



22. Międzynarodowy Kongres
Ogólnopolskiego Systemu Ochrony Zdrowia
Innowacyjna Ochrona Zdrowia



4-5 kwietnia 2017 | KATOWICE
MIĘDZYNARODOWE CENTRUM KONGRESOWE

Recent developments in Semantic Interoperability in health and care

Motto 1: Do **NOT** reinvent the wheel



Interoperability

**It is all in the
semantics**

This presentation makes use of slides kindly provided by:
CENTc251 wg1, EN13606 Association, ERS, KPMG, CIMI

Gerard Freriks

- **Active in IT** since 1972
- **General Practitioner** for 20 years
- **Standards (NEN, CEN, ISO, HL7, CIMI)** since 1999
 - past-chairman CEN TC251-WG1
 - Active: Standards for EHR-systems, and Information Security
- **EHR company ERS** (co-director, owner) 9 years
- **Recent topics:**
 - Information Architecture, advanced Semantic Interoperability

What is the problem



Topics

Communication in health and care

What is the problem: It is the Semantics, stupid!

What we need to talk about:

- Semantics
- Standards
- Bakery as metaphor
- Semantic Stack
- Epistemology
- Available standards - Concurrent use of standards
- Information Architecture

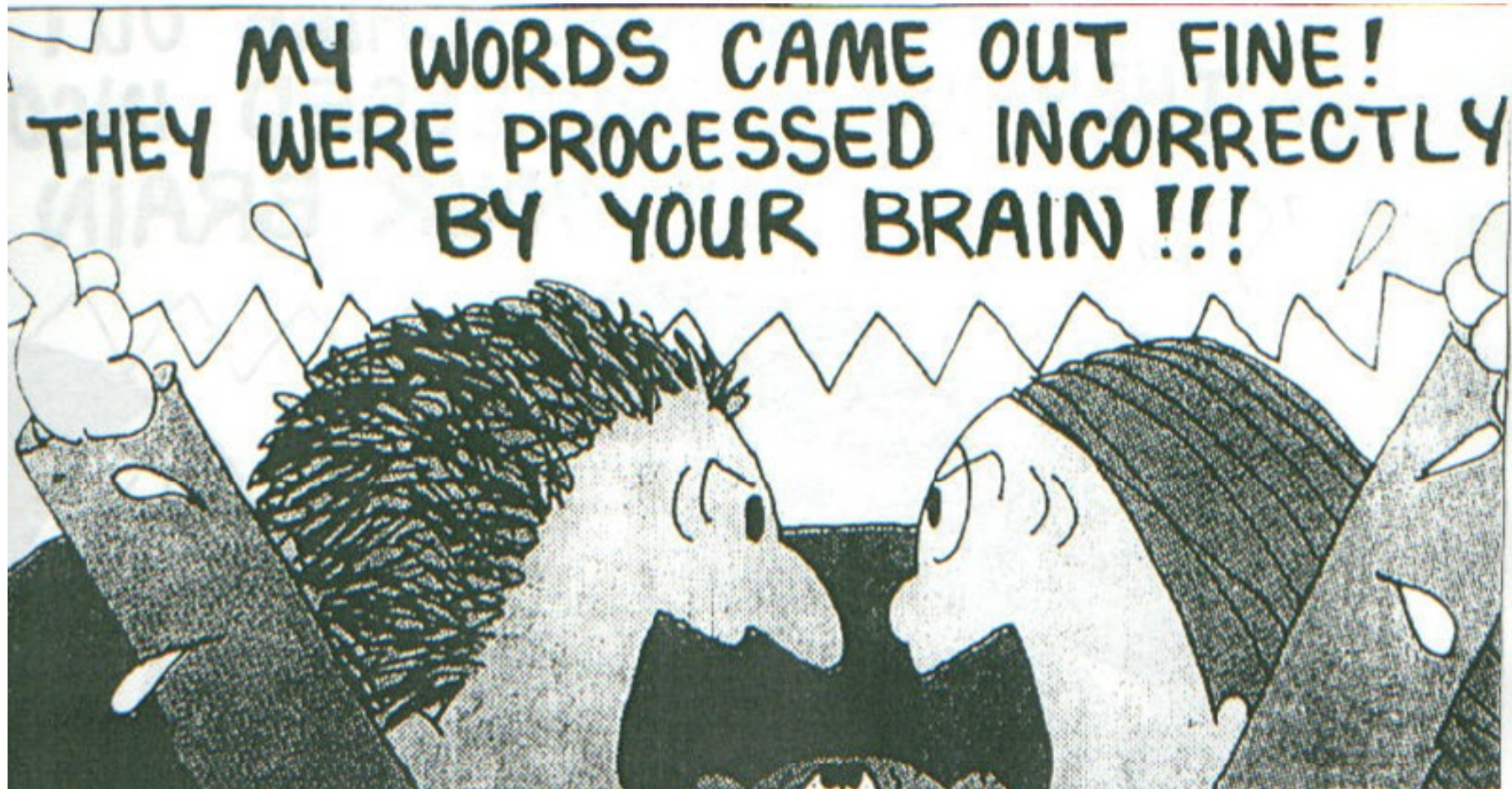
Recent developments: ISO, HL7, CIMI

Pharma developments

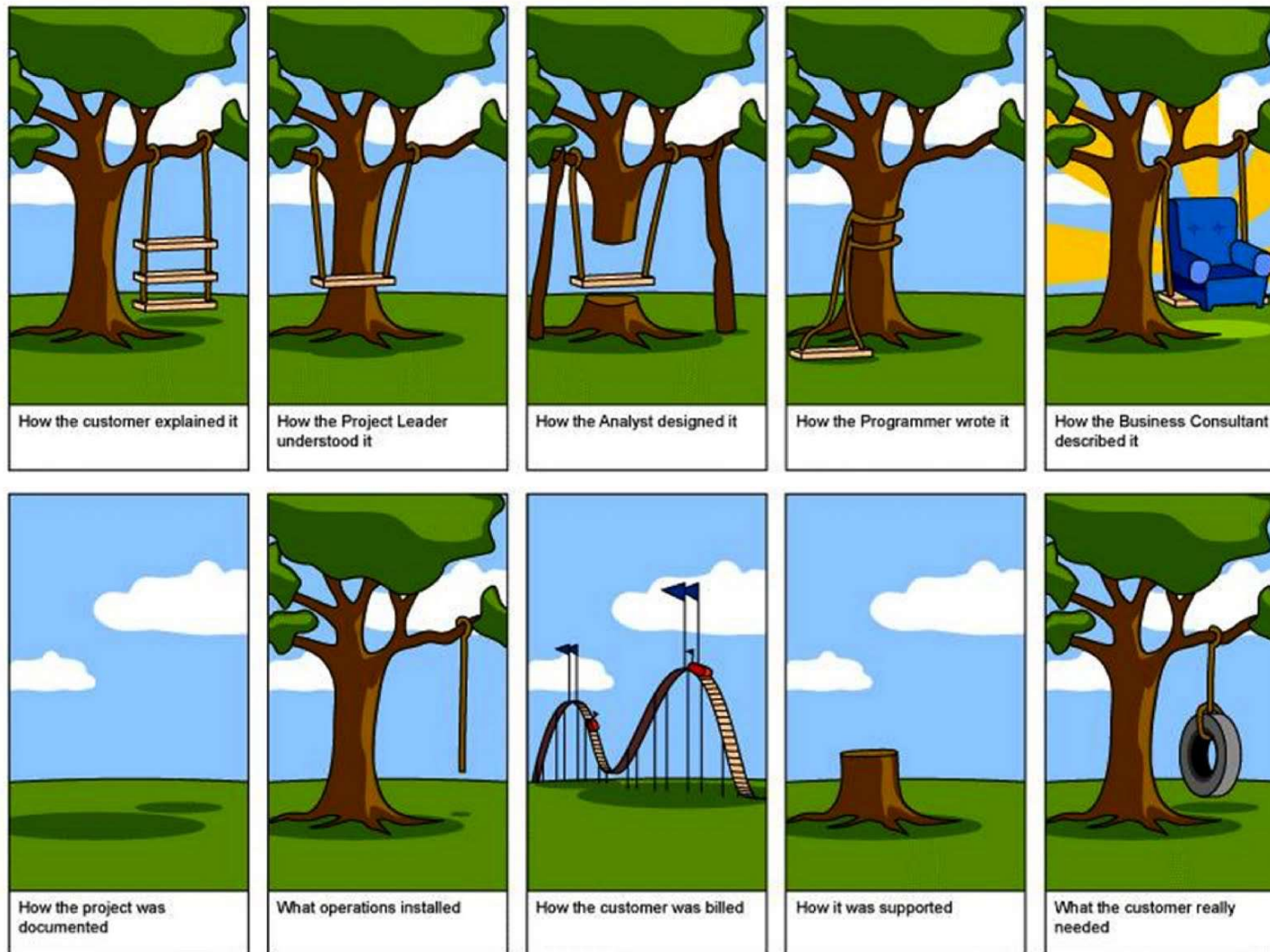
What is the problem



What is the problem



What is the problem



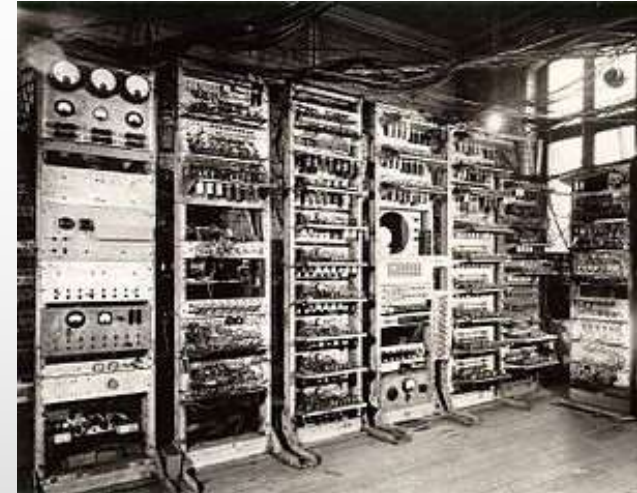
What is the problem

We use for computers since 1949

Can we ubiquitously exchange:

- *Name*
- *Data of birth*
- *Address*

between all kinds of computer systems?



(Mark 1 - 1949)

What is the problem

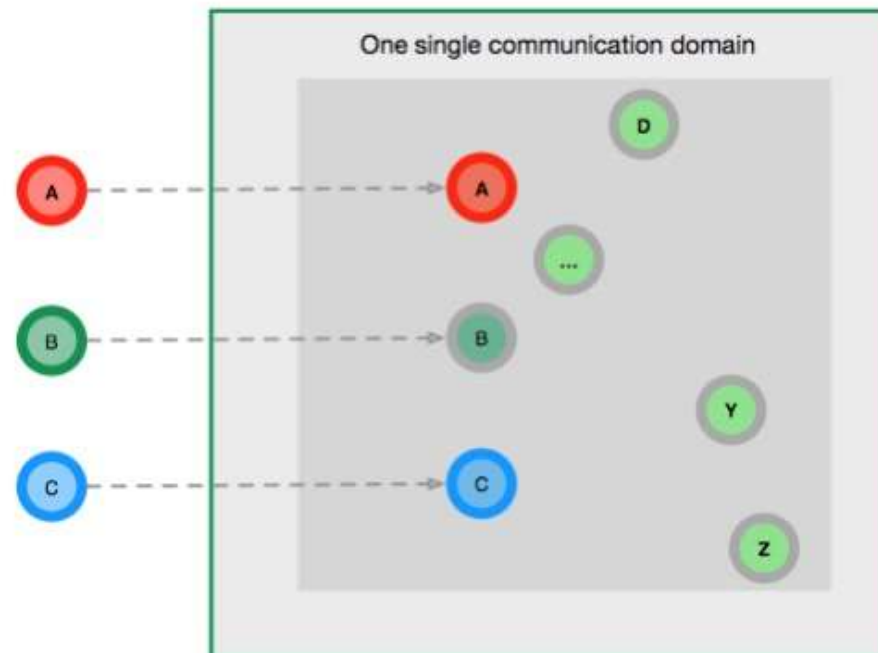
Answer:

It is the shared semantics, stupid

What is the problem

Situation:
Present

Situation:
To be



patients, carers,
nurses,
doctors,
care facilities,
pharmacists,
physiotherapists,
insurers,
registries
research

**From a collection of disconnected systems
to connected systems**

What is the problem

Definition: Semantics

- [si-**man**-tiks]
- noun, (*used with a singular verb*)
- 1.
- *Linguistics.*
- a **the study of meaning.**
- b the study of linguistic development by classifying and examining changes in meaning and form.
- 2.
- Also called significs. The branch of semiotics dealing with the relations between signs and what they denote.
- 3.
- the meaning, or an interpretation of the meaning, of a word, sign, sentence, etc.: Let's not argue about semantics.

