



**Canada Health Infoway**

# **Patient Summary Working Group (PSWG)**

**November 22, 2023**

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CIHI

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Standards

Sheridan Cook, Standards Lead



# Can you please introduce yourselves? (Organization/Role)

Wordcloud Poll 10 responses 10 participants





# Where are you joining from? (City/Province)

Wordcloud Poll  25 responses 24 participants



# Agenda

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- 1 Welcome & Announcements
- 2 Infoway and CIHI Collaboration
- 3 PS-CA v1.1.0 DFT & CA:FeX v2.0.0 DFT Scope Details
- 4 Roundtable Scope Discussion
- 5 Next Steps

# Welcome & Announcements

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- **PSWG Membership** – please ensure you have signed up as a PSWG member. This will ensure you receive notifications about upcoming meetings, forum conversations and shared documents/videos.
- **Balloting** - In our last meeting we announced that going forward, the specification review process will follow pan-Canadian balloting rules for balloting Draft for Comments and Trial Implementation material, aligning with international standards and emerging best practices for standards community practices.

**Please join us on Tuesday, November 28<sup>th</sup> at 1 PM ET for this balloting information session, including a Q&A period.**

Meeting details are available [here](#).



# **Infoway and CIHI Collaboration**

## **Patient Summary**



**A common vision:  
Connected care  
for healthier  
Canadians**



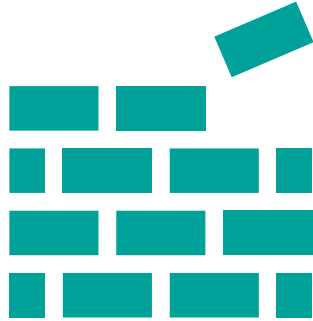
 Canada Health Infoway

**Shared Pan-Canadian  
Interoperability Roadmap**

May 2023

# CIHI and Infoway are partnering to modernize health information flows and create a connected health system

1



## Health data content foundation:

Defines the underlying data content and data structure on a pan-Canadian basis to be exchanged.

2



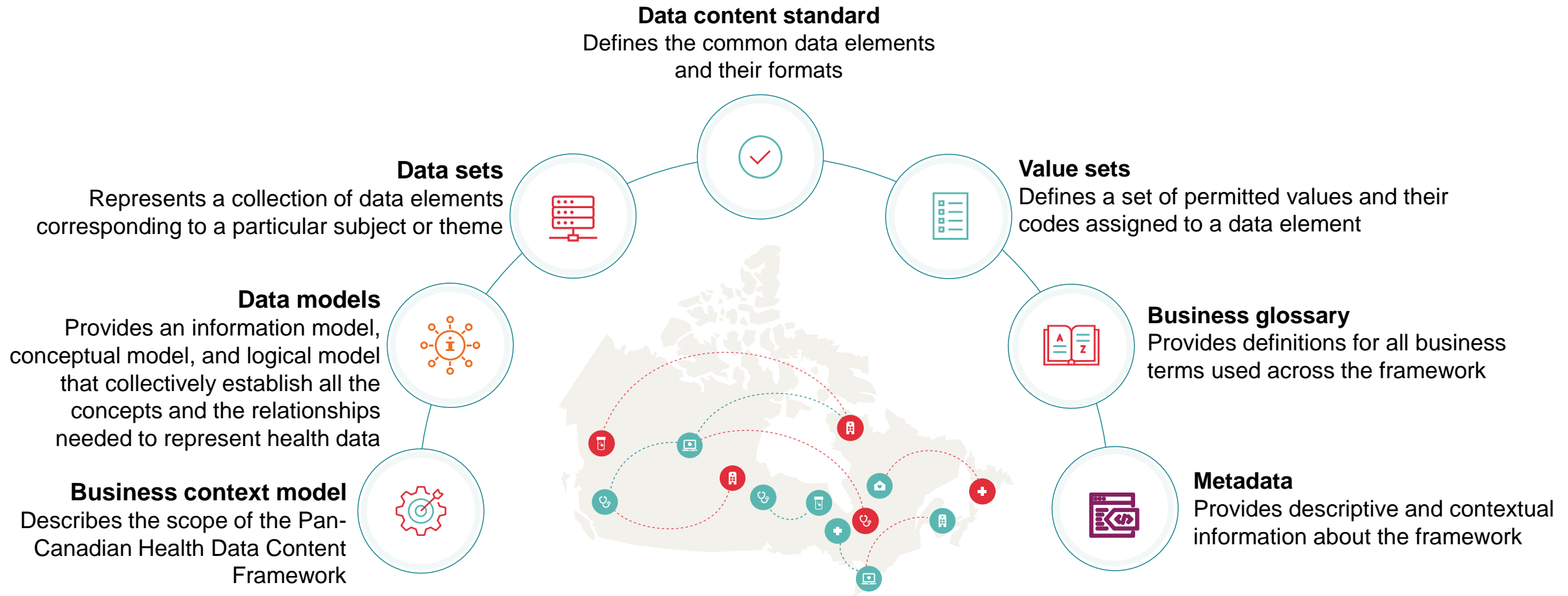
## Data exchange:

