2018-11-13 Conference Call

Attendance:

- Hugh Glover (Co-chair)
- Boris Brodsky (Co-chair)
- Ed Helton (Co-chair)
- Myron Finseth (Co-chair)
- Nagesh Bashyam (Dragon)
- Christi Denney
- Julie Evans
- Bill Friggle
- Nagesh Bashyam
- Christi Denney
- Julie Evans
- Bill Friggle
- Norman Gregory
- Catherine Hosage Norman
- Andy Iverson
- Gayathri Jayawardena
- Jane Pollack
- Abudllah Rafiqi
- Robinette Renner
- Wendy ver Hoef
- Ulli Wagner
- Mead Walker
- Rachael Roan

1 Minutes Approval

2 Project and PSS Review and Approval

Key Dates

FHIR Ballot Prep schedule

R4 Publication

2018-11-01: Substantive content freeze for core R4 publication

2018-12-02: FHIR core and FHIR IGs are all locked. No further changes without product director permission

Finalization of FMM levels

Jan 2019 FHIR IGs

2018-10-31 - Reconciliation packages posted to ballot desktop for previous ballots (if any)

2018-10-28 - NIBs due, IG must be publishing on the CI build and "functionally complete"

FMG will be evaluating "need to ballot" - each ballot must be necessary

All artifact types, all key behaviors, etc. present. If there are bugs in the publication process, they must be identified by this point and must be resolved to the point that the build at least runs successfully and any tooling-related issues must be agreed to be resolvable

2018-11-18 - Content deadline for QA. All content must be final from the workgroup perspective - no changes other than QA fixes from this point - no new artifacts or content

2.1 #1426 Women's Health Technology Coordinated Registry Network (CRN)

Confluence page

2.2 #1425 CDISC Lab Semantics in FHIR

2.3 #1424 Common Data Model Harmonization (CDMH) - FHIR Implementation Guide

2.4 #1416 Exploration of FHIR resources to support of IDMP 11238/19844 Substances Standard and Technical Specification

2.5 #1310 BRIDG Model Update (BRIDG Release 5.2 /HL7 BRIDG R5 is being updated)

2.7 #?? siRB

2.8 #?? eSource

2.9 #?? PRO - Patient Reported Outcomes

- Discuss the implementation guide http://hl7.org/fhir/us/patient-reported-outcomes/2018Sep/index.html

Dragon walked the group through the implementation guide. There were no significant issues raised. He explained there are some further amendments to be made and any formal approval for publication should wait until after those are made.

3. FHIR

3.1 FHIR Tracker Items

Current BR&R Open Items

- GF#17794 – will need to gather more background info to evaluate

3.2 From FMG removing Draft Resources:

Hi everyone,

As we start to get closer to publication of R4, the FMG has been reviewing the FMM 0 resources and evaluating whether that content is ready to appear (as draft) as part of the R4 release.

There are two options:

- keep the material "as is" in R4, marked as draft

- temporarily remove it for the R4 release, then put it back in the CI build right after so that development can continue

We'd like BR&R's opinion on what they'd like to do with the assortment of medication and product regulation resources currently in the build. You could pick either option for all of them or you might choose to leave some in R4 but temporarily remove others.

If you choose to leave any in the build, one thing that needs to happen is the creation of a "module" page (similar to the medication, diagnostic, conformance and other module pages) that provides a sense of how the included resources fit together, where they're at in the development cycle and what the future plans are.

We'd like a decision made soon - ideally on your next conference call because changes to in-scope resouces impact code generation and other things. If resources are to be removed from the main build, you can continue to work on them on a branch - and it should be possible for the work group to see the content rendered for that branch so long as there's been a recent commit.

Please let me know of your decision or if you have any questions.

Discussion: There was no dissent from the views expressed on the eMail thread that the IDMP related resources are subject to ongoing discussion by EMEA and the wider community and that withdrawing them would cause confusion.

3.3 From FMG - Ownership of ResearchStudy / ResearchSubject

When the original submissions were made, BR&R was still thinking about whether they wanted resources and what to do with them. But I presume you've now taken sufficient ownership that you're ready for the FMG to approve the proposals which will let you advance past FMM0. (The resources are now ResearchStudy and ResearchSubject, but the resource proposals have the old name.)

http://wiki.hl7.org/index.php?title=Study_FHIR_Resource_Proposal

http://wiki.hl7.org/index.php?title=StudyParticipation_FHIR_Resource_Proposal

Can BR&R vote to approve these two resources to exist, capture the vote in the wiki on the proposals and send a note to FMGContact@hl7.org when they've done so?

Motion to approve: Ed Helton, Julie Evans - passed with 2 abstentions

3.4 ResearchStudy / ResearchSubject

- Lloyd suggested moving maturity level from 0 to 2
- The semantics of StudySite

Hugh explained that Cecil Lynch had provided an email with a confirmation that Accenture do use the two resources but without giving much detail. Hugh also explained that moving to maturity level 2 did not prevent further major changes to the resources should it be necessary.

Motion to move to maturity level 2: Julie Evans, Catherine Hosage Norman - unanimous

3.5 Connectathon Planning

topics: Scenario 4 - Schedule of events – not making progress so far

In discussion there was more appetite for a Clinicians-On-FHIR event than a Connectathon. **ACTION: Hugh will progress**

4. Action Item List

- Review PRO background at http://hl7.org/fhir/us/patient-reported-outcomes/2018Sep/index.html (by Nov 13)
- Find out the uses of ResearchStudy / ResearchSubject resources by Accenture (by Nov 13)

5. AOB