

The IHE logo consists of the letters 'IHE' in a bold, dark blue, sans-serif font. To the right of the letters is a vertical line, and to the right of the line is the tagline 'Integrating the Healthcare Enterprise' in a smaller, dark blue, sans-serif font.

IHE

Integrating
the Healthcare
Enterprise



International Patient Summary (IPS)

PCC/ITI Update and Call to Action

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23 Feb 2023

International Patient Summary (IPS) Update

Why Me?

- Board member, IHE International
 - Past co-Chair ITI Planning Committee
 - Past co-Chair, IHE IPS Profile development team
- Member, Canada Mirror Committee for ISO/TC215
- past Chair, Joint Initiative Council
- past Vice-Chair, HIMSS North America
- *Currently leading negotiations for IPS governance with the Global Digital Health Partnership (GDHP)*

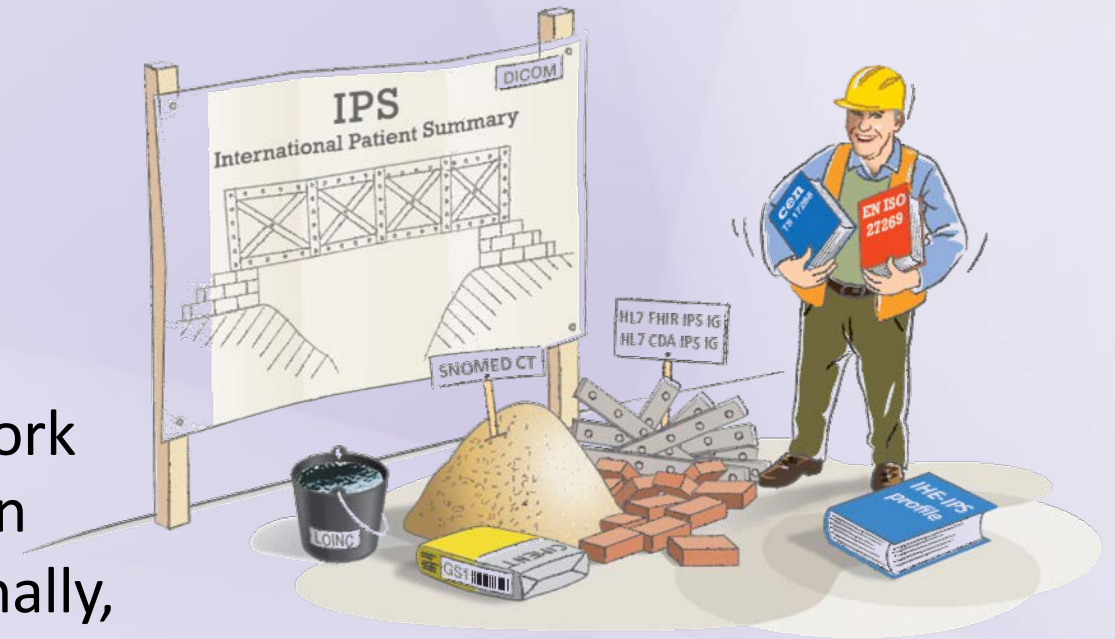


Agenda

1. Background, Terms of Reference, Context
2. Cross-SDO (xSDO) Maintenance/Enhancement Process and Governance
3. Challenge for IHE
4. Discussion
5. Next Steps

Background and Context

- International Patient Summary (IPS) standards have been built through an unprecedented collaboration amongst 5 international digital health standards development organizations (SDO's)
- There exists today a number of IPS standards artefacts that are designed and intended to work together in assisting implementers to create an interoperable IPS infrastructure (locally, nationally, internationally)
- IPS adoption has been given a high priority in many jurisdictions worldwide (eg. G7, G20, EC)



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Background and Context

- 5 SDO's collaborating (so far):
 - HL7, IHE, ISO, SNOMED, CEN
- Artefacts produced:
 - IPS Data Structure/Data Model – EN/ISO 27269
 - IPS FHIR IG – HL7 (update just released)
 - IPS CDA IG – HL7
 - IPS Terminology – SNOMED (recently released)
 - **IPS Profile - IHE**
- Connectathons: HL7 FHIR; IHE; GDHP
- Several Projectathons worldwide
- Collaborative IPS Resources: <http://international-patient-summary.net>



