

Report From San Antonio Meeting

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Report from San Antonio

- INM Out of cycle meeting
- MNM Dynamic Model
- UML ITS R2
- SOA / IHE

INM Out of Cycle meeting

Out of Cycle Meeting:

...deal with scope questions relating the concept of interactions, transmissions, transports, and SOA and how HL7's approach relates to the external world

#1: SOA represents a paradigm shift, SOA SIG should develop the SOA paradigm, do not need to use existing message constructs

#2: INM should investigate increased reliance on SLAs or contracts and policies instead of globally interoperable messages

MnM Dynamic Model

- Drop the current interactionId based approach
- Replace with an approach focused on choreography using UML Sequence diagrams
- Needs new wrappers, but is much more expressive

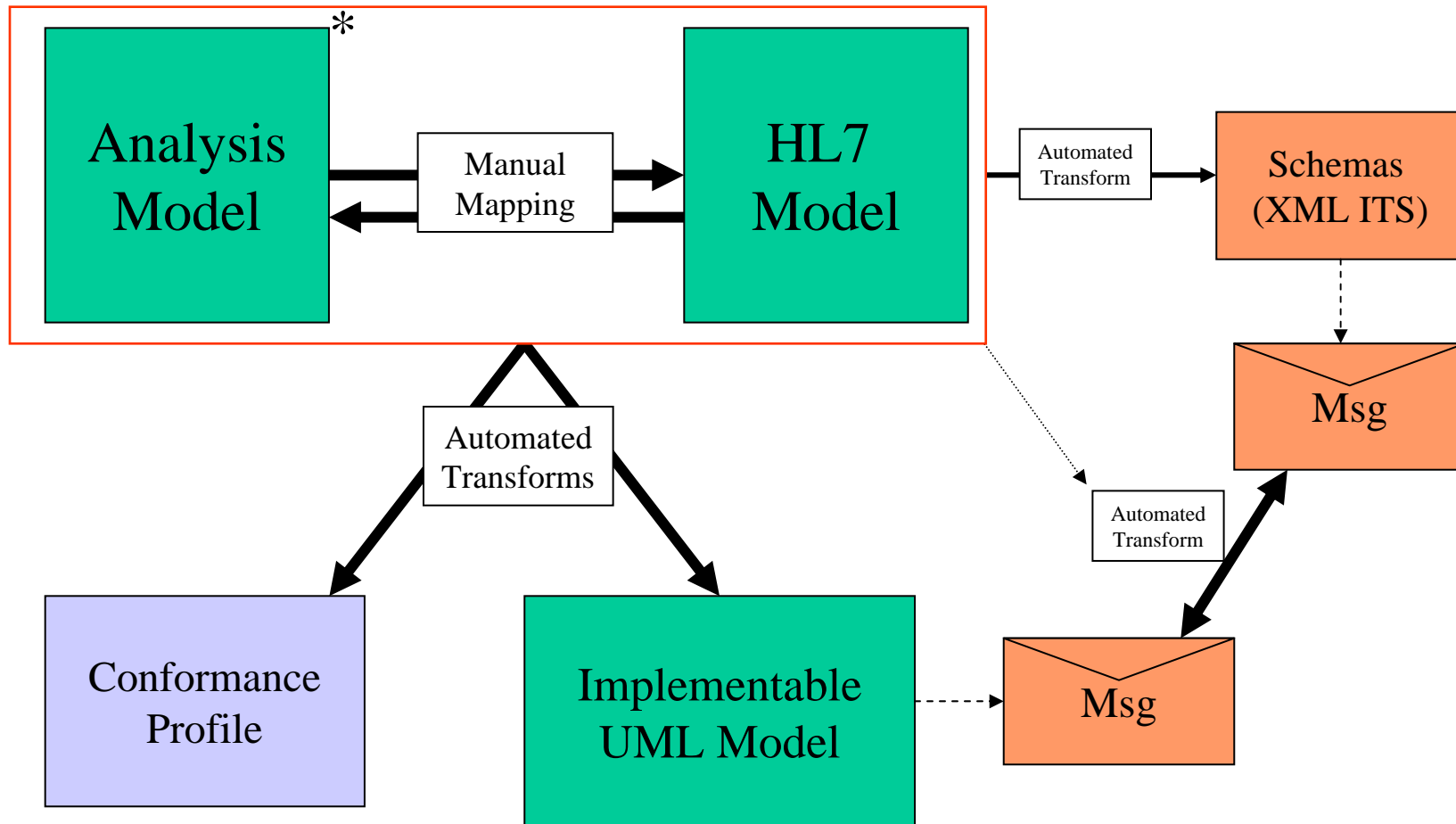
UML ITS

NHS is using V3 in production.

