

**MEETING OF WHO COLLABORATING CENTRES  
FOR THE FAMILY OF INTERNATIONAL CLASSIFICATIONS**

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**WHO-FIC Education Committee: A Status Report 2005-2006**

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**Abstract**

*The WHO-FIC Education Committee was established at the 2003 WHO-FIC Network meeting in Cologne, Germany, as a successor to the Subgroup on Training and Credentialing of the WHO-FIC Implementation Committee. New terms of reference were developed at the Cologne meeting to reflect generic tasks for education and training on the International Statistical Classification of Diseases and Related Health Problems (ICD) and the International Classification of Functioning, Disability and Health (ICF). Specific tasks have been agreed for both ICD and ICF. The principal ICD tasks relate to an international training and certification program for ICD-10 mortality and morbidity coders; this program is being developed in conjunction with the International Federation of Health Records Organizations (IFHRO), a non-governmental organization in official relations with WHO. A Joint WHO-FIC – IFHRO Collaboration (JC) was established in late 2004 to carry forward this work (see separate paper). The JC held its second meeting in Alexandria, VA in May 2006, in cooperation with the WHO-FIC Education Committee (EC). Having previously developed and approved core curricula for ICD-10 mortality and morbidity coders, progress now has been made on developing processes for solicitation and review of ICD-10 training materials, assessment of practicing coders, and recognition of trainers. The JC and EC also agreed to develop a core curriculum for training certifiers of cause of death (see separate paper) and is supporting development of a “reference” web-based ICD-10 training tool with WHO (see separate paper); this tool will include a module for certifiers of cause of death, as well as modules for coders. Regarding ICF tasks, the Education Committee is working closely with the WHO-FIC Implementation Committee to gather information, in a standardized format, on ICF applications, educational materials and electronic tools. Specific proposals include linked libraries of PowerPoint presentations and other approaches for optimizing opportunities for ICF education (see separate papers).*

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## Content

Abstract.....	1
Introduction.....	3
ICD-10 International Training and Certification Program.....	3
ICF Education and Training.....	5
Publicizing the Work of the Committee.....	6
Educational Activities for the WHO-FIC Network.....	7
Summary.....	7
Appendix 1	
Terms of Reference.....	8
Appendix 2	
ICF Information Collection Pilot, Educational materials reported.....	12
Appendix 3	
Abbreviations and Acronyms.....	14
Appendix 4	
Draft WHO-FIC Network brochure.....	23

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## **Introduction**

The WHO-FIC Education Committee was established at the 2003 WHO-FIC Network meeting in Cologne, Germany, as a successor to the Subgroup on Training and Credentialing of the WHO-FIC Implementation Committee. New terms of reference were developed at the Cologne meeting to reflect generic tasks for education and training on the International Statistical Classification of Diseases and Related Health Problems (ICD) and the International Classification of Functioning, Disability and Health (ICF). Specific tasks have been agreed for both ICD and ICF (see Terms of Reference in appendix 1). The principal ICD tasks relate to an international training and certification program for ICD-10 mortality and morbidity coders; this program is being developed in conjunction with the International Federation of Health Records Organizations (IFHRO), a non-governmental organization in official relations with WHO. A Joint WHO-FIC – IFHRO Collaboration (JC) (formerly known as Joint Committee) was established in late 2004 to carry forward this work. The JC held its second meeting in Alexandria, VA in May 2006, in cooperation with the WHO-FIC Education Committee (EC). During this meeting, the groups added educational resources for certifiers of cause of death to their agenda. Regarding ICF tasks, the Education Committee is working closely with the WHO-FIC Implementation Committee to gather information, in a standardized format, on ICF applications, educational materials and electronic tools. The Committee also has a number of crosscutting activities to publicize and disseminate its work and provide educational resources to the WHO-FIC Network.

This paper provides a summary report of the Committee's activities and progress since the 2005 meeting in Tokyo, Japan. Separate papers will provide greater detail and recommendations on key aspects of the Committee's work plan. Related documents, including the minutes and presentations from the May 2006 meeting, can be found on the Committee's web site at:

[http://www.cdc.gov/nchs/about/otheract/icd9/nacc\\_ed\\_committee.htm](http://www.cdc.gov/nchs/about/otheract/icd9/nacc_ed_committee.htm)

## **ICD-10 International Training and Certification Program**

The Education Committee and Joint Collaboration continued to make significant progress in 2005-2006 on establishing an international training and certification program for ICD-10 mortality and morbidity coders. Having previously developed and approved core curricula for ICD-10 mortality and morbidity coders, progress now has been made on developing processes for solicitation and review of ICD-10 training materials, assessment of practicing coders, and recognition of trainers. The JC and EC have held four conference calls since the 2005 WHO-FIC Network meeting and a face-to-face meeting on May 4-5, 2006. Minutes are available for all calls and meetings. The JC and EC have been using the Collaborative Workspace to share documents.

