

Introduction to HL7

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Topics

- HL7.org and HL7UK
- Products
 - Community
 - Specifications
 - Process
- The Future

HL7.org and HL7UK

- Membership organisations
- Both aim to provide standards that support Clinical Information Interoperability
- Collaboration creates more value than working alone
- HL7UK does this in a UK context

HL7 Products

- Community
- Specifications
 - V2 (Messaging)
 - V3
 - Framework
 - Messaging
 - Documents (CDA)
 - Services
 - Rules
 - Other
- Processes
 - For developing and using specifications

Community – Why?

- Limited number of people in the field
- “Safe” meeting place outside contractual roles
- Specifications need active maintenance and interpretation

Community - Organisation

- Technical Committees
- Special Interest Groups

- HL7.org, and the affiliates

- ANSI, ISO, CEN, IHE, OMG, W3C, ...

Community – HL7.org Meetings

- Working Group Meetings
 - Three meetings a year, 400+ attendees
 - Committee work and tutorials
- Harmonisation
 - Three times a year, 20 attendees
- Wiki and collaboration tooling
- Conference calls
- Mailing lists

Community – HL7UK

- Working Meetings
 - 5 times a year, 2 days long, 20-80 attendees
 - Other focused meetings as needed
- Actively maintained website
- Wiki, conference calls, mailing lists

Community - Ballots

- Central and Affiliate
- Informative, DSTU, Normative
- Joining ballot pools, and meaning of votes
- Resolution of negatives

Specifications - HL7v2

- Group of medium-sized suppliers and providers wanting to overcome/avoid supplier lock-in
- Quick pragmatic specifications
- Low hanging fruit
 - What is useful
 - What is possible
- Momentum attracted others

Specifications - HL7v3 – Why?

- Model-based development framework
- Representation of complex relationships
- Expanded scope to include community medicine, epidemiology, veterinary, clinical genomics, security, etc.

Specifications - HL7v3 - Now

- Wide sharing of healthcare data is hard
- Technical and clinical consensus needed
- Richer structures are useful
- Clinical Statement model pivotal
- Incremental implementation works

Specifications - CDA

- Evolved from KONA group, creating a roadmap for Clinical Documents using XML
- Converged to use HL7v3 model
- 80/20 functional sweet-spot for implementation
- Stable release schedule (3-5 years)
- Evolve towards detailed information reuse

Specifications - summary

- Messages
 - Tightly defined and stable interactions
 - System-System communication
- Documents
 - Generic structures
 - Human-Human communication
 - System-System communication (as well)
- Services
 - More than just data
 - New work in process

Process – Full lifecycle

- Community always there
- Supported by tools, documents and established practice
- Evolving to become more transparent and clearly documented
- Evolving a “toolkit” to localise specifications

Process - Convergence

- In the IHE Laboratory profile CDA and V3 Messaging use same structures
- This will happen across domains and technologies within HL7
- Convergence across standards
 - HL7 dynamic model and WS-I web services
 - HL7 and CEN converge on ISO datatypes
 - CEN 13606 and HL7 converge with clinical statement-equivalent reference archetypes

The Future

- Community remains vital
 - Join HL7UK
 - Tell HL7UK what you want
 - Its membership want to collaborate
- Low hanging fruit
 - What is useful
 - What is possible
- More will be possible in time, as long as we continue to share lessons learnt

HL7

Community
Specifications
Process

Many thanks

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