

Terms of Reference

WHO FIC Education and Implementation Committee

Purpose

Assist and advise WHO and the WHO-FIC Network in implementing the WHO Family of International Classifications (WHO-FIC) and improving the level and quality of their use in Member States. Track implementation of the classifications and develop implementation, education, training and certification strategies for the WHO-FIC, identifying best training and implementation practices and providing a network for sharing expertise and experience on training and implementation. The first priority will be for the reference classifications, ICD and ICF.

Background

The Implementation Committee was established in 1999 with a Subgroup on Training and Credentialing. In 2003, the Subgroup became a separate Education Committee. The two committees were merged into the Education and Implementation Committee in 2010.

Functions

The primary functions of the Committee are to develop strategies for the implementation of the WHO FIC with an integrated educational strategy for the Reference Classifications. Other members of the Family of International Classifications will be considered as resources permit. The components of this strategy include the following functions:

1. To conduct through the WHO HQ and ROs an international stocktaking of WHO FIC implementation in a timely, systematic and comprehensive manner:
 - 1.1 Review periodically the planned or existing use of classifications in both the public and private sectors in terms of: areas and purposes of use, version in use, coverage, coding method (automated, physician coders, clerk coders etc.);
 - 1.2 Prepare a periodic summary of the global implementation status in Member States;
 - 1.3 Work with WHO in the development and refinement of mechanisms for collecting and analyzing WHO-FIC implementation data (by conventional questionnaire and web-based applications);

- 1.4 Monitor and make proposals in the improvement of the technical and scientific quality of implementation-related studies presented to the annual WHO FIC meetings and other international meetings.
2. Assess the needs of users of the classifications, including those who provide source information, apply codes, conduct research or use the resulting data.
 - 2.1 Identify the learning objectives for educational approaches.
 - 2.2 Maintain an inventory of existing educational materials and capacity.
 - 2.3 Make recommendations for learning content including development of core curricula
 - 2.4 Make recommendations for best practices for promotion and delivery of educational material.
 - 2.5 Develop, harmonize and maintain self-learning tools.
- 3 Assist WHO in the development and application of implementation guidelines.
- 4 Provide WHO with guidance on user needs in terms of instruments, tools, training materials, etc.
- 5 Act as an international support network for countries, through the WHO and ROs, on issues relating to implementation and best practices on the use of the WHO FIC.
- 6 Act as advocates both nationally and internationally to obtain high level support and financial commitment to develop and implement improved information systems using WHO FIC, particularly in developing nations
- 7 Work with the other WHO-FIC Network committees and reference groups in the creation of methodologies for the joint use of WHO-FIC members in health information systems and surveys and development of educational products.

The components of the education and implementation strategies include the following tasks:

1. Inventory the use of ICD and ICF in member states
2. Inventory the availability of the classifications in multiple languages and translation strategies
3. Gather information from collaborating centres and regional offices on use and capacity for implementation of ICD and ICF in WHO member states
4. Develop a Checklist for implementation of WHO Family of International Classifications

5. Identify groups with interest in the implementation of WHO-FIC and approaches to address them.
6. Gather information from collaborating centres and regional offices on capacity for ICD-10 and ICF training in WHO member states
7. Conduct needs assessments about the capacity, skills and responsibilities of ICD mortality and morbidity coders and ICF coders in member states. Define the skills and levels of education and training required for coders and nosologists, as well as other users of the classifications.
8. Identify groups requiring education and training about ICD and ICF (e.g., coders, statisticians, epidemiologists, policymakers, administrators, relevant systems and program managers, clinicians, survey developers, health sciences educators, students and consumers) and in the proper completion of source documents (e.g., death certificate, health record) and approaches to address them.
9. Identify groups requiring education and training in the proper completion of source documents (e.g., death certificate, health record) and approaches to address them.
10. Catalogue, characterize (e.g., purpose, audience, content, language, availability, media and technology) and disseminate information on current educational and training curricula and modules for the ICD and ICF and identify gaps and methods for filling them.
11. Review existing training materials and the mechanisms for their dissemination and identify best practices. Provide advice on best practices to developers of ICD and ICF educational materials.
12. Promote the multi-lingual development of educational materials on ICD and ICF
13. Work with ITC and IHTSDO and other relevant groups on educational materials and implementation strategies for the joint use of classifications and terminologies
14. Collaborate with national and international organizations (e.g., the International Federation of Health Records Organizations) with which coders and nosologists can affiliate.
15. Continue to explore the capacity of these organizations to support an international training and certification program for ICD coders.
16. Explore the need for international certification or assessment of those trained to use ICF as a coding and classification system or of ICF training materials. Identify a support network or mechanism.
17. Identify approaches for assuring that training and certification are dynamic processes, responsive to changes in medical science, disability policy, technology, coding rules, etc. Explore different approaches to training, e.g., face-to-face, eLearning.

Structure and Working Methods

The structure of the Committee should involve permanent members from WHO (including the regional offices) and each collaborating centre who will primarily devote their time to developing and, to the extent possible, carrying out strategies for addressing the functions specified above.

Membership is open to Regional Offices and all Collaborating Centres with national and regional responsibilities for WHO FIC implementation and education. All WHO-FIC Centres may nominate two official members per country (up to a maximum of four members) and additional “collaborators”, who can participate fully but do not participate in voting. Beyond these permanent members, additional participants may take part in committee meetings as observers. The Committee will elect co-chairs from its membership during even-numbered years in a closed ballot at an annual meeting of the network for a term of two years.

The Committee should develop a biennial work plan, which lists in detail goals, objectives, activities, deliverables, timelines and responsibilities for addressing the terms of reference. If necessary, different work groups (sub-committees) may be formed on specific tasks or WHO-FIC classifications so as to address different issues.

Working methods should include e-mail, conference calls and meetings, including an annual meeting during the WHO-FIC Network annual meeting. Official meetings of the committee must be held in conjunction with international WHO-FIC meetings.

October 18, 2010