*Call for and Review of Training Materials*

A call for ICD-10 training materials was first issued by the JC in March 2005, and the request continues to be posted on the EC website. Members of the JC and EC are continuing to review the materials received, using the core curricula as a benchmark, and assessing adequacy and gaps. During the May meeting, it also was agreed to develop key objectives for each module. More information can be found in the separate paper by Margaret Skurka and Sue Walker.

*Assessment of Practicing Coders*

The assessment of practicing underlying cause-of-death coders has been identified as the first priority by the JC and will include a self assessment instrument completed by the applicant and a coding exam. The latter is being developed by the Portuguese language Centre in Sao Paulo in collaboration with the Mortality Reference Group. Considerable progress was made in developing the self assessment instrument, exam and associated processes during 2006. However, additional efforts are needed to finalize the exam and to pilot the entire process. The goal continues to be to award the first certificates to practicing underlying cause-of-death coders at the 15<sup>th</sup> IFHRO Congress in Seoul, Korea in May 2007. The JC will build on this work to recommend a process for testing and certifying existing morbidity coders. New coders seeking certification will need to demonstrate successful completion of approved courses in the core curricula offered by recognized trainers or training institutions; the full process has not yet been determined.

*Recognition of Trainers*

During 2006, the JC developed a process for recognition of ICD-10 underlying cause of death trainers and educators. The process includes completion of an application and a coding exam. Educators and trainers who meet the international standard developed by the JC will be included in a Roster of Experts on the IFHRO and Education Committee Web sites.

*Education for Certifiers of Cause of Death*

The terms of reference for the Education Committee include identifying "groups requiring education and training in the proper completion of source documents (e.g., death certificate, health record)". In response to this need, the EC and JC reviewed existing resources for training certifiers of cause of death during its May 2006 meeting and agreed to develop a core curriculum and best practices. A workgroup was formed to carry out this task and will present a proposal for discussion at the 2006 WHO-FIC Network meeting. (See separate paper by Becker, Pace and Weber)

*Development of Web-based Training Tool*

As approved at the May 2006 meeting, the EC terms of reference also include "support in the provision of a tool for self learning of ICD-10." During the May

meeting, the group informally reviewed TENDON, which had been developed by the UK Collaborating Center, and Intercod, developed by the Pan American Health Information Organization. Both were found to be useful, but it was determined that it would be desirable to develop a standardized reference training tool for ICD-10. A separate paper describes work by Robert Jakob and Sue Walker, with travel support from NCHS and contributions by members of the EC and JC, to develop this tool. The tool will be consistent with the core curricula and use a modular approach. Initial work is focusing on underlying cause of death coding and certification of cause of death.

#### *Infrastructure Work Group*

The development of the program, to date, has been by volunteer members of the EC and JC. The National Center for Health Statistics (NCHS), U.S. Centers for Disease Control and Prevention hosts the conference calls and has supported the mid-year meetings, including travel for international participants. The American Health Information Management Association (AHIMA) and individual collaborating centres also have supported the program. An Infrastructure Work Group was established during the Tokyo meeting to identify areas that require additional resources, develop a budget, identify possible sources of funds and develop applications for funding. On August 30, 2006, NCHS awarded a contract to AHIMA Foundation of Research and Education to finalize the various components of the program and to publicize, pilot and evaluate it in conjunction with IFHRO. The JC has submitted several other applications for funding, which are still under review.

## **ICF Education and Training**

#### *Information Collection and Sharing*

The ICF strategies of the Education Committee are closely aligned with those of the WHO-FIC Implementation Committee (IC); since 2004, the two committees have been partnering on a project to share information in a structured way on ICF applications, training materials and electronic tools. An initial template was piloted by the Dutch Centre in 2005, followed by a second pilot using an updated and improved template. Approximately 33 responses were received from 11 countries. The pilots demonstrated that pre-structured information could be processed and made available for sharing by using ClaML for representation and organizing the information. Difficulties were encountered, however, using the Collaborative Workspace.

