# **12. News on Working Groups**

12.1	W.g.1:	Information Science and Medical Education D.Protti
12.4	W.g.4:	Data protection in health information systems B.Barber
12.5	W.g 5:	Primary Health CareG.M. Hayes
12.6	W.g.6:	Coding and classification of health data R.Coté
12.7	W.g.7:	Biomedical pattern recognition J.H.van Bemmel
12.8	W.g.8:	Nursing informatics E.Pluyter-Wenting
12.9	W.g.9:	Medical informatics in developing countries D.Sigulem
12.10	W.g.10:	Hospital information systems A.R.Bakker
12.11		Dental informatics J.J. Salley
10 10	W/ ~ 12.	Information for phonessists and phonessols sists MD-11

12.12 W.g.12: Informatics for pharmacists and pharmacologists --M.Ball

RINTERNATIONAL MEDICAL INFORMATILES ASSOCIATION

Special Interest Group of the International Federation for Information Processing

Dr. Barry Barber NHS Information Management Center 19, Calthorpe Rd. Edgbaston, Birmingham B15 IRP United Kingdom

EC/JW/vd/91-494

Leuven, December 2nd 1991

Dear Barry,

Your report on Working Group 4 was approved by the IMIA Board and the Annual General Meeting.

However, the Board would appreciate it very much if you could still stay on as Chairman until the Autumn of 1993 so that you could complete the organization of the Working Conference of your Group.

Ab indicated that you would accept this request from the Board and the General Assembly, which I sincerely hope. We all appreciate what you have achieved for our field, for EFMI and also for IMIA.

Barry, please do us a favor and stay on as Chairman of IMIA Working Group 4 for 2 more years.

Sincerely Yours,

Joy L. WILLEMS, M.D. President of IMIA

- cc. : M. Ball
  - A. Bakker
  - H. Peterson
  - J. Roberts

Ø

IF15

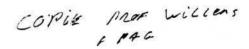
President: J.L. Willems (Belgium) Past-President: S. Kaihara (Japan) Vice-President: F. Roger (EFMI) Vice-President: V. Yacubsohn (IMIA-LAC) Secretary: R. Salamon (France) Treasurer: A.R. Bakker (Netherland) Trustee: Z. Ouyang (PR China) J. Michel (GDR) M.J. Ball (USA) J.R. Scherrer (CH) J. Flint (Canada)

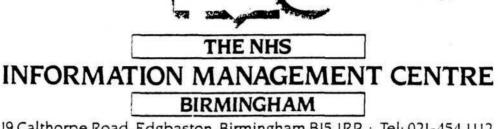


MIA

IMIA Secretariat: c/o IFIP Secretariat, 16 Place Longemalle CH-1204 Geneve, Switzerland

- 7. JAN. 1992





19 Calthorpe Road, Edgbaston, Birmingham BI5 IRP · Tel: 021-454 1112

To IMLA WG4 Members

Dear Colleague,

Proposed IMIA WG4 Working Conference on Current Issues in Data Protection and Information Systems Security

I am enclosing a copy of the WG4 report that I submitted to the IMIA AGM for the meeting in Washington on 15-16 November 1991. I have not yet seen the minutes but I understand that we have been encouraged to go ahead with our plans and I have agreed to continue as chairman for the next two years while a new chairman is found.

At this stage I do not know how we may be able to finance this conference as it is not likely to attract the level of sponsorship that other conferences seem able to attract. However, during our meeting in Vienna it was thought that a Swiss venue would be feasible and I will be exploring this as the most hopeful possibility. If these discussions prove fruitful, we shall need to hold a meeting of WG4 which includes participants from as many countries as possible to function as a Programme Committee. We shall, also, have to set up the organisation for the working conference.