Builds technical exchange standards to move discrete data points in response to specific use cases.



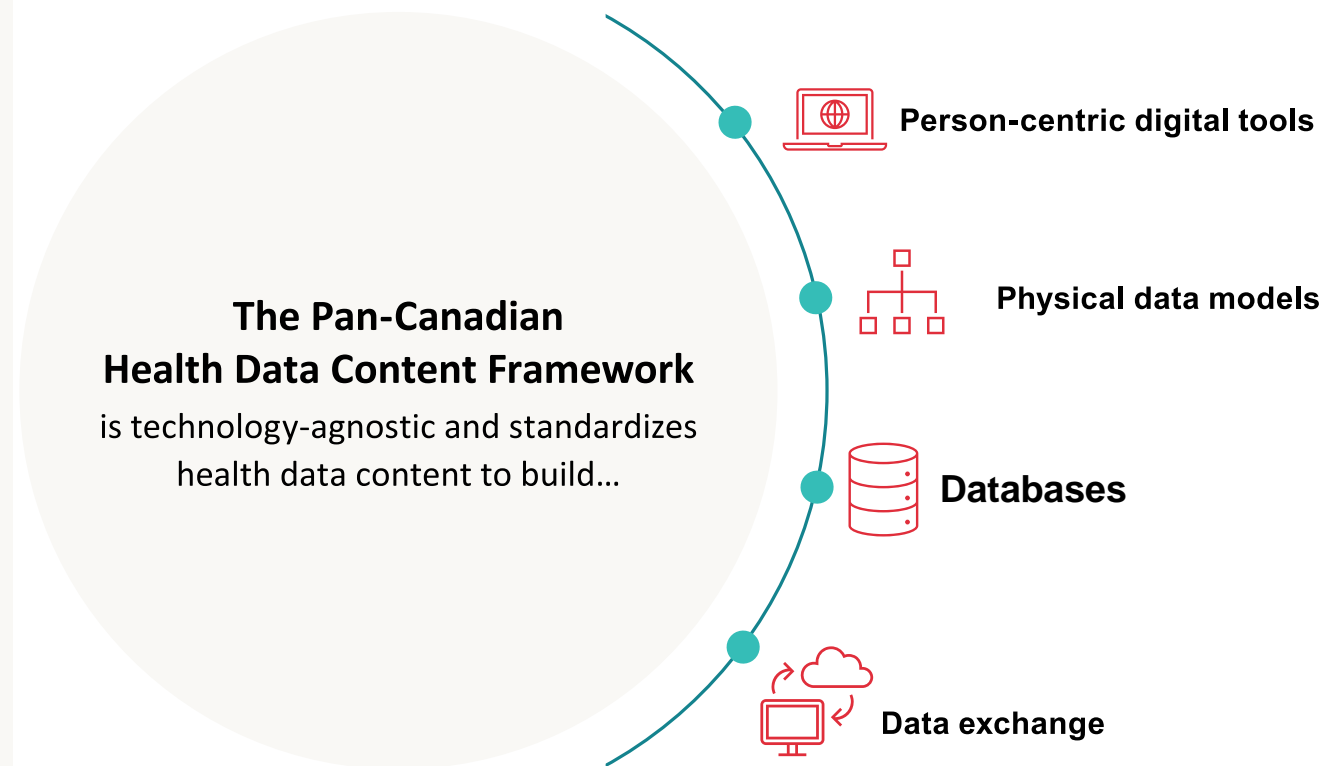
**Without data standardization at the point of capture, the information exchanged will not be meaningful**