Eleven countries reported that they had educational materials on ICF (see appendix 2). For the most part, the materials are in the country's native language. An international course in English developed for the World Federation of Physical Therapy also was reported. Because these results are from a pilot study, they are not a comprehensive list of available materials (other known education materials also

are noted in appendix 2). Countries were asked to submit information on at least one implementation activity and one educational material rather than a complete listing. The most common types of educational materials were PowerPoint presentations, user guides and manuals. Some materials were directed toward a particular specialty or sector (e.g., rehabilitation), while others were more generic. Both introductory and more advanced materials were reported.

During the Tokyo meeting, there was a proposal to develop a "library" of modular PowerPoint presentations on the Collaborative Workspace for persons interested in introductory ICF training. A separate paper by Greenberg and Hough further explores this proposal, taking advantage of the previously developed template to collect "metadata" on the presentations.

#### *Optimizing Opportunities for ICF Education*

A discussion paper by Caulfeild, Hough and Sykes describes additional approaches for making ICF introductory materials readily available to a wide audience of new users, and for shared virtual workspaces in which a narrow audience of advanced ICF users could collaborate on complex topics and methods, such as "mapping" and Core Sets. Recommendations for next steps will be sought during the Tunis meeting.

### **Publicizing the Work of the Committees**

#### *Brochures*

The Education Committee previously developed a brochure in 2003 and had been working with other committees to develop similar brochures. During the 2005 WHO-FIC Network meeting in Tokyo, it was agreed that a higher priority should be given to a brochure for the entire WHO-FIC Network. The EC has developed such a brochure, with input from the Planning Committee, for consideration and approval at the 2006 WHO-FIC Network meeting in Tunis (see separate document). The Joint Committee has developed a separate brochure to assist with marketing and disseminating information about the ICD-10 International Training and Certification Program.

#### *Presentations and articles*

Members of the EC and JC have made several presentations about the ICD-10 International Training and Certification program in their respective countries and will continue to do so. A paper was developed by Sue Walker, co-chair of the JC, on the EC's 2004 needs assessment of the international coder workforce and the Joint Collaboration. This paper was submitted to the *WHO Bulletin*; although the *Bulletin* did not accept the paper, the editors requested a shorter letter, which was published in the April 2006 issue. Abstracts also have been submitted for the May 27-30, 2007 IFHRO Congress in Seoul, Korea.

## **Educational Activities for the WHO-FIC Network**

### *Induction Sessions at WHO-FIC Network Annual Meetings*

The EC organized an "induction session", principally for first-time attendees, at the 2004 and 2005 WHO-FIC Network meetings and will conduct a similar session at the 2006 meeting. The session will familiarize attendees with the WHO-FIC, its Network of collaborating centres and committees, and the organization of the annual meeting.

### *Abbreviations, Acronyms and Definitions*

The Education Committee is continuing to update the list of abbreviations and acronyms relevant to the WHO-FIC Network, which was first developed in 2004 as an educational tool for participants in Network meetings. The list, which is a "living document" that can be updated and expanded on an annual basis, is contained in appendix 3. The Education Committee again recommends that this document be posted on the WHO-FIC Network website with hyperlinks wherever possible.

### *Frequently Asked Questions*

The WHO-FIC Network website has a place for frequently asked questions (FAQ's), but currently only a few questions are posted. The Education Committee developed additional questions in 2005 and is continuing to update them. Other Committees are asked to develop their own FAQ's on their work efforts, with appropriate links to the respective committee.

## **Summary**

The WHO-FIC Education Committee, in collaboration with IFHRO, continues to make important progress in developing an international training and certification program for ICD-10 mortality and morbidity coders. The Committee also is making progress in integrating ICF education and training into its work plan. Although the Committee has proven its ability to carry out considerable developmental work with limited external resources, additional resources will be needed by the WHO-FIC Network, IFHRO and others to execute the plans that are developed and to assure that adequate training and quality assurance in the use of both ICD and ICF are available worldwide. Approaches for expanding resources should be included in the WHO Business Plan for Classifications.

**Appendix 1*****Terms of Reference******WHO FIC Education Committee*****Purpose**

Assist and advise WHO and the WHO-FIC Network in improving the level and quality of use of the WHO Family of International Classifications (WHO-FIC) in Member States by developing an education, training and certification strategy for the WHO-FIC, identifying best training practices and providing a network for sharing expertise and experience on training. The first priority will be for the reference terminologies, ICD and ICF.

