

Meeting Summary
WHO Family of International Classifications Education Committee
May 26-28, 2004
Prague, Czech Republic

Executive Summary

Twenty-two persons from ten countries, the World Health Organization (WHO) and the International Federation of Health Records Organizations (IFHRO) convened in Prague, Czech Republic, from May 26-28, 2004 to advance work on an international training and credentialing program for ICD-10 mortality and morbidity coders. The WHO Family of International Classifications (WHO FIC) Collaborating Centres and IFHRO have been working together since 2000 to develop an international program that will improve the quality of mortality and morbidity data and the status of ICD coders. The meeting of the WHO FIC Education Committee in Prague made substantial progress in laying out a strategy for making this vision a reality. The strategy will be presented to the IFHRO Executive Committee and General Assembly at the IFHRO 14th International Health Records Congress being held in Washington, D.C., from October 9-14, 2004.

During the meeting, the group reviewed a preliminary analysis of the Needs Assessment Questionnaires for Mortality and Morbidity Coders that the Committee had distributed to WHO Regional Offices in early February. Questionnaires had been returned by nearly 100 countries from every WHO Region and will guide future work of the WHO FIC Education Committee and Implementation Committee.

A major focus of the meeting was to progress core curricula for mortality and morbidity coders and develop a business plan for the International Training and Credentialing Program. Excellent progress was made on both objectives. The core curricula were expanded and further refined for review and approval by the WHO FIC Network and the IFHRO General Assembly. The group also tentatively agreed on a strategic approach for implementing the International Training and Credentialing Program, with an initial focus on awarding an international certificate. This would include review and approval of existing training materials for ICD-10 mortality and morbidity coders, using the core curricula as the benchmark; development of “gold standard” core training packages, which would be based on a modular approach and point to the multiple approved sources of training materials and associated exams; and creation of new modules where no suitable materials are available for specific components of the core curricula. The meeting participants proposed that much of this work be carried out by a joint WHO-IFHRO committee and related workgroups. Trainers also would be able to apply for recognition as approved trainers.

Finally, individuals who complete an approved training package delivered by approved trainers or nationally recognized educational institutions and pass a set of comprehensive assessments associated with the modular training materials would receive an international certificate. Practicing coders who have not taken an approved training package would be able to take a similar comprehensive assessment within a specific time period and,

subject to satisfactory completion, receive the international certificate. The target date for issuing international certificates is 2007. It also is recommended that a coder specialist special interest group be created within IFHRO for coders.

The decentralized and modular approach proposed is considered more realistic, at least in the short term, than development of a single international training package and development and implementation of a single international exam. The latter, however, is still a possible goal for the WHO FIC Education Committee and IFHRO. It is hoped that with approved training materials and trainers, mortality and morbidity classification will be further standardized, resulting in improved and more comparable data for health policy, epidemiology and resource allocation. The status of coders also should be enhanced, improving their job retention and satisfaction. Additional resources will be needed to assure that training materials are available for all aspects of the core curricula and to support training in developing countries and countries not represented by WHO FIC Collaborating Centres.

The meeting participants also discussed the draft brochure initially reviewed at the 2003 WHO FIC Network meeting in Cologne, draft ground rules for disseminating information on the Education Committee's work and plans for the 2004 Network meeting in Reykjavik, Iceland.

Participants in the meeting were representatives of the Australian, Dutch, German, Japanese, Nordic, North American, Portuguese Language (Brazil) and United Kingdom Collaborating Centers; a representative of the Classification, Assessment and Terminology Team at WHO; two representatives of the Pan American Health Organization; and several representatives of IFHRO. For more information about the proposed International Training and Credentialing Program and the WHO FIC Education Committee, you can contact Lorraine Nicholson (l.nicholson@zen.co.uk), member of the IFHRO Executive Committee and Regional Director for Europe, or Marjorie Greenberg (msg1@cdc.gov), Chair of the WHO FIC Education Committee.

Meeting Summary

Introduction

The Education Committee of the WHO Family of International Classifications (WHO-FIC) Network held a working meeting on May 26-28, 2004 in Prague, Czech Republic. The purpose of the meeting was to progress work on an international training and credentialing strategy for ICD-10 coders, with the goal of improving the quality of mortality and morbidity data and the status of ICD coders. Twenty-two persons from ten countries, representing eight collaborating centers and several international organizations, participated in the three-day meeting. A list of participants is included in Attachment 1.