# The pan-Canadian Health Data Content Framework is a single cohesive product with many deliverables

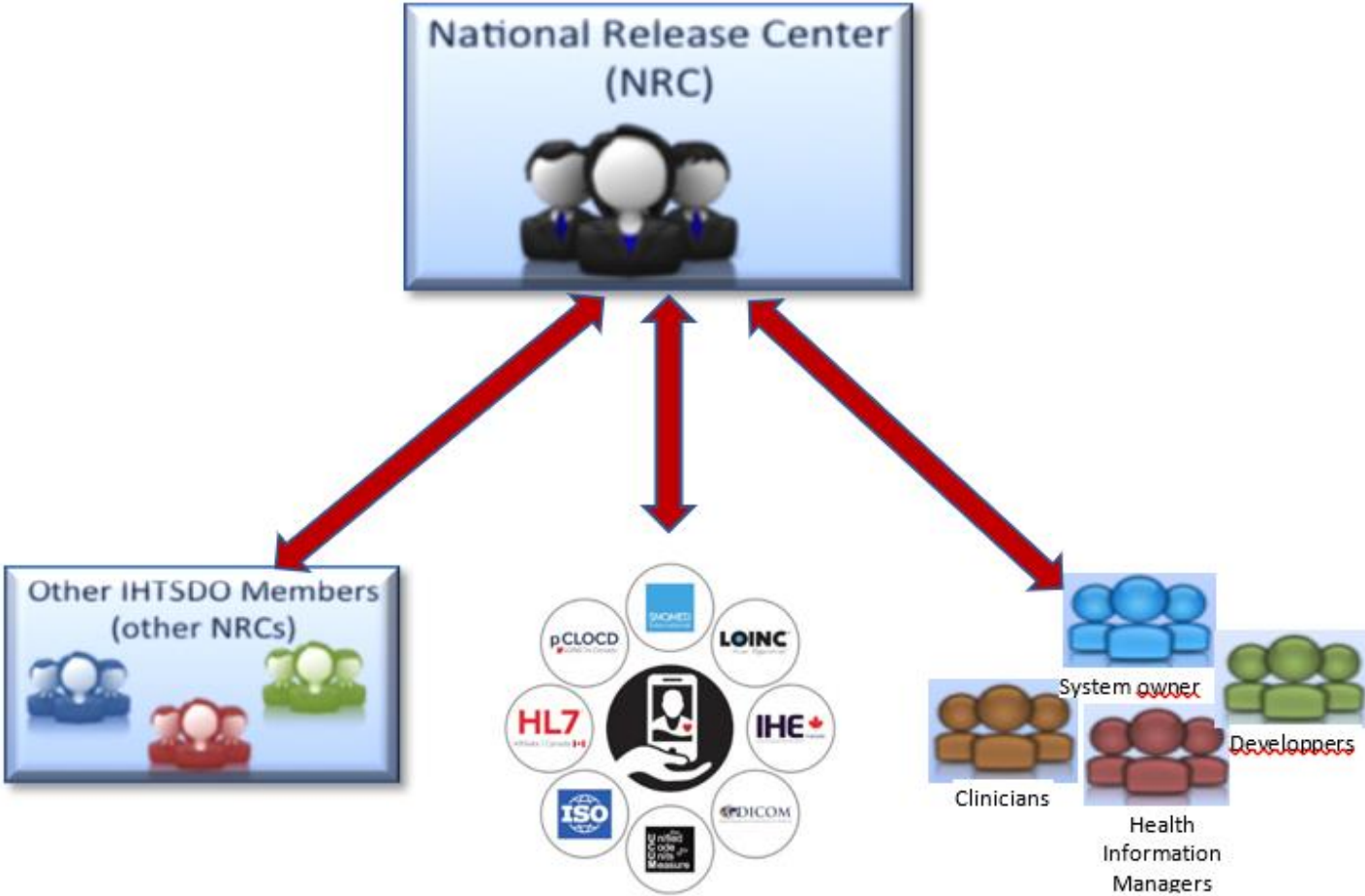


# The pan-Canadian Health Data Content Framework will address several objectives

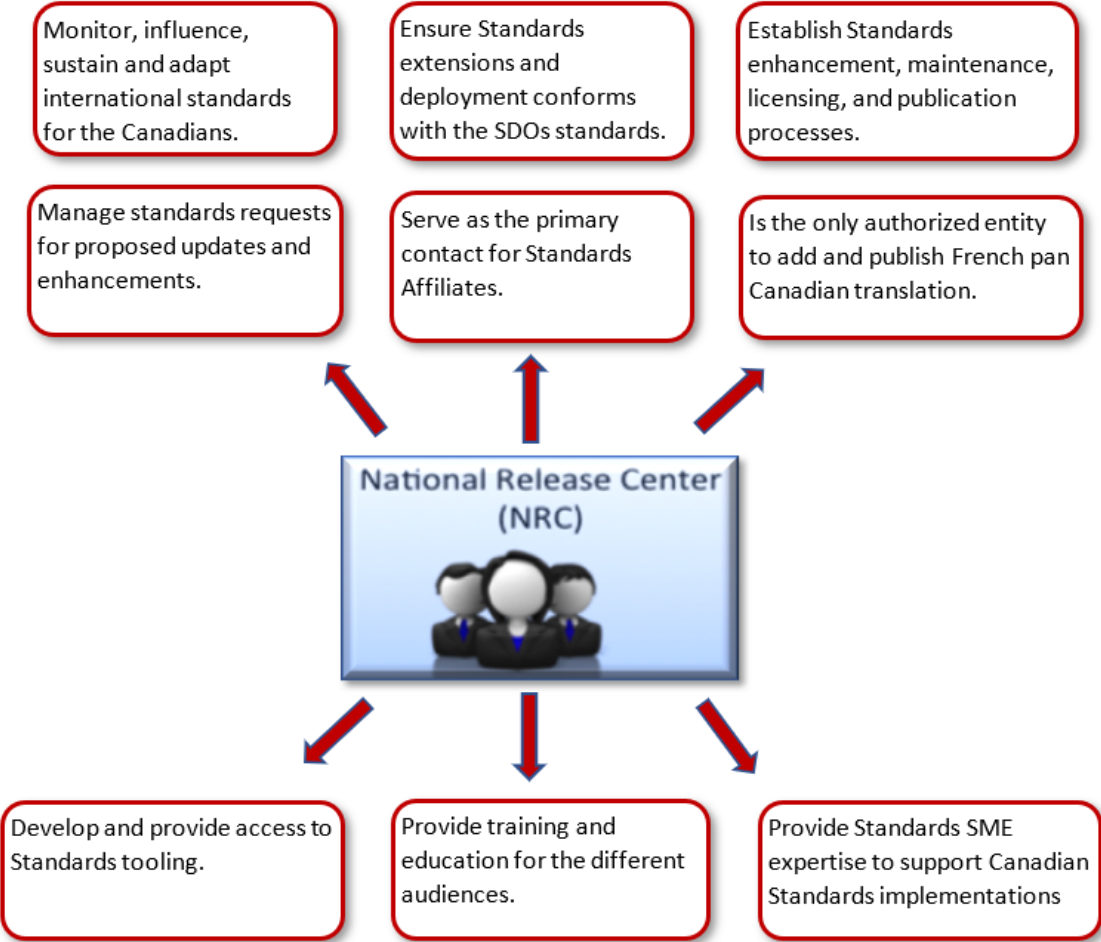
- **Defines the content of health data**, in a standardized way, to capture information about a **person** that is required to provide quality care
- **Provides the data architecture** to create efficiencies for use in building **person-centric digital tools**
- Enables the **building of use-case-driven exchange standards** to move data around, ensuring that the data carries the same meaning across all senders and recipients