What is the problem

How can we document the provision of health and care such that:

- when health data is stored now
- that health data can be safely and
- fully understood
- now and in the future
- by persons yet to be born
- using computer systems that have yet to be designed

What is the problem

Examples

Language: '*Geslacht is mannelijk*'
(*'Sex is male'*)

Meaning: Sex?
Biological sex, administrative sex

Coding system: Sex: M (or F)
Sex: 1 (or 0)

Free text / codes: 'Diabetes', 'Suikerziekte', 123.45

Coding Boundary:
Eyecolor = *brown*
Iriscolor = *brown*
Topic = *Brown-eye-color*
Topic = *iris*, Color = *brown*

Boundary Problem

IsoSemantic Models – Example of Problem

(from Dr. Linda Bird)

e.g. “Suspected Lung Cancer”

General Practice [X]

Problem/Dx

Prob/Dx: Cancer [v]

Body Site: Lung [v]

Status:

☒ Suspected

☐ Confirmed

☐ Not found

OK Cancel

Polyclinic [X]

Problem/Diagnosis

Prob/Dx Name: Suspected cancer [v]

Body Site: Lung [v]

OK Cancel

Restructured Hospital [X]

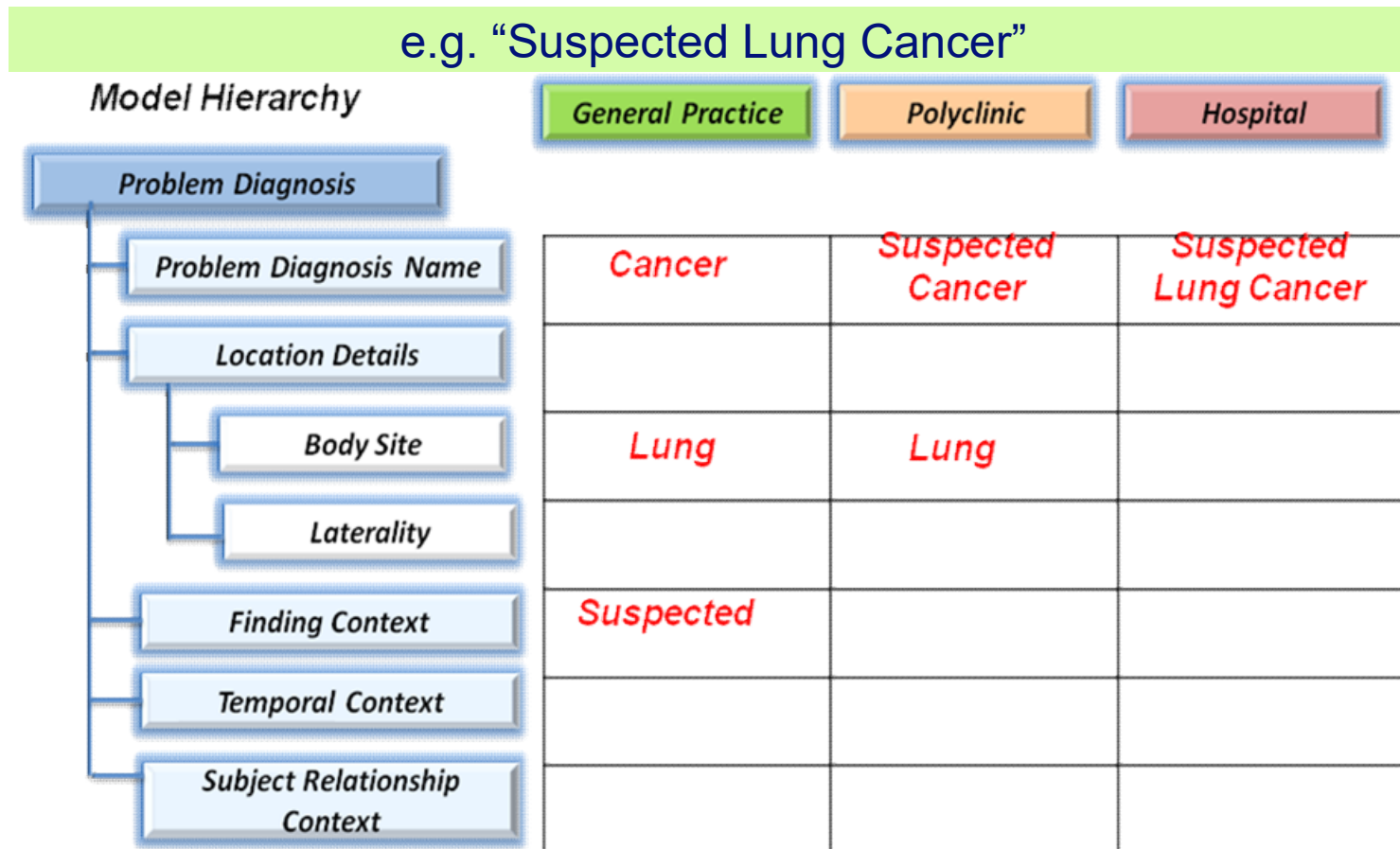
Diagnosis

Name: Suspected lung cancer [v]

OK Cancel

Boundary Problem

IsoSemantic Models – Example Instances *(from Dr. Linda Bird)*



Topics

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Recent developments: ISO, HL7, CIMI

Pharma developments

Standards - norms

- **Standards:**
parties decide with whom to make agreements
- **Example:**
Agreement about Healthcare messages
- **Norms:**
according to the principle 'All parties concerned'
- Sometimes referred to by laws
- **Example:**
Norm NEN 7510
Medical Data Security in Healthcare

Norms/standards

National SDO



European SDO



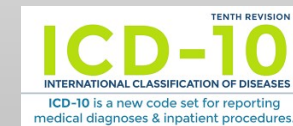
World wide SDO



National standards

Each country has its own standardisation development organisation (SDO) that takes part in:

- CEN (European Standardisation organisation)
- ISO the worldwide standardisation organisation



INTERNATIONAL STANDARDS

- EU law and regulation: CEN norms become automatically National norms in Europe
- Vienna agreement: formal co-operation between ISO and CEN
- Countries vote via national Standard Developing Organisations (SDO's)
- Other Standards developers can take part via liaison status

INTERNATIONAL STANDARDS

- **ISO technical Committee 215**

Standardization in the field of health informatics to facilitate the creation, interchange and use of health-related data, information, and knowledge to support and enable all aspects of the health system

- **CEN technical Committee 251**

- **Liaisons:**

HL7

IHE

GS1

SNOMED

EN13606 Association

INTERNATIONAL STANDARDS

ISO TC251 Health Informatics

- WG 1 Architecture, Frameworks and Models
- WG 2 Systems and Device Interoperability
- WG 3 Semantic Content
- WG 4 Security, Safety and Privacy
- **WG 6 Pharmacy and Medicines Business**

Standardization related to the application of information and communication technology in the domain of pharmacy and medication, including standardization to improve patient safety and the efficiency and interoperability of information systems used in researching, developing, regulating, supplying, using and monitoring pharmaceutical products.

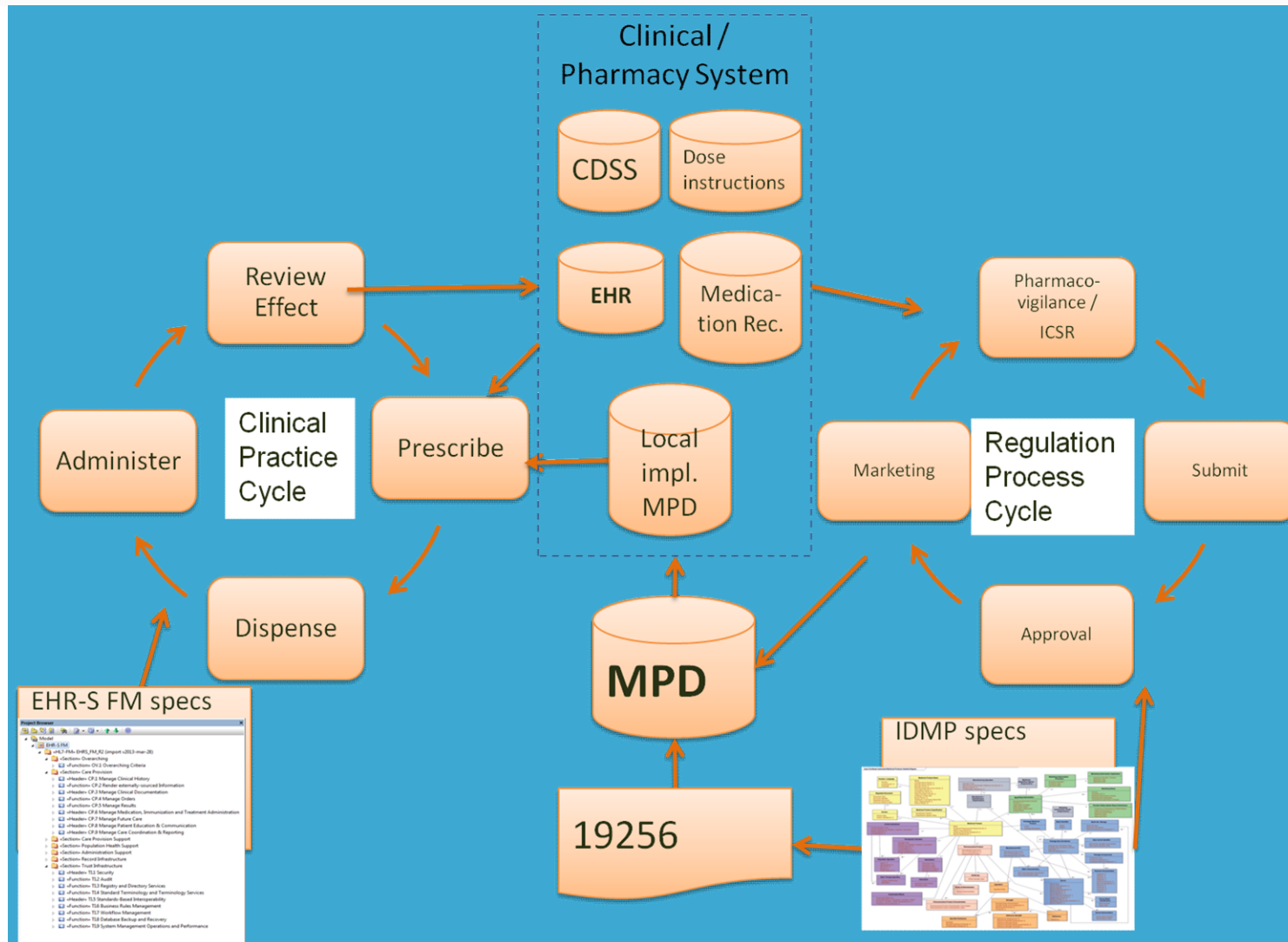
- IEC/62A/JWG 7 Application of risk management to information technology (IT) networks incorporating medical devices

INTERNATIONAL STANDARDS

Topics under discussion in ISO TC215 WG6

- ICSR, Individual Case Safety Report
- IDMP, Identification of Medicinal Products
- Machine readable codes
- Dose instructions
- Electronic prescriptions
- Medicinal product dictionaries
- Dispense record
- Medication management concepts
- Clinical decision support – knowledge base
- Big Data?

