# 2013.04.16 HL7 Templates Workgroup Concall Minutes

## Attendees: Jane Curry, Kai Heitmann, Lisa Nelson, John Roberts, Mark Shafarman

## Scribe: Mark Shafarman

## Agenda Topics and Notes:

### Discussion of question: is there a ‘formal’ MIF for CDA and templates. This is unclear at this point. Questions include: relationship of latest MIF to CDA, DÉCOR, which use Schematron validation, and PatCare templates (which (we think) use (which release) of MIF… a follow-up discussion should be scheduled for the May WGM.

### Discussion of different types of governance and implementation groups working with templates, in terms of audiences, implementers, software vendors, etc.

### Overview of use cases.

### Governance group open design and approval process (w/external review)

### Governance group closed design and approval process

### E.g. American College of Cardiology (ACA)makes its own template, and requests registration id=123, date=approval for use, status=published/active

### Two types of approval: design and use (populate/send and receive/validation)

### Also: Use in ACA documents; use in non-ACA documents

### Implementation: populate;

### Implementation validate upon receipt

### Implement: create new aggregate w/ received design… notify governance group of this/adoption… adoption before use…

### Implementation: adapt and also: receive notifications; keep track of changes from (original) governance group; but also create a new “child” in “my” governance group.

### Implementers : suggestions for improvement that result in a new design version.

### Use cases for open and closed governance groups; and adoption and adaptation differences.

### Open governance group: Publishes designs for review by others

### Closed governance group: keeps everything w/in group until ready for implementation

### Both groups may also have concerns about adopters/IP issues. They have also a formal adoption process.

### Concerns of implementers : source, versions, implementation rules

### Concerns of software vendors: what are the rules for preserving semantic integrity; for new version, for replacements, etc.

### A new realization: we need to represent both the statuses of the template itself and the statuses of each of its versions, and the relationships between the two. The template itself has a life cycle, as does each of its versions. See especially appendix A below from Lisa Nelson-- in particular, the registry use case examples for the social history template.

### Other issues to discuss next time:

### We need to clarify the above in terms of adoption and adaptation (registry issues); and in terms of which states are published.

### Also, we need to clarify which states apply only to the ‘current’ version of a template; and which states apply to the template as a whole. (See comments above).

### This need to be explicitly linked to adoption/adaptation and notification/publication (across governance groups)

### Kai asked do we need other status codes, or are some codes not needed; is there a ‘pending’ state?

### 4. Background documents: see notes from Lisa Nelson also from Mark Shafarman in Appendix “A” and “B” below.

Appendix A. From Lisa Nelson.

Use Cases

1. Open design and approval process
	1. The governance for the design and approval of templates is run in an exposed way. All transitions in a template design’s status and all template designs are exposed in the registry.
2. Closed design and approval process
	1. The governance for the design and approval of templates is run in a way that is not exposed outside of the governed community. Template designs are exposed in the registry when their status is active. From the perspective of an “outsider” to that governance community, template designs authored by that community are “born active” when this scenario is being used. The designs only appear in the registry once when they are active.
3. One governance community approves for use, a template design created by a different governance group [ADOPTION]
	1. The template is approved for use by implementers. The governance community recognizes and “acknowledges” this template design as valid for use.
	2. Implementers know what to do to populate and validate data artifacts formulated according to this template design.
4. One governance community approves for re-use in new designs, a template design created by a different governance group. [ADOPTION AND ADAPTION]
	1. The template is approved for re-use in new designs authored by this governance community.
5. Create a new template design based on an existing one. [FURTHER CONSTRAINT]
	1. This includes an explicit dependency between the two templates. If the link template design changes, this new dependent design necessarily absorbs the changes to the underlying template. The new template is narrower than the referenced template.
6. Create a new template design which is a variant of an existing one. [EXTENSION]
	1. This includes an explicit dependency between the two templates. If the link template design changes, this new dependent design necessarily absorbs the changes to the underlying template. The new template is not narrower than the referenced template. It has additional constraints which cause data conforming to this template to potentially be non-conformant to the referenced template. This new template is broader, in some aspect, than the referenced template.
7. Create a new design for an existing template.
	1. In this case, no explicit dependency reference to other related templates is included in the design.

Beginnings of a sample scenario we could use to play out the 7 suggested scenarios. I can add more to this if the team likes this idea.