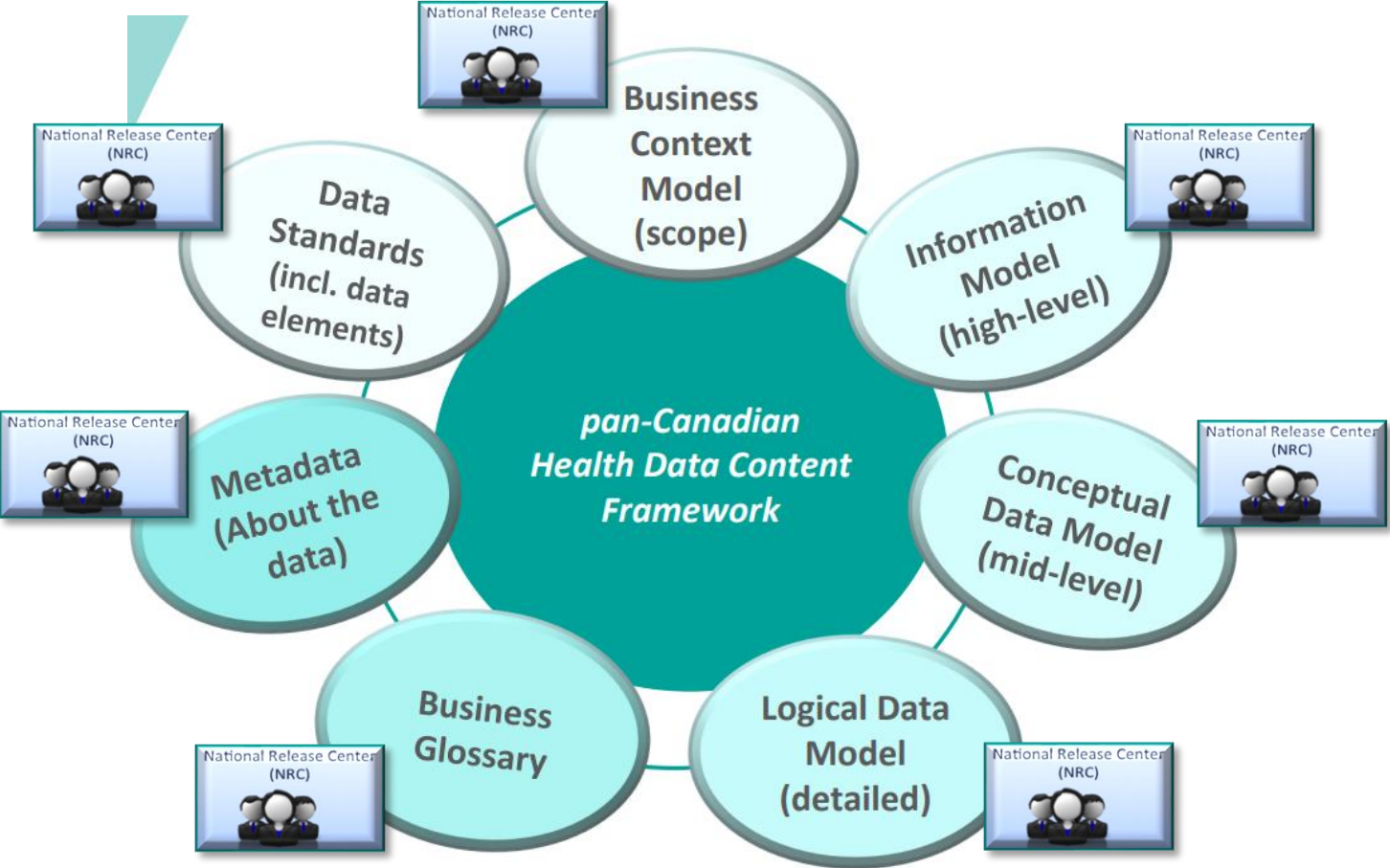
# Infoway Standards National Release Center (NRC)



# One Stop Shop for Accessing the panCanadian Standards, Specifications and Derivatives



# CIHI pCHDCF – Infoway NRC Collaboration



# **PS-CA v1.1.0 DFT**

## **Scope Discussion**



# PS-CA v1.1.0 DFT Proposed In-Scope

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- Proposed In-Scope
  - Change requests from PTs (AB & ON)
  - IPS CI build changes for alignment
  - Addition of the IPS Data Domain Diagnostic Results, including:
    - Laboratory Results (Lab, Pathology, Radiology)
    - Diagnostic Reports