**Background**

The Subgroup on Training and Credentialing of the WHO-FIC Implementation Committee was established at the 1999 meeting of Heads of Collaborating Centres in recognition of:

- The critical role of education and training for the successful implementation, use and maintenance of a classification system and for the quality of data produced
- The opportunities for sharing and strengthening education and training in members of the Family of International Classifications through international efforts, and
- The resulting benefits for comparability of national and international statistics

The Subgroup was established specifically to:

- Advise WHO and the WHO Regional Offices on best training practices
- Provide a network for sharing expertise and experiences on training
- Work with WHO Regional Offices in identifying needs for skills and training in countries both covered and not covered by Collaborating Centres
- Address the unique issues concerning mortality medical coders and nosologists in an automated environment
- Explore the possibilities for developing an international training and credentialing program for coders of WHO-FIC classifications
- Make recommendations to WHO and the WHO-FIC Collaborating Centres through the WHO-FIC Implementation Committee.

Following the integration of ICF into the Family in 2001, the Subgroup was expanded to consider parallel and related activities for users of the International Classification of Functioning, Disability

and Health. During the 2003 annual meeting, the Subgroup reorganized as the WHO FIC Education Committee to better describe its broad mission and the role of education beyond the implementation phase of a classification.

## **Functions**

The primary function of the Committee is to develop an integrated educational strategy for the International Classification of Diseases and the International Classification of Functioning, Disability and Health. Other members of the Family of International Classifications will be considered as resources permit. The components of this strategy include the following functions:

1. Assessment of the needs of users of the classifications, including those who provide source information, apply codes, conduct research or use the resulting data.
2. Identification of the learning objectives for educational approaches.
3. Inventory of existing educational materials and capacity.
4. Recommendations for learning content including development of core curricula
5. Recommendations for best practices for promotion and delivery of educational material.

The components of the strategy for the ICD include the following tasks:

1. Conduct needs assessments about the capacity, skills and responsibilities of ICD coders in member states
2. Identify the additional groups requiring education and training about ICD (e.g., statisticians, epidemiologists, policymakers, relevant systems managers, physicians, other clinicians and health sciences educators and students)
3. Identify groups requiring education and training in the proper completion of source documents (e.g., death certificate, health record)
4. Define the skills and levels of education and training required for coders and nosologists, as well as other users of the classification
5. Catalogue, characterize (e.g., purpose, subject, language, availability, media and technology) and disseminate information on current educational and training curricula and modules for the ICD, and identify gaps and methods for filling them
6. Review existing training materials and the mechanisms for their dissemination and identify best practices
7. Gather information from Collaborating Centres and Regional Offices on capacity for ICD-10 training in WHO member states
8. Explore national and international organizations (e.g., the International Federation of Health Record Organizations) with which coders and nosologists can affiliate
9. Explore the capacity of these organizations to support an international training and credentialing program
10. Identify approaches for assuring that training and credentialing are dynamic processes, responsive to changes in medical science, technology, coding rules, etc.

#### 11. Support in the provision of a tool for self learning of ICD-10

The components of the strategy for the ICF include the following tasks:

1. Liaise with Implementation Committee concerning applications and intended applications of ICF in order to identify educational needs.
2. Identify the groups requiring education and training about ICF (e.g., coders, statisticians, epidemiologists, policymakers, administrators, relevant systems and program managers, clinicians, survey developers, health sciences educators and students, consumers) the objective of the required education and the need for training trainers.
3. Catalogue, characterize (e.g., purpose, audience, content, language, availability, media and technology) and disseminate information on existing educational materials for ICF applications.
4. Create a database on educational products based on the Framework agreed by the Implementation and Education Committees and provide ongoing maintenance.
5. Review existing training materials and the mechanisms for their dissemination and identify best practices. Identify gaps and methods for filling them.
6. Provide advice on best practices to developers of ICF educational materials.
7. Explore the capacity of Collaborating Centres and Regional Offices for providing ICF education in WHO member states.
8. Explore the need for international credentialing of those trained to use ICF as a coding and classification system or of ICF training materials. Identify a support network or mechanism.
9. Identify approaches for assuring that training and credentialing 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, E-learning.

### **Structure and Working Methods**

The Subgroup should have an integrated mandate of WHO-FIC education, although the nature and phase of different members of WHO-FIC may differ in different countries. If necessary, different work groups may be formed on specific WHO-FIC classifications so as to address different issues.

