# IMIA's Working Groups and Special Interest Groups

## Assessing Information Technologies for Health

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Health informatics is facing its greatest challenge. Information technologies need to be employed optimally such that we are better able to respond to an increasing demand for health services, accommodate more expensive medical technologies, meet the health needs of an ageing population with a dwindling health workforce capacity.

Over the next 20 years our national health systems will have to treat proportionately more people, with more illness, higher expectations, and more expensive technologies, but using relatively less money and fewer workers. Given that commentators today are alarmed at the present strains on the health system, we have to assume that by 2020, the healthcare system in most nations will thus either have somehow substantially transformed, or failed. Information, knowledge management and communication technologies are crucial enablers of system change. If healthcare systems are to flourish in the coming setting of uncertain resources and increased demand, then they will have done so because we have explicitly designed and implemented new health information technologies that deliver the desired benefits so that health systems are fundamentally sustainable. The vital question we face therefore is what form of health system can we envisage which is sustainable in the long run, and how do we set about building it?

We know that semantic system interoperability is vital but one of the most difficult problems to overcome. Yet we need to be able to make all current and relevant health information available anytime anywhere to support better informed decision making by all concerned. We need to ensure that the risk for adverse events is minimised. All health services need to be provided in a cost effective manner and be based on best available evidence of practice at all times. This can only be achieved through the appropriate use of information technologies. It is about health care providers and their patients using telecommunication infrastructures, computer hardware and software to store, retrieve, share and use health care information, data and knowledge for communication and decision making purposes in all healthcare settings and via remote access.

We have a window of opportunity to use these technologies to improve health literacy, integrate telehealth with health informatics and adopt a sound national e-health framework enabling the entire population to make the best possible use of these technologies. This requires us to evaluate and assess if their adoption is making a significant contribution resulting in the desired outcomes. We need to be able to demonstrate a return on investment. This is where the assessment of information technologies in use can make a very significant contribution by identifying and demonstrating their value. In addition such assessments need to be able to identify how to best implement and make the best possible use of these technologies in many different health care environments. We need to learn from our past failures and successes so that we don't repeat adverse aspects of our past or reinvent the wheel. We need to recognise that health systems in general reflect national political philosophies. Results of information technology assessment also need to be viewed within that context as some failures can be directly attributable to the way the health system is organised from a commercial or business perspective. Good use of information technologies is not the only variable to be considered, people, organisations and national infrastructures are significant contributors to current or future health system failure or success.

The next World Congress on Health (Medical) Informatics to be held in Brisbane, Australia in August 2007 provides a focus on system sustainability. Learn about patient/consumer empowerment through health literacy, multidisciplinary teamwork, health provider collaboration, changing roles and boundaries of practice, national collection and dissemination of evidence of safe and best practice and the adoption of standardised treatment protocols through user friendly health information, decision support, knowledge and resource management systems at this event. The papers in this yearbook serve as a valuable pre-cursor.

Many of IMIA's very active working groups and its special interest group continue to make valuable contributions in support of IMIA's purpose, goals and objectives. It is with great pleasure that I present you with their reports.

# Nursing Informatics (Special Interest Group 1)

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IMIA Special Interest Group on Nursing Informatics (IMIA-NI) provides a key forum for promoting nursing informatics worldwide. Its aims are promoted through the work of its members, their local activities and through its world congress held every three years and its working groups. The next nursing informatics world congress - NI 2006 will be held on June 11-14 2006 in the COEX convention centre in Seoul Korea. Further information can be found on their website http://www.ni2006.org Preparations are underway for NI 2009, which will be held in Finland.

An IMIA-NI strategy was ratified at the General Assembly held in Geneva 2005. This emphasises IMIA-NI's principles of leadership, patient and public focus, ethical approach, innovation and evidence base. It outlines how this will be achieved through it focus on the 3 P's, the past, the profession and the possibilities. It outlines who will achieve this including its officers, national members, working group chairs and honorary members. The new bylaws outline a new look executive committee, with a chair and a number of vice chairs with specific roles, which will better support IMIA-NI's ability to deliver its aims and objectives to suit a more extensive network and membership and to support a more open and democratic executive committee.