Marjorie Greenberg, Head of the North American Collaborating Center (NACC) and Chair of the WHO FIC Education Committee, chaired the meeting, along with other

members of the meeting Planning Group. The latter included Donna Glenn, NACC; Sue Walker and Ron Casey, Australian Centre; Christine Sweeting, UK Centre, and Kathy Giannangelo, American Health Information Management Association (AHIMA) and representing the International Federation of Health Record Organizations (IFHRO).

WEDNESDAY – MAY 26, 2004

Morning Session.

Welcome & Introductions.

Marjorie welcomed the group and attendees introduced themselves. The assignment of rapporteurs was arranged as follows:

- 26.5.04 – morning session – Chris Sweeting
- 26.5.04 – afternoon session – Patricia Wood
- 27.5.04 – morning session – Donna Glenn
- 27.5.04 – afternoon session – Julia Raynor
- 28.5.04 – morning session – Stefanie Weber
- 28.5.04 – afternoon session – Sue Walker

Review of Agenda and Meeting Objectives

The group reviewed the agenda (Attachment 2) and the objectives of the meeting which were to:

- Analyse results of Needs Assessment questionnaires for mortality and morbidity coders and consider next steps
- Develop plans for updating inventories of ICD-10 training materials and capacity
- Progress core curricula for mortality and morbidity coders
- Develop business plan for International Training and Credentialing Program for mortality and morbidity coders
- Finalize brochure
- Plan presentation to IFHRO in October 2004
- Approve ground rules for disseminating materials
- Discuss plans for 2004 Annual Meeting of WHO-FIC Network
 - Education Committee working sessions
 - Needs Assessment for WHO-FIC educational sessions

Marjorie also mentioned that although the focus of this meeting was to look at how to support credentialing or certifying coders using ICD-10, the Education Committee also had to consider how to support ICF training needs.

Review of Accomplishments

Needs Assessment Questionnaires

The Needs Assessment questionnaires for mortality and morbidity coders had been circulated by the Chair to regional offices and collaborating centers in February 2004, and a preliminary analysis was available. It was pointed out that when these were first circulated, some questions had been misunderstood, probably due to language barriers. Subsequently, the questionnaires had been revised and made clearer and easier to tabulate. The Pan American Health Organization (PAHO) had translated the questionnaires into French, Spanish and Portuguese. The Australian Collaborating Centre is entering and analyzing the questionnaires and will present a full analysis of findings at the Reykjavik meeting.

Nearly 100 responses had been received from all of the WHO Regions. The highest response rate was from the PAHO region, with the European region second. It was noted that consistent with the “Information Paradox”, the fewest responses had been submitted from countries with the worst health problems.

One of the questions in the questionnaire was specifically about whether a country had a credentialing system for coders and, if not, whether an international credential would be useful. Eighty-two percent of mortality responses and 45 percent of morbidity responses supported an international credential, a positive validation of the Education Committee’s work plan.

The Education Committee was also fulfilling a remit for the WHO-FIC Implementation Committee as the Needs Assessment questionnaire asked about the current status of ICD-10 implementation within respective member countries and barriers to implementation.

Inventory of ICD-10 Training Materials and Capacity

The predecessor Subgroup on Training and Credentialing had compiled an inventory of training materials and capacity, which is posted on the NACC web site. However, the inventory is now three years old and needs to be reviewed with the core curriculum to identify gaps. This would require further discussion during the meeting.

International Training and Credentialing Program

The Subgroup had developed a proposal for an International Training and Credentialing Program, which was endorsed in principle by the IFHRO Executive Committee in 2000. There was strong agreement that WHO and the collaborating centres should partner with a non-governmental organization, such as IFHRO, to accomplish these objectives. This initial approach had been discussed with Kathy Giannangelo representing AHIMA/IFRHO and subsequently with the IFHRO Executive Committee in Rochdale, England and with Willem Hogeboom, President of IFHRO, who had attended a session of the Education Committee in Cologne. Whilst IFHRO was agreeable in principle, the Executive Committee requested a business plan from the WHO FIC Network to see how this could be progressed. It was recognized that both WHO and IFHRO had limited financial resources, and a key concern was how the international credential could be supported.