Our best plan would be to have the meeting in Switzerland and it would be desirable to have a brochure available in time for it to be distributed at MEDINFO 92 in Geneva next September. Now that the European Commission has funded an AIM project dealing with Data Protection and Information Systems Security, [SEISMED], which includes a number of IMIA WG4 members as contractors, I will see if we can arrange for a WG4 meeting to be held at the end of a SEISMED meeting if SEISMED can be persuaded to hold a meeting in Geneva in the late Spring or early Summer.

I will keep you in touch with developments as our plans develop but, meanwhile, I would be grateful if you could make suggestions of suitable participants for the programme committee.

Warmest Regards and Best Wishes for the New Year

Barry Barber Chairman IMIA WG4

IMC is part of the NHS Management Board's Information Management Group

### PROPOSED LIST OF ACTIVITIES FOR IMIA WORKING GROUP FIVE

# Forthcoming Meetings

Meeting at MEDINFO , Geneva, September 1992 Meeting at RACGP Conference, Melbourne Australia, June 1993

The aims of Working Group 5 should be defined to fulfil certain needs.

1. The need to disseminate information about primary care IT across the World.

Many activities are taking place within members countries which are not known outside that country. Because Medical IT is a new and growing discipline there are not enough published papers to avoid this problem. WG5 should aid this information dissemination by encouraging workers to demonstrate and write about projects which have not got into the published literature. in the first instance WG5 will act as a repository of information about such activities. When more is known about what is happening we can target specific areas for publication.

2. The need for support on a political and academic level.

In several countries Primary Care IT is not developing because individual workers are finding it very difficult to persuade governments of its importance. Membership of WG5 should encourage such workers in their efforts to develop IT in their own country by providing evidence of what is taking place elsewhere.

#### 3. Medical Coding Systems.

One of the most important areas of contention in Primary care Informatics is in the coding of items which a doctor enters on a computer. This refers to the representation of medical terms not coding at a machine level. A doctor, recording information on a computer during the consultation could record everything a free text. This would suit the individual physicians needs as there is no restriction on how items are recorded. However if the computer is to be able to use that information for processing, e.g. to provide drug interaction information or decision support, then the machine needs consistent data items in a common format. Also if data is to be transferred between doctors for research purposes or quality control of medical care then, again, the data must be coded. The only international standard for the coding of medical information is ICD9 (International Classification of Disease). This must remain the basis of all coding because it is internationally accepted but it is at far too high a level to be appropriate for Primary Care Physicians. As a result Primary Care has had to develop its own coding systems. Two have come to the fore and are at present in major conflict.

The International Classification of Primary Care(ICPC) has been developed under the auspices of WONCA The World Congress of organizations in Primary Care. It has been thoroughly researched and is based on the "reason for encounter". It is consistent and well structured. Already there is valid evidence that it can be used to produce accurate research information from groups of GPs. However there have been comments that it is limited to recording reason for encounter. It is thus restrictive on the GP who wants to give up using paper records and record everything on the computer. It is very applicable to research minded GPs but there have been doubts about its relevance to normal working GPs.

The Read Clinical Classification (RCC) is not a classification but a nomenclature. It is flexible and comprehensive. As such it can provide the breadth of coverage needed by an ordinary GP to record every detail of the consultation. However because it is not a classification in its own right it has not been shown to provide consistent, standardised data between GPs.

These two systems seem to many to be complimentary but circumstances have determined that they are seen to be in opposition. Many countries are looking at the RCC because of its comprehensiveness. Others have adopted ICPC because it is academically reliable. It is no countries interest for this conflict to continue. It is vital for international transfer of data that some agreement is reached.

Members of WG5 have particular interests in both coding systems. They have no personal reasons for supporting one rather than another. I would suggest that this is an issue on which we can try to come to some acceptable compromise which would benefit the whole of Primary Care Computing.

4. The development of a book on International Primary Care Computing.

The first book was too UK oriented and prescriptive. We should aim to list and develop the issues involved and publish a book which discusses issues rather than solutions. Although the problems are similar in all countries the solutions amy vary. This publication will be of more use to workers from different cultures and health care delivery systems in their own work. It is suggested that we should work towards a Working Conference at which these issues will be discussed. The book would then be a product of this Working Conference. It may also be valuable to include a list of what activities are taking place and what programs are available. This addendum would need to be kept up to date.