INTERNATIONAL STANDARDS

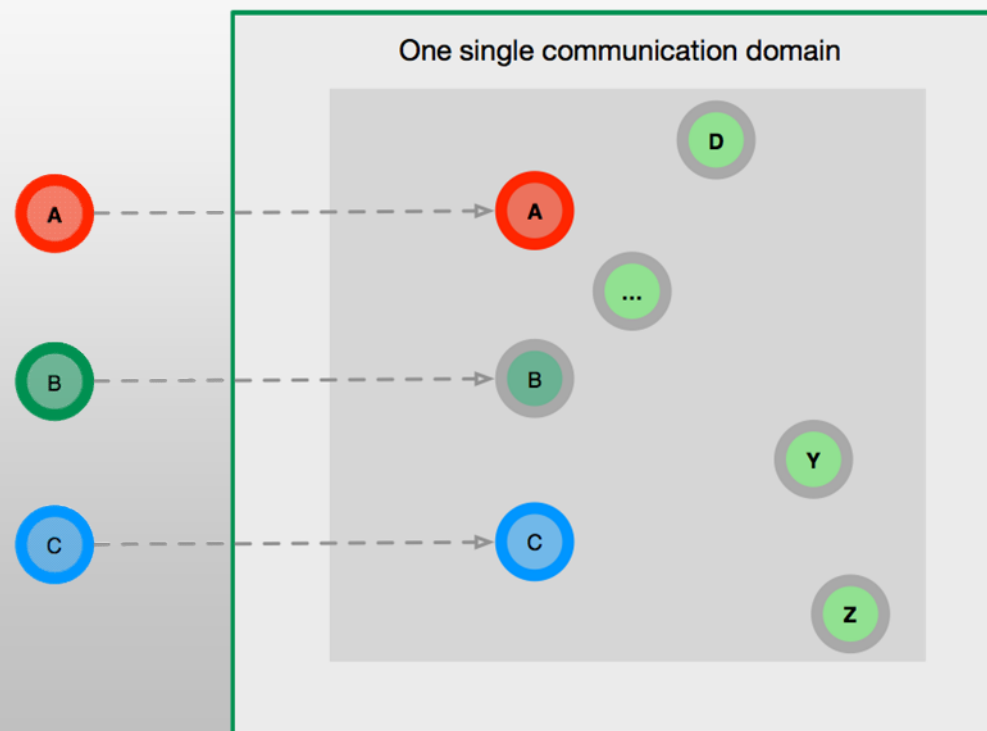


Why standards

Remember

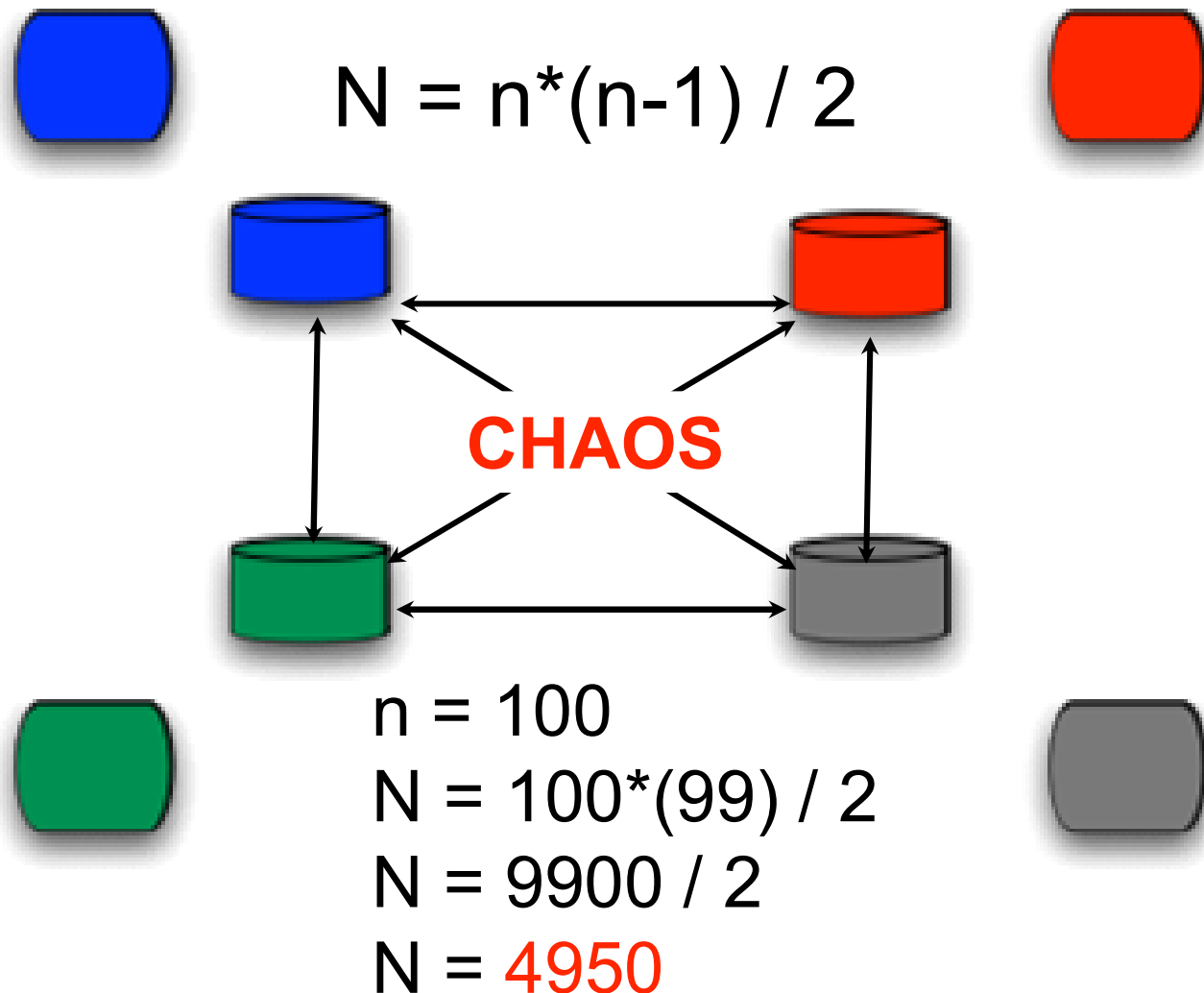
**Situation:
Present**

**Situation:
To be**



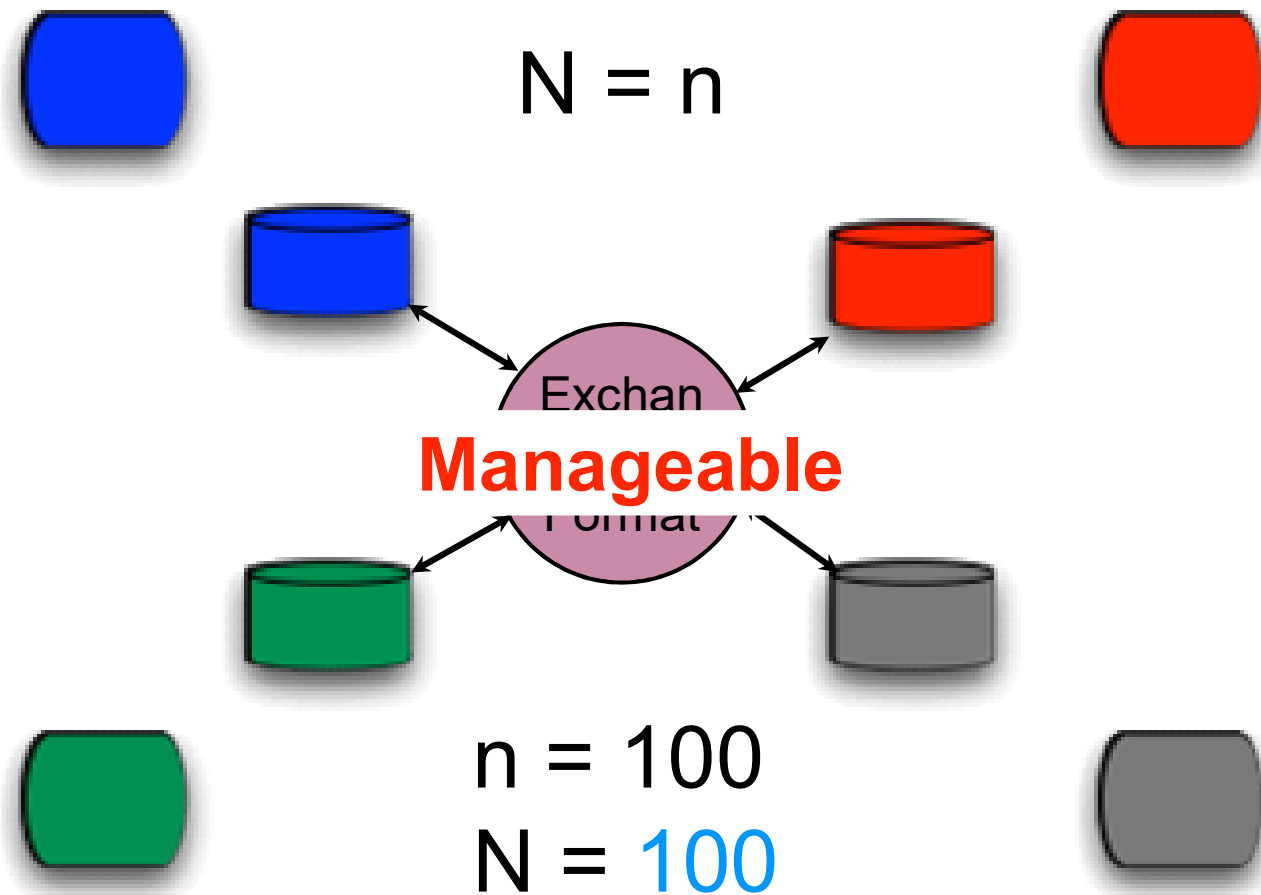
Why Standards

NO STANDARDS : Chaos



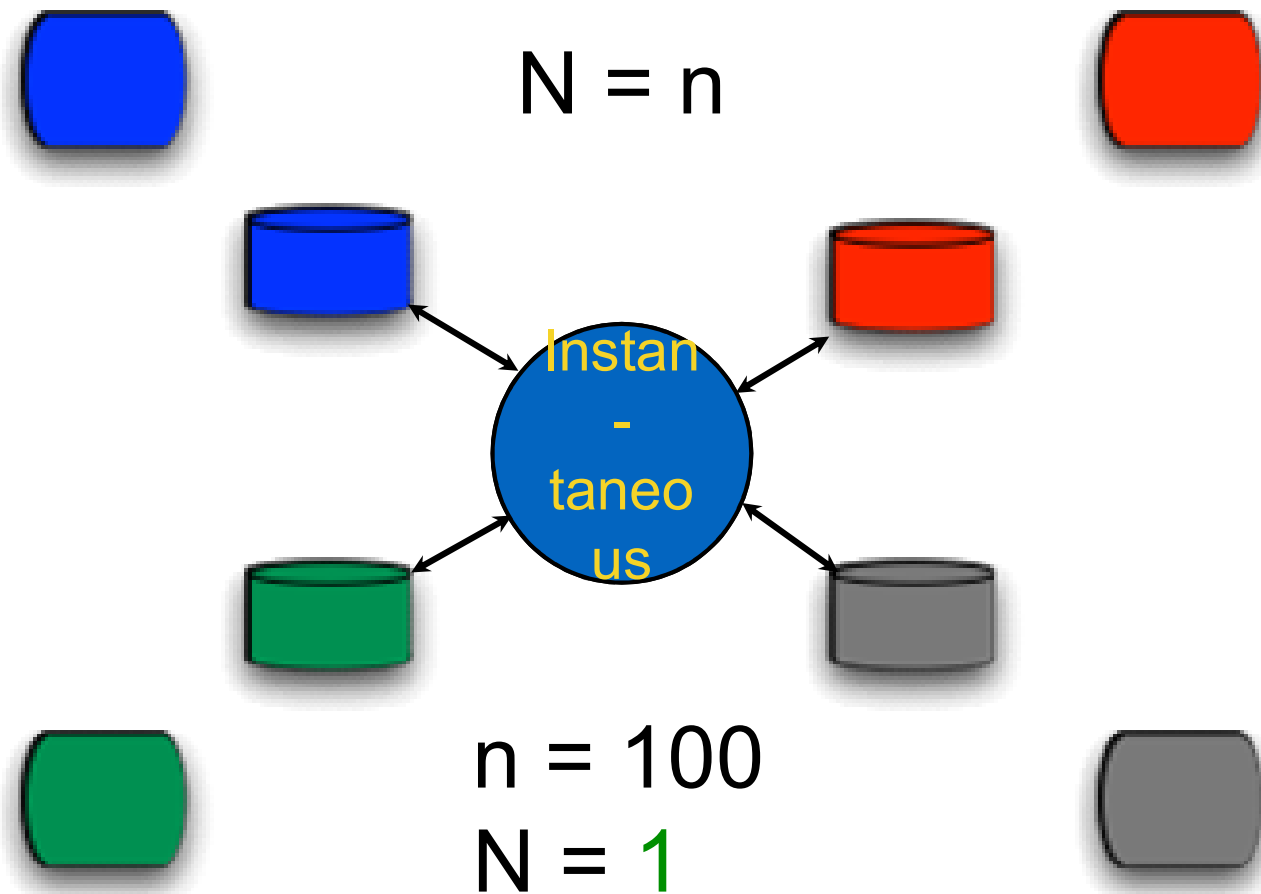
Why Standards

Message STANDARD



Why Standards

CIMI / SIAMM STANDARD



What standards

- The Bakery metaphor
- The Semantic Stack
- The Standards: again

Bakery

Recipe



Ingredients



Moulds



Kitchen machines



Oven



Pastry



Bakery / EHR expectations

Recipe



Ingredients



Moulds



Kitchen machines



Oven



Pastry



Rules



Information



Presentation



Software



Hardware



EHR



EHR's now

Instructions

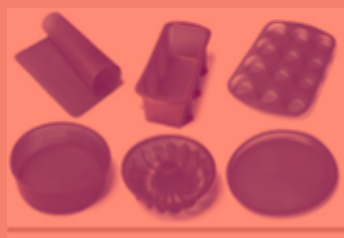
Ingredients

Moulds

Kitchen
machines

Oven

Pastry



Rules

Information

Presentation

Software

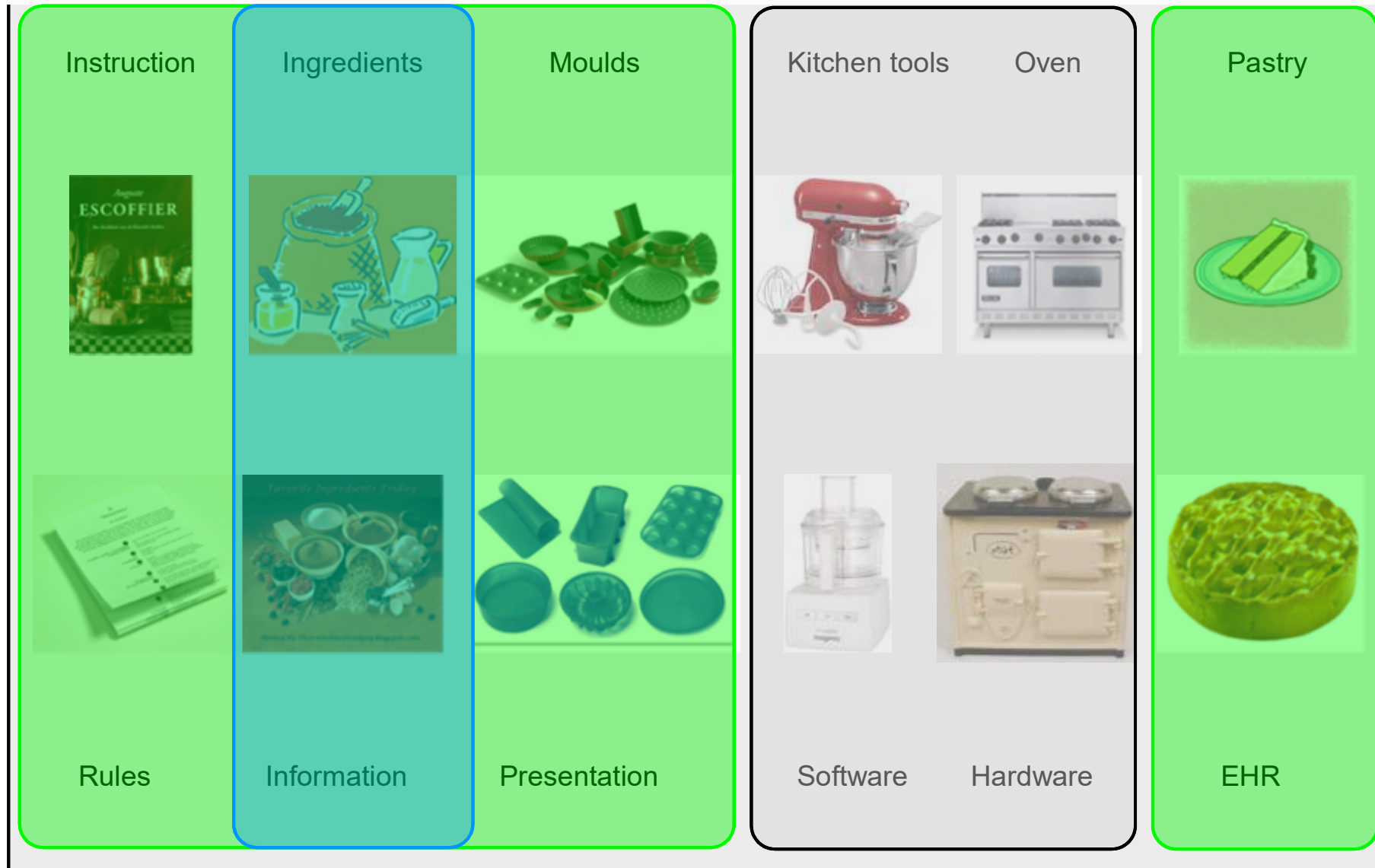
Hardware

EHR

EHR systems now



EHR-systems we need



Semantic Stack

Humans	Human Tools	Standards	Health IT Tools	Health IT
Meaning	Encyclopedia	W3C	Ontology	Ontology systems
Words	Dictionary	SNOMED/LOINC/ Drugs database	Terminology	Coding system
Phrases	Scholing	CIMI	Logical Clinical Information Models	Patterns
Sentences	Local needs	local needs	Data sets	Data sets
Syntaxis	Scholing	ISO EN13606-2 OMG - HL7	Editors	Models
Letter types	Pencil	ISO	Character set	Fonts
Medium	Paper	vendor specific	EHR/Database	Storage Messages