Lorraine Nicholson, member of the IFHRO Executive Committee, described the IFHRO structure, which includes an Executive Committee and General Assembly. There are 22 countries with national associations, each of which nominate a national director. Each country has one representative on the General Assembly. The Executive Committee consists of a President, President-elect, Secretary, Treasurer and two directors. Lorraine mentioned that IFHRO was now moving from a 4 yearly to a 3 yearly Conference. The next Conference is to be held in conjunction with AHIMA in Washington, D.C., in October 2004, where a number of persons present at this meeting also will be in attendance.

The informational brochure that had been produced by a member of Donna Glenn's staff with text provided by Sue was mentioned, but further discussion for this was ear-marked for Friday. The main focus of the morning was then given to Sue's report on the Needs Assessment Survey and its findings.

Needs Assessment Survey Findings

Sue Walker presented a draft report, based on mortality responses from 72 countries and morbidity responses from 42 countries. Sue cautioned that this was very much a draft report, in fact more of a sub-set as she knew that there were still countries whose data had not been included, but would be in the final version to be presented in October. She asked all members present to let her know if there were any mistakes or irregularities.

Mortality

Sue then went through the survey findings for Mortality – addressing each of the Survey Headings. Some comments elicited questions around some of the figures presented and also about information from countries that hadn't responded. Lorraine enquired about chasing up these missing elements and suggested that anyone who had personal contact with any of the non-responding countries could let Sue know. Lorraine agreed to make contact with them on behalf of IFHRO and pass on the information to Sue. Roberto Becker will follow up with Venezuela, and Andre L'Hours offered to provide information on countries that are submitting ICD-10 mortality data to WHO for cross reference. Andre also mentioned that questionnaires that had originated from WHO on mortality data could be fed back to the Committee. Sam Notzon may be able to obtain a response from Russia. Carol Lewis asked about whether the respondents were including private hospitals and clinics. This could have a significant impact on the number of morbidity coders that need training. It was agreed that the WHO-FIC Implementation Committee needs to be informed about private sector users of the ICD for morbidity purposes.

Discussion took place around the fact that the Education Committee and IFHRO were probably in favour of credentialing training tools rather than creating an international examination, which would be very resource intensive. Donna Glenn raised the important

point that the Education Committee also had to think about credentialing or certifying the trainers/instructors using these tools.

Sue then went on to look at the Survey findings on morbidity coders needs.

Morbidity

Regarding barriers to implementation, a question was raised about whether all hospitals were covered, e.g., psychiatric hospitals. Sue agreed that this element could be reviewed again.

When asked about being in favour of an international credential, there was a lower response rate than for mortality. This was probably due to the fact that some countries do have a national credential already in place for morbidity coders.

Next Steps

The next steps that have to be put in place after the initial findings were agreed as follows:

- Finalize data entry and re-do the analysis
- Send the finalized report to the WHO-FIC Implementation Committee and Education Committee for confirmation and then to Regional Offices
- Feedback from the survey findings will be disseminated to all countries that have participated.
- Sue will give a formal presentation to the Annual Meeting in Reykjavik in October.
- Submit the findings for publication – suggested publications were the WHO Bulletin, a major epidemiological journal and also to put it on the WHO FIC web site.

Marjorie re-confirmed that any questions/suggestions should be sent to Sue. Marjorie will also liaise with Sam Notzon to find out the numbers of deaths for countries to feed into the mortality analysis. Sue will write a formal introduction for the Needs Assessment paper and will condense some of the findings into graphs for mortality and morbidity together.

Any further information for Sue has to be with her by July 31st. The Committees and Regional Offices will receive this for comment by the end of August.

Finally, Marjorie informed the group that a member of her staff, Traci Ramirez, had translated all responses received in Spanish and expressed appreciation for this effort. Sue stated that she had attempted to do the same for those received in French, but also had final confirmation from the husband of Rosemary Robert's secretary, who is French! The Education Committee would like to thank them for their contribution and above all to Sue and her colleague Andrew Klisanin for all the hard work they have put into producing this survey. All agreed that the preliminary results were extremely interesting

and should guide future work of the WHO FIC Education and Implementation Committees.