In an imagined IHE template registry showing some of the registered templates associated with recording social history information:

1. **Social History Section 2.16.840.1.113883.10.20.22.2.17 [TEMPLATE STATUS]**

|  |  |
| --- | --- |
| **Metadata Element** | **Metadata Value** |
| Name | Social History Section |
| id | **2.16.840.1.113883.10.20.22.2.17** |
| Purpose | This section contains data defining the patient’s occupational, personal (e.g. lifestyle), social and environmental history and health risk factors, as well as administrative data such as marital status, race. Ethnicity and religious affiliation. Social history can have significant influence on a patient’s physical, psychological and emotional health and wellbeing so should be considered in the development of a complete record. |
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Design Versions

|  |  |  |  |
| --- | --- | --- | --- |
| Date | DESIGN STATUS | Description | Link |
| 20070101 | ACTIVE | Design for Initial release of HL7 CCD Document | Link-to-Repository |

**Social History Section 1.3.6.1.4.1.19376.1.5.3.1.3.16 [TEMPLATE STATUS]**

|  |  |
| --- | --- |
| **Metadata Element** | **Metadata Value** |
| Name | Social History Section |
| id | **1.3.6.1.4.1.19376.1.5.3.1.3.16** |
| Purpose | The social history section shall contain a narrative description of the person’s beliefs, home life, community life, work life, hobbies, and risky habits. |
| Relationships | Parent Template: **2.16.840.1.113883.10.20.22.2.17** |
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Design Versions

|  |  |  |  |
| --- | --- | --- | --- |
| Date | DESIGN STATUS | Description | Link |
| 20070601 | DRAFT | Design proposed for Connectathon Testing | Link-to-Repository |
| 20090131 | ACTIVE | Approved design after 3 Connectathon testings | Link-to-Repository |

**Social History Section 2.16.840.1.113883.10.20.22.2.17 [TEMPLATE STATUS]**

|  |  |
| --- | --- |
| Metadata Element | Metadata Value |
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|  |  |
|  |  |
|  |  |

Design Versions

|  |  |  |  |
| --- | --- | --- | --- |
| Date | DESIGN STATUS | Description | Link |
| 20120712 | RETIRED | Initial Consolidated CDA design – harmonized across 9 Health Story and IHE documents. | Link-to-Repository |
| 20121201 | ACTIVE | Errata Updates | Link-to-Repository |

Appendix B.

**DSTU draft Section 3.6, updated with notes from previous conference call.**

**3.6 Status of a Template**

**Discussion of State definitions. Which are states of the template design/and only for a particular version, or for both the current version and the template as a whole? And which are processes? When published first, we should set a default value for the version # equal 1. For review, set the review version number equal to 1 more than the prior published version…(or 1 for review of the first draft design).**

1. **New**

There is the intention to create a template with a certain purpose. In this state, only an id is assigned, but neither a design is created yet nor has the template an effective date (start date).

1. **Draft**

The template gets a draft design, as well as some more metadata. Especially an effective date (start date) is assigned to the template.

A governance group may decide to have also different versions of a draft template, i.e. different effective dates for a draft template in order to version the template.

1. **Review**

This status indicates that the template is undergoing a review process, either within a governance group for an internal review or published for an outside review. This is typically a transition from the status “draft” and includes a (public) comment phase.

After the review phase the template may become endorsed (active), or rejected/inactive/retired with the possibility of crafting a new version for this template in status draft.

1. **Rejected**

During some review, a template design (version) may be found inadequate or erroneous, and therefore it is rejected. In this case the expiration date (end date) is set (to the current date) indicating that the use of this template is no longer recommended. This is the end of the life cycle of this template design. A new design for this template concept may occur.

1. **Active**

This is the state of an approved template. The governance group has decided that this template is fit for purpose. When propagating a template to “active”, the effective date of the template may be updated (to current date) or left as is (e.g., like the draft version).

1. **Inactive**

Once a template design (version) should not be used any longer or is no longer recommended (deprecated), the expiration date is set and the status is set to inactive. This applies to the template version. It should no longer be used for new instances, or new definition (template designs with containment or inclusion). It should not be used for validation unless it is used for a historical validation (i.e. the date of the creation of the instance is falling between effective and expiration date).

1. **Retired**

After the expiration date is reached, a template becomes “retired”. This status applies to the template as a whole, not just a particular version. Don’t use the template or its id for definition or validation any more.

The “intention” of the template is no longer appropriate and no new versions are expected to appear. It can still be used for historical validations. This may happen if a template is replaced by a (series of templates reflecting a) new concept.

1. **Cancelled**

If the template was never used and the id is never published, a template may be cancelled, e.g. if the template is found to be a bad idea to create, a duplicate effort; or if one governance group decides to abandon their template (and its id) and, for example, join another governance group or if one governance group decides to use a template from another governance group. This is the end of the life cycle of this template as a concept and no version will be published with this identifier.

1. **Terminated**

If an already published template was found a bad idea to create, duplicate effort, etc., the status can be moved to “terminated”. This is the end of the life cycle of this template as a concept and no new version will be published with this identifier. If an instance contains a terminated template, the instance is invalid from a machine processability perspective (although it still may contain some reasonable or useful clinical information).