WHO-FIC Education Committee
WHO-FIC – IFHRO Joint Collaboration
Raleigh, North Carolina
April 1-2, 2009
Summary

The Education Committee of the WHO Family of International Classifications (WHO-FIC) Network and the Joint Collaboration with the International Federation of Health Records Organizations (IFHRO) held a mid-year working meeting on April 1-2, 2009 in Raleigh, North Carolina.

The purposes of the meeting were to 1) discuss and plan future steps for the web-based training tools for ICD-10 and for ICF, which are under development with WHO and the WHO-FIC Network, 2) advance work on the International Training and Certification Program for underlying cause of death coders and trainers, 3) discuss the feasibility of a certification program for morbidity coders, 4) continue joint work with the Functioning and Disability Reference Group (FDRG) on ICF education, and 5) make plans for the 2009 WHO-FIC Network annual meeting.

Nineteen persons from nine countries (Brazil, Germany, Japan, Mexico, the Netherlands, South Korea, Switzerland, United States and United Kingdom) representing collaborating centers, national and international organizations, participated in the meeting. A list of participants is included in Attachment 1.

Wednesday, April 1, 2009

Welcome and Introductions:

Marjorie Greenberg, co-chair of the Education Committee (EC), welcomed participants, especially those who are rejoining the group following illness. She acknowledged those who were unable to attend and welcomed the good news that Sue Walker and Chris Sweeting are recovering. Marjorie expressed appreciation to Sam Notzon, Director, International Statistics Program, NCHS, for his support of the meeting and travel for several international participants. Other meeting chairs were Cassia Maria Buchalla, EC co-chair, and Margaret Skurka, co-chair of the Joint Collaboration (JC).

Assignment of Rapporteurs

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Review of agenda and meeting objectives

The agenda (Attachment 2) was confirmed, with the addition of Yukiko Yokobori presenting information on her study of the current status of health information management.
education in 17 countries. She was asked to prepare a paper for the forthcoming 2009 WHO-FIC Network meeting and the next IFRHO meeting in 2010.

Marjorie noted significant progress on both web-based tools. Thanks to Lindy Best, Sue Walker, the group that has contributed to the pilot testing, Robert Jakob for securing funds, the Australian Collaborating Centre and all involved in the development of the ICD-10 training tool.

Marjorie also acknowledged considerable progress since the Joint Collaboration was established in 2001, thanks to the contributions of the EC and JC members and assistance of the American Health Information Management Association. However, several projects require additional resources to continue or be expanded.

Comments on the revised proposal for funds from the Health Metrics Network (HMN) were requested, prior to it being sent to Sally Stansfield, HMN Executive Director; with a view to discussing the proposal with her and WHO staff when Marjorie is in Geneva the week of April 20 for the Revision Steering Group and WHO-FIC Council meetings. Marjorie reflected on the issues that the committee can control and how to influence areas that are outside control. She reflected on the goals of the committee in relation to how the committee and Joint Collaboration can strengthen their relationships with the groups which they wish to influence.

**Review Education Committee Terms of Reference and 2009-2010 Work Plan**

Some minor changes to the Terms of Reference were identified, specifically to include “and maintain” to the function “Develop and harmonize self-learning tools.” The statement about a single Chair also should be struck.

The key tasks for 2009-2010 were revised. The mid-year meeting and regular teleconferences were acknowledged as important in driving the work plan forward. It was suggested that criteria for what constitutes good/best practice for ICD and ICF education might be useful. The curriculum has the content, but there is less information on what works well/best for different audiences. Considering the education literature should be part of this process as well as considering characteristics of recent training methods that have proved useful. The EC has included presentations on “best practices” as part of its agenda at the past several annual WHO-FIC Network meetings but has not actually defined the term.

Robert Jakob reported that the Work Plan has to be in the new excel format that enables tasks to be sorted according to committee, reference group or strategic goal. The Work Plan will be transferred to the new excel format and circulated to the members of the Education Committee.

