# IT-014 Health Informatics Committee

**Executive Summary** 

**HL7** Working Group Meeting

13<sup>th</sup> - 18<sup>th</sup> May 2012 (Vancouver, Canada)



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With input from Australian Delegation and other employer funded Australians at the meeting:

- Dr Trish Williams Ph.D. (Delegate and Report Coordinator)
- Heather Grain (Delegate)
- Richard Dixon Hughes (Delegate)
- Grahame Grieve (Delegate)
- Dr Hugh Leslie MB BS, FRACGP, FACHI (Delegate)
- Dr David Rowed, MB BS, BEng, FRACGP (Delegate)
- Dr Vincent McCauley MB BS, Ph.D. (Delegate)
- Nat Wong (Mentor Position Delegate)
- Dr Andy Bond (NEHTA)
- Dr Stephen Chu (NEHTA)

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#### 1. INTRODUCTION

HL7 is an international organisation with its origins in the USA, and an expanding group of international users participating in its standards development processes. HL7 provides international standards for inter-system and inter-organisation messaging, for decision support, clinical text documents mark-up, user interface integration, EHR/PHR systems functionality as well as a health data model and message development methodology. It produces global health informatics standards through a process of collaboration, which involves its local affiliate, HL7 Australia.

HL7 standards are the dominant health-messaging standards in the USA, Canada, Germany, Holland, Finland, Japan, Korea, Tai wan, New Zealand, and Australia and are being adopted as health-messaging standards by many other countries.

The May 2012 HL7 International Working Group Meeting was held in Vancouver, British Columbia, Canada with activities scheduled over 6.5 days. The main activities ran from Sunday, 13 to Friday, 18 May with some important additional leadership meetings scheduled on Saturday, 12 May. On weekdays formal meetings are scheduled from 8am to 5pm however, some meetings are scheduled from 7am and go as late as 10pm on some days.

At this HL7 working group meeting there were 310 registrants with 190 US delegates and 120 non-US delegates. The countries represented were Argentina, Australia, Austria, Canada, Chile, China, Congo, Croatia, Czech Republic, France, Germany, Great Britain, Greece, India, Israel, Italy, Japan, Korea, Netherlands, Norway, New Zealand, Puerto Rico, Singapore, Spain, Taiwan, Unites States of America and South Africa.

It should be noted that the HL7 International standards work is not structured as "Work Items" that are put forward to the HL7 body for approval, rather most projects arise from the work within the many domain and specialist committees. However, these proposed projects need to be well-defined and documented and require approval by the respective Steering Division and the Technical Steering Committee to ensure appropriate internal (HL7) and external (international standards development organisations) harmonisation.

This report summarises the committee proceedings, issues and actions for consideration by Australia from this HL7 International Standards and Education Meeting.

#### 2. OBJECTIVES OF THE MEETING

HL7 meetings are true working meetings, not conferences, with many experts and individual groups meeting to develop, discuss and improve HL7 standards, processes and implementation guides and to determine the most effective way to meet the needs of the stakeholders – both those present at the meeting and those in the wider community of interest. While HL7 engagement with stakeholders in other forums is also strong (through regular, often weekly teleconferences), the ability to influence the work program, outcomes and strategic direction requires physical presence at working group meetings.

The overarching objectives are to benefit the Australian health system and wider community by:

- Improving Australian capacity to implement health informatics standards and eHealth systems by expanding local knowledge and expertise based on international best practice;
- Promoting free trade and its benefits to health ICT (by lowering the cost of integrating
  and implementing local health information systems, many of which are imported, and
  by reducing costs to Australian exporters) both these outcomes require Australian
  requirements to be embedded into global standards so that they can be adopted in
  Australia, rather than having different standards across domestic and international
  markets; and

 Improving Australian health information systems by facilitating a standards-based approach to development and implementation, and achieving interoperability between systems.

Other more specific objectives for Australian engagement in international standardisation via HL7 International include:

- Monitoring and influencing HL7's strategic positioning as a global Standards Development Organisation (SDO), encouraging its collaboration with other international and global SDOs and assessing and contributing to the strategic positioning of its key products (HL7 V2.x, V3, CDA, EHR, etc.) so as to encompass Australia's health information interchange and related requirements;
- Negotiating the inclusion of Australian healthcare messaging requirements into HL7 V2.8, CDA and V3 specifications for:
  - Patient administration;
  - Diagnostics (pathology, radiology); and
  - Collaborative care (e.g. Electronic Discharge Summaries and e-Referrals, so that Australian requirements become a formal part of these standards).
- Negotiating the inclusion of Australian health sector requirements into the HL7 Standards so that Australian EHR developments are supported by the upcoming HL7 and related ISO EHR Standards;
- Negotiating the harmonisation of ISO, HL7 and CEN Standards to achieve progressive inter-SDO eHealth standards harmonisation with the long-term goal of a unified set of global health informatics standards;
- Monitoring, and influencing as necessary, new initiatives to standardise clinical data content so as to improve Australia's ability to unambiguously and safely exchange semantically interoperable clinical data;
- Assessing and influencing HL7's work on service oriented architectures (SOA), as required by Australia's national direction setting, and negotiating the inclusion of Australian health sector requirements (in particular, those described by National eHealth Transition Authority [NEHTA] into service specifications being jointly developed by HL7;
- Assessing and influencing the positioning, development, implementation, utility and effectiveness of CDA (including CDA Release 3), to support Australia's interest in CDA in its national eHealth program;
- Assessing, exploring and proposing approaches to the embedding and transportation of archetypes in HL7 V2.x messages for referral, diagnostic results and collaborative care to support Australian interest in the use of archetypes for the exchange of clinical information; and
- Progressing the international harmonisation of common data types and vocabulary for healthcare information that will meet Australia's identified requirements.

Additional Australian interests are pursued opportunistically as and where formally agreed upon by the community and to support specific objectives which are required for the development of Australia's national eHealth agenda and other national interests.