Afternoon Session

Participants provided a variety of updates, as follows:

- The WHO website is being replaced by the end of July, with assistance from Catherine Sykes of the Australian Center.
- All three volumes of ICD-10 are being reprinted to reflect corrections, changes and updates made through 2002. The reprint should be available by October 2004.
- An updated ICD-10 (all three volumes) was published in Spanish last year and an electronic version is to be released this year.
- The Paris Centre has compiled CIM-10 updates, which will be checked by Andre L'Hours, sent to DIMDI for the electronic version, and returned to Andre for final checking.

Inventories of ICD-10 Training Materials and Capacity

The inventories of ICD-10 Training Materials and Capacity, which are posted on the NACC web site (http://www.cdc.gov/nchs/about/otheract/icd9/nacc_subgroup.htm) are out-of-date but useful nevertheless. They will need to be updated as part of the process to solicit training packages for WHO-IFHRO approval. There was discussion around the translation potential of some products plus the need for clarification of the translation rights of the National Center for Health Statistics course, "Cause of Death Classification, Coding and Analyses: ICD-10 Course for Statisticians." Although any materials related to this course would be in the public domain, full documentation of the course, suitable for translation, currently is not available.

In the process of updating the ICD-10 training material inventories, the Education Committee will want to assess the extent to which the "educational needs" (as identified in the Core Curricula) are met in existing materials. There also was discussion around the need for training of the people who complete the source documents, for example, instructions for certifiers of cause of death (this was discussed again later in the meeting).

Given that there are private training materials available in some countries, it was felt that there should be efforts to include these materials in an updated inventory. It was suggested that WHO regional offices and the collaborating centres could be asked for information on private training sources in their respective areas that might be of international utility and for contact information.

Sue Walker suggested that the Education Committee focus its energy on finalizing the core curricula before updating the inventories. There was general agreement with this approach.

Regarding training capacity, discussion included mention of the Roster of Experts, which was developed by Roberto Becker and handed over to the co-chairs of the WHO FIC Implementation Committee. Marjorie reported that the idea of WHO FIC-in-a-box, which requires experts as well as materials, is still being discussed by various groups, including the Heads of Centres.

Review of Training Materials

There was consensus that ICD-10 training materials would need to be reviewed with the perspective of ensuring that material meets requirements of the core curricula for each application (mortality and morbidity). Comparing the content of training material to the items in the core curricula will serve to identify any deficiencies in material reviewed. Lorraine Nicholson continued the discussion around the concept of accrediting or approving training material and/or trainers. The group agreed that this would be more manageable than developing and administering an international credentialing exam for individuals.

Status of Core Curricula

Sue Walker led a discussion on the status of the Core Curricula for mortality and morbidity coders, which had been initiated at the 2002 WHO FIC Network meeting and further developed at the 2003 Education Committee meeting in Washington, D.C. The group decided to continue fleshing out each item in the curricula, starting with the one for underlying cause-of-death coders. The items were considered to be the *minimum* requirements of a core curriculum that could be used as a tool to guide and assess training material for approval. Many improvements were suggested by members of the group. The new draft Core Curriculum for Underlying Cause-of-Death Coders was edited by Marjorie and Patricia and presented to the group Thursday morning.

Following a very productive day, the participants all enjoyed a group dinner in Prague.

THURSDAY – MAY 27, 2004

Morning and Afternoon Sessions

Re-drafted Core Curricula

The session began with review of the revised draft Core Curriculum for Underlying Cause-of-Death Coders, with additional edits and suggestions incorporated. The group then reviewed and edited the Core Curriculum for Morbidity Coders to assure consistency between the two documents. The final draft of the two core curricula is contained in Attachment 3. One topic that received considerable discussion, both during and after the meeting, was the subject of the examinations that would be required in order to receive the international certificate. Because a modular, regional approach is being recommended for new coders, it was agreed that students may pick and choose how and where they study (e.g., courses delivered by statistical offices, community college

courses, on-line courses, etc.). Thus, each course or module would need to have an associated exam that assessed knowledge of the material covered. It has been suggested, however, that consideration might be given to identifying a “capstone” module that “integrates coursework, knowledge, skills and experiential learning to enable the student to demonstrate a broad mastery of learning across the curriculum for a promise of initial employability and further career advancement.” (see Robert C. Moore – Capstone courses at <http://users.etown.edu/m/moorerc/capstone.html>.) This can be explored by the Joint Committee.