**WHO-FIC Council meeting**

Marjorie and Cassia will be preparing a mid-year report for the WHO-FIC Council meeting. This meeting will be by way of two teleconferences for eastern and western hemispheres. A Share Point site or e-mail will be used to facilitate exchange of information.
The Council’s Small Executive Group will be meeting with WHO in Geneva on April 23-24 and will organize the teleconferences from there.

**Review Joint Collaboration Terms of Reference and 2009-2010 Work Plan**

The Joint Collaboration Terms of Reference were reviewed. They have been unchanged for two years. The current task list will be revised into the same format as the official WHO-FIC work plan. Margaret presented a summary of the achievements and noted the things that still need to be achieved. The revised task list will be circulated.

- The task of developing information sheets is in progress and on the agenda.
- Testimonials for the course and certification system have not been collected, the ongoing need for this will be considered.
- The continued role of Collaborating Centres in running the day-to-day operations of the Joint Collaboration will be discussed. AHIMA did this till end of 2008, the Australian Centre (Brisbane) agreed to take on the task in 2009, a volunteer for 2010 needs to be considered. Margaret will consult with AHIMA about their continuing role.
- The American Psychological Association (APA) is still to finalize the APA manual of ICF for health professionals.
- Regarding guidelines on good documentation for medical professionals, there are several steps before these guidelines can go ahead, possibly as a module of the training tool. The diversity of practice across the world makes this a difficult task. The group agreed to continue to pursue the topic, recognizing that it is meaningful, but needs a lot of planning. Keeping the scope limited to hospital discharge summary was suggested; there may be enough commonality across countries to make this worthwhile.
- ICD-10-CM will be introduced in the US on 1 October 2013 as a replacement for ICD-9-CM. ICD-10-PCS will replace ICD-9-CM, Volume 3. Educational activities are beginning to be planned.

**Web-based training ICD**

Robert Jakob provided an update on the web-based training tool for ICD-10. Ethics and confidentiality sections have not yet been incorporated into the Lectora tool; a module on ICD-10 updates for those who have been through the course also will be added. The level of detail needs to be appropriate for international use.

The Overview or Nutshell for those who only need a brief understanding of the subject has been included.

The suggestion to link the ICF and ICD training tools will be subject to further discussion. The two web-tools may need a common introductory module.

Robert posted the ICD-10 web-based tool for testing by the EC in mid March and received feedback from many persons. He presented the pilot form answers received to date. The feedback was generally very positive.

Amongst those that responded to the pilot test there were no statisticians, coroners or people new to ICD, and therefore the group suggested that the pilot needs to be extended to
these groups. Not all chapters had been reviewed. It was agreed to extend the pilot to end of April to include groups not represented, and ensure that all chapters have been covered. Volunteers to cover certain chapters were collected. Comments will be collated by Cleo Rooney and Carol Lewis, with input from Sue Walker and Lindy Best by mid-May.

Robert will send the link to the ICD training tool and request for feedback again to the whole EC, together with the slides on the chapters to be reviewed and audiences to be addressed.

Changes to the navigation and changes to content need to be considered separately, so that the vendors only make changes on one occasion. It may be possible to start translations in June, once the content is finalized. Patricia Soliz Sanchez will do a Spanish translation, the Brazilian Center will do the Portuguese version and the German Centre is keen to go ahead with its translation. WHO will host the official language translations, and provide links to languages hosted on other websites. The tooling environment enables the translations to be stored in a file that can be used to replace the English. Screen shots need special attention.

The maintenance of the tool needs to be considered, especially in relation to ICD updates. There is a simple link and feedback form, which can be used to provide information for updating. The use of chapters and modules can be monitored. Maintenance on a three yearly basis to coincide with major update cycle was suggested. Translators will need notification of changes to the tool. Robert will bring a proposal for maintenance to the WHO-FIC meeting in October 2009.

Users will provide feedback with the same form as the reviewers. A report on user statistics at the mid-year meeting and the annual meeting is desirable. Linking the web training and the mortality exam, and possibly, in future, a morbidity exam might be a beneficial way forward. Adding an e-tutor to the program and to continuous professional development programs might be other directions for the future. Adding local content to the existing tool is feasible, as is certification, but care needs to be taken to authenticate that the person who receives the credit has actually completed the course. An official launch may be at the WHO-FIC network meeting, but the tool may be available earlier. If there is another occasion it could be launched earlier. There will be a press release in the WHO Bulletin and information on the WHO website. The tool will be publicly accessible but not in public domain.