## NI Working Groups

The 8 IMIA-NI Working groups continue to focus on a range of activities. Topics include Consumer Health Informatics, Education, Evidence Based Practice, IMIA-NI History, Nursing Informatics Management, Nursing Concept Representation, Standards, and Open Source Software Working Group. A new working group on Process Driven Implementation Strategies will be formally proposed at the next General Assembly in September 2005.

The Nursing Informatics Management Group (NIM) seeks to promote Nursing Informatics to and among Nurse Managers. Its work is directed to the Nursing Informatics Community and to the Nursing Management Community. Therefore its goals include reaching out to the nursing service and the nursing leadership to promote awareness of nursing informatics management needs regarding information content, organizational issues and technological advances and to share knowledge and insight, to the opportunities of nursing informatics that will advance the profession

The Open Source Nursing Informatics Working Group (OSNI) continues to be active in conference presentations and through its website. They are continuing to expand the scope and content of the webpages (see http://www.osni.info) and to encourage members to provide news items, other content, and to participate in the discussion forums. Members have contributed a chapter on open source to the new version of the Saba and McCormick textbook.

The Consumer Health Informatics Group is exploring the possibility of a survey that will determine consumers' perception of health information that they have which may contribute to consumer health care providers interactions that improve the health or care of the client and the relationship with the provider. All working groups and country members will be reporting on their range of activities at the next general assembly and their reports will be available on the groups website.

## Objectives:

This WG is primary oriented to methodology. It aims to promote applications in medicine and biology focusing on methods of pattern recognition and interpretation. This WG addresses a large variety of different problems in all kinds of clinical disciplines, environmental medicine, behavioural sciences and psychology. All kind of observable phenomena recorded as signals, images and other meaningful patterns are regarded in respect to diagnoses, therapy planning, surgery and modelling. Four different steps are always involved in these complex procedures:

- data acquisition of biosignals and medical images,
- digital data processing for deriving significant features,
- classification, and
- interpretation.

According to this broad spectrum of different tasks, technology and methodology have to be optimally adopted to a specific problem solution. Multidimensional statistical methods as well as heuristics are used for feature extraction and for classification procedures. However, in order to develop useful systems and strategies for clinical routines, and to derive validated models for interpretation purposes a comprehensive medical knowledge is as important as methodological skills. The group is extending the biosignal processing application area to image processing and related subjects. Computer assisted planning and performance of surgical operations and navigation show an increasing importance for current clinical routine. Presently, since this field is not covered by an independent working group, this WG will champion these activities as well.

The approved practice of organizing working conferences with peer reviewed proceedings under the patronage of IMIA and IFMBE on special current topics is being maintained. These activities provide an ideal forum for discussion and planning of collaborations between interested experts worldwide. Furthermore, it offers opportunities to young colleagues to get in touch informally with experts and leaders of their fields. This working group is keen to organise joint sessions for International and European conferences like IEEE EMB, IEEE SPIE, MEDICON, EMBEC which provide many themes belonging also in the field of Medical Informatics. Particularly, the pattern recognition community has a great overlap with colleagues of Biomedical Engineering and Medical Informatics Societies. The group has identified the possibility of interesting collaborations with Biomedical Statistics and Information Processing (WG12), Intelligent Data Analysis and Data Mining (WG03), Technology Assessment & Quality Development in Health Informatics (WG15) Telematics in Health Care (WG18). Overlaps with other groups are not really obvious.

# Biomedical Pattern Recognition (WG 7)

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# Biomedical Statistics and Information Processing (WG12)

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# Consumer Health Informatics (WG 2)

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## Objectives:

Statistical methodology plays a great role in many tasks of information processing. It contributes to both biomedical research and healthcare applications. There is no possibility of critically analyzing papers in biomedical journals without understanding principles of statistics.