The structure of the Subgroup 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. All WHO-FIC centers may nominate participants

and beyond the permanent members additional participants may take part in committee meetings as observers.

The chair should preferably be a single person to emphasize the integration of WHO- FIC implementation.

The Subgroup should develop an annual work plan, which lists in detail aims, activities, deliverables, timelines and responsibilities for addressing the terms of reference.

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

May 4, 2006

**Appendix 2****ICF Information Collection Pilot  
Educational Materials Reported**

<b><u>Country</u></b>	<b><u>Material</u></b>
Australia	1) Users Guide 2) Four sets of PowerPoint slides
Brazil	1) Set of implementation/dissemination materials (lectures, papers) 2) Workshop PowerPoint slides
Netherlands	1) Manual and Workshop PowerPoint slides for use of ICF by Allied Professionals 2) Course reader for rehabilitation
Finland	Educational materials on assessment of functional status using ICF, including PowerPoint slides
France	Modular PowerPoint presentations on ICF
Japan	1) Guidelines for understanding and utilization of ICF 2) Book on ICF and guidelines for its use in long-term personal care services and rehabilitation 3) Guidebook for use of ICF in completing rehabilitation form
Mexico	Basic and advanced training materials (User guides and PowerPoint presentations)
Norway	Training materials for regional conferences to introduce ICF (User guides and PowerPoint)
Portugal	Workshop materials on relevance and

	application of ICF to physiotherapy (PowerPoint presentations)
Sweden	1) Training materials for clinical use in rehabilitation (PowerPoint) 2) Manual for self-ratings of participation using ICF
United States	1) Code ICF (web-based training tool) 2) Procedural Manual and Guide for a Standardized Application of the ICF: A Manual for Health Professionals, including PowerPoint training materials
Researchers from Australia, UK and Canada	Workshop materials for World Confederation for Physical Therapy (PowerPoint slides, video clips)

### Other known Educational Materials

Australia	Presentations from February 2006 forum on functioning and disability data ( <a href="http://www.aihw.gov.au">www.aihw.gov.au</a> )
Germany	Video training for ICF core sets
Italy	1) Basic and advanced training courses for clinicians 2) MHADIE Project (European Union)
United States and Canada	Presentations from North American Collaborating Center ICF conferences ( <a href="http://www.icfconference.com">www.icfconference.com</a> and NACC website)

## Appendix 3

WHO Family of International Classifications Education Committee  
Abbreviations and Acronyms

Term	Meaning
ABS	Australian Bureau of Statistics
ACBA	Australian Coding Benchmark Audit
ACCS	Automated Cause Coding Software
ACHI	Australian Classification of Health Interventions (Vols. 3 and 4 of ICD-10-AM)
ACME	Automated Classification of Medical Entities
AFRO	Regional Office for Africa of the World Health Organization
AHIMA	American Health Information Management Association
AIHW	Australian Institute of Health and Welfare
AMRO	Regional Office for the Americas of the World Health Organization
ATC/DDD	Anatomical Therapeutic Chemical Classification System with Defined Daily Doses
CAM	Complementary and Alternative Medicine
CAP	College of American Pathologists
CAT	Classifications and Terminology section of WHO Headquarters, Secretariat to the WHO-FIC Network
CBCD	Centro Brasileiro de Classificação de Doenças (Brazilian Collaborating Center)

CCAM	Classification Commune des Actes Medicaux
CCI	Canadian Classification of Health Interventions
CCI	La Classification Canadienne des Interventions
CCSA	Clinical Coders' Society of America
CDC	Centers for Disease Control and Prevention (USA)
CEMECE	Centro Mexicano para la Clasificación de Enfermedades (Mexican Center for Classification of Diseases)
CEN	European Committee for Standardization
CEVECE	Centro Venezolano para la Clasificación de Enfermedades (Venezuelan Center for Classification of Diseases)
CHIMA	Canadian Health Information Management Association
CID (CID-10)	Classificação Estatística Internacional de Doenças e Problemas Relacionados à Saúde
CID-O-3	Classificação Internacional de Doenças para Oncologia – Terceira Edição
CIE	Clasificación Internacional de Enfermedades
CIE-10	Clasificación Internacional de Enfermedades y Problemas Relacionados con la Salud
CIE-O-3	Clasificación Internacional de Enfermedades para Oncología – Tercera Edición
CIE-9-MC	Clasificación Internacional de Enfermedades, 9a Revisión, Modificación Clínica (Spanish version of ICD-9-CM)
CIF	Clasificación Internacional del Funcionamiento, de la Discapacidad y de la Salud Classification internationale du fonctionnement, du handicap et de la santé Classificação Internacional de Funcionalidade, Incapacidade e Saúde