Draft Business Plan for International Training and Credentialing Program

Kathy Giannangelo led the discussion on how to progress work on a business plan for the international training and credentialing program. The Prague meeting Planning Group had agreed to use the template developed by the WHO FIC Network Planning Committee for a business plan for implementing the Network’s Strategy and Work Plan. Different members of the Planning Group had drafted sections of the template prior to the meeting.

The majority of time was spent discussing the relevant tasks, which Kathy had drafted. Kathy walked the group through the steps that would be needed to develop a full international credential, using the U.S. process for credentialing as an example (see Attachment 4). The participants reaffirmed that this was beyond the current capacity of the Education Committee and IFHRO. However, considerable consensus was reached on a series of tasks that would result in approval of training materials and trainers and, ultimately, the awarding of an international certificate to appropriately trained coders. A central component of this strategy is establishment of a joint WHO FIC – IFHRO Committee of 6-10 persons, which would be responsible for the following tasks:

- review and evaluate training materials and associated exams
- define trainer qualifications
- define the process for trainer approval
- review and approve modular core training packages based on the core curricula and
- define the process for conducting the comprehensive assessment for practicing coders.

The target date for issuing international certificates is 2007. It was suggested that IFHRO consider (or explore the feasibility of) establishing a coder specialist special interest group within its membership and awarding additional recognition to those who receive the international coding certificate.

The group then brainstormed content for the Business Drivers (i.e., what is driving the strategic intent, the business potential) and the Risk Analysis (i.e., what are the benefits if this area of work is funded and what problems/costs may arise if this area is ignored). Finally the group discussed expected outcomes and resource requirements. The resources to support training in developing countries and countries not represented by collaborating centers are still to be figured out, as well as the resources for translating the training modules and the cost to implement. The option of scholarships needs further

consideration. An estimation of these resources would be helpful by the time of the 2004 IFHRO meeting.

Lorraine Nicholson, official IFHRO representative to the Prague meeting, participated actively in development of the Business Plan and provided considerable advice on the process for involving IFHRO members and presenting the Business Plan to the IFHRO Board and General Assembly in October 2004. This meeting and the following IFHRO meeting, in 2007, provide targets for completing relevant tasks.

FRIDAY, MAY 28, 2004

Morning session

Review of International Business Plan

A short review of the business plan discussion of Thursday afternoon was provided by Kathy Giannangelo to Lars Age Johansson, Chair of the Mortality Reference Group, and Marijke de-Klein, Co-Chair of the WHO FIC Implementation Committee, who joined the meeting on the last day.

An additional step that was added to relevant tasks was to develop the process for conducting a comprehensive assessment for practicing coders in 2006. It was still considered an open question on exactly how to assess practicing coders (who, where, etc.)

It was pointed out that the business plan was especially designed to have programs that could be shared with countries that are just starting to code mortality and morbidity data and that approved modules will be available right away, even if compilation of the core training packages takes longer.

Lars questioned who would translate the training materials. The group suggested that every country would be able to translate the modules, and that there would be at least one approved module for each component of the core curricula that did not have copyright restrictions. The mechanism for quality control of translated materials needs further consideration.

Another question was what would happen to experienced coders who don't pass the exam (possibly because of regional differences). The participants felt that there would be no international requirement that coders pass the exam, although some countries might make it a requirement or at least provide incentives. The purpose of this program is to enhance the international standard of ICD-10 coding and the quality of data, not to disadvantage the existing coders. An important thing to clarify would be the incentive for practicing coders to obtain the international certificate.

It was pointed out that the details of this program would be more difficult to develop for morbidity coding because there are a lot of country specific differences (e.g., DRGs,

definition of main diagnosis). Andre L'Hours pointed out that the WHO rules for morbidity coding haven't been revised for quite a while so this would be a task to accomplish before enforcing international standards in morbidity.

Some other resource ideas were discussed. International or national organizations could be asked for funding. Fees charged for certification could be used to support the program. Insurers and others might pay for training in ICD-10 morbidity coding; however, availability of training should not be limited by this requirement. The estimated cost should include the delivery of training to all of the regions. The need of an active role for Centres and Regional offices was pointed out. The idea of having a "pretest" before developing an international test was found helpful.