There was discussion about whether the pilot should be extended to a broader audience. Robert agreed to consider, but was reluctant to extend to people who may provide a lot of feedback, but not from a coding perspective, such as the ICD-11 revision TAGs.

**Web-based Training Tool for ICF**

Nenad Kostanjsek, WHO, participated in the meeting by phone call to explain information on development of an ICF web-based training tool, which was sent to the EC members the previous night. John Hough, U.S., and Marie Cuenot, and Catherine Barral, France, also participated by phone. Nenad gave an overview of the project itself, detailing the files sent and explaining the attachments and the feedback form. The files were shown as a training...
tool demo during Nenad’s presentation. The ICF eLearning Tool is a self-learning course based on the ICF Curriculum Modules; the plan is to provide four different modules: Introduction, Basic, Advanced and Specialized. At this stage the focus of the work is on (1) the development of the Introduction module based on the ICF Curriculum Modules and (2) the incorporation of the introduction module into the LECTORA software.

The introduction module was developed by the ICF Research Branch of the WHO FIC German Collaborating Center and WHO, with the collaboration of Catherine Sykes. The demo version shows navigational operations and overall look and feel of the course. The section follows the structure of the ICF presented as a key message, objectives, explanation, examples and tests.

Nenad pointed out the importance of having case examples from many cultures to help the understanding of the ICF for all populations. This version has been prepared in 3 languages: English, Spanish and Turkish and will be translated to German soon and to other languages once finalized. The focus now is finishing this part, developing examples, exercises and tests, and field testing the module. This step requests additional thoughts or ideas on how to improve this introduction because it is a very important section and needs to be useful and bring the user into the rest of the tool.

The material is in a PowerPoint presentation format and will be reviewed by both the Education Committee and Functioning and Disability Reference Group (FDRG). After inclusion of all comments, the introduction module will be field tested. The project plan was explained and feedback was requested. There is a need to set up project groups for additional work on the advanced and specialized modules, and additional resources are needed for these phases.

Some points were highlighted by Nenad:

1. Certification- certificate issued on completion of modules and/or full course. However, as noted earlier in regard to the ICD eLearning tool, some issues exist on this. Is there a way to verify user completion? If so, then a certificate can be awarded. Decisions need to be made going forward.
2. Finalization – after finishing this introduction module, it will be reviewed again by the FDRG and Education Committee. The next step will be the field testing of this module, after finalized it will be launched and disseminated.
3. Feedback forms due by end of April and then additional work can be done.
4. Work on other modules should begin

Some concerns were expressed at accelerated review on content, especially because EC members are completing their review of the ICD-10 tool in April. A good amount of time will be needed for the review. The introduction module should be done before moving forward on the rest. It was agreed that the review process will be refined in a conference call with the project team and co-chairs of both groups, which Marjorie agreed to organize in the next few weeks. (A teleconference subsequently was held on April 20, when it was agreed to extend the review until the end of May.)
Some preliminary suggestions were offered: The Slides need clearer distinction between concept and one specific example given. Different formatting is needed to indicate these are examples.

Questions were asked about the interactive nature of the tool. It will be a feature, but it is under future development.

Participants suggested the need for a bridge between ICD and ICF eLearning tools. For example, in regard to the tetraplegia example used in the module, it is important to link the conditions to all ICD-10 codes, not only the one related to the injury but also that for the external cause. This and other suggestions will be sent to Nenad.

After the Conference call, the process of review will be disseminated and several members, including Carol Lewis and Margaret Skurka, agreed to review the draft ICF materials.