The screenshot shows the homepage of the International Patient Summary (IPS) website. The header includes navigation links for USERS, TOPICS, RESOURCES, COLLABORATION, and CONTACT. The main logo features a globe with a caduceus and the text 'The International Patient Summary key health data, worldwide'. A central banner titled 'Implementations across the Globe' features a background image of hands holding a globe and text describing the IPS as an international asset for cross-border care. Below the banner, a paragraph defines the IPS as a minimal and non-exhaustive set of basic clinical data. A section titled 'About Patient Summaries' explains that a Patient Summary is a standardized set of basic clinical data. To the right of this text is a diagram of a stack of colored blocks representing data categories: Medication, Allergies/Intolerances, Problems, Immunizations, Results, and Procedures. The bottom section, 'Latest on IPS', contains two news items: one about CEN adopting the ISO 27269 standard and another about a hackathon at the German Interoperability Days.

What is the IPS?

- **I**nternational
- **P**atient
- **S**ummary

It emphasizes the need to provide generic solutions for global application beyond a particular region or country.

Health record extract comprising a standardized collection of clinical and contextual information (retrospective, concurrent, prospective) that provides a **snapshot in time of a subject of care's health information and healthcare**

SOURCE: ISO/TR 12773-1:2009 (en) Business requirements for health summary records — Part 1: Requirements]

The Patient Summary journey...



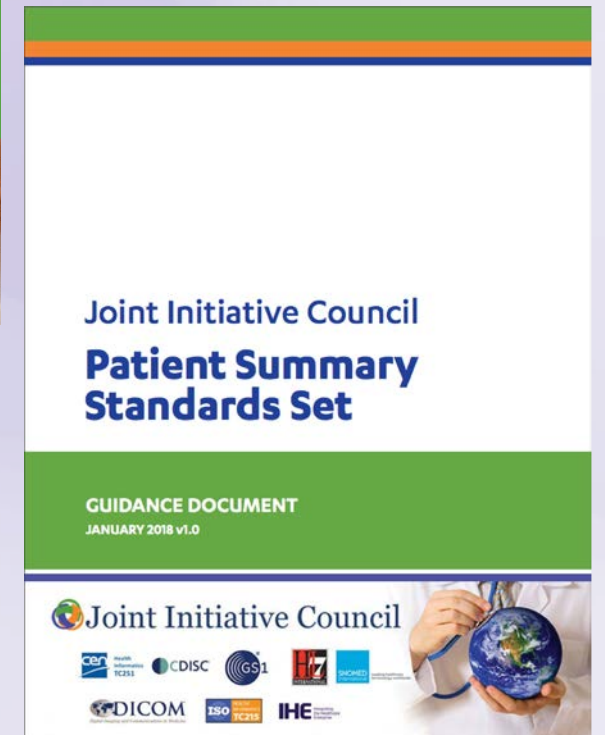
Get to know the  **Joint Initiative Council**

Making high-quality data available to the right people, at the right place and at the right time, for high-quality decisions and care.

Learn about the JIC at jointinitiativecouncil.org

cdisc | cen Health Informatics TC251 | DICOM | GS1 | HL7 International | IHE Integrating The Healthcare Enterprise | ISO HEALTH INFORMATICS TC215 | LOINC from Regenstrief | SNOMED International