Papers published in reviewed journals should guarantee both a scientific quality and practical significance of published results. However, we can often find wrong statistical analyses of collected data that lead to misleading conclusions. It is clear that often we need to generalize findings received only from samples drawn from populations under consideration. In this case statistical inductive reasoning makes it possible to calculate the degree of confidence of generalized conclusions objectively. Therefore, statistical methodology concerns itself with different aspects of data collecting (sampling methods) and data processing (computational statistics) using statistical tools for estimation of unknown population parameters and hypotheses testing. Statistical methods are often used in a broad field of biomedical applications, e.g. clinics, epidemiology, genetics, pharmacology, and other areas of healthcare. The Working Group will focus on a broad scope of statistical methods in medicine and health care including their contribution to the topics of clinical trials, meta-analysis, data mining, and decision support.

The WG members have been active in the past in different conferences and workshops connected with statistics in biomedicine and healthcare. Every two years, workshops on Statistics in clinics have been organized at the Institute of Biocybernetics and Biomedical Engineering and the Polish Academy of Sciences. These workshops combine education and research in the field of clinical statistics. The working group seeks to organize sessions at these conferences, as well as in the future MIE, IMIA conferences. It intends to establish closer co-operation in this field with IMIA member countries as well as with international societies and other bodies in the field of biomedical and health statistics, e.g. Biometric Society, International Society for Clinical Biostatistics, and International Society for System Science in Health Care. The membership of the IMIA WG 12 is open to all interested in more active contributions to the field of biomedical statistics and information processing.

## Objectives:

- To provide a forum to enhance collaboration, share experiences, and promote research in Consumer Health Informatics (CHI.)
- To increase communication with other working groups at IMIA and other informatics organizations relevant to CHI.
- To establish itself as a group for funding agencies to consult on issues related to information technology projects in health care.

The CHIWG is concerned with electronic information related to health care available to the public (e.g. Internet, wireless, standalone electronic media). For its purposes, it defines Consumer Health Informatics as "the use of modern computers and telecommunications to support consumers in obtaining information, analyzing unique health care needs and helping them make decisions about their own health" (U.S. General Accounting Office, 1996, p.1.), in which the consumer interacts with the applications directly with or without the presence of health care professionals. The group's interests focus on, but are not limited to, world wide web sites that offer advice about healthy living, research findings, and recommendations on specific disease conditions, descriptions of products, medications, and self-care health programs available to the public. Issues of concern may be the evaluation of the quality of information, education of the public, ethical issues related to electronic information and its effect on a person's health care and relationship with health care providers.

## Objectives:

To bring the small, but rapidly growing, community of dental informaticians around the world into closer contact.

## Future Activities:

- Improve access to information of dental informatics through IMIA WG 11 home page.
- Possible joint work with AMIA Dental Informatics group on "Dental Informatics Online Community" project at the grant approval.

## Objectives:

- To find out how health care informatics could improve live conditions in developing regions and implement programs in that direction.
- Organization of forums to exchange of experiences of colleagues working in the field of health informatics.
- Making a list of the needs and resources in medical informatics for each country.
- Organization of educational activities in developing regions, especially through the implementation of professors' exchange.
- Organizing workshops and seminars with international experts participation

The WG Web Page provides information about activities, publications, how to join the WG Health Informatics for Development and links to related web sites URL: www.mifound.org/WG9. There is a Mailing List to facilitate communication between members and all professionals interested in IMIA-Health Informatics for Development goals in English and in Spanish. To subscribe, send a message to: IMIA-WG9@pccorreo.com.ar. Subject: Subscribe. Body: name last name e-mail contact data. Related Mailing Lists: HELINA-List: HELINA-L@uku.fi  Contact: Mikko Korpela; International Network for the Availability of Scientific Publications: INASP_Health@compuserve.com   Contact: Neil Pakenham-Walsh; SUPERCOURSE: super3+@pitt.edu   Contact: Ron Laporte ; WG94 : 'wg94-l@uku.fi'

A recent workshop in Geneva during the EFMI MIE2005 congress consisting of short cameo presentations about health informatics (HI) from different perspectives in different countries was followed by an exploration of the key issues. This experience prompted Jean Roberts, George Mihalas, along with Lacri Stoicu-Tivadar of EFMI to undertake a survey looking at issues of exchanging health informatics experiences between those in developed countries and in those countries in transition. The group has a watching brief and provides input when appropriate to the HIFnet forum (note name change as its arrangement with WHO has altered) and close collaboration and an action program with EFMI MICIT Working Group (Medical Informatics in Countries In Transition) as well as with IMIA-LAC (Latin America), the African Region (HELINA) and APAMI (Asian Pacific Association of Medical Informatics).