International Training and Certification program for Underlying cause-of-death

The exam for mortality coders was tested in 6 countries and the results presented at the 2008 WHO-FIC Network Meeting. Although the certification exam is an important tool to stimulate coders to improve their abilities, additional resources are needed to provide the infrastructure to make the exam available on a global basis. However, several countries (e.g., Korea, Brazil and Mexico) are interested in conducting additional pilots. The initial exam had 60 questions, and an additional set of questions were added to make 100 questions to be selected for the coder and trainer exam. As these new cases were not ranked regarding their level of difficulty, the possibility to continue testing these questions was discussed. In addition, these additional pilots will allow checking translation and cultural differences. The exam and related materials have been translated into French, Spanish and Portuguese.

It was agreed that additional pilots can comprise Phase II of the project and serve to test the new questions as well as the translations. The processes documented by AHIMA in the program evaluation can now be decentralized to the country level.

Regarding the potential pilot in Korea, it was discussed how many times a person could sit for the exam after a first failure. It was decided that they can have two failures and have a third chance only after receiving additional training. The country will manage the process. Korea needs to maintain the integrity in the process that they did last time. Rita or Sue would need to be contacted regarding the provision of certificates to successful candidates. Brazil back translated the exam and will pilot the questions never previously tested in May or June 2009 in order to validate them. Mexico is translating the test now and wants to do pilots as well. Others who participated in the original pilots may also want to test some of the new questions.

A difficulty index has not been developed for previous pilots and has to be prepared for the exam to be complete. The EC/JC goal is towards “Phase III”, a real process with infrastructure, quality control, testing review.
**Process for certifying morbidity coders and trainers**

The EC and JC continue to discuss the feasibility of conducting a similar pilot program for ICD-10 morbidity coders and trainers. A paper on this topic was presented at the 2008 WHO-FIC Network meeting with no decision reached.

In early 2009, Joon H. Hong conducted a survey of EC, JC and other WHO-FIC members regarding the rationale and feasibility of proceeding with a morbidity coding exam. The results of this survey were presented. From the 74 questionnaires distributed, there were 34 answers from 16 countries. Ninety-four percent of those who responded to the questionnaire supported the importance of making a morbidity exam and certification available for morbidity coders in some countries, while recognizing the challenges due to lack of international agreement on morbidity coding rules. Many challenges were identified regarding the difficulties to have an exam for the different settings and whether to include procedures in the exam. The latter would mean that many decisions would need to be taken, such as adoption of a Procedure Classification by WHO, in order to establish exam for the countries that do not use a procedure classification and so on. The financial aspects to translate and to conduct the exam, such as the exam fee, among other related issues, were also mentioned.

Countries around the room agreed on the importance of such exam and certification but also agreed on the difficulty to implement. One suggestion was to offer an online exam to assess morbidity coding skills, which would be managed by the centers and, ideally at little or no cost to the coders.

It was suggested that an abbreviated exam could be used in conjunction with the web-based training tool for ICD-10 and face-to-face training and as a means for identifying additional training needs. The EC and JC will continue to liaise with the Morbidity Reference Group on these proposals.

After considerable discussion, it was agreed that non-respondents to the survey should be re-contacted to increase the response rate. The results will be presented at the 2009 annual WHO-FIC Network meeting with a possible proposal for an abbreviated exam to test the skill levels of morbidity coders but not lead to certification at this time. A “pretest” may be more valuable for countries not around the table. People should be encouraged to take the web based training first, and then could “pass” a basic ICD-10 exam.

The process for review and approval of training materials were also discussed. AHIMA coordinated the review of underlying cause-of-death training materials, but the contract with AHIMA has ended. It will not be possible to review morbidity training materials without financial support to organize the review and more consensus on coding rules. Yukiko Yokobori, Head of Distant Training Division of the Japan Hospital Association presented her work on “The Current Status of Education on HIM around the world.” The work presented was a summary of the results she received to date and will be updated for presentation at the 2009 WHO-FIC Network Meeting in Seoul. Yukiko will ask the respondents to review their data and provide any updates. Meeting participants in Raleigh were struck by the different versions of ICD being used for morbidity coding and congratulated Yukiko on her study.
It was agreed that the EC and JC can raise awareness of some of these issues—the variety of ways in which countries are capturing data, the lack of consensus on rules, the reimbursement issues, and the epidemiologist’s way of looking at the data. It was decided that the EC should consider working with the Morbidity Reference Group to compile this type of information in a compelling way.