IPS
↑
2017-2020

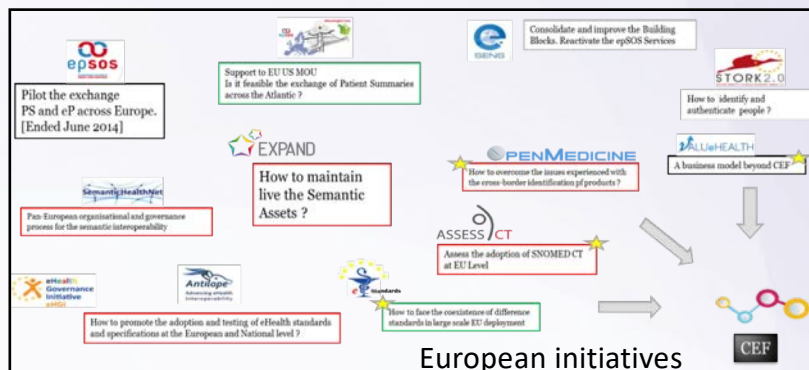


Joint Initiative Council
Patient Summary Standards Set

GUIDANCE DOCUMENT
JANUARY 2018 v1.0

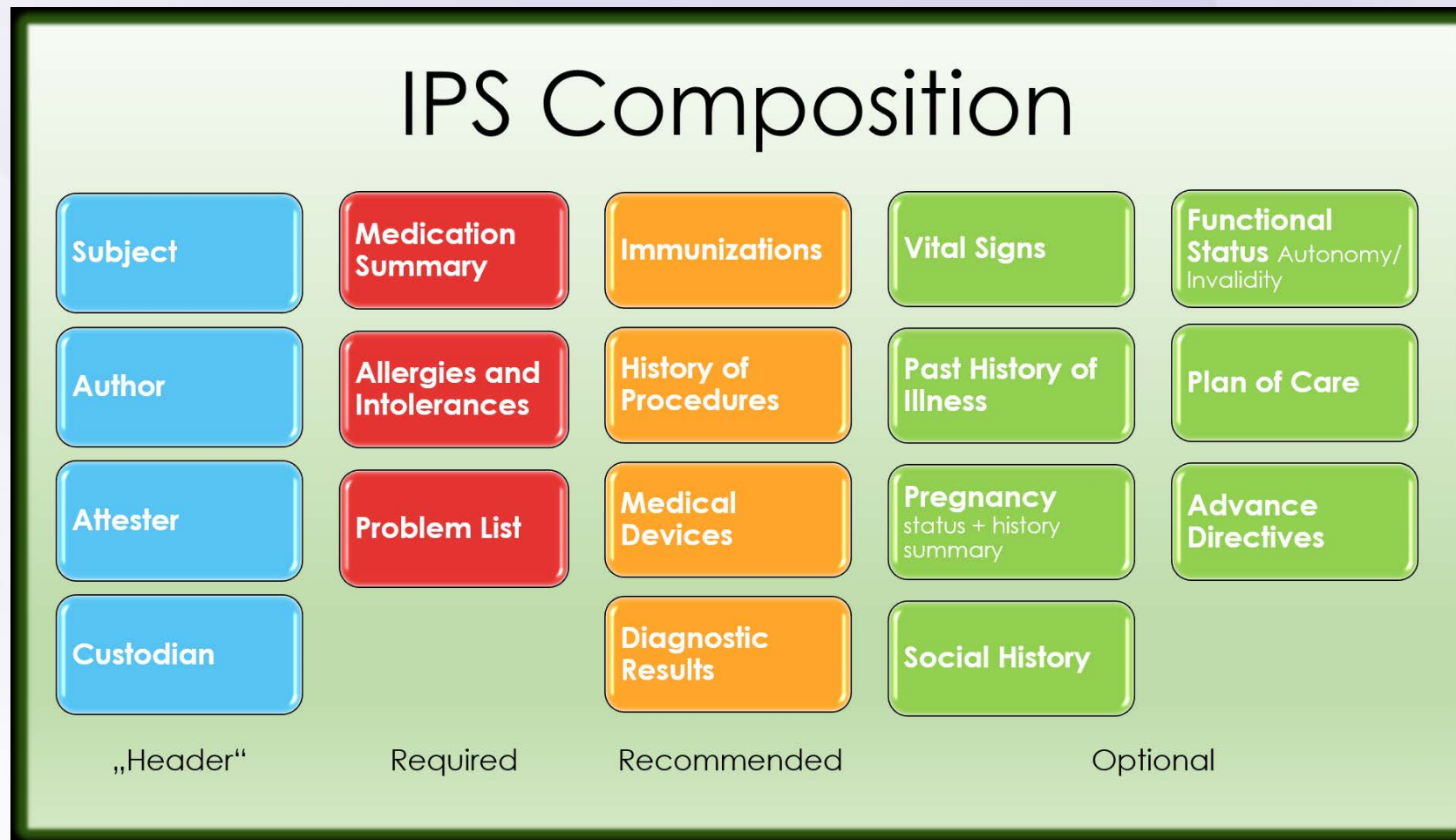
Joint Initiative Council

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International Patient Summary (IPS) Update