The final draft of the Business Plan, agreed by the meeting participants, is contained in Attachment 5.

Review of draft brochure

The **draft brochure** was passed around and explained by Sue Walker. The initial idea for creating such a brochure was that everybody does not have access to the internet and there should be some paper-based information material for those countries. A brochure also was seen as a concise vehicle for dissemination and education about the International Training and Certification Program and the WHO FIC Network. Sue had presented a paper at the 2003 WHO FIC Network Meeting in Cologne, "Supporting the International Coding Community through Standardized Education and Credentialing", with a first draft of the brochure. A colleague of Donna Glenn had worked on layout of the material into brochure format, copies of which were reviewed by Prague meeting participants. The cover design was based on the solar system, with the WHO FIC Education Committee in the Center.

Marijke suggested that the layout, design and information would be helpful for other committees, as well. Each Committee could use the generic information and include greater detail on the respective committee and work plan. The Committee featured would be the center of the solar system for that brochure. Lars agreed and explained that there are 45 countries with 75 people participating in the Mortality Reference Forum. Roberto also operates a forum for Spanish-speaking countries. The problem of people not knowing about these forums was discussed; a similar brochure for the Mortality Reference Group and other forums could address this problem.

Ideas for enhancement of brochure:

- Addresses of regional offices should go on the back
- Some of the descriptions of the committees need to incorporate information on the International Classification of Functioning, Disability and Health
- There could be less information on collaborating centers on the first page
- The wording should be clearer to make it easier to translate

The group also discussed some of the questions raised in Sue's Cologne paper.

- Regular paper weight will be sufficient at first
- First start with .PDF file on the website and printouts done by Centres or whoever wants to distribute
- Each Centre could translate as the need comes up
- The brochure should be ready for Reykjavik – Marijke de Klein suggested it should be ready for the implementation committee by then as well
- The idea of the solar system is accepted by everybody but there should be no mix of regional offices and committees.
- No phone numbers should be included on the brochure but rather e-mail addresses
- IFHRO should be mentioned on the WHO FIC Education Committee brochure, but without detailed information or logo

Sue plans to revise the brochure to reflect the results of this meeting. Revisions will be e-mailed to members of this Committee by Sue Walker by the end of June for comment, to be returned to Donna Glenn by the beginning of August. An accompanying paper will be written for Reykjavik by Donna Glenn, Sue Walker and Margaret Hazlewood. There should be sufficient numbers of hardcover copies for the meeting in Reykjavik.

Next steps for Needs Assessment Questionnaires

The group reviewed the next steps for the Needs Assessment questionnaires, which were discussed on Wednesday:

- Data analysis will be finished by Reykjavik
- Sue will try to get information from countries who did not respond so far (especially the countries that have not implemented ICD-10 and their reasons)
- Answers received until August 1st will be incorporated into the report for Reykjavik
- Sue will check back with regional offices to let them know about “deadline” for Reykjavik paper
- Report will be submitted by WHO FIC Education Committee
- Report will be sent to regional offices and Education Committee by the end of August for last comment before finalization for Reykjavik; after the meeting it will be available for everyone
- Paper should be presented during plenary in Reykjavik
- Publication of results will be discussed in Reykjavik
- The WHO questionnaire on mortality data will be revised by WHO, then sent to Education committee and Mortality Reference Group for revision and then sent out to countries. Results are not expected for this year.

Next Steps for Inventory of Training Materials and Capacity

No updating of the inventory of training materials seems to be necessary now because this will be done by asking Collaborating Centres and Regional Offices to submit

training materials for the modular training packages. Questions about format, copyrights, prerequisites etc. will be included in the “call for materials”.

Other Education and Training Needs

There needs to be a curriculum for training the people who provide the mortality and morbidity information that is coded (e.g., certifiers of cause of death). Ideas for information materials or ways to train these “suppliers of data” were discussed. Cultural and linguistic barriers might be a problem for certification. An outline will be drafted by Roberto Becker and passed to the group.