CIHI	Canadian Institute for Health Information
CIM (CIM-10)	Classification statistique internationale des maladies et des problèmes de santé connexes
CIM-10-CA	Classification statistique internationale des maladies et des problèmes de santé connexes dixième version, Canada
ClAML	Classification mark-up language
CPT	Current Procedural Terminology (U.S.)
CRAES	Comité Regional Asesor en Estadísticas de Salud (PAHO Regional Advisory Committee on Health Statistics)
CTNERHI	Centre Technique National d'Études et de Recherches sur les Handicaps et les Inadaptations (France)
DATASUS	Departamento de Informática do Sistema Único de Saúde (Brazil)
DG SANCO	Directorate General for Health and Consumer Affairs, European Commission
DIMDI	Deutsches Institut für Medizinische Dokumentation und Information
DPI	Disabled Peoples International
DRG	Diagnosis-Related Groups
DSM-IV	Diagnostic and Statistical Manual of Mental Disorders – 4 <sup>th</sup> Edition
EBM	Evidence-based Medicine
EBP	Evidence-based Practice
EC	Education Committee (WHO-FIC)
EDI	Electronic data interchange
EIP	Evidence and Information for Policy (WHO cluster)

EMRO	Regional Office for Eastern Mediterranean of the World Health Organization
ETC	Electronic Tools Committee (WHO-FIC)
EU-HDP	European Union Hospital Data Project
EURO	Regional Office for Europe of the World Health Organization
FAQ	Frequently asked questions
FDC	Family Development Committee (WHO-FIC)
FDRG	Functioning and Disability Reference Group (FDRG)
FIC	Family of International Classifications
Forum-CIE	Group for discussions by e-mail of issues related to mortality and morbidity coding and related themes (in Spanish)
HIMAA	Health Information Management Association of Australia
HL7	Health Level Seven - one of several American National Standards Institute (ANSI) -accredited Standards Developing Organizations (SDOs) operating in the healthcare arena. Health Level Seven's domain is clinical and administrative data.
HMN	Health Metrics Network
HOC	Heads of WHO Collaborating Centers for the Family of International Classifications
HRG	Healthcare Resource Group – used in the UK for casemix grouping
IARC	International Agency for Research on Cancer
IC	Implementation Committee (WHO-FIC)
ICD	International Classification of Diseases
ICD-9-CM	International Classification of Diseases, Ninth Revision, Clinical Modification (USA)

ICD-10	International Statistical Classification of Diseases and Related Health Problems, Tenth Revision
ICD-10-AM	International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification
ICD-10-CA	International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Canada
ICD-10-CM	International Classification of Diseases, Tenth Revision, Clinical Modification (USA- not yet in use)
ICD-10-GM	International Classification of Diseases and Related Health Problems, Tenth Revision, German Modification
ICD-10-PCS	International Classification of Diseases, Tenth Revision, Procedural Coding System (USA – not yet in use)
ICD-10-XM	International Statistical Classification of Diseases and Related Health Problems, 10 <sup>th</sup> Revision, International Clinical Modification (under discussion)
ICD-DA-3	Application of the ICD for Dentistry and Stomatology, 3 <sup>rd</sup> Edition
ICD-Forum	Group for discussions by e-mail of issues related to mortality and morbidity coding and related themes (in English)
ICD-NA	International Classification of Diseases, Neurology Application
ICD-O-2 or 3	ICD for Oncology, 2 <sup>nd</sup> Edition; 0-3, 3 <sup>rd</sup> Edition
ICE	International Collaborative Effort [on automating mortality statistics, on Injury Statistics] sponsored by NCHS
ICECI	International Classification of External Causes of Injuries
ICF	International Classification of Functioning, Disability and Health
ICF-CY	International Classification of Functioning, Disability and Health, Children and Youth version