Epistemology

When documenting health and care such that it can be fully understood it is necessary that we document the **context**, the **epistemology**:

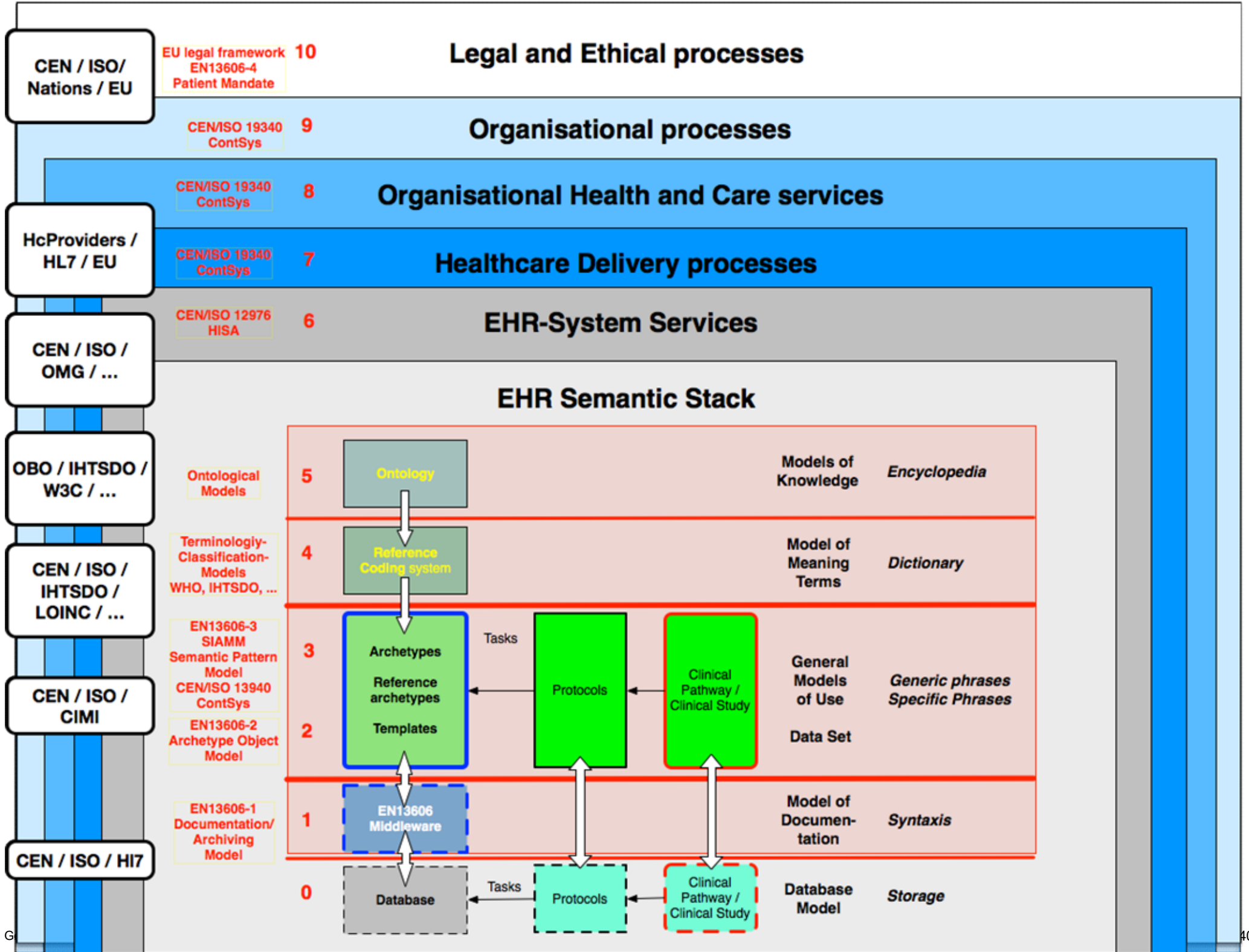
- **What:** topic
- **When:** date, time
- **Where:** location
- **Who:** author, involved parties
- **Why:** reasons
- **How:** methods, confounding factors

Epistemology

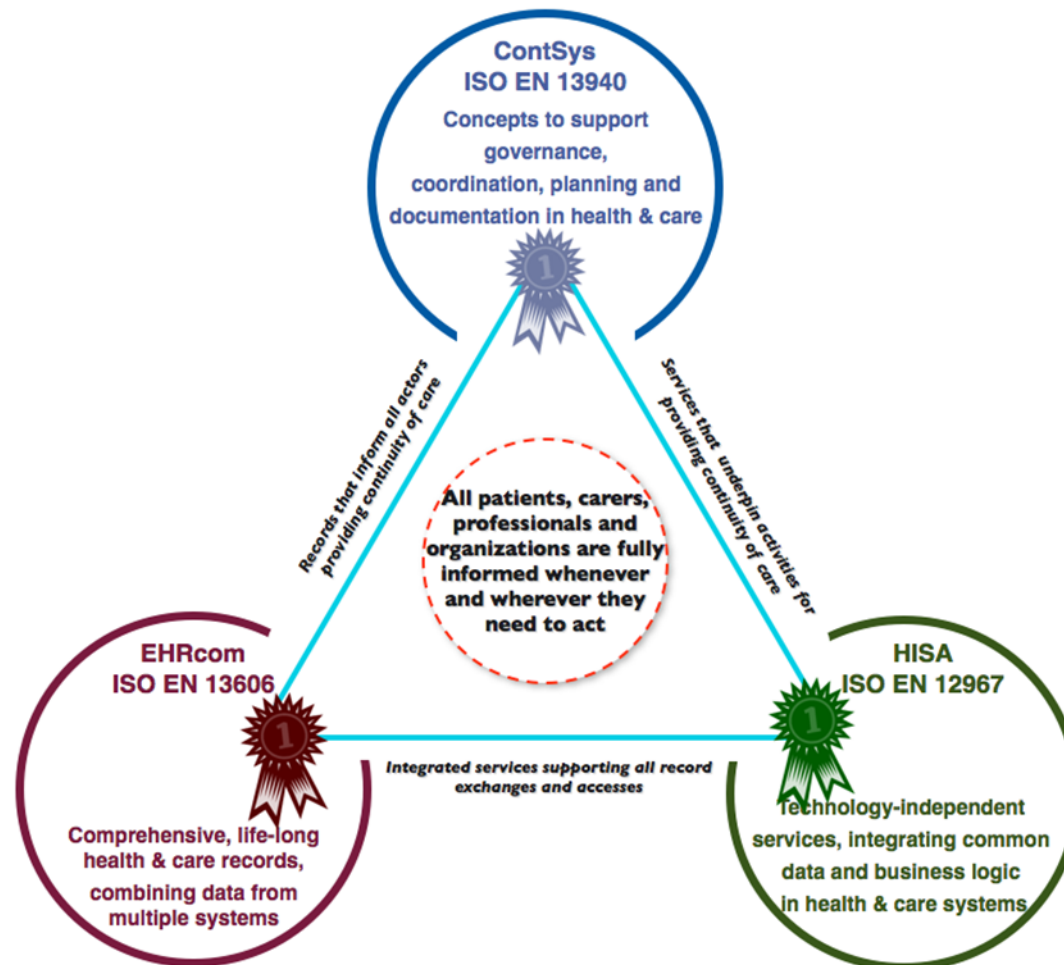
Present systems
do **NOT** systematically record
these items (context / epistemology)

People, and Clinical Reasoners
can **NOT** safely re-use data

Available standards for the Semantic Stack



3 Concurrent ISO standards

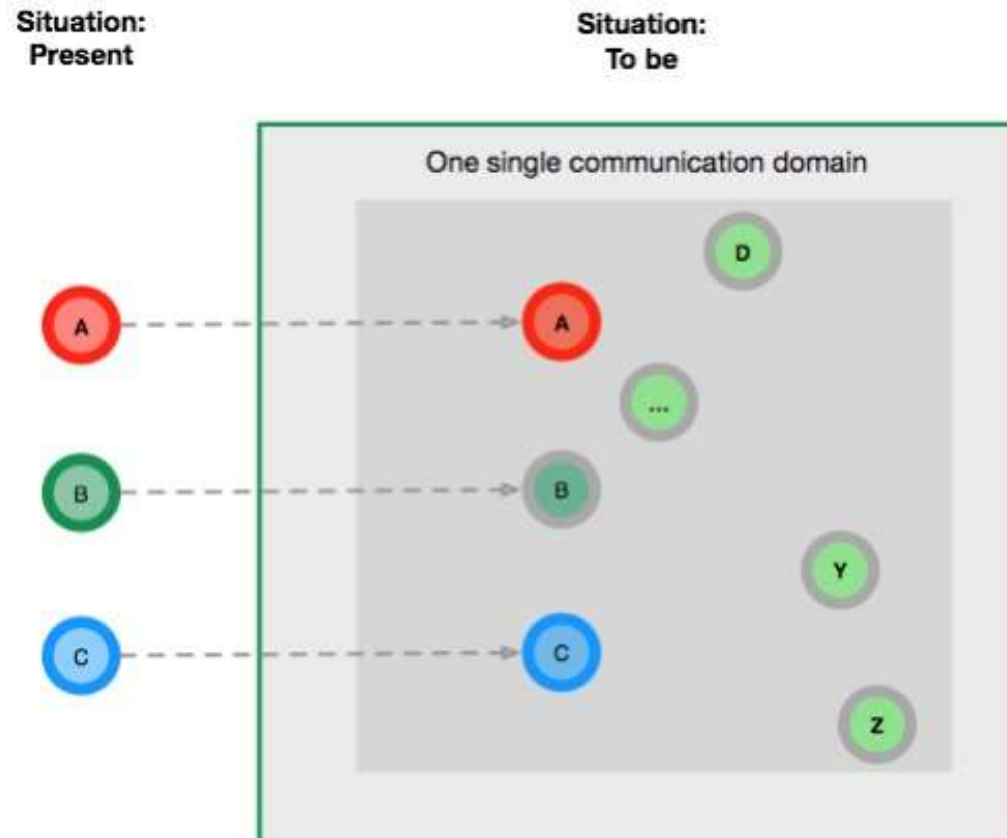


dinsdag 13 augustus 13

Semantic Stack

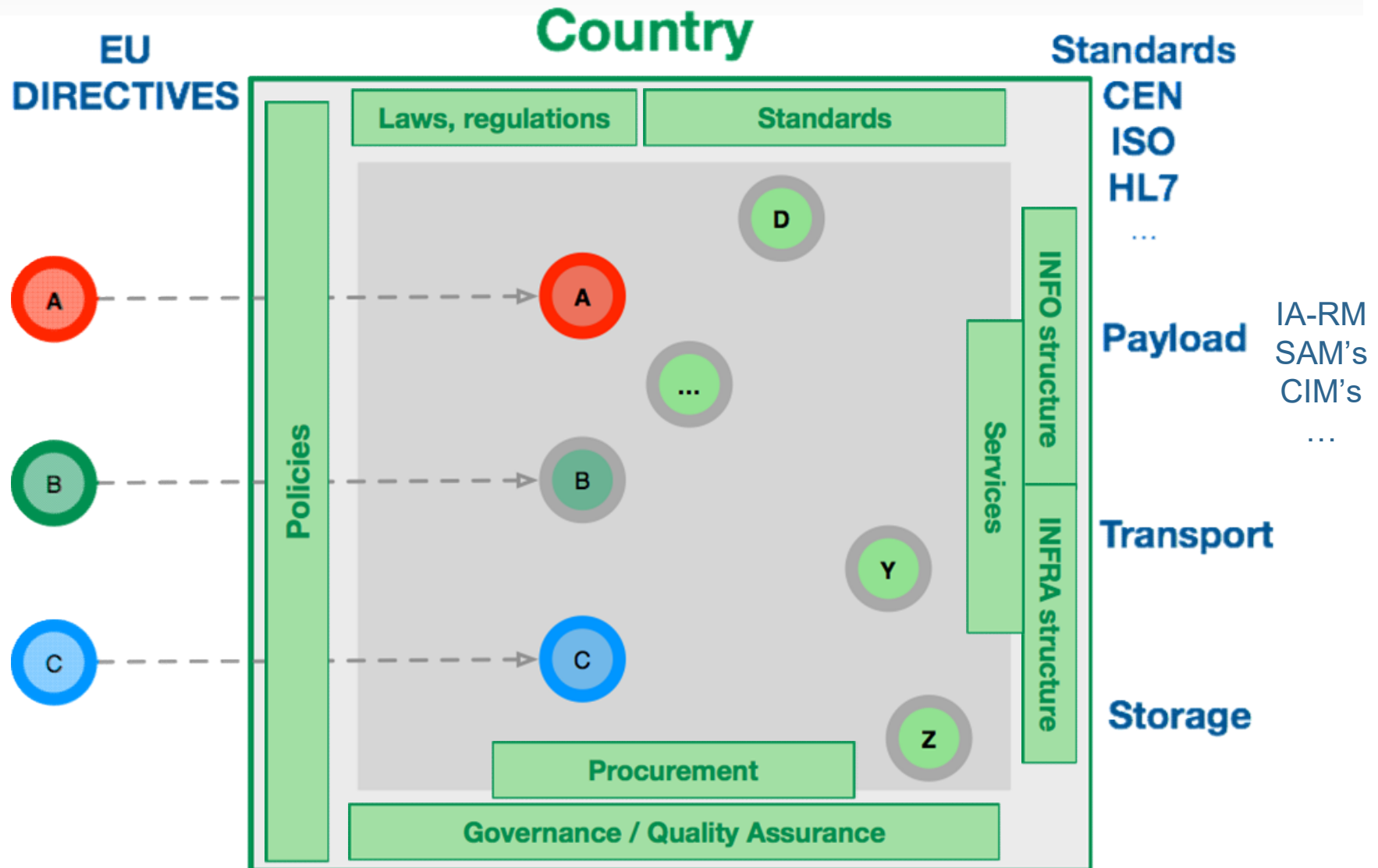
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What is needed