# PS-CA v1.1.0 DFT Proposed In-Scope Details

Change Summary	Change Description	Rationale	Requested by
Introduce alternative to PS-CA Pseudo Resources	Relax section.entry for Condition, Medications, and Allergies sections, re-introduce emptyReason, introduce new invariant, raise issue for correction in IPS	Reduces technical burden of having to convey simple statements about the lack of records for a section as a transient/persistent resource	PS-AB Team
Relax cardinality on section.entries	Relax cardinality on Recommended section.entries to allow for emptyReason or text to be used as a means of conveying the information in limited scenarios, raise issue for correction in IPS	Allows for use of emptyReason, allows for inclusion of notes on sections like procedures even if no resource is available – particularly helpful for manual creation summary workflows	PS-AB Team
Relax cardinality on PS-CA Patient.Gender	Relax Patient.Gender Cardinality to align with IPS CI build and PS-AB needs	Increase alignment with IPS CI Build, required binding on Patient.gender does not capture the administrative terms protected through regulation	PS-AB Team, IPS CI build
Relax cardinality on Condition.clinicalStatus	Relax minimum cardinality on Condition.clinicalStatus, maintain MS flag, include notation of rationale, raise issue for correction in IPS	The Condition.clinicalStatus valueSet required in the base specification does not provide an "unknown" concept resulting in addition burdens that not all participating systems could meet with their legacy data	PS-AB Team
Introduce additionalBinding extension	Replace terminology slices with examples and additionalBinding extension to allow for easier re-profiling from PS-CA	Prior approach of slicing additional structured terminology presented challenges for jurisdiction's re-profiling (some slices N/A), supports better alignment to IPS approach	IPS CI Build
Change in canonical URI for CCDD and HC NPN code system	Update the value set for CCDD and HC NPN to have include statements with the newly recognized code system convention that is preferred in THO	Align to preferred code systems now recognized in terminology.hl7.org: <a href="http://terminology.hl7.org/CodeSystem/hc-CCDD">http://terminology.hl7.org/CodeSystem/hc-CCDD</a> , <a href="http://terminology.hl7.org/CodeSystem/v3-hc-npn">http://terminology.hl7.org/CodeSystem/v3-hc-npn</a> - does not prevent the use of old code system convention	PS-ON Team, Infoway Standards team
Use of CCDD/NPN	Added additional binding to convey CCDD and NPN for medication allergies	Some jurisdictions are using CCDD and NPN to convey medication allergies, additional binding is used until more is known about whether the primary binding should be updated	PS-ON Team

# PS-CA v1.1.0 DFT Proposed In-Scope Details

Change Summary	Change Description	Rationale	Requested by
Correct cardinality on Composition.subject	Correct composition.subject to min of 1 cardinality - technical correction added into IPS	Increase alignment with IPS CI Build, apply technical correction that aligns to existing expectations	PS-ON Team, IPS CI Build
Update guide content to indicate potential mechanisms for future use case consideration	Update the IGuide to include pointers to CA:FeX update with a note around potential use for emerging use cases (on demand generation of document/document references)	Existing guidance should indicate a path forward for emerging pilot use cases (e.g., on demand) to stay in sync with what is being seen in pilots	Infoway Product Team, PS-ON
Introduce new localized profiles for section.entry to align to IPS	Introduce PS-CA localization of IPS Laboratory Results (Lab, Pathology, Radiology) & Diagnostic Reports	Support of jurisdictions using these sections in their limited production release	Infoway Product Team, BC, NL,SK

# PS-CA v1.1.0 DFT Proposed Out of Scope

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- Proposed Out-of-Scope
  - Use cases will remain as-is in PS-CA v1.0.0 TI (new/modified use cases for v2.0.0 DFT)
  - Exchange patterns (CA:FeX, MHD) will remain as-is in PS-CA v1.1.0 TI. However, CA:FeX v2.0.0 DFT will be released with expanded capabilities

- Proposed Scope
  - Introduction of guidance on exchanging single resources using RESTful API
    - CapabilityStatement for Servers – identification of key SearchParameters to harmonize around
  - Expanded guidance on exchanging documents (re-introduction of Operations for Fetching Document References)
    - Introduction of Fetch Document Reference and use of \$docRef to potential pilot needs for on-demand

# Roundtable

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- Please share your thoughts and/or concerns regarding:
  - PS-CA v1.1.0 DFT Scope
  - CA:FeX v2.0.0 DFT Scope



## PSWG Next Steps

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- ❑ Schedule next PSWG meeting. Note that based on our agreed 4-week cadence, this will bump us into January since 4 weeks from now lands us in peak holiday season.
- ❑ According to today's discussions, the PS Product team will complete updates to the PS-CA v1.1.0 DFT content and will enter the content freeze period.



