

Sept 16 (Monday) Q4

Date: Sept 16 2019

Quarter: Q4

Chair- Joginder

Scribe- Erin

Minutes Approved as Presented



This is to approve minutes via general consent. *"You have received the minutes. Are there any corrections to the minutes? (pause) Hearing none, if there are no objections, the minutes are approved as printed."*

Goals

Hosting FHIR-I

Discussion items

Time	Item	Who	Notes
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Q4	FHIR-I Updates /discussion	Erwout	<ul style="list-style-type: none"> • This will be the last time that Erwout is joining us. He is stepping down as co-chair • FHIR R4 Timeline: <ul style="list-style-type: none"> • Looking at delaying R5 one quarter to take advantage of changes expected to come from the accelerator projects • FMG wants to know if this is ok? <ul style="list-style-type: none"> • This would allow us to have the STU ballot in May 2020, not in Jan which is expected to be lower in attendance due to being in Australia • IF necessary could have some sort of interim formal STU • What are the obligations (IGs and Resources) to be considered to be a part of the FHIR R5 release? <ul style="list-style-type: none"> • Resources to go normative in R5? Vs not necessary to go normative • Much less urgent if not normative • Even to go to ballot, you must be at FM level 2 • Resources- Imm (3) and ImmRecommendation (1) and ImmEvaluation () • What about the IG's? IG's stay the FHIR level in which they were balloted • Delaying 1 quarter is not really a delay. Why not delay longer to give folks in the community and implementers time?- • PH doesn't have a lot of concerns about delaying, and suggest that it could slow down further • Attendance plan for Australia <ul style="list-style-type: none"> • 2-3 Co-chairs will not be traveling • We typically plan for less participation and plan for limited to no decision making during the WGM • Quorum – 1 co-chair +2 • We are not expecting any new projects coming up for May balloting • CDS FHIR may need to go back to ballot • Possibly go normative with the HC surveys, though likely not • We will need to decide whether or not we want to put together a real agenda • What structural issues do we expect to get resolved in R5? <ul style="list-style-type: none"> • Little feedback on what has been implemented • What is the appropriate amount of engagement between these profiling activities and FHIR activities and the workgroup that owns these resources? • If it's easier to profile issues away, there are not incentives to bring back through the process <ul style="list-style-type: none"> • Normally there are processes and expectations for providing feedback on API's, but not here. • An example is the FHIR accelerator projects- new project for PH alerting; we just found out about this by word of mouth. What level of engagement has the PH community had in this work? • IG's <ul style="list-style-type: none"> • Is there a model IG that folks can use as an example? This is being worked on. • Every IG you look at is different • HL7 will be mandating eventually but not likely in the next 6 months • Eric Haas and Llyod are developing- need to keep tabs • New IG tooling is coming <ul style="list-style-type: none"> • Build.fhir.org/ig/lmckenzi/sample-ig/# • IS there something that we can do to help guide new projects? What considerations should be have been developing a FHIR IG? <ul style="list-style-type: none"> • Should validate what the acceptable tools are that you can use at that time • The process has to conform with the tooling stack; however a lot of tools don't have documented requirements and then the approval is subjective based on who likes or dislikes the way it looks. • You have to be aware of the risk with regards to tooling • There are rules- whatever the IG publisher produces • Developing requirements for FHIR IGs to be tested in Connect-a-thons BEFORE submitting an NIB. They must be at FHIR maturity level 2 before going to ballot- (at least 3 independently developed systems with semi real data) <ul style="list-style-type: none"> • Even for STUs... what is the point of the STU? • Was this the intent to apply the same rigor to IGs as you do to resources • For this particular workgroup this is going to be difficult, bc it will be hard to get EHR vendors to implement something that isn't yet a standard, or an IG • Do we need to go to a for comment ballot before approaching vendors?? • IF one of the actors is supposed to be a PH agency, it will likely be difficult for them to participate. This could actually prevent PSS's from coming forward

Action items