Some issues have emerged:

- Higher instance / other data ratio
- Less complex message structure
- Messages that work with off the shelf tools
- More consistent wire format (patient safety and transformation costs)

UML ITS R2



UML ITS R2

```
<Response xmlns="urn:hl7-org:v3/uml/nhs" xmlns:xsi="http://www.w3.org/2001/XMLSchema-
instance" xsi:schemaLocation="urn:hl7-org:v3/uml/nhs/xxx" NHSNumber="123123"
SensitivityIndicator="0" DateOfBirth="19920321" SerialChangeNumber="4">
- <Name>
  <use value="legal" />
  <part type="givenname" value="Donald" />
  <part type="initial" value="B" />
  <part type="familyname" value="Duck" />
</Name>
- <Address>
  <use value="home" />
  <part type="addressLine" value="23 Mickey Mouse St" />
  <part type="addressLine" value="HumperDick" />
  <part type="postalCode" value="2345D" />
  <part type="PAFKey" value="1252234" />
</Address>
- <Consent Value="Yes" ChangeDate="20040301">
  <comments lang="en">This is some comments</comments>
</Consent>
<CareProvider type="GP" ProviderCode="23234234" BusinessEffectiveDate="20030101" />
</Response>
```

```
- <PdsNhsNumberConfirmation classCode="OBS" moodCode="EVN" xmlns="urn:hl7-org:v3"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance" xsi:schemaLocation="urn:hl7-
org:v3/schemas/xxx">
- <subject typeCode="SBJ">
- <patientRole classCode="PAT">
  <id root="2.16.840.1.113883.2.1.4.1" extension="123123" />
  - <addr use="H">
    <streetAddressLine>23 Mickey Mouse St</streetAddressLine>
    <streetAddressLine>HumperDick</streetAddressLine>
    <postalCode>2345D</postalCode>
    <addressKey>1252234</addressKey>
  </addr>
  - <patientPerson classCode="PSN" determinerCode="INSTANCE">
    - <name use="L">
      <given>Donald</given>
      <given>B</given>
      <family>Duck</family>
    </name>
    <birthTime value="19920321" />
  - <playedOtherProviderPatient classCode="PAT">
    - <subjectOf typeCode="SBJ">
      - <patientCareProvision classCode="PCPR" moodCode="EVN">
        <code code="1" codeSystem="2.16.840.1.113883.2.1.3.2.4.17.37" />
        - <effectiveTime>
          <center value="20030101" />
        </effectiveTime>
        - <responsibleParty typeCode="RESP">
          - <healthCareProvider classCode="PROV">
            <id root="2.16.840.1.113883.2.1.4.3" extension="23234234" />
            <healthCareProvider>
              </responsibleParty>
            </healthCareProvider>
          </patientCareProvision>
        </subjectOf>
      </playedOtherProviderPatient>
    </patientPerson>
  - <subjectOf1 typeCode="SBJ">
    - <consent classCode="OBS" moodCode="EVN">
      <code code="4" codeSystem="2.16.840.1.113883.2.1.3.2.4.16.2" />
      <effectiveTime value="20040301" />
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    - <pertinentInformation>
      - <pertinentSupplementaryComments>
        <code code="4" codeSystem="2.16.840.1.113883.2.1.3.2.4.16.2" />
        <value>This is some comments</value>
      </pertinentSupplementaryComments>
    </pertinentInformation>
  </consent>
</subjectOf1>
</patientRole>
</subject>
- <pertinentInformation typeCode="PERT">
- <pertinentSerialChangeNumber classCode="OBS" moodCode="EVN">
  <code code="2" codeSystem="2.16.840.1.113883.2.1.3.2.4.17.35" />
  <value value="4" />
</pertinentSerialChangeNumber>
</pertinentInformation>
</PdsNhsNumberConfirmation>
```

UML ITS R2

- Board recommended that NHS further investigate the approach and prepare more detailed proposals
- INM recommended that NHS further investigate and prepare draft standards, and to consider proposing the UML ITS as ITS R2

IHE & SOA

- IHE considers that it's actors and transactions constitute “services”
- SOA / HSSP is developing service specifications
- There is concern amongst industry and standards that HL7 & SOA will not collaborate and produce incompatible specifications

IHE & SOA

We recommend the following working principles to the SOA Sig, and ask them to work with IHE to jointly develop and then endorse the resulting principles.

Draft Working Principles

- 1) The HSSP BoilerPlate for SFMs should include the IHE work as relevant domain work, with strong references. Someone from IHE should be a point of contact for the HSSP group to verify and clarify the IHE_to_SFMs relationship.
- 2) Within the OMG, HSSP should include IHE representatives to understand the methodology and the ramifications of the OMG RFP (or RFC) process
- 3) Establish functional profiles in the SFM as constraints to the HSSP standards that provide foundation and support for the IHE work (eg, an HL7 Structured Document Retrieval profile in the SFM that would support an IHE XDS response to an OMG RFP)
- 4) HSSP and IHE need to cross-pollinate meetings. This is not only about the meeting location and frequency, but also attempting to highlight for each other the normative and the informative meetings.
- 5) In summation of all of the above and as part of the normal HSSP Structured Development Cycle, HSSP should explicitly seek to engage in peer reviews with the IHE community. We should explore the viability of the HSSP peer reviewing and otherwise becoming engaged in the IHE Development Cycle.