

WHO-FIC Asia Pacific Network Working Meeting

Minutes

Date and Time: February 12 (Thu.), 2015 10:00-16:30

February 13 (Fri.), 2015 10:00-12:00

Place: Japan Hospital Association conference room

Participants: Hiroyoshi Endo (Co-Chair, Japan), Sukil Kim (Co-Chair, South Korea), Mark Landry (WHO WPRO), Wansa Paoin (Thailand), Maliwan Yuenyongsuwan (Thailand), Joon Hong (South Korea), Yukiko Yokobori (Japan)

At the outset, the meeting reviewed the agenda and approved the minutes of the previous meeting.

1. ICD-10 APN Simplified Version (beta)

Dr. Paoin reported on the progress on the development of the beta version of ICD-10 APN Simplified Version. The main component of the Simplified Version will be the index. The index will be in a table format with a column of disease names at the far left and the remaining columns for the various states of the patient. This layout enables the coder to easily select the correct code even for diseases that use different codes for patients in different states, such as in a perinatal period and birth, and facilitates the selection process that was not necessarily easy using ICD-10. Dr. Paoin explained that Dr. Ustun of WHO Headquarters had pointed out to him in their discussions last year that a further decrease in the number of codes could not be authorized. Accordingly, Dr. Paoin decided to work on simplifying the index and developed the new structure. Dr. Paoin also requested the meeting to let him know if more names should be added to the acknowledgements in the first part of the index. Ms. Hong pointed out that there were both Arabic and Roman numerals used in the index, such as for diabetes “type 1,” and advised that numerals should be unified according to either one of the systems. The beta version will be finalized after it is reviewed by the participants and modifications made.

Dr. Landry informed the meeting that Cambodia had made a request for ICD-10 training to WHO, and the United States Agency for International Development (USAID) is expected to implement the training. In Cambodia, while the full ICD-10 should be introduced in large hospitals, the ICD-10 APN Simplified Version should be introduced in primary care facilities. Dr. Landry proposed linking the activities of the APN Simplified Version with the USAID project.

As for the future steps, it was agreed to implement the field trial for the Simplified

Version in 2015, release the final Simplified Version during the Asia-Pacific Network meeting in 2016, and aim to have the global release at the WHO-FIC Network meeting in the same year in 2016.

2. WHO's mortality list and GFF

Dr. Landry provided an overview of a cause of death short-list of 104 ICD-10 mortality codes and the Global Financing Facility (GFF). The list of mortality codes was prepared by WHO for use by countries that do not use ICD at all. Dr. Landry suggested incorporating the list into the APN Simplified Version. After discussing this proposal, it was agreed to add the list as an appendix to the summary.

At the suggestion of the Canadian Prime Minister Stephen Harper in Ottawa last year, GFF will be officially launched in September 2015. Many of GFF's target countries overlap with those of the APN Simplified Version. GFF has five stated aims, one of which is to finance the strengthening of civil registration and vital statistics. Dr. Landry suggested APN submit a funding proposal for the APN Simplified Version.

Dr. Landry also provided an overview of the Asia eHealth Information Network (AeHIN), which was established in 2012, and proposed APN to work jointly with AeHIN. For example, the APN Simplified Version could be presented in AeHIN's regular informal webinars and at AeHIN's annual meetings. There is also a possibility for AeHIN to dispatch instructors for training on the APN Simplified Version.

3. Translation tool for ICD-10 APN Simplified Version

Professor Kim made a presentation on the translation tool for ICD-10 APN Simplified Version. The tool is being developed for translation of ICD-11 into Korean, but it can be used for translation of other Asian languages. Professor Kim provided detailed explanations on the mechanism and logic of the translation tool. He expects to have a full presentation ready for the next APN meeting. He stated that the Cambodian translation will require cross-checking and suggested that WHO's country office in Cambodia be asked to perform this task.

4. Field trial for ICD-10 APN Simplified Version

The meeting participants discussed plans for the field trial. The translation of the index will take about a month. Verification of the beta version will take about a month and will be completed by the end of March 2015. Validation of the beta version, which will involve coding of cases, should take about three months and will be completed between April and July 2015. Ms. Hong and JHA will be responsible for the verification, and Thai

Collaborating Centre for the validation exercise.

It was agreed to ask the Cambodian health ministry whether the field trial can be implemented in Cambodia. If it is acceptable for Cambodia to have the field trial in Cambodia, a field trial orientation meeting lasting a day or two will be organized immediately after the APN meeting. The field trial, lasting for about three months maximum, will subsequently be implemented during 2015. A proposal was made to select a few sites for implementation of the field trial.

A suggestion was also made to have the field trial implemented in other countries in addition to Cambodia. At any rate, it was agreed to set a goal of reporting the progress of the field trial at the WHO-FIC Network meeting in October 2015, even if the results of the field trial would not have come out by that time.

5. Plans for the 7th APN meeting 2015

It was agreed to request Cambodia to host the 7th APN meeting to be held in 2015. Dr. Landry will first liaise with the Cambodian side and then a letter jointly signed by APN and WHO will be sent, through WHO's country office in Cambodia, to the Cambodian health ministry to officially request Cambodia to host the meeting. The preferred host city will be Siem Reap in Cambodia. Two options were given as to the dates: June 29 and 30 as the first choice, and July 27 and 28 as the second best choice. It was suggested that public facilities could be used as the venue. Dr. Yuenyongsuwan will be responsible for making block hotel reservations. The agenda will include (1) adoption of the APN Simplified Version (beta version), (2) workplan (including GFF and the simplified curriculum), (3) ICD-11 field trial, (4) an open forum, and (5) country report. The invitees will basically be the same as for the 6th APN meeting in Bangkok. It was also decided that invitation letters could be sent to invitees not from the APN countries if such invitees could attend the meeting with their own funding. As for work sharing, it was normally the case for JHA to send out the invitation letters and the hosting country to provide logistics and visa support. However, because it would be difficult for Cambodia to bear all of the hosting burden, it was decided to ask WHO's country office in Cambodia to provide support, including in terms of communication.

6. Simplified education module

Ms. Hong made a presentation of the sample materials that could be used in the educational tool for the APN Simplified Version. Because of the heavy workload, the Thai Collaborating Centre offered to assist Ms. Hong in the development of the educational materials. As for the number of days needed for training, Ms. Hong estimated a week for

training of trainers and three days for general training of trainees. Dr. Landry suggested creating a list of commonly used codes and putting it at the beginning of the Simplified Version. It was agreed to create such a list by referring to examples in Thailand. Dr. Paoin showed a flow chart used to select the appropriate code from a diagnosis. There are 54 types of such flow charts already developed. It was decided that provided there is permission from Dr. Yuenyongsuwan's superior, the flow charts would be used in the APN Simplified Version. Dr. Yuenyongsuwan will draft a letter seeking this permission, and the Co-Chairs will check and sign the letter.

7. Survey on training resources

The secretariat reported that progress has not been made regarding the survey since the Thai meeting in 2013. So far, only Pakistan, Australia, and India have provided information on education and training. It was decided that the secretariat will conduct a survey on the availability of special courses on demand in respective countries before the 7th APN meeting.