

7 December 2010

OUTCOMES STATEMENT

Meeting Summary 7 December 2010

The twelfth meeting of the Clinical Terminology and Information Reference Group was held in Sydney on 7 December 2010.

Representation at the meeting included:

Joanne Foster	Nursing Informatics Australia
Narelle Portakiewicz	Department of Health South Australia
Sharmila Biswas	NEHTA Clinical Lead
Donna Truran	Australian Centre for Clinical Terminology and Information
Rowena Sierant	Department of Health and Ageing
Graeme Miller	Royal Australian College of General Practitioners (RACGP)
Hugh Leslie	Medical Software Industry of Australia (MSIA) representative
Andrew Singer	Department of Health and Ageing
Gordon Tomes	Australian Institute of Health and Welfare (AIHW)
Graeme Pegler	NSW Health
Hayley Koberg	Queensland Department of Health
James Chippendale	Queensland Department of Health
Tony Robertson	NEHTA
Mary Kelaher	NEHTA
Liz Jones	NEHTA
Michelle Laing	NEHTA
Paul Williams	NEHTA

The meeting was co-chaired by:

Ian Bull	Department of Health ACT
Michael Legg	Health Informatics Society of Australia

Apologies were received from:

Chris Williams	Private Hospital CIO Forum Representative, Sydney Adventist Hospital
Rohan Martin	Ambulance Victoria
Tony Greville	Consumer Health Forum
David Evans	NEHTA Clinical Lead
Richard Madden	National Centre for Classification in Health (NCCH)

The meeting had the following objectives:

- Update on PCEHR Work Program.
- General Practice Reference Set (GPRS) project brief review.
- AMT v3 Data Production Project update.
- Update on Terminology Server Sandpit.
- Pathology Terminology Update.

Summary of Actions:

- Update on PCEHR Work Program.
 - NEHTA is working with Standards Australia on providing content for the eDischarge Summary (as a Standard Document Template (SDT) and Clinical Document Architecture (CDA).
 - Noted that the eDischarge Summary will have to undergo a revision which will require a higher level view of components standardised so that they can be reused whenever required. Stressed that the discharge summary will not be redeveloped in time for the PCEHR. Release 2 of the discharge summary will be delivered in time for lead site implementations (by Apr 11).
 - Agreed that at the February CTIRG an update on the discussion with the RACGP regarding the Health Summary and constrain of the Detailed Clinical Models (DCMs) be provided to the group.
 - Workshop on DCM Governance to be conducted at the February CTIRG.
 - Following a discussion on the Clinical Knowledge Manager (CKM) portal, agreed that a list of the contributors to the portal be circulated amongst the CTIRG.
 - NEHTA to determine whether the DCM/Archetypes created can be absorbed into OpenEHR.
 - Agreed that the timetable and review requirements are uploaded on to the DCM page of the NEHTA website.
 - Discussion around the role of the CT Editorial Group, agreed that members of the CTIRG to provide nominations for editorial group membership.

- General Practice Reference Set (GPRS) project brief review.
 - Michael Legg suggested setting up a GP Support Group. Agreed that the CTIRG should advise on the constitution. Michael Legg suggested that there should be 10 to 12 people in the group which are representative of different stakeholder groups. The CTIRG suggested representation from Practice Nurse, Practice Manager, GP Terminology user, Lead Sites – one or more, Emergency Department representative, Department of Health and Ageing, GP Non Terminology User (novice user), Information Manager, Consumer, Clinical Unit representation.
 - NEHTA to circulate to the CTIRG the current GPRS membership, stating how it aligns with the proposed membership and where there are gaps.
 - CTIRG to develop and send an email (covering the scope and membership of the proposed GP Support Group) to the Clinical Unit for approval.

- AMT v3 Data Production Project update.
 - The NEHTA CTI team has completed an exercise on developing the v3 data, which is now available for testing. There have been plenty of lessons learned and these are being made into a project to develop into the final production version. Agreed a transition plan will be required.

- Update on Terminology Server Sandpit.
 - A number of needs have been identified by current CTI customers. The Terminology server sandpit environment has been created to make it easier for people to consume and test terminology products. An evaluation program will be run with users to validate CTI products. A business case can then be developed off the back of this work.
 - Agreed that CTI to invite vendors to get involved in the Terminology Sandpit.
 - CTIRG to give feedback on the use cases presented.

- Pathology Terminology Update.
 - NEHTA to circulate the Pathology one page plan to CTIRG members. Review to be conducted at the February CTIRG meeting.

Summary of Outcomes:

- Following an update on the General Practice Reference Set (GPRS) project, agreed there was merit in establishing a new GP Support group to ensure there is support from the right people in determining usability of terminology.