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### Objectives:

- To provide a forum for collaboration among members and to promote systematic development and research in the field of health information systems.
- To identify and assess problems and success factors of health information systems and to provide intensive feedback between the scientific community, healthcare professionals, and the health IT industry. This implies a "horizontal" orientation with close contact to other working groups.

An IMIA HIS working conference will be hosted by the Portuguese Institute for National administration (INA), an institutional member of IMIA (www.ina.pt) on July 2-4 2006 at a very beautiful palace outside of Lisbon – the palace of the famous Marquês de Pombal. The conference is an IMIA WG HIS conference in cooperation with IMIA WG Telematics in Health Care. The conference organizing committee will be chaired by Luis Lapao (Luis.Lapao@ina.pt), the theme is based on the following topic:

Expanding the Scope of Health Information Systems from Hospitals to Regional Networks, to National Infrastructures, and Beyond

### Objectives:

- To disseminate and exchange information on Health and Medical Informatics (HMI) programs and courses.
- To promote the IMIA HMI database on programs and courses on HMI education.
- To produce international recommendations on HMI programs and courses.
- To support HMI courses and exchange of students and teachers.
- To advance the knowledge of: (1) how informatics is taught in the education of health care professionals around the world, (2) how in particular health and medical informatics is taught to students of computer science/informatics, and (3) how it is taught within dedicated curricula in health and medical informatics

This group has developed and published IMIA's recommendations on Education in Health and Medical Informatics and a book which identifies issues associated with the globalization of health informatics education. [refer IMIA endorsed documents and its list of publications for further details.] These recommendations have now been translated into Spanish, Chinese, Italian, Turkish, Czech and Japanese. Anyone undertaking further translations must (1) formally seek permission from Schattauer, the publisher of the recommendations, (2) notify Dr Reinhold Haux at (r.haux@mi.tu-bs.de) and (3) forward the URL to Dr. John Mantas so that a link can be established on the WG 1 website. The IMIA HMI Education has a mailing list and anyone interested is able to join this list via the IMIA webpages accessible via the IMIA homepage at http://www.imia.org

## Objectives:

Opportunities arise within the discipline of biomedical informatics to facilitate the advancement of genomic medicine. To effectively link the genotype and phenotype a bi-directional flow of data, tools and methods between two traditionally separate areas of informatics (clinical informatics and bioinformatics) must be ensured. These interests include, but are not limited to:

- Integrating genomics and genomic information (genetic testing, mutation analysis, gene and protein expression) into health information systems and tools (electronic health records, computerised protocols and clinical guidelines, clinical trials in the context of pharmacogenetics, molecular imaging).
- Generating structured, standardised, anonymous clinical data sets (phenomic data) to be used in the context of post-genomic research (annotation and validation of experimental results)
- Facilitating new approaches for the integration and analysis of different levels of information (molecular, cellular, tissue, patient, population) about diseases (grid, biobanks, disease modelling and simulation, mapping of clinical and genetic databases and ontologies).

The IGM WG aims to:

- Provide a forum to enhance collaboration, share experiences, and promote research in this field
- Increase communication with other working groups at IMIA, AMIA and other organizations relevant to IGM including groups with an emphasis on genomic medicine and informatics from the biomedical community, computing research and bioinformatics as relevant.
- Establish itself as a scientific reference on issues related to information technology projects in genomic medicine.

Contacts with ERCIM (European Research Consortium for Informatics and Mathematics) for the creation of a Working Group in Biomedical Informatics have been made.