#### 2.1 RELEVANCE TO NEHTA PROGRAMS

NEHTA has endorsed a range of Australian Standards derived from international standards work by including them in the National eHealth Standards Catalogue. As the implementation of

NEHTA's domain-specific initiatives are based on many of these standards, it is important that Australia continues to be involved in the international forums that develop, manage and maintain these, and other potentially relevant, health informatics standards.

#### 3. MEETING LOGISTICS

The table below shows the meeting schedule for all of the meeting groups. Most US based meetings have greater than 60 separate working groups and committee meetings. In addition to the working groups listed, members also attended tutorials and project specific workshops e.g. Fast Health Interoperability Resource (FHIR).

The Australian delegation is denoted as following in the table below:

AB – Andy Bond	HL - Hugh Leslie	SC – Stephen Chu
DR - David Rowed	MA- Meya Achdiat	TW - Trish Williams
GG - Grahame Grieve	NW - Nat Wong	VM - Vince McCauley
HG - Heather Grain	RDH - Richard Dixon Hughes	

Working Group	Sat	Sun	Mon	Tue	Wed	Thu	Fri
Affiliate Agreement Task Force (AATF) and access to HL7 IP					1.00		
Affiliate Due Diligence Committee				RDH			
Anatomic Pathology							
Architecture Review Board (ArB)		AB GG				AB GG	
Arden Syntax							
Board of Directors' Meeting				RDH GG			
Clinical Decision Support				DR	DR GG	MA	
Clinical Interoperability Council					HL		
Clinical Statement						sc	
Co-Chair Information Session			RDH				
Community Based Collaborative Care			TW MA				
Conformance and Guidance for Implementation/Testing			VM	VM		VM	
Detailed Clinical Models		HL	HL	HL	HL	HL	HL
Education & Marketing			HG RDH	HG			
Electronic Health Records			RDH	HL NW RDH	TW NW RDH		
Electronic Services						NW	

Working Group	Sat	Sun	Mon	Tue	Wed	Thu	Fri
Emergency Care							
Foundation Task Force				HG			
Fresh Look Taskforce			AB NW MA				
HL7 Activities with other SDOs		RDH TW HG MA	RDH				
Health Care Devices				GG		GG	
Implementation Technology Specification					GG		
Infrastructure and Messaging							
International Council		TW HG NW RDH VM SC DR MA				RDH	
International Membership &	RDH				RDH		
Affiliation Task Force (IMATF) Joint Initiative Council (JIC) liaison	TW					RDH	
Laboratory							
Mobile Health (mHealth)					RDH VM GG MA	TW	
Marketing Council							
Modelling and Methodology (MnM)		GG	GG	GG	HG		
Orders and Observations					DR		
Patient Administration			NW	GG NW	NW	NW	
Patient Care			HL SC DR	HL SC	GG HL SC MA	HL SC	
					IVIC	1	
Patient Safety			SC	SC	MA	VM	GG NW
Pharmacy						1	SC
Physicians					DR		
Policy Advisory					RDH	1	
Public Health Emergency Response					GG DR	MA	
Publishing						MA	

Working Group	Sat	Sun	Mon	Tue	Wed	Thu	Fri
Regulated Clinical Research Information Management (RCRIM)			NW	NW	NW		
RIMBAA						GG	
SAIF Architecture					AB		
Security			TW MA	TW	TW VM	TW	
Services Oriented Architecture			AB GG VM DR	AB VM DR	TW VM	AB DR	VM
Structured Documents			GG	VM	VM DR	HG HL NW MA	NW RDH
Templates						HL	AB GG RDH SC
Terminfo Project / Terminology				HG			
Tooling US Government Projects ** This WG has officially been disbanded **				HG		HG	VM
Vocabulary			HG	HG	HG	HG VM DR MA	HG
CIMI – Clinical Information Modelling Initiative	GG & HL – present at the 3 day meeting in San Francisco 10, 11, 12				0, 11, 12		

Tutorials are also offered and these are of great value both to new comers and to older hands to bring them up to date on generic changes made that may not be discussed in their individual committee areas. At this meeting 34 tutorial sessions were held concurrently with 61 work group and task force meetings.

The number of concurrent sessions makes it difficult for a small delegation to effectively follow all the issues and to influence change. It is noted that delegates funded by their employer, or individually, to international meetings have no obligation to work with or relate information back to the Australian delegation, though some have done so in the past. It is clearly desirable that there be a cohesive Australian position.

Given the participatory nature of the HL7 committee work, it is vital that Australians are present and participate in the committee work. Intensive work is done in the committees and often 2 or 3 Australian subject matter experts are required to get the Australian requirements into the consensus-based processes. In most cases, beforehand preparation of "Australian positions" on the matters to be worked on is not effective, as the discussions and views often substantially change during the consensus-building process. Most of the work done in committee is "leading edge" standards development work that often cannot be locally previewed, assessed and commented on beforehand. As a result, the selection process of the funded participants focuses on their expertise and interests as well as their ability to effectively communicate

complex technical issues and achieve the desired outcomes for Australia in a collaborative consensus-based committee environment.

As is customary, the Australian participants met on a daily basis to plan and monitor its involvement, identify any additional sessions and/or activities that should be covered and to identify emerging issues - particularly those that are relevant to the Standards Australia IT-014 and/or NEHTA work plans. Australian participants also coordinate their activities through Skype.

#### 4. RECOMMENDATIONS ARISING FROM THE MEETING

The principal issues/actions and recommendations identified by the Australian delegation at the May 2012 HL7 Meeting are summarised in this section. The alignment to the IT-014 Committee Structure is also listed.