The EC should discuss further in Seoul a way to go forward with these projects: test development, collect morbidity training material and match against the Morbidity Core Curriculum and how to obtain the resources to do this.

**Thursday, April 2, 2009**

Marjorie Greenberg opened the second day of the meeting by announcing that the 2010 mid-year meeting of the WHO-FIC EC and the JC will be held in Germany at the end of February or the beginning of March. The German Collaborating Centre has offered to host the suite of mid-year meetings (i.e., ICE Planning Committee, MRG, EC/JC and possibly MbRG and FDC).

Margaret Skurka reviewed the action items that had been decided during the first day of the meeting.

There was considerable discussion about establishing a gateway to the web-based training tool. Should this be a common entry point that would branch into ICD and ICF or should it be an introduction to each of these two tools? Should there be hooks to link the tools and if so at what point should this be done? It was pointed out that HTML pages are now available that might be used to set up a portal and Catherine agreed to head up a small group, including Lynn Bufka, that would suggest a solution.

**Funding Proposal**

During last year’s ICE plenary meeting, Marjorie and Sue Walker met with Carla Abou-Zahr, the liaison with Health Metrics Network (HMN) at WHO, who was supportive of the EC/JC efforts to improve the quality of data through the training and certification of coders. Based on this, a proposal for funding was developed and submitted to HMN by June 30. Despite repeated attempts, it was not possible to arrange a telephone conference call to discuss the proposal until the 20th of October. At that time there were different views on the value of focusing on coder training and certification, but it was agreed to revise the proposal to provide a more direct link to the web-based training tool.

Approaches for revising the proposal were discussed during the WHO-FIC Network meeting in Delhi and during subsequent teleconferences. The new proposal, *Training and certification for higher quality information*, was prepared for discussion at the EC/JC mid-term meeting. After a review of the document, Cleo suggested that the proposal to Health Metrics be limited to one or two very specific projects that are closely linked to objectives that HMN wants to achieve. The group concurred with this excellent suggestion and suggested that the proposal be no longer than two pages plus an appendix on background and accomplishments of the training and certification program.
Marjorie agreed to draft the revised funding proposal to Health Metrics (including background information as an Appendix) and circulate it to members of the EC and JC by close of business April 7 for comment. Comments are to be sent to Marjorie by Monday, April 13. Marjorie will be in Geneva the week of April 20 and hopes to be able to discuss the proposal with HMN and WHO staff.

While the group was hopeful that this proposal would meet with success, there should be a fall-back plan. This Plan B would be a generic proposal that would be adapted to meet the requirements of the WHO regions. The WHO-FIC Centres, WHO Regional Offices (PAHO and where there are new information officers in EMRO, SEARO and WPRO), would be asked to identify potential funding sources to which a proposal, tailored to their interests, could be sent.

**Mortality and Morbidity Flyers**

The development of mortality and morbidity flyers had been proposed at the 2008 mid-year meeting of the EC and JC. Marci MacDonald had prepared and circulated a draft morbidity flyer, and it became apparent that there was a lack of clarity about the objective of the flyer and of the audience to which it was directed. Stefanie stated that she had not had time to draft a mortality flyer but indicated that she was still interested in going forward with a flyer directed to users of mortality data. She saw this as a document that would be provided to individuals along with the mortality data they had requested.

The question before the group was to decide if the development of flyers was an activity to be pursued. If they were in the form of a one-page information sheet, there would be a number of benefits. They could be easily updated, could be placed on the web where they would be accessible and available for translation. The information sheets would be in the public domain and therefore could be made specific for use by a country or association. The sheets would be dated so that revisions could be easily identified.

Robert stressed that in developing the information sheets, the web-based training tool should be consulted to ensure that both are telling the same story. Accordingly it was decided to go forward with drafting the following information sheets and to circulate drafts prior to the September teleconference with final approval at the Network meeting in Seoul:

- Stefanie Weber will try to have an information sheet for users of mortality data
- Marci MacDonald to update information sheet for users of morbidity data based on comments made during meeting and those sent to Margaret after meeting
- Marci and Chris Sweeting to prepare an information sheet on morbidity documentation
- Margaret Skurka to update information sheet on Joint Collaboration
- Marjorie to update information sheets on WHO-FIC Network and on the WHO-FIC Family of Classifications.