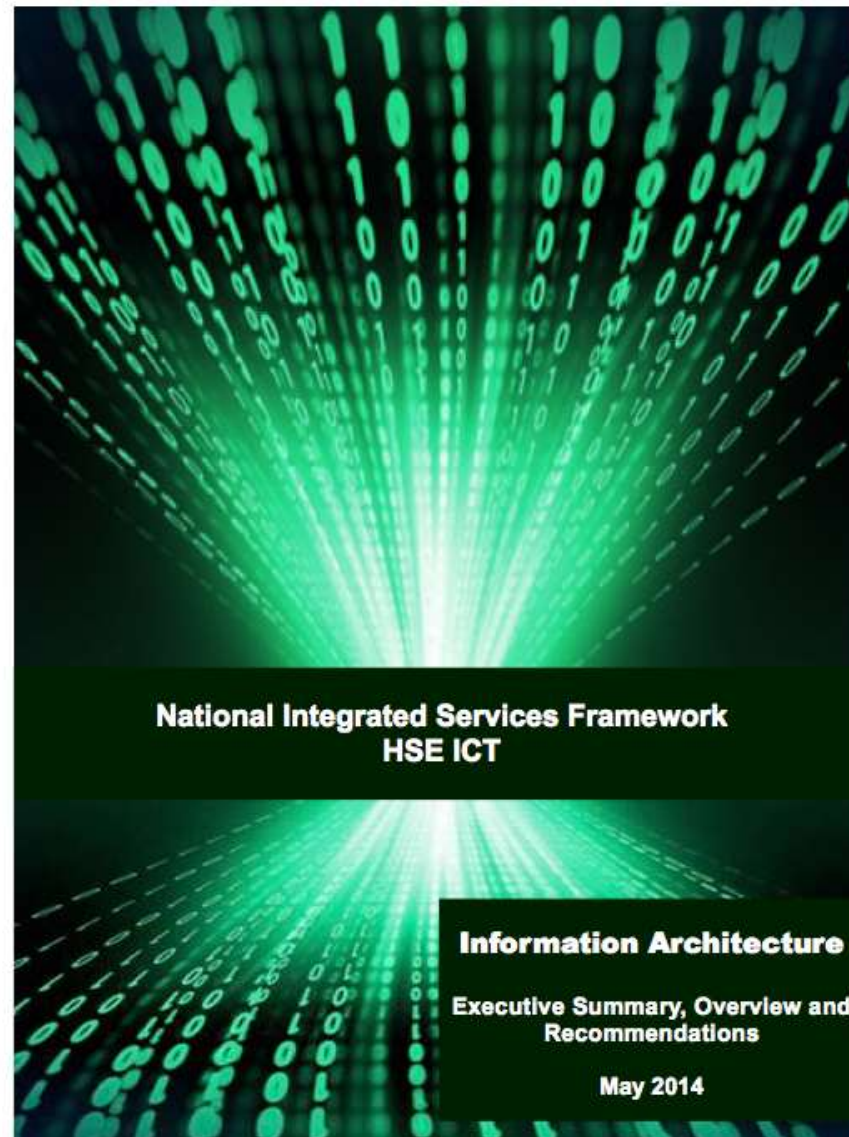


(Inter-) National Information Architecture

Information Architecture



Information Architecture



Owner:
Irish Republic

Author:
ERS bv

Topics

Communication in health and care

What is the problem: It is the Semantics, stupid!

What is needed:

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- Bakery as metaphor
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- Available standards - Concurrent use of standards
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Recent developments: ISO, HL7, CIMI

Developments

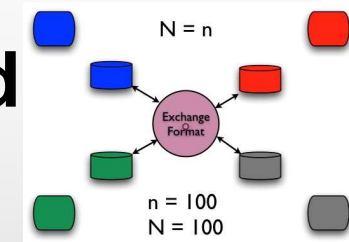
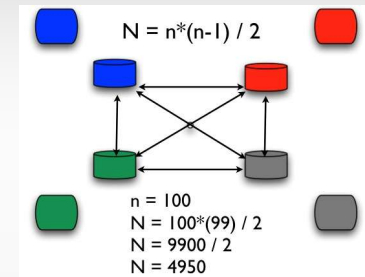
1.Unique proprietary connections

2.Standardised Messages updating field databases:

Edifact messages, HL7v2, HL7v3,
HL7 v3 CDA (*Clinical Document Architecture*), IHE,
FHIR (*Fast Healthcare Interoperability Resources*)

3.CIMI (*Clinical Information Modelling Initiative*)

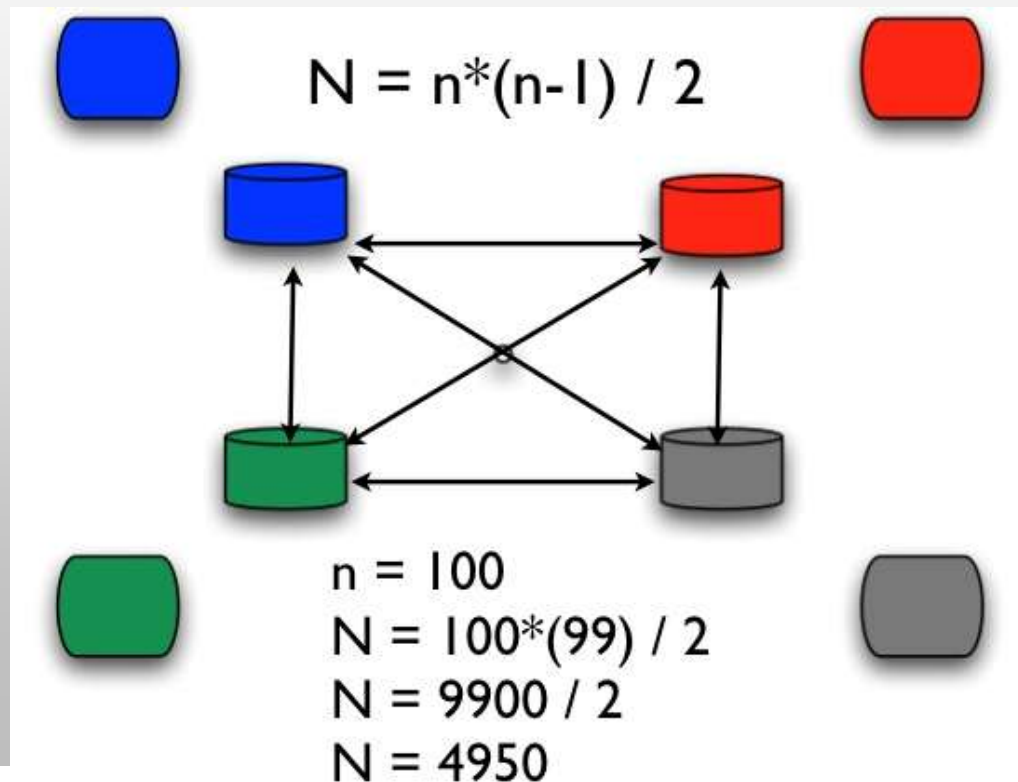
Collection of Logical standardised components
dealing with data in context



Developments

1. CHAOS

Unique proprietary connections



Developments

2. Standardised Messages

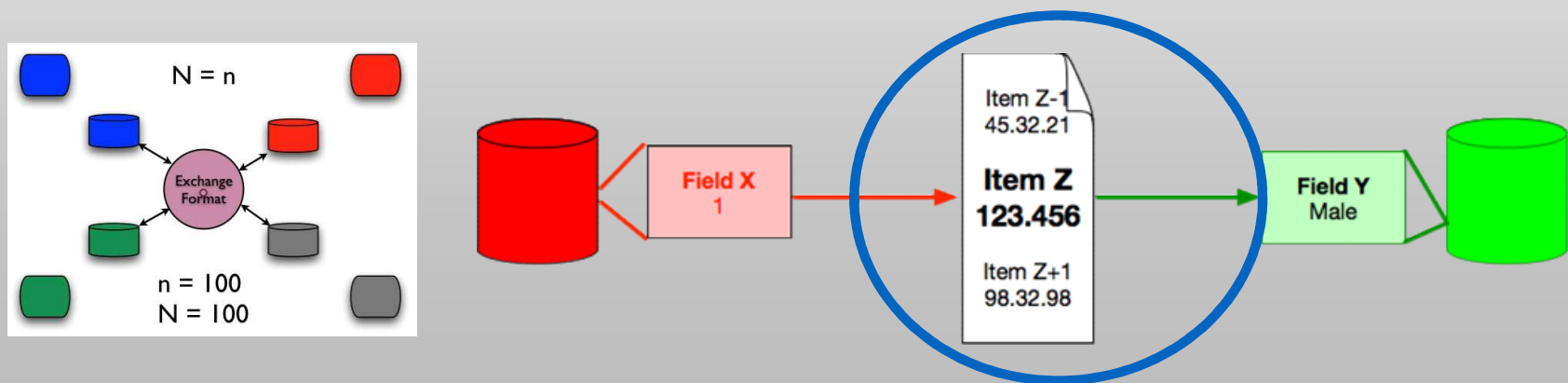
updating fields in databases:

Edifact messages, HL7v2, HL7v3,

HL7 v3 CDA (*Clinical Document Architecture*),

IHE,

FHIR (*Fast Healthcare Interoperability Resources*)



Developments

3. **CIMI** (*Clinical Information Modelling Initiative*)

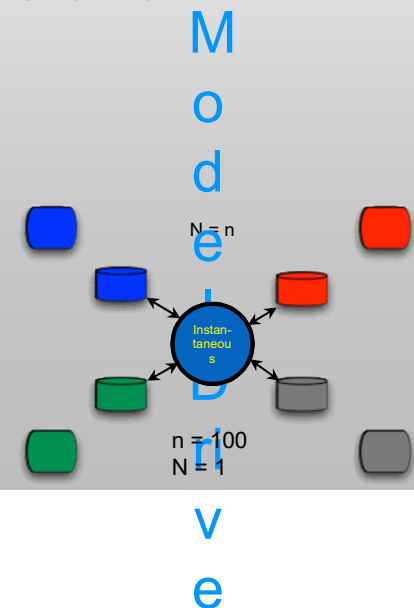
Clinical Information Models: CIM's

Shared Logical Clinical Models that:

- standardise data sets,
- the way data sets are defined and used
- are created based on shared standards, models and principles
- two model paradigm

CIM's can be used in:

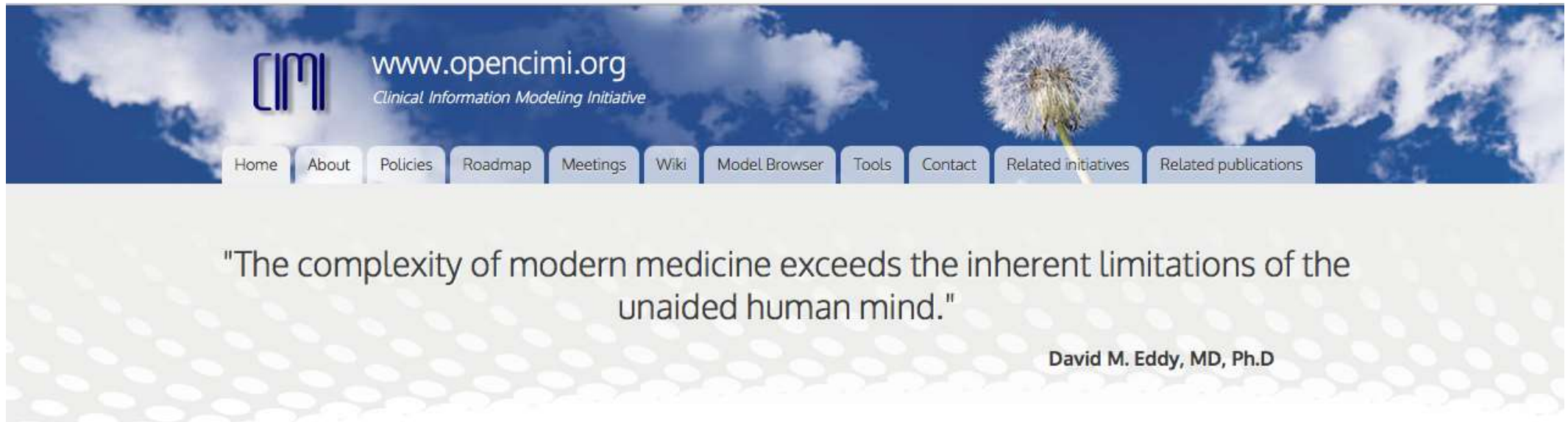
- interface specifications in general
- including messages, documents



CIMI

- The Clinical Information Modelling Initiative (CIMI) is an HL7 Work Group that is producing detailed clinical information models to enable interoperability of health care information systems
- CIMI was initiated during a “Fresh Look” session at an HL7 meeting in 2011
- CIMI models are free for use for all purposes
- See <http://www.opencimi.org/> for more details

CIMI



Mission and Goals

Published by Virginia Riehl, May 2015

Mission

Improve the interoperability of healthcare systems through shared implementable clinical information models.