ICHI	International Classification of Health Interventions
ICIDH	International Classification of Impairments, Disabilities, and Handicaps (Revised in 2001 and published as International Classification of Functioning, Disability and Health)
ICIS	Institut canadien d'information sur la santé (also CIHI)
ICPC	International Classification of Primary Care
ICPM	International Classification of Procedures in Medicine (WHO 1978)
IFHRO	International Federation of Health Records Organizations
IHRIM	Institute of Health Record and Information Management (UK)
IMIA	International Medical Informatics Association
IND	International Nomenclature of Diseases (Not currently maintained)
INSERM	Institut National de la Santé et de la Recherche Medicale
INTERCOD	Computer-assisted program for self-instruction for coding mortality and morbidity with ICD-10 developed by the Mexican Center for the Classification of Diseases and PAHO.
IRIS	A language-independent coding system based on MMDS
ISO	International Organization for Standardization
ISO 9999	Technical aids for persons with disabilities. Classification and terminology
MbRG	Morbidity Reference Group (WHO-FIC)
MDG	Millennium Development Goals
MedDRA	Medical Dictionary for Regulatory Activities
MF	Mortality Forum - Group for discussions by e-mail of issues related to mortality coding (in English)
MICAR	Mortality Medical Indexing, Classification and Retrieval

MIKADO	Swedish automated coding system
MMCB	Mortality Medical Classification Branch, NCHS
MMDS	Mortality Medical Data System (US automated coding system)
MRG	Mortality Reference Group (WHO-FIC)
NACC	North American Collaborating Center
NCCH	National Centre for Classification in Health (Australia)
NCECI	NOMESCO Classification of External Causes of Injuries
NCHS	National Center for Health Statistics (USA)
NCSP	NOMESCO Classification of Surgical Procedures
NHS	National Health Service (UK)
NIC	National Interventions Classification – currently under development but will ultimately replace OPCS-4 for surgical procedures and intervention for the UK
NLM	National Library of Medicine (U.S.)
NOMESCO	Nordic Medico-Statistical Committee
OECD	Organization for Economic Cooperation and Development
OMS	Organisation mondiale de la Santé Organización Mundial de la Salud Organização Mundial da Saúde
ONS	Office for National Statistics (UK) Formed in 1996 by a merger of the Central Statistical Office (CSO) and the Office of Population Censuses & Surveys (OPCS)
OPCS-4	The Office of Population Censuses and Surveys' Classification of Surgical Operations 4 <sup>th</sup> Revision. The current surgical procedures classification used

	in the UK
OPS (OPAS)	Organization panaméricaine de la Santé Organización Panamericana de la Salud Organização Pan-Americana da Saúde
PAHO	Pan American Health Organization
RI	Rehabilitation International
RIVM	National Institute of Public Health and the Environment (Netherlands)
RUTENDON	Computer-based ICD-10 coding training, in Russian
SCB	Seleção de causa básica (automated system, Brazil)
SEARO	Regional Office for South East Asia of the World Health Organization
SNOMED	Systematized Nomenclature of Medicine
SNOMED CT	SNOMED Clinical Terms
SNOMED RT	SNOMED Reference Terminology
STC	Statistics Canada
STYX	French automated coding system
TENDON	Computer-based training package for ICD-10 produced by the WHO Collaborating Centre for the Classification of Diseases, London.
TRANSAX	Translation of axes – used to create data appropriate for either record-based analysis or person-based analysis
TRG	Terminology Reference Group (WHO-FIC)
UC or UCOD	Underlying cause of death
UMLS	Unified Medical Language System (NLM)
UN	United Nations

URC	Update and Revision Committee (WHO-FIC)
WCPT	World Confederation for Physical Therapy
WFOT	World Federation of Occupational Therapists
WHO	World Health Organization
WHO CAT	World Health Organization Classification, Assessment, Surveys and Terminology
WHO CC	World Health Organization Collaborating Center
WHO-FIC	World Health Organization Family of International Classifications
WICC	WONCA International Classification Committee
WONCA	World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (The short name is World Organization of Family Doctors.)
WPA	World Psychiatric Association
WPRO	Regional Office for Western Pacific of the World Health Organization
XML	Extensible Mark-up Language
YLD	Years of life lived with disability Years of life lost through disability
YLL	Years of life lost