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
Advisory Council input	i i i i i i i i i i i i i i i i i i i	
	Richard Dixon Hughes of any matters of potential general strategic importance to HL7 International that might usefully be the subject of advice from the Advisory Council to the HL7 Board.	
Affiliate Agreement Task Force (AATF)	As version 14 of the affiliate agreement was negotiated, agreed and executed by all parties in April 2012, the AATF has concluded that for the time being, it's task and has been disbanded.  Action: HL7 Australia to continue to monitor the adequacy of the HL7 affiliate agreement and to advise International Council of any required changes in future revisions.  Action: IT-014 Secretariat to remove "Affiliate Agreement Task Force (AATF)" from the delegate responsibility lists and report	HL7 Australia IT-014 Secretariat WGM Report Coordinator
	template for future delegations.	
Affiliate Agreement Task Force (AATF): Use of HL7 IP in Australian Standards	HL7 Australia and Standards Australia to complete the update and renewal of their agreement to support the continued use of HL7 International IP in the production and publication of Australian implementation guides as Australian Standards (and related publications).	HL7 Australia Standards Australia (General Counsel)
	Action: HL7 Australia and Standards Australia to finalise drafting and continue with the negotiation of a suitable affiliate agreement for 2012 though 2013 and other arrangements with the aim of facilitating the continued availability of HL7 materials in Australia under reasonable commercial terms and allowing the continued publication of HL7 Implementation Guides as Australian Standards.	

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
Affiliate Due Diligence Committee	Continuing support by L7 Australia of the work of the Affiliate Due Diligence Committee (ADDC) through Richard Dixon Hughes as an active member.  Action: HL7 Australia to note and monitor progress with ADDC	HL7 Australia Richard Dixon Hughes
Architecture Review	The development of a capability model for SAIF will allow greater	NEHTA
Board (ARB):  Service Aware Interoperability Framework (SAIF)	realisation of maturity of interoperability.  Action: Share NEHTA interoperability capability and maturity work with ARB.	
HL7 Board	West Wireless Health Institute is a significant philanthropic enterprise dedicated to lowering the cost of healthcare through the development of innovative technology, with a strong focus on mobile communications, body area networks and the like.	Richard Dixon Hughes (Completed)
	Action: Richard Dixon Hughes to put West Wireless Institute and HISA Digital Hospital Design SIG in contact with each other.	
CBCC/Security:  Data Segmentation for Privacy	The data segmentation for privacy is a framework that is being cited by several HL7 workgroups including CBCC/SEC and SOA.  Action: Monitor the use of the S&I Framework across the HL7 workgroups for potential application to the Australian environment.	IT-014
Conformance and Guidance (CGIT): HL7 Vocabulary Binding Syntax	ISO 17583 draft 'Health Informatics: Terminology constraints for coded data elements expressed in ISO harmonised data types in healthcare information exchange' will be circulated shortly for comment.  Action: Distribute draft for Australian comment when available.	NEHTA CCA IT-014 Conformance Task Force
Conformance and Guidance (CGIT): HL7 V2.8 Conformance Requirements	Significant work has been completed on how conformance requirements for required and optional fields should be specified in HL7 V2. This is also relevant to CDA conformance testing.  Action: Distribute draft material to the NEHTA and the CCA Governance Group.	NEHTA CCA Governance Group
Conformance and Guidance (CGIT): HL7 V2.8 Conformance	The final ballot cycle for HL7 V2.8 Conformance Requirements will occur in September.  Action: Prepare and submit ballot responses prior to next WGM in	HL7 Australia Standards Australia
Requirements  Conformance and Guidance (CGIT):	Aligning code sets, value sets, and vocabulary models used in V2 and V3/CDA is required to facilitate interoperability. Australia has strong use of V2 and CDA as its key component in the PCEHR.	IT-014-06
HL7 V2 table content quality review and V3 / CDA harmonisation	Action: IT-014-06 need to consider resolution of similar issues.	

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
Conformance and Guidance (CGIT):	"XML V2 representation HL7 Project 825" was recently published and should be distributed to the appropriate Standards Committees and industry.	IT-014-06 MSIA
representation HL7 Project 825	Action: Notify Standards Committees and industry that this updated document is available.	
Education	HL7 Australia is considering how to work with New Zealand and possibly Singapore to promote education activities in the region and for their members.	HL7 Australia
	Action: HL7 Australia to progress development of structured HL7 education offerings in collaboration with New Zealand and possibly Singapore.	
Education and Marketing:	Australia still has no strategy related to HL7 or Standards Australia products in general. DEEWR Industry Skills Council's funding to develop competency and skill sets to support certification could be	JSCHIS HL7 Australia
development of understanding and skills	leveraged to develop a strategy.  Action: JSCHIS to consider the possibility of representation on the DEEWR Industry Skills Council.	
	Action: HL7 Australia to consider how they could add to their existing excellent general information sessions in order to develop more serious certified education programs within the Australian education system and where possible leverage international opportunities and partnerships.	
Electronic Health Record (EHR):	There is a lack of clarity on the purpose of use of the metadata in the EHR and its potential impact on Australian adopted models.	IT-014 NEHTA
HIE metadata	Action: Monitoring and input to the project by Australia from those with knowledge of the Australian EHR format and use is required from both the clinical and security perspectives.	NEITA
Electronic Health Record (EHR): EHR-S FIM	The EHR Function and Information Models, the existence of which is little known in Australia, would have value to both Purchasers and Developers.	HL7 Australia MSIA
	Action: Increase Awareness of the EHR System Functional Model.	
Electronic Health Record (EHR):	Despite the presence of Australian Co-Chairs driving this project, its visibility to Australian Software Developers is limited at best.	HL7 Australia
Allergies and Intolerances	Action: Increase awareness of this Domain Analysis Model.	

