

2020-11-19 Public Health WG Call Minutes



Chair: [Joginder Madra](#)

Scribe: [Erin Holt](#)

- Attendees

Check In

Edit	Name	Affiliation
	AbdulMalik Shakir	Hi3 Solutions
	Austin Kreisler	Leidos
	Becky Angeles	Carradora Health
	Bill Lober	University of Washington
	Cindy Bush	CDC/NCHS
	Craig Newman	Altarum
	Crystal Snare	WA DOH
	Danny Wise	Allscripts
	Dave deRoode	Lantana Consulting Group
	Erin Holt Coyne	TN Dept of Health
	Genny Luensman	CDC/NIOSH
	Heather Patrick	CDC
	Jamie Parker	Carradora Health
	Joginder Madra	Madra Consulting Inc.
	John Loonsk	JHU / APHL
	John Stamm	Epic
	Kishore Bashyam	Carradora Health - Drajer Consulting
	Laura Conn	CDC/CSELS
	Laura Rappleye	Altarum
	Lloyd McKenzie	Gevity/HL7 Canada
	Lux Phatak	HLN Consulting LLC
	Maria Michaels	CDC
	Nagesh Bashyam	Drajer LLC
	Nosipho Beaufort	Public Health Informatics Institute

Shaily Krishan	CSTE
Will Rosenfeld	IBM

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."

Agenda Topics

Agenda Outline	Agenda Item	Meeting Minutes from Discussion
1.	Welcome, agenda review, meeting minute approval	Meeting for 11/ 26 is canceled
2.	STU Extension Request for the 2.8.2 IG for Immunization Messaging (Chrissy Miner) - 10 min	<ul style="list-style-type: none"> • STU ends 12/10 of this year • Want to extend for 2 additional years • 5 questions currently unresolved • Not able to resolve them at this time due to COVID response and vax distribution preparedness • Question as to what the future of this guide is. Right now with COVID the interest in maintaining the STU. <p>Motion- Craig moves to approve the STU extension request.</p> <p>Second- Danny</p> <p>26, 0, 0</p>
3.	FHIR Jira ticket review (Craig Newman) - 20 min	<ol style="list-style-type: none"> 1. Powerpoint of issues 2. This was both for ImmunizationEvaluation and ImmunizationRecommendation 3. 28150- Information statements regarding RIM mapping- FMG had said that all resources mappable to the RIM are expected to include those mappings. A couple of months ago that requirement was relaxed. This information message is expected to go away. That said we should know what our resource means in RIM terms. No one has complained that those RIM mappings weren't there, therefore its believed that there isn't much value in requiring them since they presumably aren't being used. They were originally required to help drive clarity about content and definitions that might not happen otherwise. 4. 28151- Warnings- short descriptions aren't that helpful– agree that these should be updated. Can use both the short description and the long description. Need to be careful about adding content. Will reevaluate this and come back to it. 5. Maturity Levels- <ol style="list-style-type: none"> a. Imm – currently a 3, but has implementation in multiple prototype projects. Should we consider moving to 4? Have we tested it across scope? Do we have stability? We don't have much information from implementers <ol style="list-style-type: none"> i. Reach out to the FMG and they can help reach out to implementers and the community to see who is using it. A formal survey is coming out to help with this. ii. We will wait for the survey, with the goal of having our answers before R5 (by July) b. Same questions for other Imm related resources. c. Craig will touch base with Lloyd separately on these others, particularly ImmEval which is set at 0
4 .	eCR - ballot readiness review for: CDA eICR IG and FHIR eCR IG (Laura, John, Sarah) - 2 min	<ul style="list-style-type: none"> • FHIR: https://build.fhir.org/ig/HL7/case-reporting/ • CDA: TBA • Going to ballot. Sending out the IG next week for review by the workgroup (list serve) • This involves both the CDA and FHIR IGs. Please look at them. • Will be looking for approval to go to ballot on 12/3

5.	BFDR - ballot readiness review for: FHIR BFDR IG and FHIR Vital Records Common Profiles Library IG (Cindy, Sarah) - 10 mins	<ul style="list-style-type: none"> • https://build.fhir.org/ig/HL7/fhir-vr-common-ig/ • https://build.fhir.org/ig/HL7/fhir-bfdr/ • These are both going to ballot and will send out the links to the IG for workgroup review and then asking for approval to go ballot on 12/3.
6.	MedMorph (Kishore Bashyam) - 13 min	<ul style="list-style-type: none"> • IG- going to ballot in this cycle. • The IG is out there for review right now for feedback. • Will be seeking approval to go to ballot on 12/3 • Dragon gave a walkthrough of the IG and overview of the project • CDC sponsored project • Making EHR Data More Available for Research and Public Health • Designed to support various PH use cases, but 3 specifically are covered in this initial work and associated IT <ul style="list-style-type: none"> • Hep (would use the eICR FHIR IG) • Cancer • Healthcare Surveys • There is a lot of supporting documentation and references provided in the IG that should be reviewed.
7.	Additional Discussion	<ol style="list-style-type: none"> 1. Reminder- the approvals for these IGs to go to ballot are to determine readiness to go to ballot, not on content. Final content is due 12/13. For FHIR, you aren't supposed to make any changes (major changes) after the 24th. 2. Do we need to start using a PH git repository? Yes <ol style="list-style-type: none"> a. Long term Gforge will be sunset b. SVN will be migrated to a repository on the cloud (need to migrate the RIM) c. If we need repository location, use git. It allows source control where the S3 doesn't. d. Need direction on how to do this for CDA or v2. Talk with Wayne and Melva