**Canada Health Infoway**

# Thank you!

## Contact Information:

[interoperability@infoway-inforoute.ca](mailto:interoperability@infoway-inforoute.ca)

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[infoway-inforoute.ca](http://infoway-inforoute.ca)

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# Helpful Links

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## Published specifications (available on InfoScribe):

- [PS-CA v1.0.0 TI](#)
- [CA:FeX v1.0.0 TI](#)
- [CA:FeX v2.0.0 DFT](#) (white paper, recorded video, and draft implementation guide)

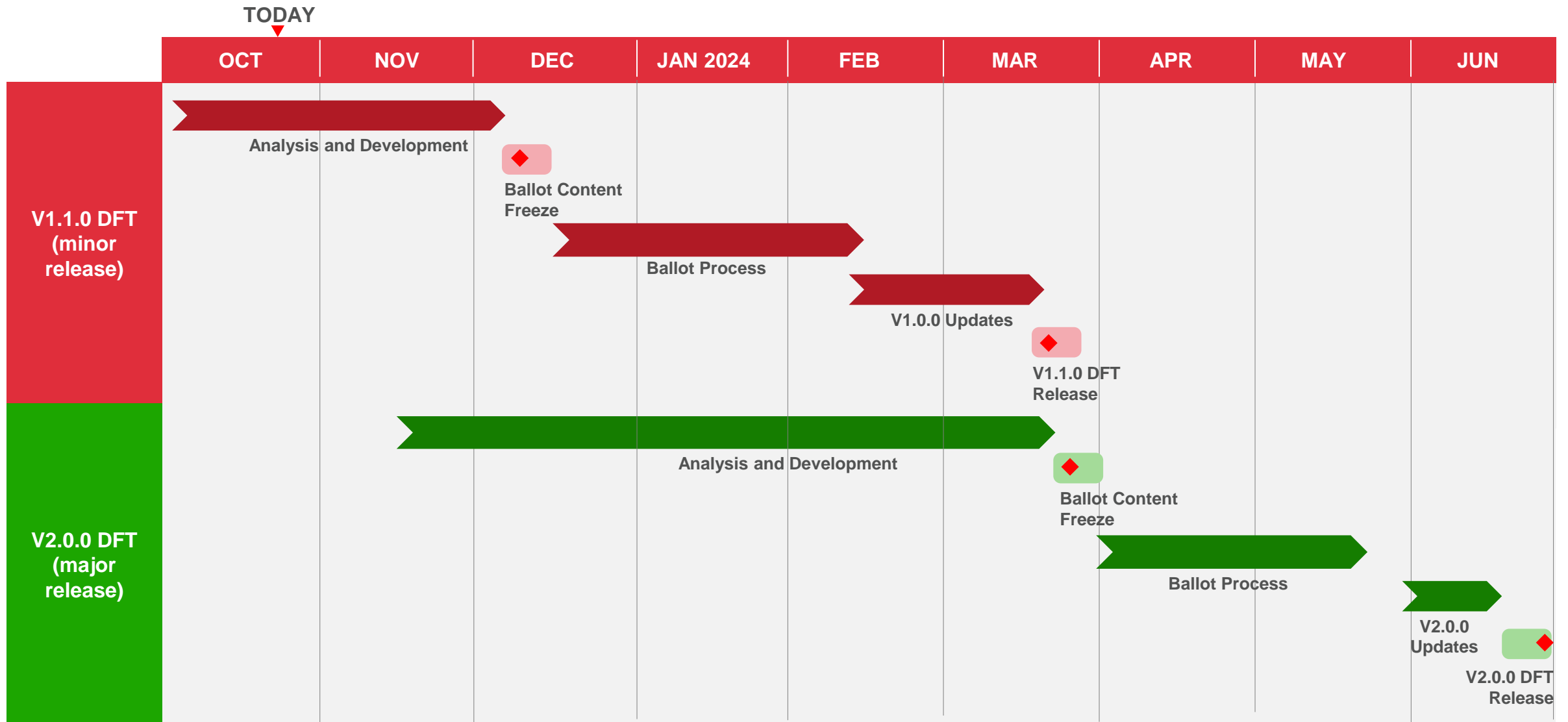
## Working Groups (hosted on InfoCentral):

- [Patient Summary](#)
- [eReferral](#)

## Projectathon Information (available on InfoScribe):

- [Overview of Projectathons](#)
- [2023 Final Report](#)

# Patient Summary High-Level Timeline



# PSWG Objective:

**Collaborate** on the various aspects of creating, distributing, and consuming a health records **summary for a patient** resulting in a **harmonized pan-Canadian specification** that can be implemented across the country to **improve Provider access to Patient data** at the point of care and improve care coordination.