IPS Content



The Challenge

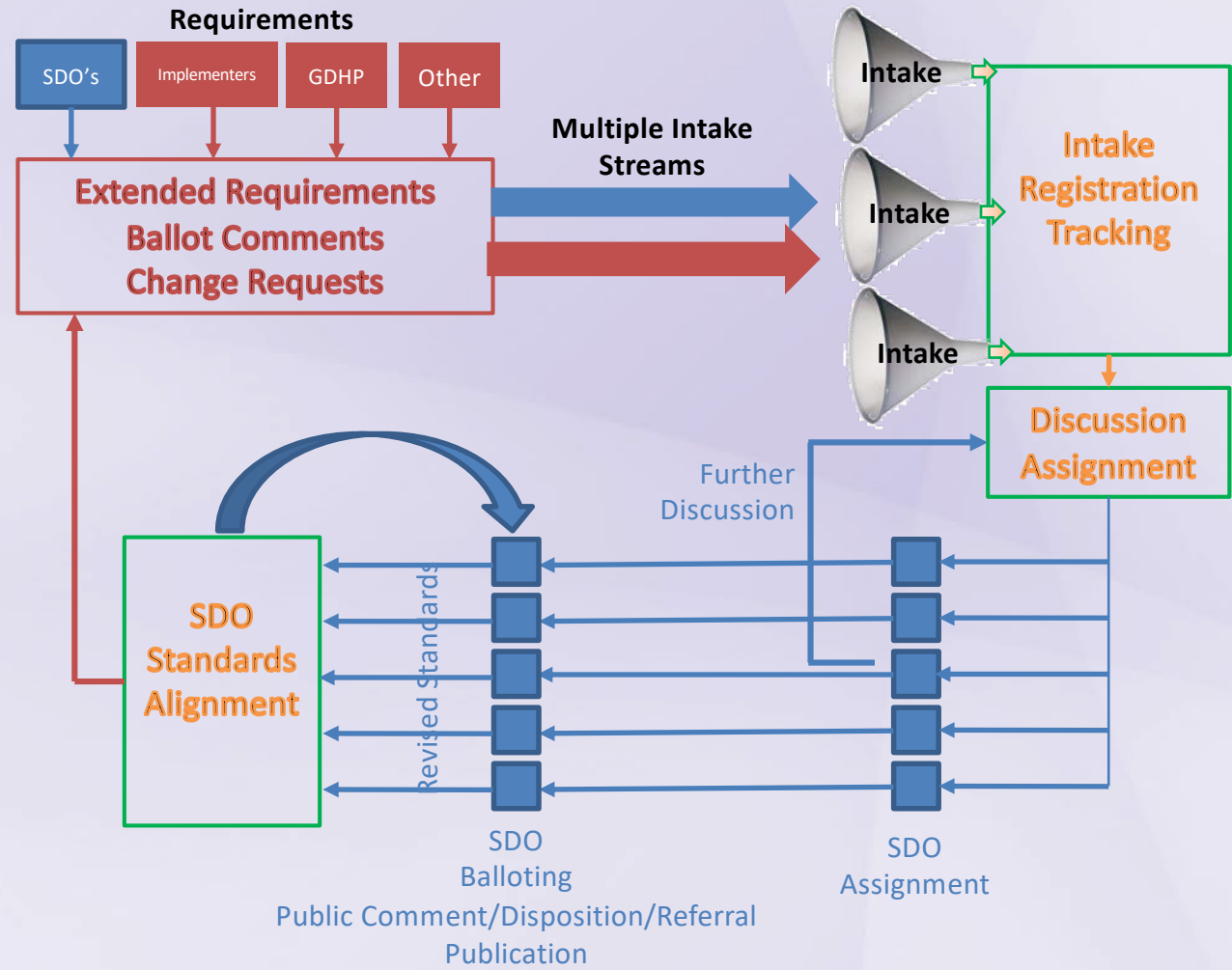
- IPS artefacts are interdependent on one another, and must be kept synchronized
- Updates to one artefact necessitate updates to others
- Correction (as well as new functions and features) to IPS standards are constantly introduced through SDO ballot comments, Connectathons, Projectathons, and global implementation experience
- There is a need for ongoing xSDO triage and coordinated response
- An informal IPS xSDO group has been meeting bi-weekly for the past 2 years... this is being formalized under the JIC*