**Collaboration with FDRG**
Nenad Kostanjsek, John Hough, Marie Cuenot, and Catherine Barral joined the meeting via telephone to participate in the discussion of this topic.

**ICF Curriculum Modules**

No additional comments have been received on the Curriculum modules for the International Classification of Functioning, Disability and Health (ICF), Version 1, which were approved at the meeting in Delhi. The document is posted on the EC’s web site ([http://www.cdc.gov/nchs/inforesources.htm](http://www.cdc.gov/nchs/inforesources.htm)). Catherine Sykes asked if there were a link between WHO and the EC web site, which was confirmed.

Given that no changes in the curriculum have been proposed, the curriculum modules can now be translated. Cassia will translate the modules into Portuguese. Marie Cuenot will translate them into French for use in France and the French-speaking parts of Belgium and Switzerland. Patricia Soliz Sanchez will translate them into Spanish.

To increase awareness of the existence of the curriculum modules a number of activities were identified. Catherine Sykes suggested that editorials on functioning and disability be written for publication in professional journals. Also, she will arrange for links to be placed on physical therapy and occupational therapy web sites and will explore ways of reaching health educators. Lynn will arrange for placing links to the curriculum modules on the AMIA (American Medical Informatics Association) and IMIA (International Medical Informatics Association) web sites. Margaret will arrange to have information on the curriculum modules included in her presentation to the US HIM educators at the Assembly of Educators meeting to be held in Las Vegas, NV in July.

**An overview of the ICF**

This document replaces what was once known as the Two-minute reader. A first draft of the document was presented at the FDRG meeting in Quebec last year and was then revised and sent to ICF task leaders, and some comments were received. More input is now being sought.

The document is envisioned as having two levels – one level that conveys basic information and a second level with boxes and links to other sources, designed for those needing more information. But more work is needed to achieve the two levels. If the levels are not right there is a risk that the document will not be useful to anyone. Coding was cited as an example. Should details about coding be included in the basic document or should it be limited to mention about why coding is important? It was also suggested that another way of achieving the two levels was to write the basic information in bold (or on a colored background) with the detailed information appearing in regular text. Catherine and FDRG Task Group 5 will revise the document and circulate it for comment.

**Review of training materials and other activities**

Cassia announced that a two-day meeting of the technical committee for Latin America and the Caribbean ICF Network will be held in Sao Paulo, Brazil (27 – 28 July). There will be a half-day presentation on ICF in a joint meeting with FDRG, which will hold its midyear meeting on the following days (29-30 July). Armando Vasquez, from PAHO, is coordinating the Latin America and the Caribbean ICF Network and there will be reports
on the ongoing projects on ICF in this region. Cassia said that she would provide information from the meeting to the group. Marjorie suggested that it would be good to have an education paper from the Sao Paulo meeting for the Network meeting in Seoul.

ICF education has moved beyond introductions to the classification and its potential uses so Catherine stressed that it was important to keep seeking new education materials along with information about how well particular teaching methods worked. Marjorie pointed out that because resources are currently not available to review morbidity training materials there would also not be resources for a review of ICF materials. It was agreed that the effort to solicit best practices should continue and be included in the EC agenda for Seoul.

**Briefing material for new Centres**

Marjorie presented the Briefing Kit of materials for Collaborating Centres (formerly known as a tool kit for new Centres). It has been discussed previously with the EC and WHO-FIC Council. The plan is to post the materials on a Sharepoint site for reference by all Collaborating Centres. A few documents still need to be updated or prepared. Participants provided comments, which Marjorie will incorporate into the next version. Marjorie and Cassia will work with WHO on having the materials posted before the Seoul meeting, if possible. All current collaborating centres will be requested to prepare short profiles of their respective centres for the Briefing Kit.

