**Call Details:**

AN&D Nutrition CDA IG Stakeholder Meetings Mondays 5-6 ET.

From October 2 through December 11.

Please join my meeting from your computer, tablet or smartphone.   
<https://global.gotomeeting.com/join/790946677>

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United States: +1 (872) 240-3212

Access Code: 790-946-677

**Participants:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Organization** | **Present** |
| Lindsey Hoggle (LH) | AND | To Do |
| Tina Papoutsakis (TP) | AND | To Do |
| Eric Parapini (EP) | LCG | To Do |
| Sarah Gaunt (SG) | LCG | To Do |
| Zabrina Gonzaga (ZG) | LCG | To Do |
| Don Lloyd (DL) | LCG | To Do |
| Elaine Ayres (EA) | NIH | To Do |
| Kelly Danis (KD) | UPMC | To Do |
| Susan Evanchak (SE) | UPMC | To Do |
| James Allain (JA) |  | To Do |
| Jim Case (JC) | NLM/IHTSDO | To Do |
| Sue Kent (SK) |  | To Do |
| Leslye Rauth (LR) |  | To Do |
| Margaret Dittloff (MD) | AND | To Do |
| Oliver Lawless (OL) | Panacea Health | To Do |
| Lisa Nelson (LN) | Janie Appleseed | To Do |
| Karen Nocera (KN) | CBORD | To Do |
| Jennifer Harward (JH) |  | To Do |

**Agenda (Call #1 – 2017-10-02):**

* Introduce the project (LH)
* High level overview of Care Plan (EP)
* Analysis and mapping work (EP)

**Minutes:**

* Intro to the project (LH)
  + Presented slides outlining the problem (LH)
    - Present state of nutrition care (LH)
    - New project with HL7 *HL7 CDA R2 Implementation Guide: C-CDA R 2.1 Supplemental Templates for Nutrition, STU, Release 1 (U.S. Realm)* (Sponsor: SD; Co-sponsors PC, O&O) (LH)
    - HL7 C-CDA high-level overview and the document types in which nutrition information is desired (LH)
    - Adding additional templates to existing CDA Documents (LH)
    - How nutrition is currently represented in C-CDA (LH)
      * Nutrition Section, Nutrition Status Observation, Nutritional Assessment (LH)
      * C-CDA and the Nutrition Care Process (NCP) (LH)
    - Continuity of Care across settings (Acute Care, Outpatient, Nursing Home, etc.) (LH)
    - Organization of data (LH)
    - Making sure the NCP is designed appropriately in EHRs (LH)
    - Terminology - VSAC - there are a number of nutrition value sets already created that reside in VSAC (LH)
    - Aim is to solve the problem by using and further specializing the C-CDA Care Plan (LH)
      * Will guide EHR vendors to create the NCP in a way that supports nutrition data (LH)
  + (include slides) (LH)
* Overview of current C-CDA Care Plan data element relationship diagram (EP)
* Overview of NCP data element categories and relationships (EP)



* + High-level overview of how NCP maps onto current C-CDA Care Plan (EP)
    - Elements that align:
      * Nutrition Assessment
      * Nutrition Evaluations & Outcomes
      * Nutrition Intervention/Recommendation
    - Elements which require more clarity:
      * Nutrition Goals
    - Elements which contain conflicting issues:
      * Nutrition Diagnosis
  + Deeper dive into the data elements identified through analysis of NCP and their mappings to actual sections and entry level templates currently in C-CDA Care Plan (EP)
    - Explanation of extending existing C-CDA templates for specialized use with nutrition care process (EP)
* What goes into Nutrition Assessment? (OL)
  + Food/Nutrition Related History
  + Anthopometric Measurements
  + Biochemical Data, Medical Tests, and Procedures
  + Nutrition-Focused Physical Findings
  + Client History
* Nutrition screening - is this part of scope? (SK)
  + Nutrition screening serves as a trigger which ends up as the reason why someone is receiving a nutrition care plan (although it is not required) (MD)
* Is assessment something nutritionists have to do? (OL)
  + Nutrition Assessment is performed by a nutritionist when evaluating an individual. (LH & MD)
* High-level Care Plan diagram - need to make sure flow is aligned with other work going on (LN)
  + TODO: Will sort out booking a meeting in the next week to ensure different Care Plan streams are aligned

**To Dos:**

To Do Book a meeting in the next week to ensure different Care Plan streams are aligned (LH completed)