Glyn Hayes June 7, 1992 INTERNATIONAL MEDICAL INFORMATICS ASSOCIATION

Prof. Dr. Roger A. COTE Department of Pathology Faculty of Medicine University of Sherbrooke Sherbrooke, Quebec J1H 5N4 CANADA

EC/JW/vd/92-230

Leuven, June 2nd, 1992.

Dear Roger,

During the last Board Meeting of IMIA, which was held in Vancouver April 30th - May 1st, 1992, the current membership and future activities of Working Group 6 was briefly discussed, as well as that of the other Working Groups/Special Interest Groups.

According to the rules of IMIA the Chairmanship of a Working Group should rotate at certain intervals. Two terms of 3 years seemed to be a desirable maximum.

I donot know whether you have discussed or reflected on a transition of the Chairmanship in your Working Group. I do know that there have been problems in your group, as a result of some "misunderstanding".

I would appreciate to know your personal opinion on these matters and specifically on a transition of the Chairmanship in WG6. Jean-Raoul and Salah Mandil are too busy with MEDINFO 92 for the moment, so that I don't want to give them additional burden at this time. After completion of MEDINFO a new start should be given to WG6 in my opinion.

I look forward seeing you in Geneva and thank you beforehand for your help.

Sincerely/ Yours.

Jos WILLEMS, M.D., Ph.D. President of IMIA

cc. : Marion Ball, President-Elect Bjarte Solheim, Secretary of IMIA Jean Raoul Scherrer Salah H. Mandil

J. L. Willems	President	в	1989 - 1992
S. Kalhara	Past President	J	1989 - 1992
M. J. Ball	President Elect	USA	1989 - 1992
R. O'Moore	Vice-President (EFMI)	IRL	1991 - 1992
V. Yacubsohn	Vice-President (IMIA-LAC)	Α	1989 - 1992

B. G. Solheim Secretary A. R. Bakker Treasurer J. R. Scherrer Trustee K. C. Lun Trustee N 1991 - 1994 NL 1989 - 1992 CH 1988 - 1994 SGP 1991 - 1994

Proposal for a working conference on HIS at Atlanta, March 27 to March 31, 1994 

After the successful working conference at Nijmegen (May 1988) and Göttingen (September 191) another IMIA working conference is considered to be necessary since there are still a lot of developments around HIS. Also our previous working conferences indicate that a number of topics deserve further attention.

After two working conferences in Europe a venue in the United States would be quite welcome. Fortunately we found Gerber Alley prepared to sponsor this working conference.

Suggestions for topics for the working conference will be discussed during the meeting of Working Group 10 at Geneva, September 7th, 1992. The Scientific Program Committee for the conference will those working take suggestions into consideration when preparing the program.

- As composition for the SPC is proposed: Ab Bakker (The Netherlands) chairman
- Ed Hammond (USA) co-chairman
- Michael Brown (USA)
- Carl-Theo Ehlers (Germany)
- Amado Espinoza (Mexico)
- Valerio Yacubsohn (Argentina)
- Elly Pluyter-Wenting (The Netherlands) WG8 representative
- Jean-Raoul Scherrer (Switzerland)
- Takashi Takahashi (Japan)
- somebody from Emery University (USA) (candidate to be nominated)
- a link to AMIA HIS working group (candidate to be nominated)
- Donald Lindberg (USA) honorary advisor.

As editing committee for the proceedings is proposed:

- Ed Hammond (USA) chairman
- Ab Bakker (The Netherlands)
- Michael Brown (USA).

It is proposed that Michael Brown (USA) will chair the organizing committee.

#### 8. Tasks for working group 10?

At the end of the conference it was asked whether the participants judged the working conference to have been useful, the answer was a clear: YES, INDEED. So the question lays at hand: "are there further actions to be taken by working group 10?"