(A single curated collection)

Strategic Goal



Download the official CIMI presentation as

- [Portable Document \(PDF\)](#)
- [MS-Powerpoint \(PPTx\)](#)

CIMI Member Organizations

- Canada Health Infoway
- Caradigm
- CDISC
- CEN/TC215
- HL7
- IHTSDO
- Intermountain Healthcare
- Kaiser Permanente
- Mayo Clinic
- NEHTA Australia
- NHS
- OpenEHR
- Results4Care
- SMART
- South Korea
- Tolven
- US Government
- EN 13606 Association

CIMI Goals

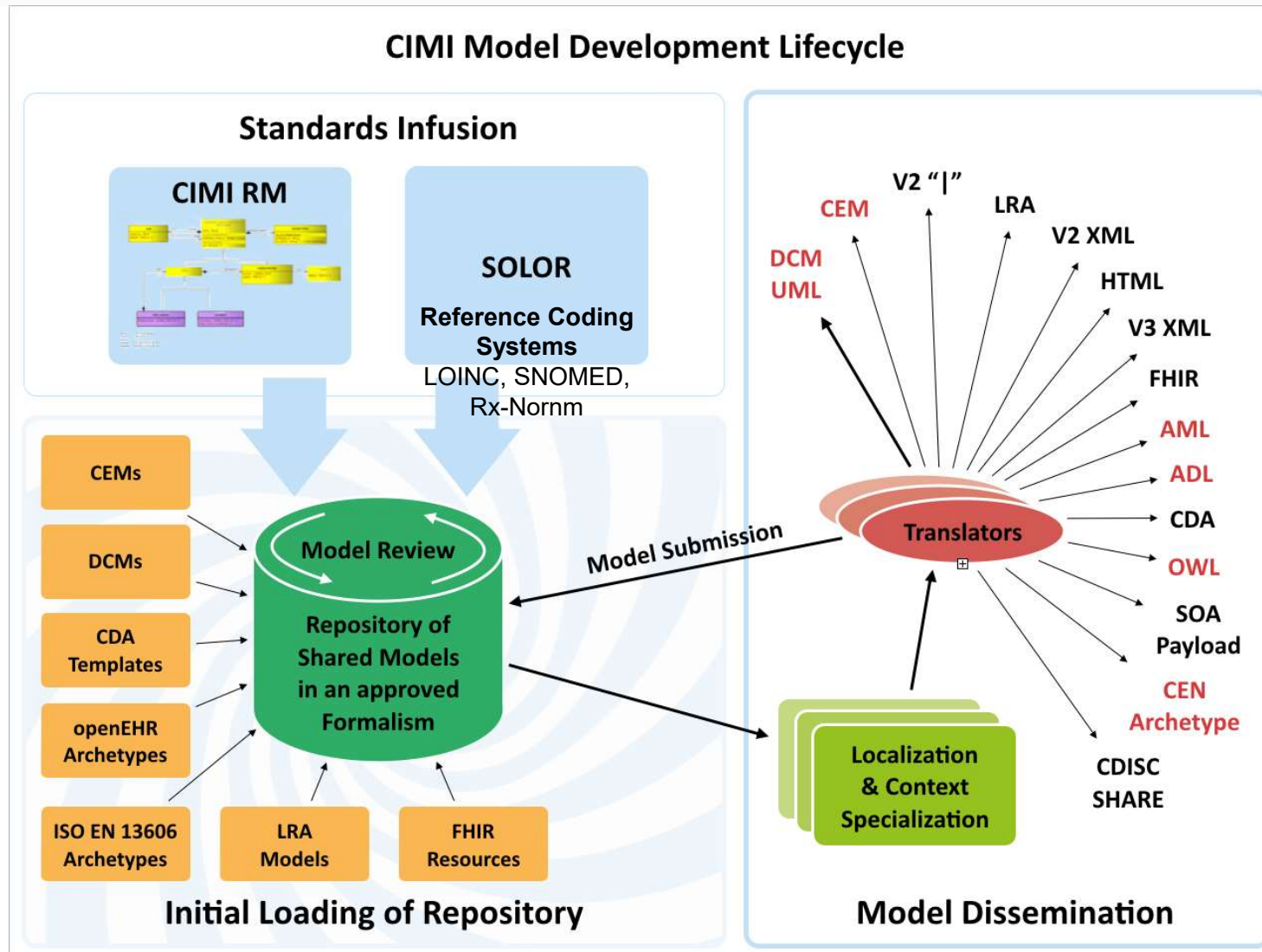
Create a shared repository of detailed clinical information models, as standardised building blocks

Repository is open to everyone and models are licensed free for use at no cost

Where the models:

- Are expressed in an approved formalism
- Archetype Definition Language (ADL)
- Archetype Modelling Language (AML)
- Are based on a core reference model, including a set of base data types
- Have formal bindings to standard coded terminologies

CIMI and data formats



CIMI Accomplishments

- CIMI core principles
- CIMI Reference Model
- Data types
- Core constructor types – clusters, elements
- Reference patterns
- 3,529 CIMI clinical laboratory models

Healthcare Services Platform Consortium HSPC

HSPC Mission:

Improve health by creating a vibrant,
open ecosystem of interoperable applications,
content, and services

HSPC

Membership

3 Benefactor members

- Veterans Administration
- Louisiana State University Health
- Intermountain Healthcare

Key alliances

- Center for Medical Interoperability (C4MI)
- OSEHRA

3 Associate (organizational) members

- Regenstrief
- Motive
- Allscripts

11 Individual members

Society Members: AMA, MHII and ACOG

HSPC Initiatives

- Be a provider led collaboration agent
- Create a reference implementation of common SOA
- Develop terminology and information models for true semantic interoperability
- Support authoring and sharing of knowledge content
- Obtain implementation and adoption of approved standards
- Create a shared technical environment to enable simple and efficient development

Pharma ISO Standards

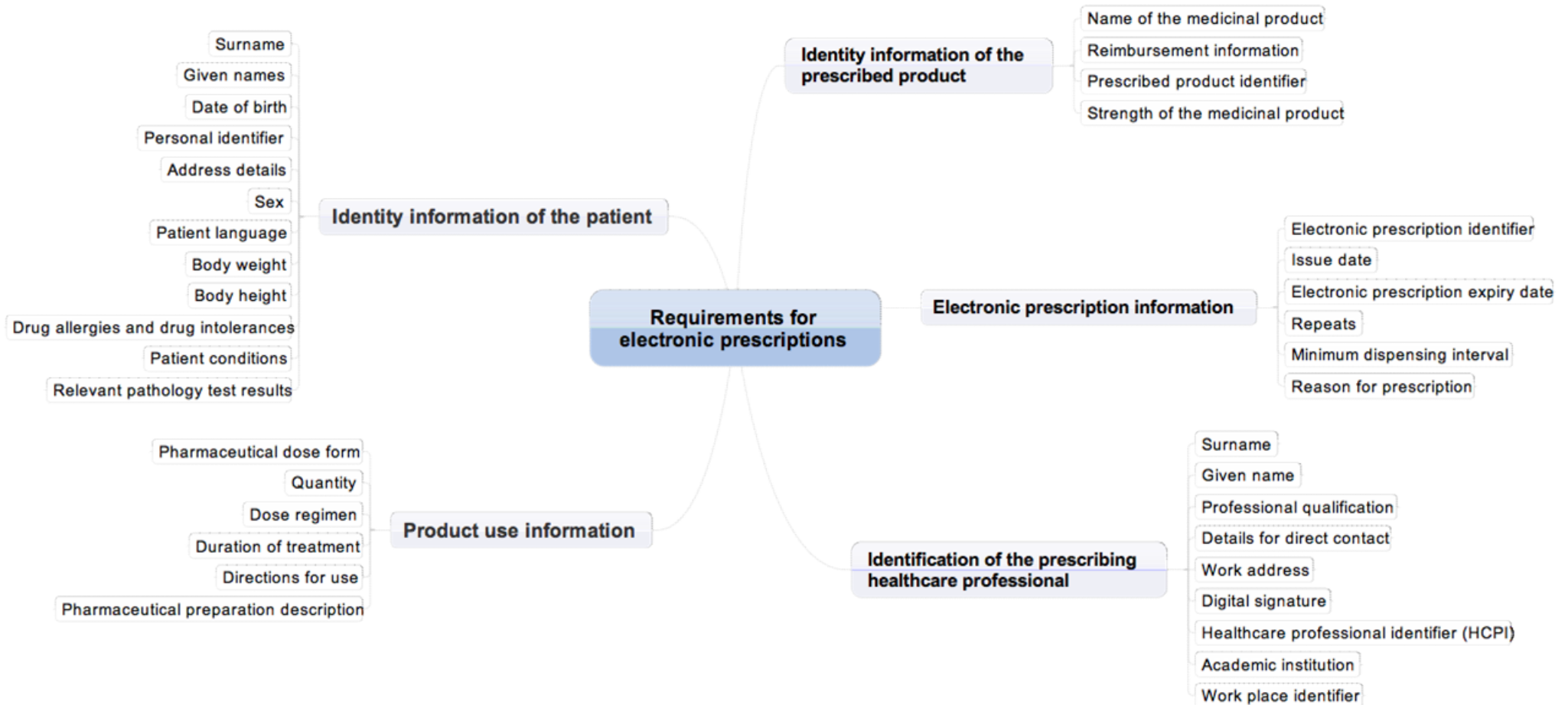
Substantial input from the Netherlands

GP's and Pharmacists co-operate for 30 plus years

Based on the dutch G-standard and Dutch standards a complete national services supporting:

- GP's, Hospitals, Specialists
- Pharmacists
- Whole sale, im-/exporters
- Pharma industries
- Insurers

CONTENT ELECTRONIC PRESCRIPTION



Machine Readable Codes

ISO/TS 16791:2014 Health Informatics

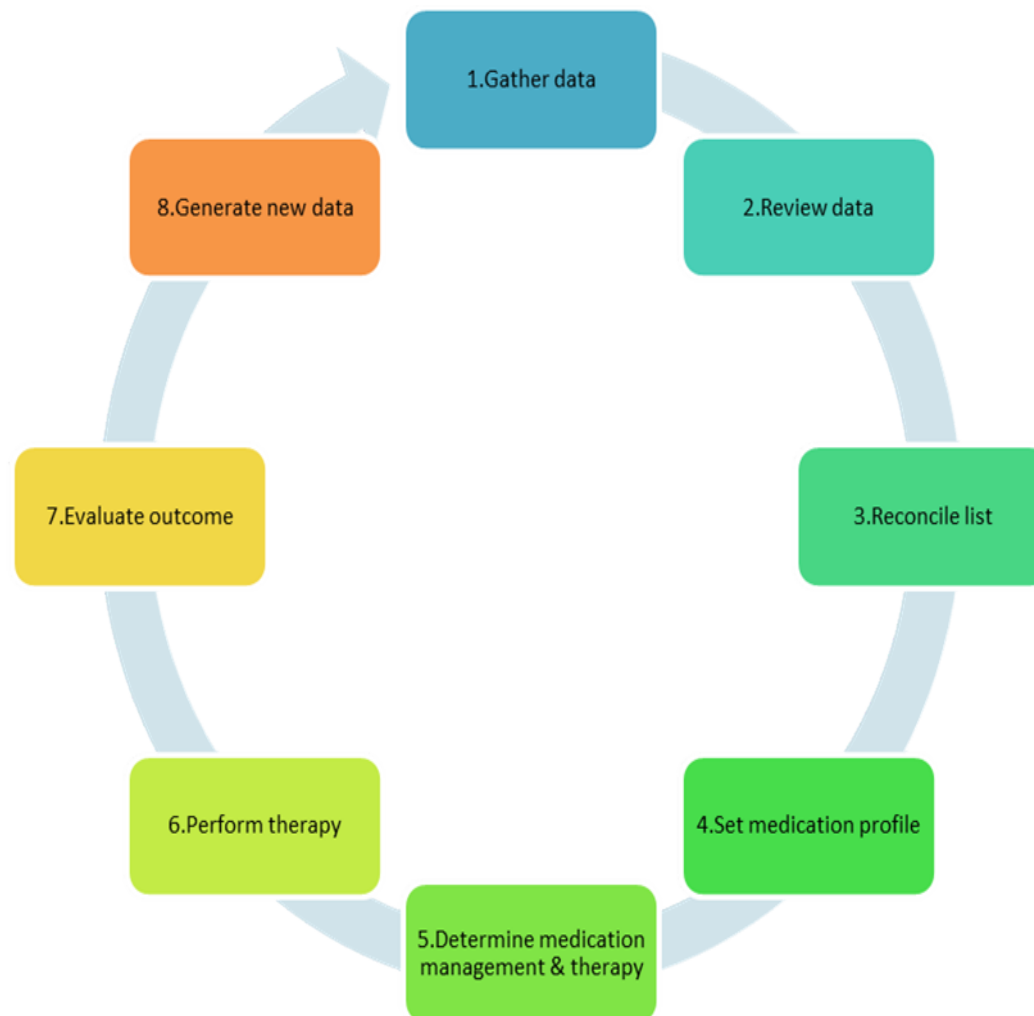
- Requirements for international machine-readable coding of medicinal product package identifiers
- Barcodes for medicinal products
- Identification from production to dispensing
- GS1 plays a prominent role for GS1
- Dutch Z-Index served as input