- Participation in research projects funded by the European Commission (Information Society Technologies Program):
  - SYMBIOMATICS – European Research Area Network. Specific Support Action: Synergies in Medical Informatics and Bioinformatics, coordinated by the EBI, 2005-2006.
  - BEYOND THE HORIZON - Coordinated action, supported by the Information Society Technologies/Future and Emerging Technologies programme (IST-FET) of the European Commission. Coordination of the Thematic area: Biomedical Informatics. 2005-2006.
- to formalize relationship of IMIA IGM group with the AMIA GEN-WG (Genomics)

# Informatics in Genomic Medicine (IGM)

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## Intelligent Data Analysis and Data Mining (WG 3)

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## Medical Concept Representation (WG 6)

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## Mental Health (WG 8)

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### Objectives:

- To increase the awareness and acceptance of intelligent data analysis and data mining methods in medical community.
- To foster scientific discussion and disseminate new knowledge on AI-based methods for data analysis and data mining techniques applied to medicine. To promote the development of standardized platforms and solutions.
- To provide a forum for presentation of successful intelligent data analysis and data mining implementations in medicine, and for discussion of best practices in introduction of these techniques in medical and health-care information and decision support systems.

The working group will focus on specific topics of interest for the scientific community. In particular, the following issues will be explored:
- the exploitation of predictive data mining in clinical medicine.
- knowledge-based functional genomics
- temporal data mining in medicine and bioinformatics

### Objectives:

To provide a forum for state of the art dialogue and collaboration on natural language processing and concept representation in healthcare applications, IMIA's Medical Concept Representation Working Group is the international forum for issues related to informatics in the classification and coding of health data. The working group is charged with:
1) Reviewing health data nomenclature and classification needs for the world community;
2) Evaluating information processing technology in meeting these defined needs; and
3) Recommending methods for future classification and nomenclature systems.

### Objectives:

This group was established at the IMIA Board meeting in August 2000 with the formal confirmation being received in October 2000. The proposal was triggered by an increasing recognition of the need to consider the special information and informatics needs of this domain, which represents some 10% of all healthcare activity. The domain has special information-handling requirements, and a range of challenges commencing with the longer-term, multi-site nature of much mental health care and the emphasis on qualitative and attitudinal data. At the same time, it is hoped that techniques to assist with these particular needs in health informatics will enrich more biophysical care domains as well.

## Objectives:

- To investigate and evaluate organizational, social, ethical, and individual behavioral issues surrounding the introduction and use of informatics applications.
- To determine strategies for product design and technological change to support health care delivery through information and communication technologies.
- To incorporate organizational change management and human concerns into information technology projects.

## Recent activities:

**Medical Informatics Activities:**
1. Co-sponsored with the AMIA People and Organizational Issues WG of a Doctoral Consortium to precede the AMIA 2005 Symposium.
2. Organized a panel on ubiquitous computing in health care for the IFIP WG 8.2 conference on "Designing Ubiquitous Information Environments: Socio-technical Issues and Challenges," Cleveland, OH  2005

**Outreach and Collaborative Activities**
To raise awareness of organizational and social issues in health care, the chair contributed to
1. *Consumer Health Informatics*, eds. D. Lewis, G. Eysenbach, R. Kukafka,  Z. Stavri, and H. Jimison et al.,  NY: Springer, 2005.
2. with J. Maxell, *Evaluating the Organizational Impact of Healthcare Information Systems*, 2nd edition. eds. J.G. Anderson, C.E. Aydin, and S.J. Jay, Newbury Park, Cal.: Sage, 2005.
3. *E-Health Systems Diffusion and Use: The Innovation, the User and the USE IT Model*, eds. R. W. Schuring and T. A. M. Spil,  Idea Group Publishing, 2006.
4. with C. Atkinson, K. Larson, HMG Martins, J. Lundell, and M. Harris, *Designing Ubiquitous Information Environments: Socio-technical Issues and Challenges*, eds. C. Sørenson, Y. Yoo, K. Lyytinen, and J.I. DeGross, London: Kluwer Academic Publishers, 2005.

**On-going Activities**
1. Nominate papers for the Diana Forsythe Award of the AMIA People and Organizational Issues WG, and serving on the Awards Committee.
2. Organize panels and tutorials at AMIA Symposia and Medinfo.

## Objectives:

To promote primary care informatics by
- acting as a forum for exchange of ideas between its members
- providing information to its members to assist them in progressing primary care informatics in their own country
- increasing the understanding of primary care informatics issues with a view to publishing the results of these discussions.

