Statement of Agreement on the International Patient Summary

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Endorsement

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- Rob Hausam (involved in HL7 International)
- Stephen Kay (involved in CEN/TC 251)
- Wayne Kubick (employed by HL7 International)
- Jane Millar (employed by IHTSDO)
- Anna Orlova (employed by AHIMA)
- Robert Stegwee (involved in CEN/TC 251)
Vision

• In order to further the care for citizens across the globe, we agree to provide an single common International Patient Summary (IPS) specification that is readily usable by all clinicians for the (cross-border) care of a patient.
Oslo Statement of Agreement on the International Patient Summary (IPS)

1. We agree on a common scope for IPS

2. We have a set of agreed principles for the standards specification of an IPS:
   a) IPS will be implementable
   b) IPS will be global
   c) IPS will be extensible and open
   d) IPS will be sustainable

3. We will actively manage expectations of the IPS standards specification
IPS Scope

• “Minimal and non-exhaustive Patient Summary, specialty-agnostic, condition-independent, but readily usable by all clinicians for the unscheduled (cross-border) care of a patient.”
Principles (a)

• The standards specification for the IPS will be implementable
  – Promote (the evolution and convergence of) existing standards
  – Rely on solutions that are already implemented or ready for implementation
  – Consider additional solutions as they become available
Principles (b)

• The standards specification for the IPS will be applicable for **global use**
  – Strive for global accessibility of standards for free
  – Strive for a core set of globally accessible and broadly usable terminologies
  – Include free text in addition to the structured codes as needed
  – Do not include local solutions that are not available in other jurisdictions
Principles (c)

• The standards specification will be extensible and open to future use cases and solutions
  – The IPS provides common content that can be extended for other use cases
  – The IPS is open to emerging solutions for unresolved issues or improvements
Principles (d)

• The standards specifications and their implementation will be **sustainable** over time through:
  
  – A robust maintenance and update process of the IPS
  
  – A process to ensure clinical validity of the IPS, meeting
    • clinical requirements (including workflow)
    • clinical documentation requirements
    • information quality requirements
Expectations

• We will manage the expectations of the IPS standards specifications among stakeholders, by
  – stipulating the role of the IPS as a foundation for others to extend
  – justifying the inclusion of items in the IPS within the limited context of unplanned (cross border) care