Medication management concepts

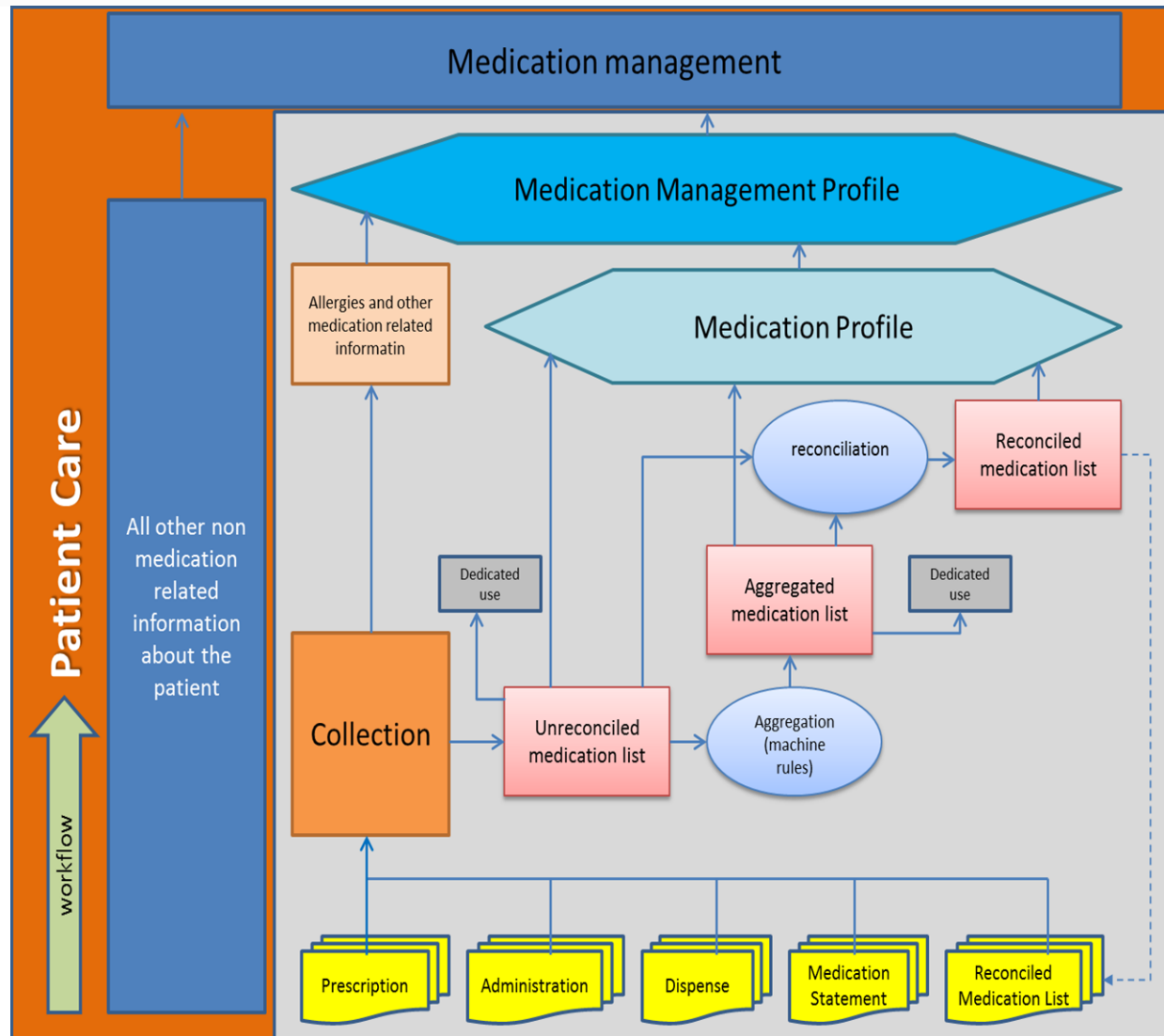
ISO/PDTR 20831 Health informatics Medication Management concepts

- Describes the process steps for medical product therapy
- Defines concepts in this domain
- Input/consensus between: IHE Pharmacy, HL7 Pharmacy and ISO TC215 WG6

Medication management concepts

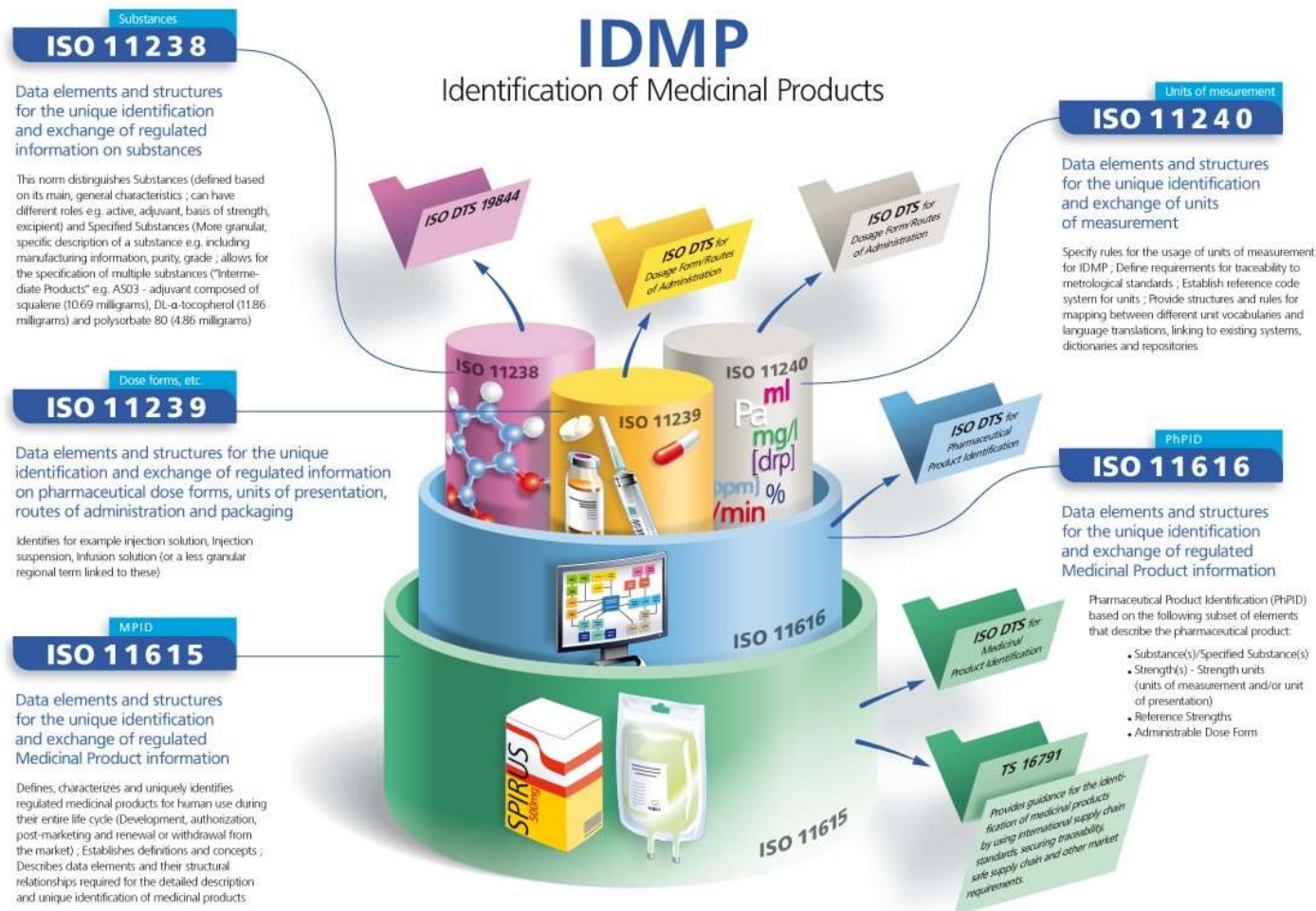


Medication management concepts



IDMP

Identification Medical Products



IDMP

- Started by Registration Authorities of Europe, VS and Japan and submitted to ISO TC215**
- Goal:**
 - one terminology for Medicinal products
 - exchange of associated side effects

IDMP

Substances

Very extensive information about substances

Per kind of substance character

- protéines
- Vaccins
- simple substances
- etc

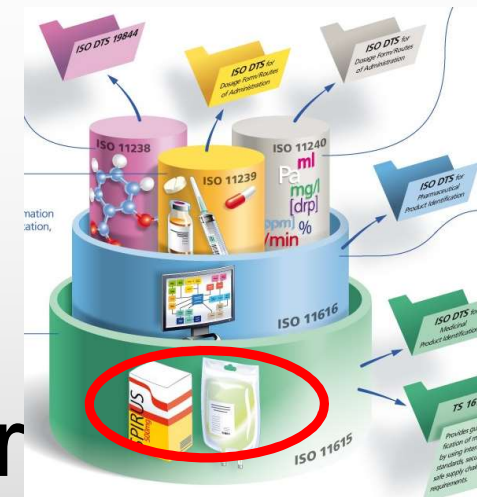


Worldwide 5-10 experts, world leader is the Netherlands

IDMP

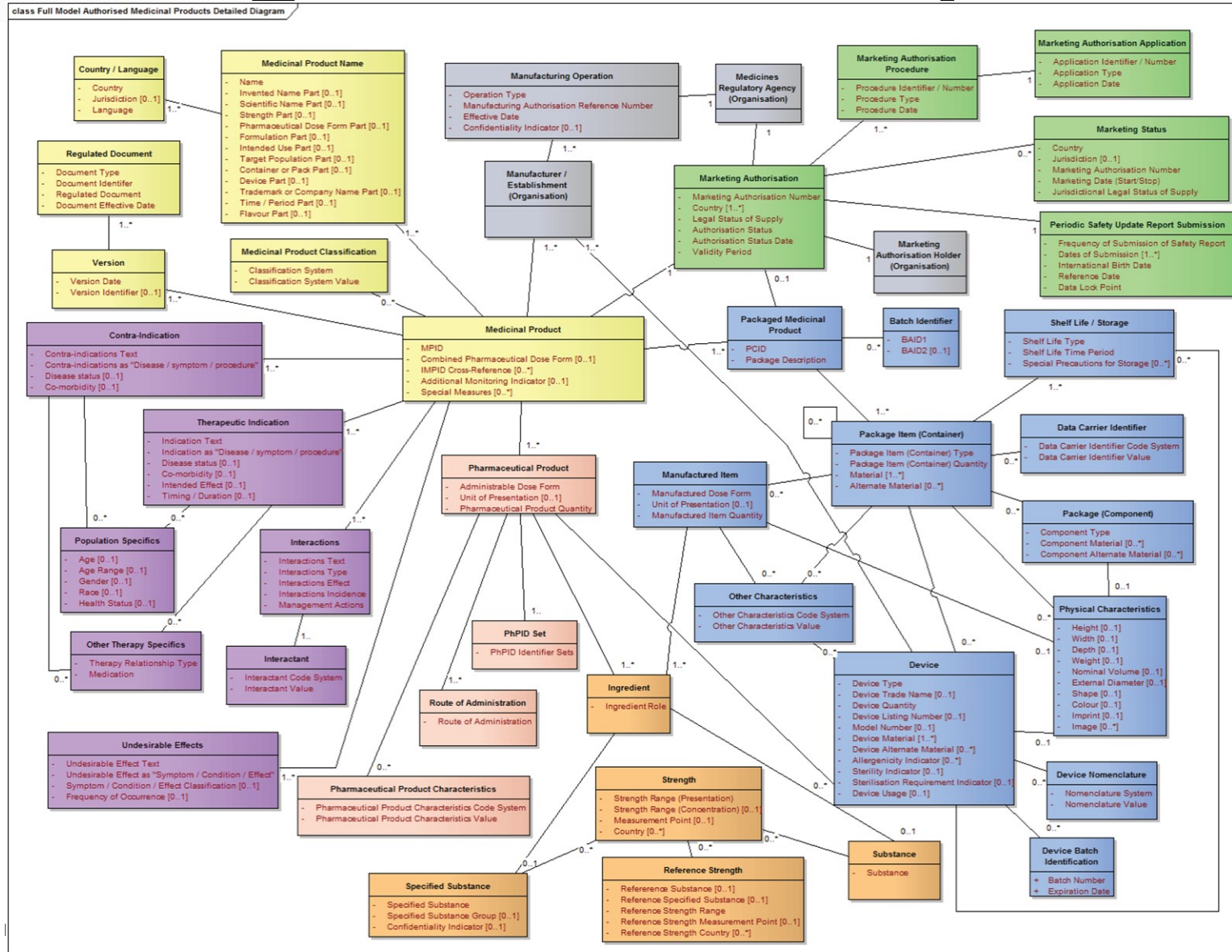
Packaged Medicinal product

- Many, many details
- Registration procedure
- Manufacturer, production process
- height, diameter, kind material, color, weight of emballage
- etc



IDMP

Packaged Medicinal product



Implementations

Physical data base: NL / EMA / VS

Pharm. Products: algorithm in development

Packaged Med. Products: unclear at this moment

Pharmaceutical form: EDQM - European Directorate for the Quality of Medicines

Units of Measurement: HL7 UCUM

Implementation

20.6.2012

EN

Official Journal of the European Union

L 159/5

COMMISSION IMPLEMENTING REGULATION (EU) No 520/2012

of 19 June 2012

on the performance of pharmacovigilance activities provided for in Regulation (EC) No 726/2004 of the European Parliament and of the Council and Directive 2001/83/EC of the European Parliament and of the Council

Article 25

Use of internationally agreed terminology

1. For the classification, retrieval, presentation, risk-benefit evaluation and assessment, electronic exchange and communication of pharmacovigilance and medicinal product information, Member States, marketing authorisation holders and the Agency shall apply the following terminology:

- (c) the terminology set out in EN ISO 11615:2012, Health Informatics, Identification of Medicinal Products (IDMP) standard, 'Data elements and structures for unique identification and exchange of regulated medicinal product information' (ISO/FDIS 11615:2012);