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
Electronic Services: HL7 Ballot Site Education Tutorial	As an International Affiliate, HL7 Australia votes as an entity for all its members. Over the past few years, HL7 Australia has not voted in a number of ballots and there has been some loss of knowledge regarding the balloting process.	HL7 Australia
	As the significant majority of ballots have been related to HL7 Version 3 technology, there has been little interest in the Australian HL7 community in these ballots. Exercising its votes is one of the significant levers that HL7 Australia can use to influence international standards development in the international HL7 stage and requires renewed focus and energy.	
	Action: Increase knowledge of HL7 International Ballots in Australia.	
Electronic Services: New HL7 Web site	The HL7 Australia website is in need of a significant overhaul. There does not appear to be the level of analytic data available to HL7 Australia to better understand its member's interests.	HL7 Australia
	Action: Redevelop the HL7 Australia Website.	
Fresh Look Task Force	The "Fresh Look Task Force" is one of several activities that emerged from the V2/V3/CDA Task Force but is now a separate activity in its own right. It has yet to be separately listed on the Australian delegate task allocation list and have its own section in WGM reports instead of being listed as an incidental inclusion under "V2/V3/V4 Task Force", which ceased to exist over 12 months ago.	IT-014 Secretariat WGM Report Coordinator
	Action: IT-014 Secretariat to include "Fresh Look Task Force" as a separate activity in the delegate responsibility lists and report template for future delegations.	
FHIR	All rights in the FHIR resources (formerly RfH -Resources for Health) have been donated by Graham Grieve to HL7 in order to provide a simplified technology platform, compatible with current service oriented approaches, for rapid implementation of HL7 (and other) artefacts in the eHealth domain. This is a highly significant development of which all members of the Australian eHealth community should be aware, particularly given its Australian origins. It is time for local awareness in Australia to be raised and engagement in the potential use and development of this resource.	HL7 Australia
	Action: HL7 Australia to raise awareness of FHIR technology and initiate discussion related to its potential application, development and use in the Australian context.	

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
International membership & Affiliation Task Force (IMATF)	The IMATF is considering the medium to long-term membership structure of HL7 and its affiliates. These discussions overlap the HL7 Board consideration of its forward business plan and potentially impact the role of HL7 Australia and the benefits currently received by its members and the Australian eHealth community.  Action: HL7 Australia to continue engagement on the HL7 membership model through IMATF with a view to ensuring Australian stakeholders can continue to obtain HL7 membership benefits cost-effectively and have their interests in HL7 represented locally and at the global level.	HL7 Australia Richard Dixon Hughes Others as appropriate
International membership & Affiliation Task Force (IMATF)	Richard Dixon Hughes has been asked to lead a study into comparative membership structures across the affiliates and assist in proposing new categories for licensing intellectual property.  Action: Richard Dixon Hughes to finalise and issue survey of affiliate membership classes and privileges for IMATF.	Richard Dixon Hughes
International membership & Affiliation Task Force (IMATF) Review of licensing classes	Richard Dixon Hughes to complete analysis of potential HL7 licensing classes.  Action: Richard Dixon Hughes to assist Diego Kaminker (Argentinian Board Member) with development of revised licensing classes to put forward for use in the HL7 IP policy, membership agreements and affiliate agreements.	Richard Dixon Hughes
Mobile Health (mHealth)	While mobile health has not yet emerged as a priority for Australia, there is a considerable and growing international interest in its many facets, which is relevant to HL7 as a member of the global eHealth community. Australian interest in health devices is growing and this is an area that may be impacted by developments in mHealth standardisation. Australia should encourage collaboration and harmonisation of mHealth standards and interoperability of mHealth applications with each other and with mainstream applications including EHR and PHR systems.	IT-014 HL7 Australia
	Action: IT-014 and HL7 Australia to monitor progress of mHealth and developments in mHealth standards more generally with a view to ensuring Australian interests are informed and to encourage collaboration between HL7 and other groups seeking mHealth Standards.	
Modelling and Methodology (MnM): FHIR	Australia needs to consider whether a position on FHIR is required.  Action: Consider this at the next HL7 Australia meeting.	HL7 Australia
Modelling and Methodology (MnM): FHIR – Vocabulary Requirements	Action: Australian HL7 stakeholders should consider the impact and requirements for terminology binding specification to meet Australian needs.	HL7 Australia
Patient Administration:	There is limited awareness of the GS1 Patient ID proposal/standard among Australian Medical Software Developers.  Action: Increase awareness of GS1 Patient Identifiers.	HL7 Australia MSIA

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
Patient Administration:	There is no MOU between HL7 Australia and GS1.	HL7 Australia
GS1	Action: Recommend that HL7 Australia explore an MOU with GS1.	
Patient Care:	Sharing of Allergy/Intolerance information is critical for good patient care and safety. This work will enable sharing of this information in a	Standards Australia
Allergies and Adverse Reactions	standardised and computable way that enables true interoperability.  Action: Australian delegates to HL7 should continue to be	HL7 delegates
	involved in steering this work to make sure that it fits with the needs of the Australian health community.	
Patient Care:	This project is of interest to IT-014-06-04, IT-014-06-06 and the newly established IT-014-13.	IT-014
Allergies and Adverse Reactions	Action: Australia, in particularly NEHTA and the relevant IT-014	IT-014-06-04
	subcommittees and working groups, should continue to provide leadership and contribution to the completion of this very	
	important project.	for Action by  HL7 Australia  Standards Australia HL7 delegates  IT-014 IT-014-06-06 IT-014-13 NEHTA  Standards Australia  Standards Australia I I I I I I I I I I I I I I I I I I I
Patient Care:	While Australia is not using HL7 V3 models, it is useful to follow this	Standards Australia
Harmonisation of the Patient	issue as encounter models are an important part of any health IT system.	
Administration Encounter Model	Action: Continue to observe the outcome of the HL7 V3 models issue.	
Patient Care: Detailed Clinical	Clinical modelling is a vital activity for Australia to be involved in. The HL7 DCM approach at this time is flawed and is likely to be subsumed by the CIMI work. FHIR also bears watching in this area.	Standards Australia
Models	Action: Australia should continue to watch developments in CIMI for clinical modelling approaches. The HL7 work should be observed.	
Patient Care: Care Plan Topic	While the HL7 V3 output from this work is unlikely to be used in Australia, the DAM is likely to be a useful piece of work to inform modelling in this area.	Standards Australia
	Action: Australia should continue to monitor this work item.	
Patient Care:	The Care Plan project work has important relevancy to IT-014-06-06 and IT-014-13.	
Care Plan Project	Action: Australia, through NEHTA and relevant IT-014	
	subcommittees and working groups, should continue to lead and contribute to the development of a care plan structure and exchange standards. Jurisdictional participations will also be important and useful.	
Pharmacy:	Action: This project is of significant interest and importance to	IT-014
Patient Medication	Australian ehealth agenda. NEHTA and IT-014 subcommittees and working groups, IT-014-06-04, IT-014-06-06 and IT-014-13,	IT-014-06-06
Queries	should monitor the progress of this project and actively contribute to the development of the models and infrastructures.	
	1	NEHTA

