatriz   | de Faria Leão | Observer  | Y         |
|           |               |           |           |