72

... and more ISO IDMP standards

Implementation

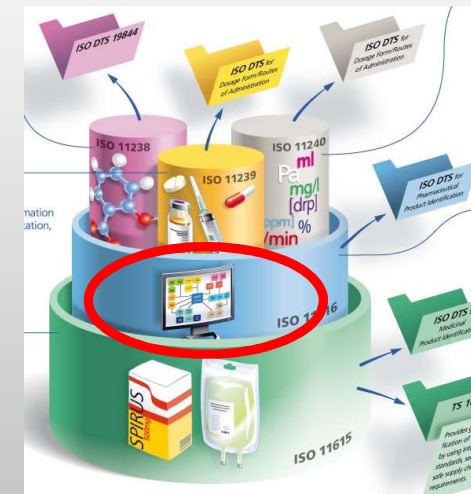
- **EU regulation**
- **Changes in national existing implementations**
- **Vendors, Importers/exporters, whole sale, pharmacists, clinicians, registrations**

IDMP

Substances

Input from Dutch G-Standard:

- active substance
- pharmaceutical form
- strength
- administration kind



Medicinal Product Dictionary



MPD

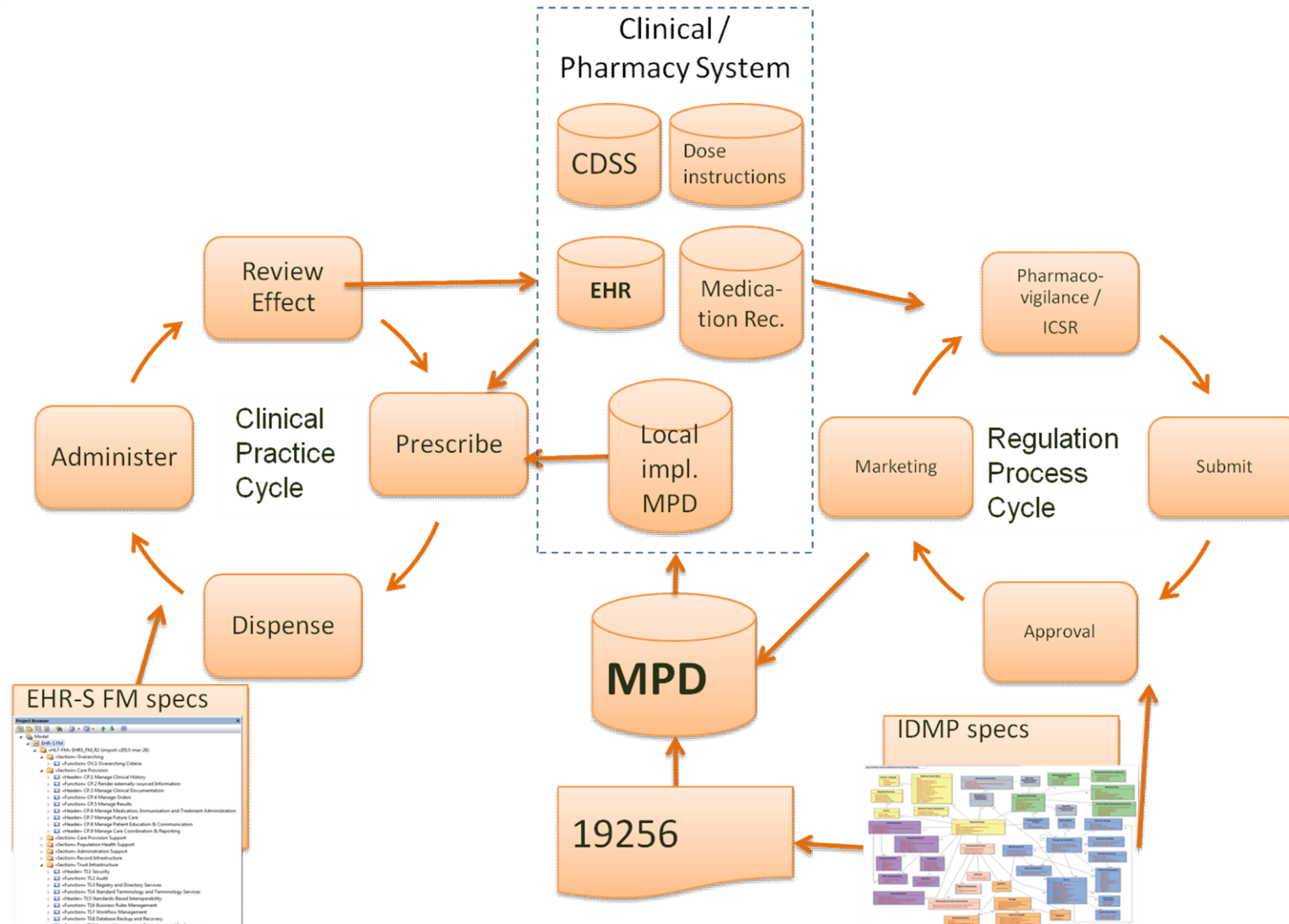
What is it

- The ISO norm describes requirements for a drug dictionary that is annex the IDMP
- To be used by EHR-systems, clinicians
- Several levels
- It is based on the Dutch G-standard (NEN7507)

Dosage instructions



Dosage Instructions



Dosage Instructions

Example

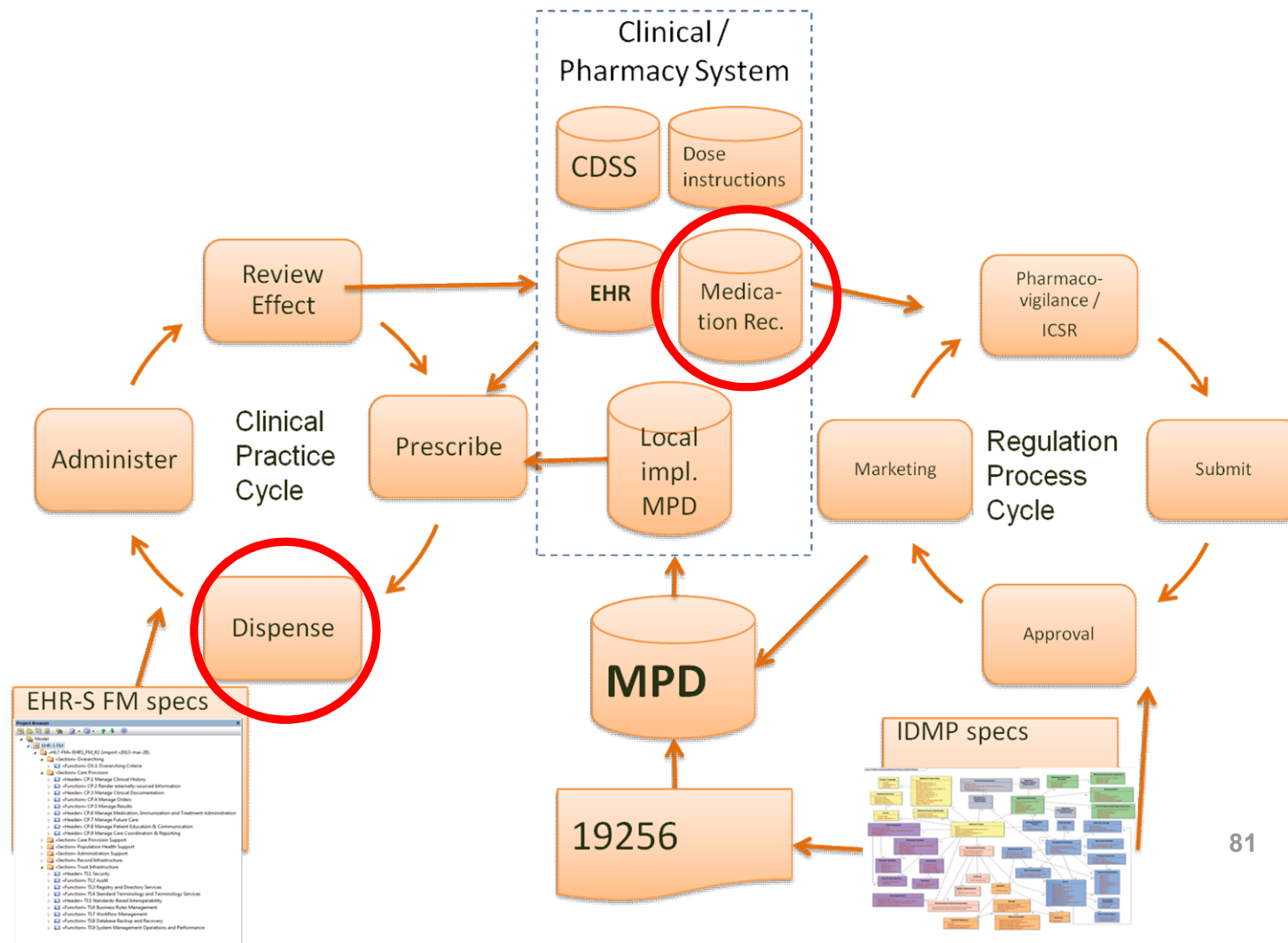
- '1 tablet per day'
- Day part ('morning')
- Time ('22:00')
- Label text ('take with water')
- Therapy duration
- Infusion: administration duration, administration speed
- etc, etc

**Dutch GP organisation and Pharmacists
have experience for 30+ years**

Dispense record



Dispense Record



Dispense Record

Why

- Data to be used for medication surveillance, billing, etc
- Exchange data about a dispensed medicinal product
- etc

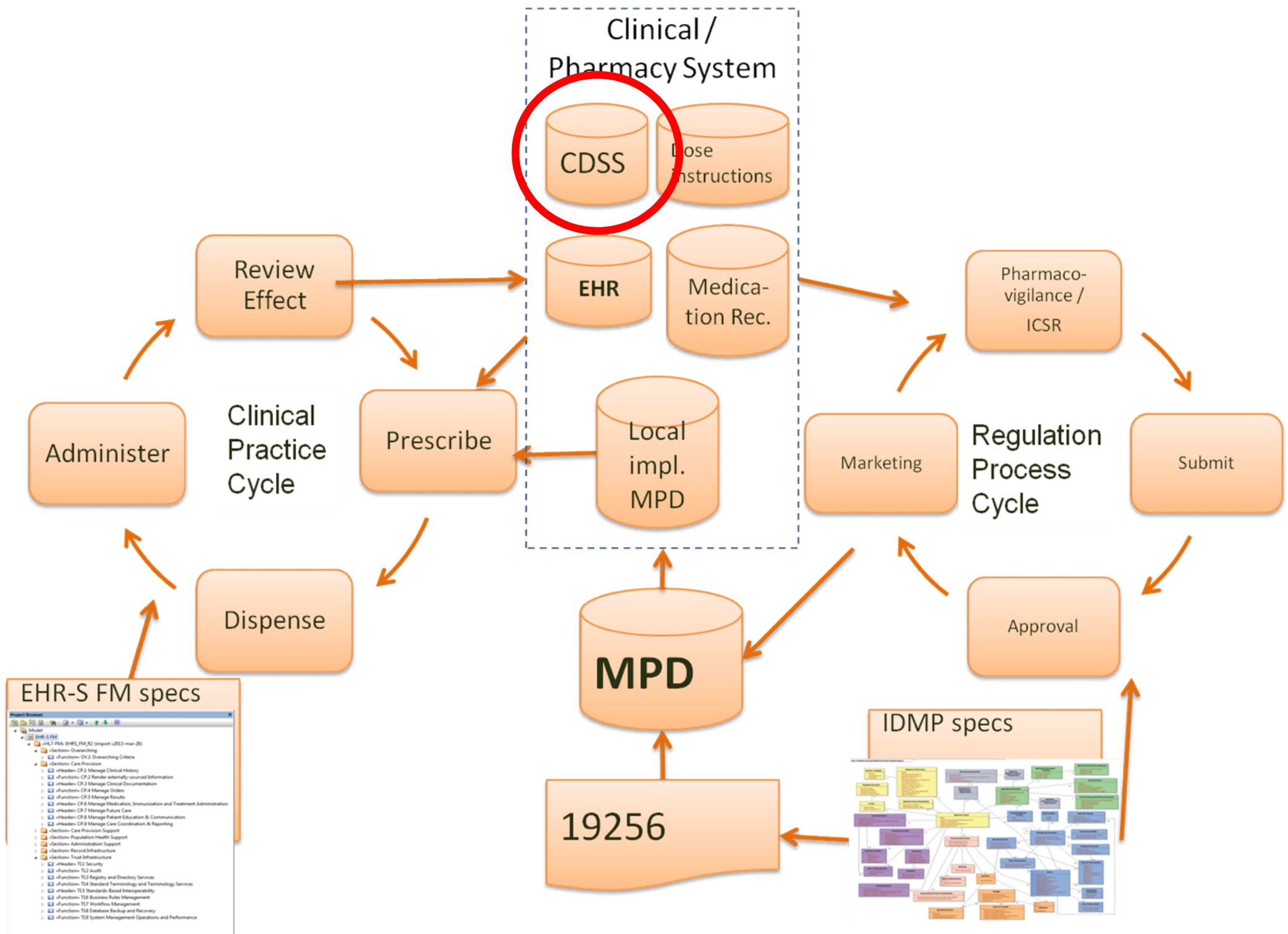
Dispense Record

Content

- prescriptions , and Over-the-Counter
- Patient, Pharmacist accountable
- medicinal product, dosage, label text
- amount and repeats
- Link to prescription / order
- Billing, insurance information
- etc

Knowledge base





CDSS

Knowledge base

- **Content and decision rules for medication surveillance**
- **Netherlands actively involved**

Take home messages

Pharma I

1. Shared care impossible without full and safe Semantic Interoperability (including pharma)
2. Do NOT re-invent the wheel
3. Standards: many International standards that have to be used
4. Developments Semantic Interoperability:
Chaos -> Messages -> Documents -> Logical Clinical Information Models (CIM's)
5. Semantic Stack: each layer driven by only one shared standardised model
6. Epistemology / Context are very important for full and safe semantic interoperability

Take home messages

Pharma 2

7. Model driven CIM's (Logical Clinical Information Models)
with the full epistemology / context influenced by EU standards
8. Each country its own Information Architecture based on the same International standards
9. ISO actively is producing various pharma standards
10. EMA and the EU will legislate
11. Using ISO standards national drug databases can be supported and stay interoperable internationally