The journal, *Informatics in Primary Care,* was relaunched by Radcliffe Publishing, with endorsement from IMIA WG5 and involvement of members of the working group on the Editorial Board. The journal received Medline listing in September 2003, and since then is receiving an increasing volume of submissions from international sources. Full text is available to personal and library subscribers at: www.radcliffe-oxford.com/ipc.

Members of the working group continue to liaise at an international level on key local and regional initiatives in primary care informatics. Our key international partners include EFMI Working Group 7 (Primary Care), Informatics Working

## Organizational and Social Issues (WG 13)

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# Security Issues in Health Information Systems (WG 4)

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Party of WONCA (The World Organization of Family Doctors), and the American Medical Informatics Association's Primary Care Informatics Working Group.

## Recent activities:

- A review paper on primary care informatics 2001–2004 has been published in Yearbook of Medical Informatics 2005 by Sheila Teasdale .
- "*What is Primary Care Informatics?*", a very successful consensus conference, was held as part of Medinfo 2004 in San Francisco in September. A conference report has been published in Informatics in Primary Care . The planning group for this conference included IMIA WG5, AMIA Primary Care Informatics Working Group, EFMI Primary Care Informatics Working Group, and the WONCA Informatics Working Party.

## Future Activities:

- Work with the WONCA Informatics Working Party on a 2-day workshop in Tuscany in August 2006.
- Hold a Working Group 1-day conference on 19th August 2007 in Brisbane as part of Medinfo 2007, working with AMIA, EFMI and WONCA primary care informatics working groups.

## Objectives:

To examine the issues of data protection and security within the health-care environment. The Data Protection in Health Information Systems Working Group addresses state-of-the-art security of distributed electronic patient records (EPR).

The working group is preparing its next working conference in Dijon France, Thursday April 27 to Sunday April 30, 2006. Francois Allaert (FR) is Chair of the Local Organizing Committee and Francis Roger France (B) Chair of the Scientific Program Committee. The theme of the conference is:

SECURE eHEALTH: Managing risk to patient data

Four themes have been defined. These are chaired by specific coordinators:
- Telecommunication and Wireless Technologies – F. Allaert
- Ethics and Laws for eHealth in Telemedicine – E. Kluge
- Long Term Data Preservation and Intelligibility – A. Bakker
- Security of Community Wide Health Care Records – N. Gaunt

The Foundation ICMI (International Conferences in Medical Informatics) has made a prize of €1000 for the best student paper available. The papers will be adjudicated by a committee consisting of the Chair of the Working Group and the Chair of the Scientific Program Committee. The prize will be awarded on the basis of the quality of the paper as well as of the quality of the presentation.

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## Objectives:

- To advise about standards from an academic perspective.
- To promote the mutual identification of needed standards world-wide.
- To share information to facilitate mutual coordination of standards development in health informatics.

Expanded description of the content areas that will be worked on by the proposed Working Group

- WG 16 itself does not create a new "standard", rather, it devotes its activity on promotion of mutual identification and coordination by posting and maintaining an inventory of health informatics standard activities.
- Usually, standard development activities are by volunteers, vendors, and immediate users. It is quite natural and fine for them to devote efforts to acquire fruitful outcomes. Sometimes, however, potential future users' profit could be underrated.
- IMIA is academically oriented, and is a world-wide organization which has connections with countries which participate less currently in existing standard development activities.
- Therefore, IMIA WG 16 inputs thoughtfulness for future users and for multi-cultural environments, as advisory to standard development activities.

An inventory of health informatics standard activities is maintained for the purpose of promoting mutual identification between activities, as well as proliferation to users. A web site (http://www.mi.hama-med.ac.jp/standardization.html) is maintained which reports up to date activities of ISO and CEN. This HP is updated and contains slides and handouts of the WG activities.

This group provides academic and clinical advice to standards development activities undertaken via ISO/TC215, CEN TC 251 and HL7 . (IMIA is already a liaison of ISO/TC 215.) This advice is based on world-wide experience, with thoughtfulness of multi-cultural environment. Virtually, initial mission is to high-light differences of health and personal information handling caused by each country's health and medical cultural differences.

