

Building Blocks Working Group Meeting Summary

Meeting Summary

<u>Date and Time</u>	<u>Location</u>	<u>Note Taker</u>	<u>Next Meeting Date</u>
Thursday, July 11, 2024, 1:00pm-2:00PM ET	Virtual	Sadrina Petit, Project Analyst, Digital Health Interoperability	Thursday, July 18, 2024, 1:00pm-2:00PM ET
Meeting Agenda: <ol style="list-style-type: none"> First look at resources <ul style="list-style-type: none"> Healthcare service Location eReferral <ul style="list-style-type: none"> Will discuss the various ways that eReferral will use the CSD to ensure that we can include any cardinality, MS rules etc. in be profiles. 			
Presenters <ul style="list-style-type: none"> Dean Matthews – Service Directory, Product Owner Irfan Hakim - Functional & Industry Consultant Data & AI 			
Invited Guests <ul style="list-style-type: none"> Public 			

1. Welcome and Introductions

D. Matthews welcomed all participants to the working group meeting. Meeting materials and recording of the session will be made available on the InfoCentral working group.

2. Content Presentation

The Infoway Team presented each of the agenda items as outlined above. In the meeting, we took a first look at resources and discussed the various ways that eReferral will use the CSD to ensure inclusion of any cardinality, MS rules, etc., in the profiles.

The presentation is available: [Building Blocks Working Group Meeting](#)

The video recording is available: [Building Blocks Working Group Meeting](#)

3. Questions raised during the working group meeting:

What are the key focus areas for the healthcare service and location profiles?

The main focus is on evaluating and possibly modifying elements such as constraints, cardinalities, and the necessity of extensions, especially concerning e-referral and other related projects.

How is feedback on profiles being managed?

Feedback is collected via the Simplifier project platform, where issues and comments can be logged. This feedback will be reviewed and addressed in subsequent profile reviews.

What are some examples of extensions being considered for these profiles?

Extensions like the delivery method, which could indicate a service being provided via telecommunication tools like Zoom, and usage licenses, which ensure practitioners meet the necessary qualifications for the services they provide.

How do modifications to the profiles align with Canadian healthcare standards?

Modifications aim to align with the Pan-Canadian standards and Ontario specifications, ensuring that the profiles meet regional and national compliance requirements.

What is the usage license extension, and why is it important?

The usage license extension specifies the minimum level of licensing required for practitioners providing a service. This helps ensure that services are performed by qualified individuals.

Are there any necessary extensions for the location profile?

Currently, no new extensions are deemed necessary for the location profile. However, community feedback is encouraged to identify any potential requirements.

What is the difference between using GeoJSON and position elements in location profiles?

The discussion is ongoing regarding the need for GeoJSON versus using existing position elements, which already capture geographic coordinates. The decision will depend on the specific requirements and efficiency of data use in service directories.

What is the rationale for using the position element in location profiles?

The position element is generally considered sufficient for capturing location data. However, there is ongoing review to determine if additional extensions are necessary to fully meet the needs of service directories.

What is a facility location in the context of service directories?

A facility location is a specific instance of a location that combines both location and managing organization elements. This type is particularly used when a physical establishment, like a hospital, needs clear management attribution.

How are physical and virtual locations handled in the profiles?

The profiles are designed to accommodate both physical and virtual locations. Discussions are ongoing to ensure that definitions and parameters do not inadvertently exclude virtual services, such as telehealth.

Are the discussed profiles applicable only to service directories?

Yes, the profiles discussed are specifically designed for service directories but can serve as a base for jurisdiction-specific adaptations, allowing for tailored implementations.

What is the difference between 'must support' and 'obligation' strategies in profiles?

'Must support' indicates essential elements that should be considered in a profile, while 'obligation' provides further details on how these elements are handled. Both strategies are complementary, with obligations enhancing the directive nature of 'must support' elements.

What is the purpose of the delivery method extension in healthcare service profiles?

The delivery method extension allows healthcare services to specify how the service is delivered, such as virtually or in-person. This helps accommodate different service delivery preferences, such as certain hours dedicated to virtual consultations like Zoom calls, and others for in-person visits.

How does the usage license extension benefit healthcare services?

The usage license extension specifies the minimum licensing requirements necessary for a practitioner to provide a service. This ensures that practitioners are appropriately qualified for the services they offer, enhancing the reliability and safety of healthcare services.

What does the usage license extension typically link to?

The usage license often links to a URL that provides detailed information about the licensing and qualifications of healthcare providers. This helps patients and other stakeholders verify that healthcare services are provided by qualified personnel.

Is there a consideration to derive service directory profiles directly from the MCSD?

There is ongoing discussion about whether to derive the service directory profiles directly from the Minimal Common Subset Directory (MCSD) or to use it merely as inspiration. The decision hinges on compatibility and adaptability with potential updates to the MCSD.

What are the implications of deriving profiles from the MCSD?

Deriving profiles from the MCSD could potentially make updates more straightforward but requires careful consideration to ensure compatibility with existing standards, like Canada Core processes, and the ability to incorporate necessary extensions without conflicts.

What are the next steps for updating healthcare service profiles?

The next steps include internal reviews of community feedback, updating profiles accordingly, and planning further discussions on topics such as deriving from the MCSD. Future meetings will continue to refine these profiles and ensure they meet the needs of various jurisdictions.

Action Items:

Action Item #	Action Item	Responsible	Due Date	Status
1	Schedule the next working group meeting on Thursday, July 18, 2024, 1:00pm-2:00PM ET	Working Group	July 11, 2024	Complete
2	Conduct internal reviews of the feedback received from the community to identify necessary updates and improvements to the profiles.	Infoway	July 18, 2024	Complete
3	Update the profiles based on the reviewed feedback to ensure they accurately reflect current requirements and standards.	Infoway	July 18, 2024	Complete
4	Schedule and prepare for discussions regarding the potential of deriving profiles from the MCSD, considering the implications for compatibility and adaptability.	Infoway	July 18, 2024	Complete
5	Plan and schedule future meetings to continue refining the profiles and ensure they adequately meet the diverse needs of various jurisdictions.	Infoway	July 18, 2024	In Progress