**HL7 Patient Care WG**

**FHIR Resources Management**

**Meeting Minutes**

**June 26, 2014**

Participation Information

Phone Number: +1 770-657-9270

Participant Passcode: 943377

Web Meeting Info

www.webex.com

Meeting number 198 139 396

**Attendees:**

Elaine Ayres

Stephen Chu

Becky Angeles

Igor Sirkovich

David Hay

Lee Unangst

Emma Jones

Julia Chan

Russ Leftwich

Lloyd McKenzie

Peter Bernhardt

**AGENDA for June 26:**

1. Emma Jones – IHE Profile
2. Review connectathon use cases
	1. **Immunization**
	2. Allergy and Intolerance(including patient reporting)
	3. **Acute Care**
	4. Chronic Condition (make sure that medication management is included).
	5. Home Care
3. New change requests
4. Next meeting July 3 at 5 PM EDT

**Minutes: Emma Jones**

Request to this group to review the Patient Care Plan Reconciliation Profile.

The IHE Patient Care Coordination Technical Committee has published the following supplements to the IHE Patient Care Coordination Technical Framework for public comment in the period from **June 6 through July 5, 2014**:

* Reconciliation of Clinical Content and Care Providers (RECON)

The documents are available for download at [http://www.ihe.net/Public\_Comment/](http://ihe.us1.list-manage2.com/track/click?u=a75e449ea24da34a9a89ed37a&id=89d5cb0009&e=2d68229859). Comments submitted by **July 5, 2014** will be considered by the IHE Patient Care Coordination Technical Committee in developing the trial implementation versions of the supplements. Comments can be submitted at [http://ihe.net/PCC\_Public\_Comments/](http://ihe.us1.list-manage1.com/track/click?u=a75e449ea24da34a9a89ed37a&id=d9c893e05e&e=2d68229859).

This reconciliation can be done with any CDA content. Emma to send Stephen the link and will discuss at the next Care Plan/CCS calls. Can send comments to Emma after the deadline.

**Connectathon Logistics and Details**

1. Review of questions
	1. Entry of information over 30 minutes/45 minutes
	2. Probably will not be able to handle payment information.
	3. Identify key points – is this a comfortable volume, what needs to be represented?
2. Draft the Flow of Day
	1. Clinicians enter data from use cases (10-15 clinicians)
	2. Enter the same data for each use case
	3. Define key data entry concepts
	4. Have optional data entry concepts
	5. Review and Evaluate what everyone is entered
	6. Data will be entered into a fake application
	7. Discuss the event
	8. Define success criteria
		1. Test the data representation using the FHIR standard
			1. Discrete data vs. text
			2. User variability in data representation
			3. Can this promote data interoperability?
	9. Agenda
		1. Set-up and orientation (9 AM) (30 Minutes)
		2. Data entry – 2 hours
		3. Data Review – 1 hour
		4. Lunch with informal discussion (12:30)
		5. Discuss – 1.5 hours (1:45)
		6. Event evaluation – 30 minutes (End – 4 PM)
3. FHIR team will take use cases
	1. Tool will provide the options detailed in the underlying resource
	2. Can capture data as discrete elements
	3. FHIR team needs storyboards by end of June.
4. Participants and recruitment – Friday September 19
	1. Approach FHIR, EC, EHR and PC WG participants. Plan on 10-15 by invitation.
	2. Approach physician and nursing group.
	3. Need to familiar with HL7.
	4. No registration, no fee.
	5. Russ will put together a guest list with a calling tree. Russ will contact.
		1. Russ
		2. Laura
		3. Stephen
		4. Elaine
		5. Emma or George
		6. Jim McClay
		7. LCC – Becky Angeles
		8. Academy
		9. *Sandy Marr or Peter Park*
		10. *Susan Matney*
		11. *Mark Jancweski*
		12. *Pat Van Dyke*
		13. *Harry (GE)*
		14. *Floyd Eisenberg*
		15. *William Goossen*
		16. *Rosemary Kennedy*
		17. *Kevin Coonan*

**Review of Connectathon Use Cases:**

**a.** Immunization

b. Allergy and Intolerance (including patient reporting)

c. Acute Care - Emergency Room

d. Chronic Condition with medication management

e. Home Care

Results of Voting:

*Ranking from voting*:

- Chronic condition

- Acute Care

- Allergy/Intolerance and adverse reaction

- Home health

- Immunization

Discussion of selection – keep it manageable. Send top three to FHIR team.

The use cases are on the connectathon wiki.

New change requests – need by September.

Referral Resources – Stephen Chu has been working on.

Stephen displayed the resource work sheet. Note format of the resource name. Also, point to “resource any” that are supported by the referral request. Use profiles for referrals for a particular environment that cite other necessary resources.

“Must understand” column refers to data elements that change the meaning of another element.

**AGENDA for July 3:**

1. Review Agenda
2. Connectathon topics.
3. New change requests – review and vote
4. Continue to review the referral request.
5. Next meeting July 3 at 5 PM EDT (? Meeting on July 10??)

Current Patient Care FHIR Resources:  <http://www.hl7.org/implement/standards/FHIR-Develop/?ref=learnmore>

The FHIR issue tracker in gForge:

<http://gforge.hl7.org/gf/project/fhir/tracker/?action=TrackerItemBrowse&tracker_id=677>

All resource proposals

<http://wiki.hl7.org/index.php?title=Category:FHIR_Resource_Proposal>

Referral Resource Proposal

<http://wiki.hl7.org/index.php?title=Referral_FHIR_Resource_Proposal>

**Current Clinical FHIR Resources**

1. Adverse Reaction
2. Allergy Intolerance
3. Care Plan
4. Condition
5. Family History
6. Procedure
7. Questionnaire
8. Referral (NEW)