## Objectives

- To promote comprehensive assessments of healthcare information technologies.
- To demonstrate the value of assessment methods in healthcare information technologies.
- To promote international cooperation toward developing methodological issues.

## Recent Activities

- Collaboration with the EFMI working group on evaluation is ongoing refer http://iig.umit.at/efmi/index.htm .
- Publication of the Handbook of Evaluation Methods for Health Informatics by Jytte Brender, Academic Press, 2006, ISBN 0123704642.
- Participation in the workshop on Good Evaluation Practice Guidelines at MIE 2005 in Geneva, August 2005 (details report available at http://iig.umit.at/efmi).
- Invitation of the WG chair to participate in a panel on evaluation at AMIA spring conference 16-18 May 2006
- Invitation of the WG chairs to participate in the Usability and Human Factors Engineering Workshop in Lille, 22 - 24 May 2006.
- Invited paper in the IMIA Yearbook of Medical Informatics 2006: Evaluation and Implementation: A call for action by J.L. Talmon.
- The Declaration of Innsbruck, originally published June 2004 in the International Journal of Medical Informatics, is selected for the IMIA Yearbook of Medical Informatics 2006.
- · Contributions to the ongoing work on Good Evaluation Practice Guidelines (GEP-HI) and Standards for Reporting on Evaluation Studies (STARE-HI).

## Standards in Health Care Informatics (WG 16)

Chair:

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## Technology Assessment and Quality Improvement (TAQI) (WG 15)

Chair:

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Co-chair

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# Telematics in Healthcare (WG 18)

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# Open Source Health Informatics Working Group

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## Objectives:

- To explore the rationale and perspective of Health Telematics
- To promote the design and development of open architecture and inter-operability tools
- To promote the analysis, design and development of methodologies and applications to support collaborative work in healthcare information systems
- To share experiences on E-health, Telemedicine and Professional Healthcare networks.

Building a website to give information on this large subject including: Telemedicine, Open Hospital Information Systems, Healthcare Regional Networks.

## Objectives

The objectives of the group as developed at its formation in 2002 remain relevant, and the focus of the group remains on educational, promotional and 'evangelistic' activities to raise awareness of open source software. While the group is named 'open source', our areas of interest include free/libre software and open source software (as described at in the European Commission-funded FLOSS project – see http://www.infonomics.nl/FLOSS/index.htm), and including GNU/Linux.

The objectives of the group are:
- to provide a forum for discussion and for a collaborative, non-judgemental work environment to explore, and where appropriate promote and facilitate, the application of free/libre and open source solutions within health, healthcare and health informatics.
- to bring together experts and interested individuals from a wide range of health professions and with a range of interests in the potential application of free/libre and open source solutions within their domains of expertise.
- to explore the implications of the free/libre and open source approaches for all aspects of IMIA's areas of interest.
- to work with other IMIA Working and Special Interest Groups to explore the appropriate use of free/libre and open source solutions and applications.
- to facilitate both the use of other groups' expertise in the areas under consideration, and the input of IMIA views to those other groups' work and discussions.

It should be noted that, due to considerable joint membership, many of the activities of the Working Group have been, are likely in the near future to continue to be, coterminous with those of the IMIA-NI Open Source Nursing Informatics Working Group. In the longer-term, specific activities of the two groups may diverge, although they are likely to undertake much joint work, and much work in collaboration with the AMIA Open Source Working Group.

The Working Group website continues to run well on the PHP-Nuke open source content management system and included discussion forums. It is being developed in parallel with development of the IMIA-NI OSNI website (www.osni.info). We are exploring the possibility of moving the website to a different open source CMS, which has greater flexibility (eg Mambo, currently used for the EFMI website).

A book chapter on free/libre and open source software, and highlighting the IMIA OSWG and IMIA-NI OSNI WG, has been authored by two group members (Peter Murray and Alric M O'Connor) and was published in the new edition of Saba and McCormick's *Essentials of Computers for Nurses*.

We will be exploring some formal submissions from the WG and in conjunction with the IMIA-NI OSNI WG for events at NI2006 in Seoul, Korea; we will also be encouraging members to submit materials.