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
Pharmacy: V3 Nutritional Order Clinical Message	Australia currently does not have an ehealth work program on nutrition assessment and orders. NEHTA has received contacts from the Dietician Association of Australia (DAA) on the use of the International Dietetics and Nutrition Terminology (IDNT) to support nutrition assessment and order. NEHTA will introduce the DAA members to work currently being done and planned by the HL7 Nutrition group.  Action: Australia will need to keep a close watch on the development of nutrition models and contribute where appropriate.	IT-014 NEHTA
RCRIM: BRIDG as a DAM	Australia does not appear to have active participation in the development of the BRIDG model.  Action: Increase Awareness of BRIDG and CDISC more generally in Australia.	HL7 Australia MSIA ANZCTR
RCRIM: CTR&R	There is no known Australian participation in this project. Does Australia leverage International initiatives in the registration of Clinical Trials?  The Australian equivalent to the US ClinicalTrials.gov and European EudraCT sites is ANZCTR – Australian New Zealand Clinical Trials Registry (www.anzctr.org.au).  Action: Inform ANZCTR of this project, and invite and encourage participation.	NEHTA DoHA ANZCTR
Security Workgroup: Security and Privacy Ontology - Project No: 646	This ontology is at present quite immature and requires wider consideration for its international application and specifically for Australia.  Action: Increased review and engagement by IT-014-04 members on this and subsequent ballots.	IT-014-04
Security: New Co-Chair	Dr Patricia Williams, member of the Australian delegation, was appointed new Co-Chair of the Security WG.  Action: For noting as Australian leadership engagement.	IT-014
SOA:  Cross Platform Interoperability Implementation Guide for Immunisation.  Sponsor SOA, co- sponsor with PHER, ArB.	Output from this project is likely to be useful in the Australian context.  Action: Keep the clinical decision support community updated with approach and progress to inform Australian CDS projects.	IT-014-13

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
SOA/Pharmacy: Medication Statement Service	The proposed Medication statement service will be balloted in the September 2012 Ballot cycle.  Action: Ensure relevant groups are aware of ballot, and comments are submitted.	HL7 Australia IT-014-06-04 NEHTA Terminology
		Services
SOA: Healthcare and Community Services Provider Directory Service (HCSPD)	Endpoint Location Service (ELS) is to be published through the OMG.  Action: Australia should support the ELS work in the OMG.	NEHTA
SOA: Clinical Terminology Service (CTS2)	The French have deployed a Terminology (view only) Service for their Medicines terminology using CTS2. Their approach is documented at http://wiki.hl7.org/index.php?title=File:Phast_STS_brief_description_May14_2012.pdf  Action: Australia to review this work as it may provide information for an Australian approach to deployment of AMT.	NEHTA Clinical Terminology IT-014-06-04 IT-014-02
SOA: SOA Service Ontology	SOA is currently working with NEHTA, Canada Infoway and Kaiser Permanente to develop use cases, structure and content of the SOA Service Ontology.  Action: NEHTA to continue to be involved in the development of the ontology content.	NEHTA
SOA: PASS	There should be revision of the PASS DSTU scope to include data tagging and labelling (data segmentation).  Action: When scope is available for discussion, Australia to review to ensure it is sufficiently international to be relevant for future use in Australia.	IT-014
Structured Documents: HL7/IHE Consolidated CDA Implementation Guide	There is a proposed new work item for a CDA document type specific to patient entered data. This is relevant to the PCEHR.  Action: Contribute to new work item in view of Australian current work and experience in this area.	NEHTA IT-014-06-06
Templates: HL7 Template ITS Pilot	The Template ITS pilot project should be of interest to Standards Australia IT-014-06 subcommittees and PCEHR program group developing template services.  Action: Increase awareness of this project, and Australia to consider for potential contribution.	IT-014 IT-014-06 NEHTA
Vocabulary: Vocabulary Facilitators	Action: HL7 Australia to advise Vocabulary Work Group member for Australia of national requirements for facilitators.  Action: HL7 Australia to consider how we manage these requirements in Australian Standards production.	HL7 Australia

Topic	Issue / Action / Recommendations for Australia	Recommended for Action by
Vocabulary: Development of Terminology Authority for HL7	As the development of a terminology authority for HL7 offers the ability to use more standardised and accessible terminological content for HL7 purposes, both nationally and internationally, this item is considered to be important to all organisations.  Action: Australia to support the development of a terminology authority and IT-014 to monitor work in this area.	HL7 Australia IT-014
Vocabulary: Use of IHTSDO workbench for HL7 Content	Action: Ongoing contribution and reporting is required to ensure that HL7 Australia and IT-014-06 are aware of progress in this area.	HL7 Australia IT-014-06
Vocabulary: Common Terminology Server 2	Action: Consider how these updates and international trials impact Australia's potential use of this work.	NEHTA
Vocabulary:  Development of Terminfo use cases	Action: Consider whether Australia wishes to actively contribute to use case development.  Action: IT-014-06-05 to consider any specific issues related to existing standards that might require modification or which could provide input to the use cases.  Action: Consider whether Australia can contribute any information from our existing implementation guides.	NEHTA IT-014-06-05
Vocabulary/Tooling: National Library of Medicine Request Submission System	Action: Raise awareness of this tool within HL7 Australia community and IT-014-02 through circulation of web address.	Standards Australia
Vocabulary: Terminology Binding	Action: Consider the impact of these issues of binding syntax in CDA documents under development and published in Australia.	NEHTA IT-014-06
Clinical Information Modelling Initiative (CIMI)	Clinical modelling is of vital importance to the eHealth program in Australia.  Action: Australia to continue to be involved and support the work of the CIMI group.	NEHTA Standards Australia

# 5. FUNDING SOURCES SUMMARY AND AUSTRALIAN ATTENDANCE

Eleven Australians attended as representatives for the duration of this HL7 meeting, nine of whom were in the formal 'delegation'. The funding source for these delegate numbers is indicated in the table below.