**2009 WHO FIC Network Meeting**

The Education Committee intends to hold two two-hour sessions during the 2009 Annual Meeting. Progress in all aspects of the work plan will be presented and future plans discussed. As in the past, the EC will solicit papers and posters on “best practices” for ICD and ICF training. Marjorie noted that the theme of the meeting is Primary Care Classifications. The following papers and posters were suggested:

- ICF and ICD education “best practices”
- ICPC literature review (Teresa Cravo)
- Results of survey on morbidity exam and proposal for next steps (Joon H. Hong)
- Current Status of Education on HIM around the world (Yukiko Yokobori)
- Information sheets (as discussed and assigned above)
- Proposal for updating ICD-10 eLearning Tool (Robert)

There being no further business, the meeting was adjourned at 5:00 p.m. by Marjorie Greenberg and Cassia Maria Buchalla.
Meeting of the WHO-FIC Education Committee and 
Joint WHO-FIC - IFHRO Collaboration
Raleigh, NC, USA
April 1-2, 2009

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Final Agenda
WHO-FIC Education Committee
WHO-FIC – IFHRO Joint Collaboration
Capital Room
Sheraton Raleigh Hotel
Raleigh, North Carolina

April 1-2, 2009
Wednesday, April 1

8:45 a.m.  Welcome
           Introductions
           Assignment of rapporteurs
           Review of agenda and meeting objectives
           Marjorie Greenberg
           Cassia Maria Buchalla
           EC co-chairs
           Margaret Skurka, JC co-chair

9:30 a.m.  Review Education Committee Terms of Reference and 2008 – 2009 Work Plan
           EC co-chairs

10:00 a.m. Review Joint Collaboration Terms of Reference and 2008 – 2009 Work Plan
           Margaret Skurka
10:30 a.m. Break

10:45 a.m. Web-based Training Tool for ICD-10
- Discussion of outcomes of pilot testing
  Robert Jakob

12:30 p.m. Lunch

1:30 p.m. Web-based Training Tool for ICF
  Cassia Buchalla
  Nenad Kostanjsék (by phone)

3:00 p.m. Break

3:15 p.m. International Training and Certification Program for Underlying cause-of-death
  Margaret Skurka

  • Additional pilots
    o Korea
    o Brazil
    o Mexico
    o Others?
  • Translation issues

4:00 p.m. Process for certifying morbidity coders and trainers
  Joon H. Hong
  Carol Lewis

  • Rationale for proceeding
  • Process for review and approval of training materials
  • Process for development of exam
  • Feasibility of piloting exam
  • Decision on way forward

5:00 p.m. The current status of education on HIM around the world
  Yukiko Yokobori

5:30 p.m. Adjourn and Group Dinner

Thursday, April 2

8:30 a.m. Welcome and Introductions
  Cassia Buchalla

  Assignment of Rapporteurs
  Marjorie Greenberg

  Review of first day
  Margaret Skurka

8:45 a.m. Funding proposal
  Marjorie Greenberg

  • Develop pre- and post-tests
  • Pilot web-based training tool in developing countries
  • Pilot UCOD exam in developing countries
  • Expand web-based tool for UCOD

  Margaret Skurka
• Pilot expanded web-based tool
• Compare in-person training and web-based tool
• Improve skills of certifiers        Stefanie Weber
• Improve infrastructure          Margaret Skurka

10:00 a.m.  Break

10:15 a.m.  Mortality and Morbidity Flyers       Marjorie Greenberg
    Decision on Way forward        Stefanie Weber

11:15 a.m.  Collaboration with FDRG        Cassia Buchalla
    • ICF Curriculum Modules
    • Overview document
    • Review of training materials

12:30 p.m.  Lunch

1:30 p.m.  Collaboration with FDRG (continued)  Cassia Buchalla

2:30 p.m.  Briefing materials for new Centres  Marjorie Greenberg

3:15 p.m.  Break

3:30 p.m.  2009 WHO-FIC Network Meeting  EC co-chairs
    • Agendas for working sessions
    • Papers

4:30 p.m.  Review of action items  EC co-chairs
    2009 - 2010 work plan

5:00 p.m.  Adjourn

April 1, 2009