US TAG - US Technical Advisory Group to ISO TC215 (Health Informatics)

Presentation to:
National Council on Vital and Health Statistics
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Gary L. Dickinson
Chair, US TAG
Head of US Delegation to ISO TC215
Lead, ISO TC215 WG2 Architecture Sub-Group

US Leadership in ISO TC215

- Secretariat
  - Audrey Dickerson - HIMSS
- Convenors
  - Michael Glickman - WG2 - Data Interchange
  - Chris Chute, MD - WG3 - Semantic Content
  - Todd Cooper - WG7 - Medical Devices
- Vice-Convenor
  - Lori Forquet - WG4 - Security

US Leadership in ISO TC215

- Ambassador to Developing Countries
  - Ed Hammond, PhD
- Lead, Consumer Policy Committee
  - Solomon Appavu
- Lead, eHealth Task Force
  - Solomon Appavu

US Leadership in ISO TC215, con't

- TC215 Chair
  - Yun Sik Kwak, MD (Korea)
  - Nominated by US TAG

ANSI (US) Standards Promoted to ISO

- ASTM Lab Analyzer Interface
- HL7 v3 Reference Information Model
- HL7 v2.5 Messaging Specification
- IEEE/MIB Medical Device Standards

- Non ANSI Standard
  - DICOM v3 Diagnostic Imaging (by reference)

US TAG Members

- Currently 51 Members, including:
  - Providers
    - Cook County Hospitals, Kaiser Permanente, Mayo Foundation, United Healthcare
  - Standards Developers
    - DICOM, CAP/SNOMED, HL7, IEEE, OASIS
  - Professional/Trade Associations
    - ADA, AHA, ANA, ComCare Alliance, NEMA

US TAG Members, con't

  - Government Agencies
    - VA, DOD, AHRQ, NIH
  - Vendors
    - Draeger, Ethidium, GE, Motorola, Perot, Philips, Quadramed, Siemens
  - Academics/Providers
    - Duke and Georgetown Universities, Universities of Iowa, Kansas, Michigan, Wisconsin
  - Consultants
    - Various

US TAG Membership

- Good Balance of Stakeholders
- Good Depth of Technical Expertise in Many Topics
- But Need to Fill Important Gaps

US Participation/Influence

Strong	WG2 - Data Interchange
	WG3 - Semantic Content
	WG4 - Security
	WG7 - Medical Devices
Moderate	WG1 - Data Structure
Minimal	WG5 - Health Cards
	WG6 - Pharmacy/Med Req'ts
TBD	WG8 - EHR Req'ts (new)

TC215 Standards Development Objectives

- "Producing" ISO standards is not necessarily writing them from scratch.
- TC215 will, wherever practicable, seek to meet the need for international standards by:
  - Adopting documents/standards produced by others with only those amendments which are necessary;
  - Encouraging other suitable bodies to develop standards to fulfill ISO TC215 objectives;
  - Developing its own standards only where neither of the above is achievable.

Precedents

- Establish Requirements First
  - Precedent to Specification
  - What (Requirements Statement)
    + Why (Rationale)
    NOT How (Implementation Details)
  - Sets Benchmark for Achievement
- Establish Roadmap for Future
  - Standards Form, Fit and Purpose

Key Issues

- Gain Participation
  - Including Key Stakeholders
  - Promoting User Perspective/Objectives: Consumers, Providers, Health Plans
  - Clinical (Care-wise) and Technical (HIT-wise)
- Ensure Balance
  - Producers and Users/Consumers

Key Issues, con't

- Ensure Global Relevance, across:
  - Bastions of EHR/HIT
  - Emerging Markets
  - Developing Countries
  - Western, Eastern and Alternative Medicine
- Ensure Validation of Standards
- Ensure Standards have Testable Conformance Criteria

What Can Government Do?

- Insist on Requirements First
- Insist that Standards be Developed as Components of a Strategic Roadmap
- Insist on Credible, Broad-Scale Validation of Published Standards
  - Preferably at the DSTU Stage

What Can Government Do?

- Insist on Standards which Include Testable Conformance Criteria
- Ensure Competent Conformance Measurement Process

What Can Government Do?

- Assist a Set Number of Experts from Diverse Stakeholder Groups
  - To Participate In, and Contribute to, Select Standards Development Activities
  - Favor Those with Less Ability to Otherwise Participate
  - Develop Solicitation/Selection Process
  - Pay Travel Expenses, Meeting Fees, Modest Per Diem
  - Rotate Year to Year (e.g., 1-2 year term)

Contact

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