*<http://jointinitiativecouncil.net>

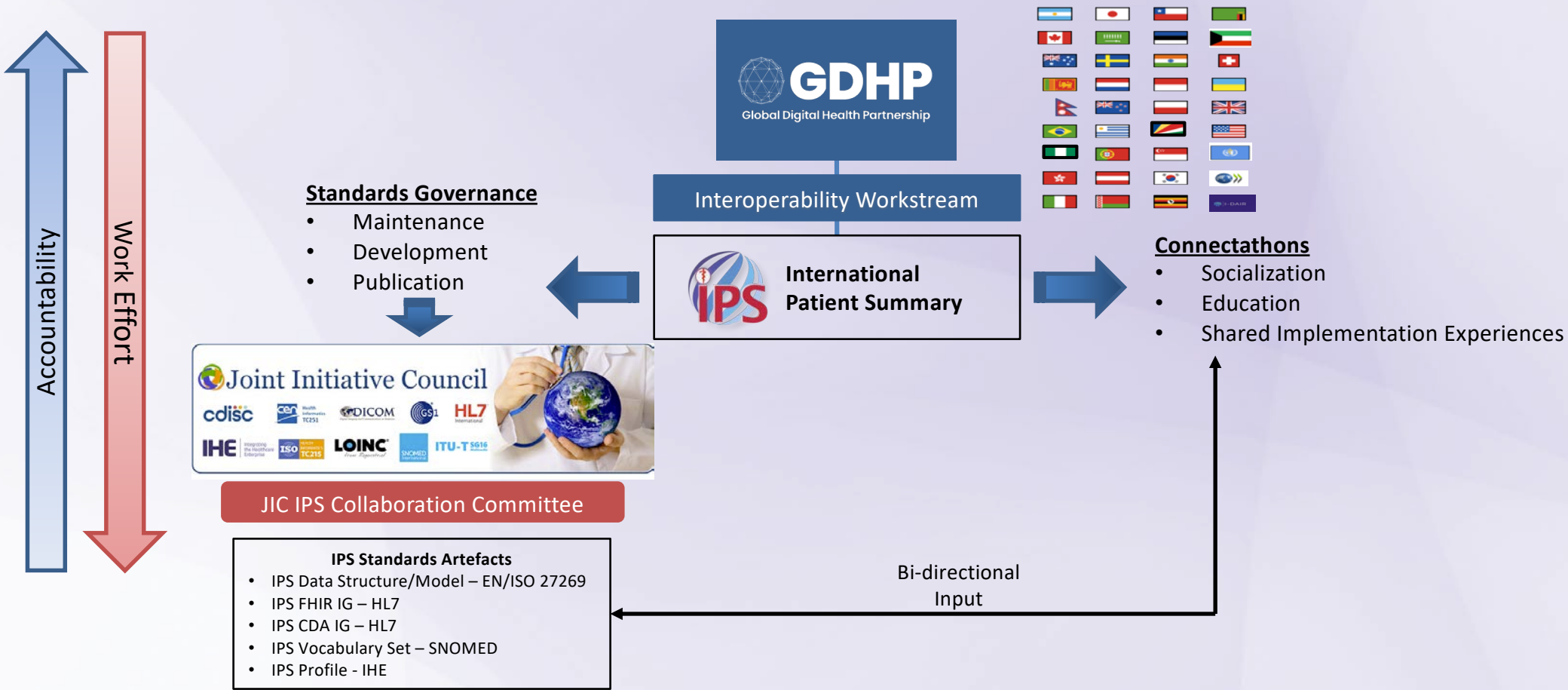
xSDO IPS Standards Maintenance Process

- IPS Standards Artefacts**
- IPS Data Structure/Model – EN/ISO 27269
 - IPS FHIR IG – HL7
 - IPS CDA IG – HL7
 - IPS Vocabulary Set – SNOMED
 - IPS Profile - IHE

Note:
Green boxes represents tasks to be undertaken by a xSDO Coordination Body



IPS Standards Governance Discussion



International Patient Summary (IPS) Update

Challenge for IHE

- The IHE IPS Profile is a content profile – and this profile is already out of synch with recent updates to the HL7 FHIR IG and the SNOMED terminology Set
- The uptake of the IHE IPS Profile has been very low (IHE-NA and IHE-EU Connectathon stats) – why is that?
- Uptake of the HL7 FHIR IG's has been much higher (FHIR Connectathon stats) – why is that?
- Work needs to be done to ensure IHE's contribution to the IPS ecosystem remains relevant – critical to the survival of IHE

IHE Opportunities

- Update the IPS content profile to re-synchronize (PCC)
- Find ways to “bundle” IPS with other profiles (FHIR and non-FHIR) to enable implementable workflows (ITI)
 - “push” vs. “query-response”
 - trigger events – alerts
 - other examples?
- We need to distinguish IHE’s contribution from that of HL7’s IGs
- Use cases:
 - Cross border scheduled and emergency care (any border)
 - Within border scheduled and emergency care

Discussion

- What ideas can we bring to the table?
- What resources can we bring to the table?
- What work can be done (short-term and long-term)?

Next Steps

1. ...
2. ...
3. ...



Thank you

For further information:

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