DOHA provided funding assistance for the following delegates:

- Heather Grain
- Patricia Williams
- Vince McCauley
- Richard Dixon Hughes
- Hugh Leslie
- Graham Grieve
- David Rowed
- Nat Wong
- Meya Achdiat

Funding Source	Number	Change from Previous meeting
Full funding by employer: Private	0	-2
Full funding by employer: States/Territories or National Initiatives (NEHTA)		-4
Funding assistance – DOHA through Standards Australia contract		+1
Total:	11	-5

There was a team of delegates from NEHTA who attended the HL7 meeting and these NEHTA delegates are listed below:

- Andy Bond
- Stephen Chu

# 6. AUSTRALIAN LEADERSHIP POSITIONS

The table below lists leadership positions held by Australians at the HL7 meeting in May 2012.

Attendee	Position (held at	Funding Source	Work Group or Committee
	the meeting)		
	Co-Chair	Standards Australia	Vocabulary
Heather Grain		via the DoHA	D. II. A. L
	Invited Member	Funding Agreement	Policy Advisory Committee Structured Documents
	Co-Chair	Standards Australia via the DoHA	Structured Documents
Grahame Grieve	Co-Chair	Funding Agreement	Modeling and Methodology
			modeling and metroderegy
	Member		Architecture Review Board
Hugh Leslie	Co-Chair	Standards Australia	Patient Care
		via the DoHA	
	Co-Chair	Funding Agreement Standards Australia	Advisory Council to the Board of HL7
	CO-Chair	via the DoHA	International
		Funding Agreement	
	Non-Voting Member		HL7 International Board of Directors
	Chair		International Council and Affiliate Chairs
	HL7 Australia		Meetings,
	TIET Adoliana		Affiliate Agreement Task Force (AATF),
Richard Dixon			International Membership & Affiliation Task
Hughes			Force (IMATF)
	Invited Member		Affiliate Due Diligence Committee
	invited Member		(of HL7 International Board)
			(cr. i.i.) international desire)
	Invited Member		Policy Committee (of HL7 International
			Board – invited by HL7 Chair)
	Nominated Chair-		Joint Initiative Council (JIC) for Health
	elect		Informatics SDO Harmonisation
Vincent McCauley	Co-Chair (newly	Standards Australia	Service Oriented Architecture
	elected)	via the DoHA Funding	
		Agreement	
Trish Williams	Co-Chair (newly	Standards Australia via the DoHA	Security
THOU WIIIIAIIIS	elected interim)	Funding Agreement	Jecumy
Andy Bond	Member ARB	NEHTA	ARB
Stephen Chu	Co-Chair	NEHTA	Patient Care

### 7. ACRONYMS LIST

Abbreviation	Meaning
ACCC	Australian Competition and Consumer Commission
ACMA	Australian Communication and Media Authority
ACSQHC	Australian Commission on Safety and Quality in Health Care
ACT	Action
ACTUG	Australian Clinical Terminology Users Group
ADA-JDA	Australian Design Award James Dyson Award
ADL	Archetype Definition Language
AG	Advisory Group
AGDA	Australian Graphic Design Association
AHIEC	The Australian Health Informatics Education Council
AHIMA	American Health Information Management Association
AHMAC	Australian Health Ministers' Advisory Council
AHML	Australian Healthcare Messaging Laboratory
AIDA	Australian International Design Awards
AIHW	Australian Institute of Health & Welfare
AIIA	Australian Information Industry Association
AMT	Australian Medicines Terminology
ANSI	American National Standards Institute
ANZCTR	Australia New Zealand Clinical Trials Registry
ArB	Architecture Review Board
AS HB	Australian Handbook
AS/NZS	Australian/New Zealand Handbook
AS/NZS ISO	International Standards adopted by Australia and New Zealand
AU	Australia abbreviation in the Int'l comment form
AWI	Approved Work Item
BAU	Business As Usual
BCA	Building Codes of Australia
BRS	Business Requirements Specification
BRIDG	Biomedical Research Integrated Domain Group
	BRIDG is a collaborative effort of CDISC, the HL7 RCRIM WG, the (US) National Cancer Institute (NCI), and the US Food and Drug Administration (FDA).

Abbreviation	Meaning
Cal-X	The California Exchange (Cal-X) is a data and information exchange to support healthcare, medical, public health, and homeland security needs in a collaborative, shared, secure, and cost-effective manner.
COPOLCO	Consumer policy committee [ISO]
CASCO	Conformity Assessment
CBCC	Community Based Collaborative Care [HL7 Workgroup]
CCD	Continuity of Care Document
CCHIT	(US) Certification Commission for Health Information Technology
CD	Committee Draft (third stage in developing an ISO or IEC standard)
CDA	Clinical Document Architecture
CDC	Centre for Disease Control (US Government agency)
CDISC	Clinical Data Standards Interchange Consortium
CDS	Clinical Decision Support [HL 7 Workgroup]
CDV	Committee Draft for Vote
CEN	European Committee for Standardization (Comité Européen de Normalisation)
CENELEG	European Committee for Electrotechnical Standardisation
CEO	Chief Executive Officer
CGIT	Conformance and Guidance for Implementation and Testing Committee
CIC	Clinical Interoperability Council [HL7 Workgroup]
CIMI	Clinical Information Modelling Initiative
CIS	Clinical Information Systems
COAG	Council of Australian Governments
СОМ	Comment
conHIT2011	European Health Informatics Conference 2011
ContSys	System of Concepts for Continuity of Care
COR	Corrigendum [to a Standard]
CRM	Customer Relationship Management
СТО	Chief Technical Officer
CTR&R	Clinical Trials Registration and Results
DAFF	Department of Agriculture, Fisheries and Forestry
DAM	Domain Analysis Model (comprehensive model of a domain) [HL7]
DAM	Draft Amendment [Standards Australia]
DCM	Detailed Clinical Model
DCOR	Draft Corrigendum