Next Steps for Business Plan

Kathy Giannangelo will distribute the documents discussed in this meeting by the beginning of June. Marjorie will compile all rapporteur notes and draft documents into a meeting summary, which she will circulate to meeting participants by July 9. After incorporating any comments received, Marjorie will distribute the meeting summary to the full WHO FIC Education Committee for member comments. The package of materials should be made available to the IFHRO Executive Committee some time in August.

Marjorie, Sue and Lorraine will make the presentation to the IFHRO Executive Committee and also will prepare a 15-minute presentation to the IFHRO General Assembly. Marjorie invited Committee members to attend the 14th Congress of IFHRO in conjunction with the AHIMA 76th National Convention and Exhibit, which will be held October 9-14, 2004 in Washington, D.C. She especially encouraged participation in the October 14th Institute on Classifications and Vocabulary, which will feature presentations on the WHO FIC Network and the International Training and Certification Program.

The participants discussed membership from the WHO FIC Education Committee on the Joint WHO FIC – IFHRO Committee agreed on the previous day. Marjorie pointed out that members will need to have considerable expertise in ICD-10 training. The following persons were recommended: Sue Walker of Australia, Cassia Maria Buchalla of Brazil and Christine Sweeting of the United Kingdom. Marjorie said she would serve as an “ex-officio” member in her capacity as Chair of the WHO FIC Education Committee.

Draft Ground Rules for Disseminating Materials

Marjorie, Sue and Kathy had held a conference call in April to discuss ground rules for disseminating materials developed by the WHO FIC Education Committee. As a result, Marjorie had drafted a set of ground rules, which were reviewed with the participants. The group agreed on the ground rules with a few modifications, as follows:

- Change last sentence of introduction: remove “while” and add “when” to make it more specific.
- Change the last sentence to: Final meeting reports could be posted on the website but not draft reports.

The revised draft, which will be presented in Reykjavik, is in Attachment 6.

Afternoon session

Participants discussed the agenda for the next meetings of the Education committee to be held during the WHO-FIC Network meeting in Reykjavik. The following issues were identified for discussion:

- annual report of Education committee,
- report on results of needs assessment survey,
- update on work of the Education committee during Prague meeting,
- update on IFHRO collaboration and progress towards the standardized ICD training and certification objective,
- discussion regarding ICF information requirements – possible inventory of training materials, needs assessment, completion of framework document - possible parallel work to ICD-10 needs assessment survey but focused on ICF.

The latter was discussed at some length. PAHO indicated a need to determine how ICF is to be used, the needs of its users for support and the educational requirements for ICF users.

Marjorie reported that the Education Committee’s Terms of Reference are generic and encompass both ICF and ICD activity. Whereas the ICD work is well progressed, there was an agreement at the Cologne meeting that further ICF activity should wait until the framework is finalized and agreed. At this stage, the framework remains in draft and there is reluctance to move forward with the work plan until it has been adopted. There is a need to ensure that the Reykjavik meetings are structured to progress both ICD and ICF workplans, whilst avoiding the debate about the Terms of Reference that ensued in Cologne.

Marijke expects to have the revised framework available from Australia before the October meeting. It is proposed that a joint meeting of both the Implementation and Education committees be held in Reykjavik to discuss this version and to develop a common view of a possible ICF data collection framework (e.g., what do various individuals and groups need to know about ICF, why, what will they use the classification for, is anyone using the classification at the code level for describing information in clinical records?). This will provide scope for the proposed survey to be developed and operationalized during 2005. Marijke believes that there is a lot of local knowledge about ICF currently, but there is a need to focus on global requirements. Training of ‘coders’ currently is not a major requirement because there are many different data collection instruments and tools in use, but no standard coding application.

It is also unclear at this stage what ICF data will be required by WHO and in what format.

The final decision about the Reykjavik meetings was as follows:

Plenary sessions

- Report on needs assessment survey report (Sue)
- Report on training and certification progress (Marjorie and Kathy)
- Annual report (Marjorie)

Breakout sessions

Session 1

Joint education and implementation committee meeting on ICF education and needs assessment (3 hours) (Marijke and Marjorie)

Session 2

- Feedback from IFHRO and next steps in training and certification process
- UK paper regarding the Agenda for Change initiative (Chris)
- Possible ICF parallel session (or ICF papers presented in joint session above)

Session 3

- Training needs for users and providers of data (e.g., certifiers, clinicians) (Roberto)
- Brazilian experiences in teaching physicians (Ruy and Cassia)
- Any additional papers not yet identified, including papers on ICF education, papers relating to educational issues for other members of the Family

