

2020-01-14 Agenda and Minutes

Meeting Information

Phone Number: +1 605-472-5251
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Web Meeting Info

For screen sharing, here is the information to utilize [FCC.com](https://fcc.com) screen sharing:
Join the Online Meeting:
Online Meeting Link: <https://join.freeconferencecall.com/lhswg-cc>
Online Meeting ID: lhswg-cc

Chair: Russ Leftwich

Scribe: Emma Jones

Attendance

Name	Affiliation
Russell Leftwich	InterSystems
Chris Melo	Phillips
Emma Jones	Allscripts
Lindsay Hoggle	Iris Health Solutions
Claude Nanjo	Univ Utah
Stephen Chu	Australia

Quorum (Chair +3) met? Yes

Agenda

1. Agenda
2. Action items
 - a. Continue work on the model documentation
 - i. Reconciliation with the FHIR model - how far will the reconciliation go? Can always use FHIR extensions or change requests to handle gaps. Concern more with congruence. There was also limitations in one area of the logical model that is too constrained and the FHIR model is more open. In this case will loosen the logical model
 - b. Care Team Connectathon - test the model and it's use cases
 - i. Coordinate with Clinician-on-FHIR
 - ii. Virtual Connectathon and also the May Connectathon at HL7 - possible joint effort with the care management track
 - iii. Need someone to lead coordination - Lindsay Hoggle and Emma Jones
 1. Lindsay will reach out to Sandy Vance for assistance with coordination. Russ will follow-up with Sandy and Graham while in Sydney
 2. Possible feasibility of doing the virtual connectathon by April.
 3. Essential element will be to have a server we can use - server candidate of R5.
 - iv. ACTION - discuss on the care plan call next Wednesday with Gay and Evelyn's group.
 - c. Resolve the negative comments from the ballot
 - d. Need to get the next set of Ballot materials out
 - e.  **FHIR-25267** - CareTeam: add status and status reason to careTeam.participant **TRIAGED** -
 - i. Need to review statuses in the logical model in general and see if there is congruence
 - ii. Per Lloyd the proposed value set is too complex. From a clinical workflow perspective need to come up with use cases that would represent the need.

- iii. Suggestion to start with the use cases first then come up with the appropriate value set that would make up the core values to support the workflow.
- iv. Next steps is to create requirement documentation. Will do this offline. ACTION: Emma will start a google doc with some of the existing notes from Clinician-on-FHIR and share with the group.
 - 1. Google Doc [CareTeam Participant Status Analysis](#) - email sent to group on Jan 18, 2020