Abbreviation	Meaning
DEVCO	Developing country matters
DIA	Design Institute of Australia
DICOM	Digital Imaging and Communications in Medicine
DIISR	Department of Innovation, Industry, Science & Research
DINZ	Design Institute of New Zealand
DIS	Draft International Standard (fourth stage in developing an ISO or IEC standard – the main opportunity for public input)
DMP	Dossier Médical Partagé (Shared Medical Record) (France)
DoHA	(Australian Government) Department of Health and Ageing
DSTU	Draft Standards for Trial Use (HL7 and ANSI)
DTR	Draft Technical Report [ISO and Standards Australia]
DTS	Draft Technical Specification [ISO and Standards Australia]
EC	European Commission [the administrative arm of the EU]
ECCF	Enterprise Compliance and Conformance Framework
EEC	European Economic Community
EFMI	European Federation of Medical Informatics
EHR	Electronic Health Record
EHR-FM	EHR Functional Model
EHRS or EHR-S	Electronic Health Record System
ELGA	Austrian CDA Implementation Guide in Development
ELS	End Point Location Service
EMEA	European Medicines Agency
EN	European Standard (Européen Norm)
ENA	Energy Networks Association
EPM	Enterprise Project Management
epSOS	European Patients Smart Open Services.
	A European initiative (23 countries) to exchange pharmacy and EHR information including prescriptions, across the EEC using IHE profiles and local standards. See <a href="https://www.epsos.eu">www.epsos.eu</a>
ETP	Electronic Transfer of Prescriptions
EU	European Union
EudraCT	European Union Drug Regulating Authorities Clinical Trials
FCD	Final committee draft
FDAM	Final Draft Amendment
FDIS	Final Draft International Standard (for vote to publish) [ISO]
FHIR	Fast Health Interoperability Resources [HL7]

Abbreviation	Meaning
FRS	Functional Requirements Specification
FYI	For your information
GCM	Generic Component Model
GDP	Gross Domestic Product
GP	General Practitioner
GS1	An international SDO – primarily in the supply-chain domain
GVP	Good Pharmacovigilance Practices
HCD	Health Care Devices Committee
HDF	HL7 Development Framework
н	Health Identifiers
HIE	Health Information Exchange
HIMSS	Healthcare Information and Management Systems Society
HISC	Health Informatics Standing Committee
HITSP	Health Information Technology Standards Panel
HL7	Health Level Seven (International)
HL7 ELC	HL7 E-Learning Course
HPI	Healthcare Provider Identifier
HPI-I	Healthcare Provider Identifier for Individuals
HPI-O	Healthcare Provider Identifier for Providers
HQMF	Health Quality Measure Format
HSSP	Healthcare Services Specification Project [joint HL7/OMG]
IC	International Council (HL7)
ICD10AM	The Australian NCCH modification of ICD-10 code set for the coding of diseases and procedures
ICD10-AM	International Classification of Diseases, Version 10, Australian Modification
ICD9CM	International Classification of Diseases 9 Clinical Modification
ICH	International Conference on Harmonisation (of Technical Requirements for Registration of Pharmaceuticals for Human Use)
ICHPPC	International Classification of Health Problems in Primary Care
ICNP	International Classification for Nursing Practice
ICOGRADA	International Council of Graphic Design Associations
ICPC2+	International Classification of Primary Care 2
ICSID	International Council of the Societies of Industrial Design
ICSR	Individual Case Safety Report [related to Medicines/Devices]
ICT	Information & Communications Technology

Abbreviation	Meaning
IDA	International Design Alliance
IDEA	Industrial Design Excellence Awards
IDMP	Identification of Medicinal Products
IDSA	Industrial Design Society of America
IEC	International Electrotechnical Commission (an international SDO)
IEEE	Institute of Electrical & Electronic Engineers (US) (also an SDO)
IF	International Forum of Design
IFI	International Federation of Architects/ Designers
IG	Implementation Guide
IHE	Integrating the Healthcare Enterprise
IHI	Individual Healthcare Identifier
IHTSDO	International Health Terminology Standards Development Organisation
IMATF	International Membership and Affiliation Task Force
InM	Infrastructure and Messaging [HL7 Workgroup]
IP	Intellectual Property
IS	International Standard
ISO	International Organization for Standardization
ISO/CS	ISO Central Secretariat
ISO/TC 215	ISO Technical Committee (Health Informatics)
IT	Information Technology
IT-014	Standards Australia Committee IT-014 (Health Informatics)
ITS	Implementable Technology Specifications
ITTF	ISO/IEC Information Technology Task Force
ITU-T	International Telecommunications Union – Standards Division
IXS	Identity Cross Reference Service
JI	Joint Initiative on SDO Global Health Informatics Standardization
JIC	Joint Initiative Council (responsible for governance of the JI – with current members being ISO/TC215, CEN/TC251, HL7 International, CDISC, IHTSDO and GS1)
JIDPO	Japanese Industrial Design Promotional Organisation
JSC-HIS	Joint Standing Committee on Health Informatics Standards
JSON	Java script Object Notation
JTC	Joint Technical Committee
JTC 1	ISO/IEC Joint Technical Committee 1 Information Technology
JWG	Joint Working Group