In this section an attempt is made to answer that question.

First of all it should be realized that members of the working group will spend only limited amounts of time on the activities of the group. The total effort will be in the order of one fte, so almost negligible as compared to the total development capacity for HIS, which can be estimated at several thousands of fte. So, what is the strength of working group 10?

First of all wg 10 because of its scientific nature can bring together people from different groups even if these groups may be competitors in the market place.

Second the members of the group come from different countries, so a broad perspective of HIS developments can be achieved.

Third the members of the group have easy access to scientific meetings, so ideas from the group can readily be promoted.

Last but not least, the group is independent, so ideas can be promoted without the suspicion of commercial interests.

The working conferences offer an opportunity for exchange of views, for in-depth discussions. It is the intention to organize such a conference once every three years, where the topics to be discussed will be based on issues raised at the preceding conference and trends observed in the HIS field. The conference at Göttingen yielded in my perception as possible topics:

- further exploration of the aspect integration, both from technical perspective and from the users' perspective, the latter possibly in cooperation with other IMIA working groups,
- the data capture problem,
- proposal for definition of HIS,
- HIS reference model,
- the structure of the electronic medical record.
- is there an alley to an open HIS ?
- assessment of costs and benefits.
- assessment of risks in relation to software quality, availability and unauthorized access, in cooperation with IMIA working group 4 (data protection in health information systems),
- -- participation in the preparation of a proposal for a project:

"HIS and developing countries".

Besides that the working group can organize workshops and tutorials in conjunction with major scientific meetings on medical informatics. At SCAMC 91 a panel session was organized on the outcomes of the Göttingen conference, at MEDINFO'92 there is a workshop.

To be able to carry out at least a part of the activities suggested here active participation in the working group's activities is needed. All IMIA member societies should consider their representation in the working group, still several counties not being represented.

Minutes of IMIA Working Group II Meeting November 19, 1991, Washington, D.C. Members Present

Dr. Louis M. Abbey, Dr. Richard Adelson, Dr. Marion Ball (IMIA President Elect), Dr. John Eisner, Ms. Lynn Johnson, Dr. Tony Kiser, Dr. John J. Salley, Dr. Eric E. Spohn, Dr. Richard P. Suddick, Dr. Hiroo Tamagawa, Dr. Jos L. Willems (IMIA President), Dr. John Wittenstrom, Dr. John Zimmerman

Guests Present

Ms. Carolyn F. Gray, Dr. Mike Hamlin, Dr. W. Paul Lang, Dr. Jim Lipton, Dr. Nancy M. Lorenzi, Dr. Larry Peterson, Dr. Jack D. Preston

- I. The meeting was called to order at 7:30 a.m. by Chairman Salley A. The members and guests were introduced
- II. Minutes of the November 4, 1990 meeting were approved

III. Agenda for this meeting was approved

IV. Chairman's report: Dr. John Salley

A. Activities since last meeting.

- June meeting cancelled in Sweden due to Gulf War and other factors.
- B. IMIA Board meeting held Friday, November 15, 1991. Topics of interest included:
  - 1. MEDINFO '92 will be in Geneva next year
  - 2. Only two papers on Dental Informatics have been received
  - President Jos Wilhems encouraged dental informatics activities at the Geneva MEDINFO meeting
  - Workshops 50 proposed but only 30 can be conducted consolidation being done
  - 5. Dr. Veronica Wagner indicated to Dr. Salley that the

consolidation process will not conclude until January '92

- Dr. David Reynolds indicated Dr. Wagner wants the theme to be Quality Assurance
- V. Chairman's report from AADS Information Technology Committee: John Zimmerman
  - A. Dr. Zimmerman briefly described the topics which the AADS

Information Technology Committee focused on during the meeting

- 1. Curriculum Guidelines for Informatics
- 2. Communications AADS
- 3. Standards
- 4. Videotape with ADA
  - 5. Consortia Activities
- a. Curriculum Data Base
  - b. Clinical Information Data Base
  - c. Patient Simulation

VI. Dr. Marian Ball - President Elect of IMIA was introduced to the group. Dr. Ball extended greetings on behalf of IMIA Executive "Board.