Participants then considered the proposal to conduct an educational session in conjunction with the WHO FIC Network meeting, as proposed by the Planning Group in Helsinki. It was determined that once a list of registrants is available, a needs assessment survey will be forwarded to these individuals to determine requirements for, or interest in, such a session. This will assist in providing something useful and practical. It is also possible that work towards some form of meeting protocol could be undertaken to ensure that full participation by new meeting attendees, or those not currently affiliated with a Collaborating Centre, is facilitated. An orientation package could be developed, including a glossary of terms and acronyms, more information about the WHO FIC Network and a guide to Centre Heads, to help newcomers. The proposed WHO-FIC committee brochures could also be included. It was determined to work with the Planning committee with the view to having something available both in hard copy for the 2005 WHO FIC meeting and for uploading to Centre/regional office/WHO websites. Carol Lewis volunteered to work with Marjorie on the glossary of terms and definitions for the 2004 meeting.

The possibility of splitting the current meeting format into two – a business meeting (of WHO-FIC members) and a conference (with broader scope, open to anyone who is

interested) – was considered. Marjorie stated that the one-day session to be held at the IFHRO congress in Washington was planned to involve a wider audience as a public relations exercise for the Committee's work. The group felt that the current WHO-FIC meetings are not aimed at being educational sessions but are business meetings and policy-making forums.

Marjorie then thanked the committee for three full days of goodwill and hard work, and closed the meeting at 14:20pm.

**WHO Family of International Classifications Education Committee
Working Meeting
Prague, Czech Republic
May 26-28, 2004
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**Tentative Agenda
WHO Family of International Classifications Education Committee
Working Meeting
Prague, Czech Republic
May 26-28, 2004**

Wednesday, May 26

9:00 a.m.	Welcome and Introductions Assignment of rapporteurs Review of agenda and meeting objectives	Marjorie Greenberg
9:30 a.m.	Brief review of past accomplishments and future plans	Marjorie Greenberg
10:00 a.m.	Discussion of Needs Assessment Questionnaire Findings	Sue Walker
10:45 a.m.	Coffee break	
11:00 a.m.	Continue discussion of questionnaires and implications for Committee work	
12:00 p.m.	Lunch	
1:00 p.m.	Discussion of Inventories of ICD-10 Training Materials and Capacity and need for updating	Marjorie Greenberg
2:00 p.m.	Need and plans for review of training materials	Marjorie Greenberg Sue Walker
3:00 p.m.	Coffee break	
3:15 p.m.	Status of Core Curricula for mortality and morbidity coders	Sue Walker
4:00 p.m.	Approaches for progressing core curricula	Sue Walker
5:00 p.m.	Adjourn	
6:00 p.m.	Group dinner	

Thursday, May 27

9:00 a.m.	Draft Business Plan for International Training and Credentialing Program	Kathy Giannangelo
10:00 a.m.	Discussion and refinement of business plan	
10:45 a.m.	Coffee break	
11:00 a.m.	Continue discussion of Business Plan	
12:00 p.m.	Lunch	
1:00 p.m.	IFHRO Board informal reaction to Business Plan and further discussion	Lorraine Nicholson
3:00 p.m.	Coffee break	
3:15 p.m.	Plan presentation to IFHRO Board	Marjorie Greenberg
5:30 p.m.	Adjourn	

Friday, May 28

8:30 a.m.	Review of draft brochure and plans for publication and distribution	Sue Walker and Donna Glenn
10:45 a.m.	Coffee break	
11:00 a.m.	Next steps for: <ul style="list-style-type: none">• Needs Assessment Questionnaires• Inventories• Core Curricula	Marjorie Greenberg
12:00 p.m.	Lunch	
1:00 p.m.	Next steps for: <ul style="list-style-type: none">• Business Plan• Presentation to IFHRO• Brochure	Marjorie Greenberg
2:30 p.m.	Draft Ground Rules for Disseminating Materials	Marjorie Greenberg
3:00 p.m.	Coffee break	
3:15 p.m.	Plans and agenda for meetings in Reykjavik	Marjorie Greenberg

4:30 p.m. Adjourn

May 17, 2004