August 31, 2006

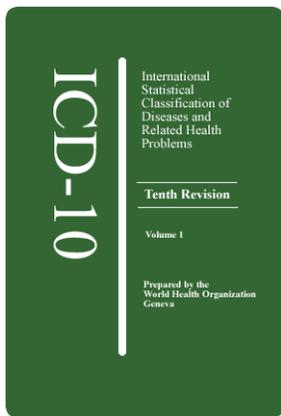
WHO-FIC 2006/00-3

**WHO-FIC Education Committee:  
A Status Report 2005-2006**

Tunis, Tunisia  
29 Oct. - 4 Nov 2006

**Appendix 4**

**Draft WHO-FIC Network Brochure**



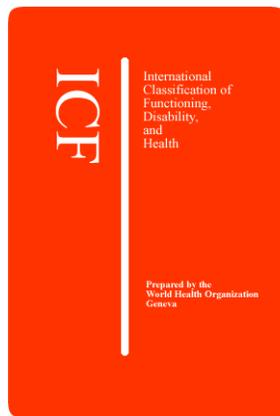
International  
Statistical  
Classification of  
Diseases and  
Related Health  
Problems, 10<sup>th</sup>  
Revision (ICD-10)

These Reference Classifications are used in hospitals, health and community services, statistical agencies and research to describe the morbidity, mortality and disability of individuals and populations.

For more information about the WHO-FIC, contact WHO headquarters, a WHO regional office or any WHO Collaborating Center or visit the WHO-FIC web site:

[www.who.int/classifications/en/](http://www.who.int/classifications/en/)

DRAFT October 2006



International  
Classification of  
Functioning,  
Disability and  
Health (ICF).

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## WHO Family of International Classifications (WHO-FIC)



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## WHO-FIC NETWORK

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*Classifications to  
support  
National and  
International  
Health Information  
Systems*

## [The WHO-FIC Network](#)

The **World Health Organization (WHO) Collaborating Centres for the Family of International Classifications (FIC)** are an international network of expert centres in health classifications, coding, and terminology development. The Network also includes other representatives of WHO Member States and non-governmental organizations. The principal role of the WHO-FIC network is to promote the implementation and use of the two WHO reference health classifications, the International Classification of Diseases (ICD) and the International Classification of Functioning, Disability and Health (ICF). The Family also includes a suite of derived and related classifications. The Network's mission is to develop, disseminate, implement and update the WHO-FIC to support national and international health information systems, statistics and evidence.

## [WHO collaborating centres](#)

A WHO collaborating centre is a national institution designated by the Director-General to form part of an international collaborative network to support WHO's mandate for work on international health issues.

## [WHO-FIC Committees](#)

**Planning Committee (PC)** monitors Strategy and Work Plan and Business Plan for WHO-FIC and plans annual meeting.

**Education Committee (EC)** encourages

the development and implementation of best educational practices to ensure comparable data within and among WHO Member States. A Joint Collaboration has been formed with the International Federation of Health Records Organizations to develop an international training and certification program for ICD-10 coders.

**Electronic Tools Committee (ETC)** is developing policies on the deployment and application of electronic tools for the WHO-FIC. The Committee supports WHO and the WHO-FIC Network in the dissemination of such tools and establishes liaisons with other organizations working in electronic classification.

**Family Development Committee (FDC)** aims to ensure that the WHO-FIC has a logical structure so that the classifications needed for each component and setting within the health system can be identified. FDC identifies and prioritises gaps in the WHO-FIC. It sets criteria for and assesses potential new member classifications against these criteria and has developed a protocol for accepting new classifications into the Family

**Implementation Committee (IC)** focuses on tracking, promoting and supporting implementation of the WHO-FIC in health information systems internationally. This group is assisting WHO in the compilation of guidelines, educational materials, tools and strategies useful to countries introducing members of the Family.

**Update and Revision Committee (URC)** assesses the need for updating WHO-FIC classifications and manages the process to update ICD-10 following submissions from the

reference groups, collaborating centres, and other experts.

## [WHO-FIC Reference Groups](#)

**Mortality Reference Group (MRG)**

identifies and solves problems related to the interpretation and application of ICD-10 to mortality, supports the development of internationally applicable software for mortality coding and classification, and addresses issues of analysis and assessment of mortality statistics.

**Morbidity Reference Group (MbRG)**

identifies, discusses and solves problems related to interpreting and applying ICD-10 to morbidity coding and classification, through the development of agreed upon coding rules and guidelines.

**Functioning and Disability Reference Group (FDRG)**

advises the WHO-FIC Network on functioning, disability and health classification and coding issues. The chief aim is to improve the quality and comparability of national and international data that describes functioning, disability and health by enhancing the appropriate use of ICF in statistics and information systems.

**Terminology Reference Group (TRG)**

follows terminological developments and promotes awareness of the need to ensure and verify congruence between concepts underlying clinical terminologies and the WHO classifications.