- VII. Dr. Richard Adelson Report on "Aspen II" Conference planningA. Proposal has been submitted to AFDH to fund conference.
- B. May combine AMIA Aspen II activity with Dr. Jack Preston's September 1992 meeting (see next item)

VIII. Dr.Jack Preston - Report on "International Conference on Clinical Computing in Dentistry" Houston, September, 1991

- A. 440 Attendees 33 speakers, 15 sponsored, 18 not sponsored; 6 speakers were outside of dentistry, remainder in dentistry
- B. Next year program will focus on "Standards for Imaging"
- C. September 18 20, 1992
- D. Venue: Stouffer's Hotel, Los Angeles, CA

- E. 1993 Venue is spoken for
- IX. Dr. Tony Kiser described activities related to Informatics at ADA
  - A. Described the organization of a computer based Patient Record Institute
  - B. Reviewed information on standards and how ADA is organizing committees to review electronic technology.
  - C. Described reorganization being considered at ADA
    - a. There may be a new division of Information Systems and Technology with a Chief Information Officer. Dental Elections Advisory Group (DETAG) may be organized and software review activities are developing

#### XII. Other Business

- A. Dr. Jos Wilhems suggested the need for a THEME for an International Conference, 1993, this was deferred until after meeting with Dr. Preston.
- B. Ms. Carolyn Gray received strategic plan from AADS Information Technology Committee and emphasised the need to cooperate with other organizations and interested groups and the need for IMIA and AMIA to serve as hubs or umbrellas to represent various constituencies.
- C. Dr. Jim Lipton brought up the fact that research has not received much attention at this meeting and discussed the benefits of bringing the educators, researchers, practitioners and manufacturers togehter.
- D. Planning of a joint "Aspen II and Clinical Computing in Dentistry Meeting" was deferred until a subcommittee could discuss the topic at the meeting to follow this meeting.

XI. Meeting adjourned at 9 a.m. by Dr. Salley.

DR. JOHN J. SALLEY PO BOX 838, LAUREL HILL URBANNA, VA 23175 (804)758-4863

December 2, 1991

Dr. Thomas J. Ginley Executive Director Americal Dental Association 211 East Chicago Avenue Chicago, IL 60611 Dear Tom:

4 ...

I am writing in my capacity as Chairman of the International Medical Informatics Association, Working Group 11- Dental Informatics (IMIA/WG-11). Our Working Group was established by the IMIA General Assembly when it met in Singapore in December 1989. Currently we have 27 members representing 12 nations from Africa, Asia, Australia, Europe and North America; twelve members are from the U.S. and come from the three major segments of the profession --- practice, education and research. Our most recent meeting was held in Washington on November 19, 1991 in conjunction with the annual session of the American Medical Informatics Association.

Before and during our Washington meeting we were advised that soon you will be creating the position of Chief Information Officer on the senior staff of the ADA. The membership of IMIA/WG-11 are unanimous in commending you for your wisdom and foresight in this very progressive development. It is clear that the need for well coordinated information management, broadly defined, is a paramount requirement for successful corporate operations in this day and time; it is also clear that the appointment of a CIO by the ADA will place the Association in the vanguard of U.S. health organizations in this emerging and exciting field of endeavor.

The members of the dental informatics working group also wish to urge your strong consideration of Tony Kiser for appointment to the CIO position. As you know, Tony is a member of IMIA/WG-11 and has been a major contributor to our work and in our meetings. Clearly his knowledge of information science and technology is thorough and has depth that is well above average. When you add to these two attributes his broad perspective concerning the present utility, future potential and appropiate placement of dental informatics in the hierarchy of dentistry, Tony displays wisdom that goes far beyond that of others in and outside of the profession.