Abbreviation	Meaning
KPI	Key Performance Indicator
LB	Letter Ballot
LIC	Low Income Country
LMIC	Low and Medium Income Countries
LOINC	Logical Observation Identifiers Names and Codes
LPO	Local PCEHR Officer
MBS	Medical Benefits Scheme
MBUA	Member Body User Administrators (Person who maintain the ISO Global directory in each country)
MDA	Model Driven Architecture
MIC	Medium Income Country
MM	Maturity Model
MnM	Modelling and Methodology [HL7 Workgroup]
MOR	Monthly Operational Report
MOU	Memorandum of Understanding
MSIA	Medical Software Industry Association
MT	Maintenance committee (IEC)
NASH	National Authentication Service for Health
NATA	National Association of Testing Authorities
NEHIPC	National E-Health and Information Principal Committee
NEHTA	(Australian) National E-Health Transition Authority
NH&MRC	National Health and Medical Research Council
NHCIOF	National Health Chief Information Officer Forum
NHIN	(US) National Health Information Network
NHISSC	National Health Information Standards and Statistics Committee
NHS	(UK) National Health Service
NIH	(US) National Institutes of Health
NIST	National Institute of Standards and Testing (USA)
NMB	National Member Body [of ISO or CEN]
Normapme	European Office of Crafts, Trades and Small and Medium sized Enterprises for Standardisation
NP	New Work Item Proposal (current ISO/IEC abbreviation)
NPACC	National Pathology Accreditation Advisory Council
NPC	National Product Catalogue
NQF	National quality (measures) framework

Abbreviation	Meaning
NSO	National Standards Office
NWIP	New Work Item Proposal (obsolete ISO/IEC abbreviation – see "NP")
0&0	Orders and Observations [HL7 Workgroup]
OBPR	Office of Best Practice Regulation
OCL	Object Constraint Language
OHT	Open Health Tools Foundation (www.openhealthtools.org)
OID	Object Identifier
OMG	Object Management Group
ONC	Office of the National Coordinator for Health Information Technology (within US Department of Health and Human Services)
OSI	Open Systems Interconnection
OTF	Organisation Task Force [ISO TC 215]
OWL	Web Ontology Language
PA	Patient Administration [HL7 Workgroup]
PACS	Picture Archive Systems
PAS	Patient Administration Systems
PBS	Pharmaceutical Benefits Scheme
PC	Patient Care [HL7 Workgroup]
PCEHR	Personally Controlled Electronic Health Record
PDAM	Proposed Draft Amendment
PDF	Portable Document Format
PDTR	(Proposed) Draft Technical Report
PHDSC	Public Health Data Standards Consortium
PHER	Public Health and Emergency Response [HL7 Workgroup]
PHM	Powerhouse Museum
PHR	Personal Health Record
PHTF	Public Health Task Force
PIM	Platform Independent Model
PIP	Practice Incentive Payment
PIR	Post Implementation Review
PKI	Public Key Infrastructure
PM	Project Manager
РМВОК	Project Management Body of Knowledge
РМО	Project Management Office
PMP	Project Management Plan

Abbreviation	Meaning
PMS	Practice Management System
PMTL	Project Management Team Leader
PoC	Point-of-Care
PSM	Platform Specific Model
PSS	Project Scope Statement [HL7]
PSUR	Periodic Safety Update Report
PWG	Pharmacy Working Group [HL7 Workgroup]
RACGP	Royal Australian College of General Practice
RCPA	Royal College of Pathologists Australia
RCRIM	Regulated Clinical Research Information Management [HL7 Workgroup]
RFID	Radio Frequency Identification
RHIO	(US) Regional Health Information Organisation
RIM	Reference Information Model
RIMBAA	RIM Based Application Architecture
RIS	Radiology Information Systems
RLUS	Resource Locate Update Service (HSSP)
RMIM	Refined Message Information Model
RM-ODP	Reference Model of Open Distributed Processing
RO	Responsible Officer
SA	Standards Australia
SAIF	Services Aware Interoperability Framework
SC	Subcommittee
SD	Structured Document [HL7 Workgroup]
SDO	Standards Development Organisation
SHIPPS	Semantic Health Information Performance and Privacy Standard
SIG	Special Interest Group
SKMT	Standards Knowledge Management Tool
SLA	Service Level Agreement
SMB	Standards Management Board (IEC only)
SME	Subject Matter Experts
SMTP	Simple Mail Transfer Protocol
SNOMED	Systematised Nomenclature of Medicine
SNOMED CT	Systematised Nomenclature of Medicine- Clinical Terms
SOA	Service Oriented Architecture

Abbreviation	Meaning
SOAP	Simple Object Access Protocol
SP3	Standards Professional Project Practitioners
STC	Technical Steering Committee
T3SD	Technical and Support Services Steering Division
TC	Technical Committee
TCM	Traditional Chinese Medicine
TCP/IP	Transmission Control Protocol/Internet Protocol
TEAM	Traditional East Asian Medicine – This term, though inadequate is used to represent Traditional Chinese Medicine, Traditional Korean Medicine, Traditional Japanese Medicine.
TF	Task Force
TM	Traditional Medicine
ТМВ	Technical Management Board (ISO only)
TOGAF	The Open Group Architecture Framework
TR	Technical Report (an informative ISO or IEC standards publication)
TS	Technical Specification (a normative standards publication having a lower level of consensus than a full international standard)
UAT	User Acceptance Testing
UCUM	Unified Code for Units of Measure [Regenstrief Institute]
UHI	Unique Healthcare Identifier
UML	Unified Modelling Language
UN	United Nations
VMR	Virtual Medical Record
VOC	Vocabulary Committee [HL7 Workgroup]
W3C	World Wide Web Consortium
WCM	Web Content Management
WD	Working Draft (second stage in developing an ISO or IEC standard)
WG	Working Group or Work Group
WGM	Working Group Meeting
WHO	World Health Organization
WI	Work Item
WTO	World Trade Organisation
XDS	(IHE's) cross enterprise Data Sharing protocol
XML	Extensible Markup Language