Page 2:

In closing and on a personal note, during my 44 years in dentistry I've seen a multitude of "new" discoveries and initiatives descend upon us. Some have been good and others of questionable value, but all of them have added to the storehouse of infomation we've needed to make the necessary qualitative judgements. The so called "Information Age" brought on by modern computer and other electronically based technologies is no longer new, and thankfully has provided significant assistance in keeping all of our new ideas sorted out. The horizon remains broad, however, for still new discovery and innovative new applications which I am convinced will result ultimately in improved oral health care for all of our patients, i.e. CAD/CAM, clinical decision support using expert systems, electronic patient records, etc., etc., ad infinitum.

The fact of the matter is that we've only scratched the surface of informatics applied to dentistry, and among the critical needs for the immediate future is conceptual and organizational leadership. There can be no question that the most appropriate organization to pick up the leader's mantle nationally as well as internationally is the ADA.

a 11111 Sathire potential and concurate clogenent of annaa luformatife in the housershy of darkisery. Some displayed

We are grateful, Tom, for your vision and again want to commend you for adding a Chief Information Officer to the staff of the Association.

Warm personal regards.

Sincerely,

CC: Dr. Jos Willems Dr. Marion J. Ball Dr. Eric E. Spohn

## Medical College of Virginia Virginia Commonwealth University

TO: IMIA Working Group 11

FROM: John J. Salley, D.D.S., Ph.D.

DATE: February 13, 1992

At the last meeting of IMIA/WG-11 in Washington, D.C. on November 19, 1991 it was agreed that planning should begin for an international conference on dental informatics to replace the June 1991 meeting in Stockholm which unfortunately was cancelled because of circumstances related to the war in the Persian Gulf. During our discussion on November 19th it was suggested that an appropriate time and venue for the proposed conference would be in November 1993 in San Francisco, California either just before or after the annual session of the American Dental Association which is scheduled for November 6-11, 1993.

To facilitate planning for our conference to which I am assigning the working title, "The First International Congress on Dental Informatics", I am asking the following persons to serve on the Program Planning Committee:

Louis Abbey	John Zimmerman, CHAIR
John Eisner	Anthony Kiser, ex-officio
Paul Lange	John Salley, ex-officio
Hiroo Tamagawa	Eric Spohn, ex-officio
Veronica Wagner	and we have the second of the

For those who will be attending the American Association of Dental Schools meeting in Boston, MA on March 8-11, 1992, Dr. Zimmerman will contact you directly in order to convene an organizational meeting of the committee then. One item to be discussed will be the need to supplement the committee membership with up to four additional persons.

We also must have an Organizing Committee to assist in planning for local arrangements and other logistics. The following are asked to serve on this Committee:

Cheryl Cameron	John	Salley, ex-officio
Anthony Kiser, CHAIR	Eric	Spohn, ex-officio
John Preston	John	Zimmerman, ex-officio
John Wittenstrom		2

We will increase the size of this committee also, perhaps adding four to six other members. As with the Program Planning Committee, those on the Organizing Committee who will be attending the AADS session can meet at a time and place selected by Tony Kiser.

Department of Oral Pathology • P. O. Box 566 • Richmond, Virginia 23298 • (804) 786-0779

Finally, Tony Kiser, Eric Spohn, John Zimmerman and I in consultation with Marion Ball will undertake the responsibility of developing the ways and means to support the Congress. The potential for a sizeable attendance should be good. An ADA Meeting in San Francisco usually attracts 25,000 to 30,000 registrants, and a meeting of this size and scope often has a large representation from the Pacific Rim countries, Latin America, as well as Europe and North America.

I hope each person designated above will be able to serve. There is much to do; others of the Working Group will most assuredly be involved either sooner or later! Best wishes.

Best wishes.

Dr. Jos Willems CC: Dr. Marion Ball

Information", I am asking the following paraons to serve on the