WHO-FIC NETWORK MEETING

Tokyo, Japan
16-22 October 2005

Update and Revision Committee
Review of the Terms of Reference
Evaluation of the URC Processes

It was recommended, in the Reykjavik paper WHO/FIC/04.068 and again at a special meeting held in Hyattsville Maryland on February 9 – 10, 2005 on Evaluation of ICD-10 Implementation and Updating, that there be an internal WHO-FIC Network evaluation of the ICD-10 updating process.

Further, following the URC handover meeting, Julie Rust prepared a discussion document to assist in moving this issue forward.

As the chair of the URC, I must apologize for not having taken any action sooner on bringing this item forward for the discussion of the committee members.

In light of activities that have transpired with the handover of the URC from the NCCH to CIHI and work begun on addressing the issues under Special Clinical Topics, I propose that we incorporate discussion on evaluation of the Updating Process with discussion of our Terms of Reference.

Does the Committee agree that discussion in one area may inform the other?

Working through these two tasks is important if the URC is to continue as an effective body. It may be that there is insufficient time to discuss these two projects in a comprehensive manner. Therefore, I propose that we discuss the following items first and then if there is time, tackle questions as outlined in the accompanying documentation.

1. Frequency and format of URC meetings
2. Purpose of the URC – updating and revision
3. Format for conducting the Evaluation of the Updating Process

   The actual methodology for this evaluation could include:

   - Focus group of URC members at the annual WHO-FIC meeting
   - Questionnaire via URC forum and WHO website of WHO-FIC Network

Does the Committee agree with this approach?

In preparation for this discussion, it is recommended that Committee members review

and bring a copy of the pdf documents More Information on the URC and the Terms of Reference for the URC as they are posted on the WHO website: http://www.who.int/classifications/committees/updating/en/index.html. Also, following is an edited version of the document prepared by Julie Rust.

Questions to facilitate discussion are posed within the document.

Issues for discussion for internal (WHO-FIC Network) evaluation of ICD-10 updating process –prepared by Julie Rust April 25, 2005 and edited by Mea Renahan October 2, 2005

The following are some issues highlighted during the handover meeting of URC chair and secretariat in Toronto in February 2005, raised in Rosemary Roberts' paper for the Helsinki planning meeting in April 2004 and discussed in Washington, February 2005.

Issues to be considered:

Access

- The current process of updating is offered only in English and access is limited to a collaborating centre or member state
- The current members of the URC include 6 Collaborating Centres, 11 countries and the WHO secretariat

Q1 - Should membership of the URC be expanded?

Q2 - Should discussion/submissions be opened up to the general public via the WHO website?

Methodology

- Most of the successful annual recommendations for change are a result of problems identified by users of the classification, and easy to fix, rather than a systematic review, ie reactive rather than proactive.
- The majority of these proposals originate from countries producing their own clinical modification.
- Major clinical and structural changes have not been possible under existing updating mechanisms – ?need for criteria to distinguish between 'update' proposal and 'revision' proposal. The pilot project in this area for 2005 may provide further information on this issue. *This should be addressed under item 6.1 on the agenda.*
- Lack of documented business rules for structure and conventions of ICD-10 which makes it difficult for less experienced members to formulate submissions.
- Clinical currency of the classification versus stability in time series.

- ?Access to international expert clinical groups.
- Current process is labour intensive - ?better managed by web-based process using 'blog' style communication.
- Need to encourage more members to contribute to email/blog discussions during the year, rather than save all comments up for WHO-FIC meeting.
- Contentious submissions should be 'tested' via the URC forum (as a sounding board) prior to submission

  Q3 - Should URC plan for a second face-to-face meeting and teleconferences to discuss morbidity issues? (See Terms of Reference)

  Q4 – Should the URC incorporate the processes used in the development of the ICF? The WHO has offered to set it up and manage it.

  Q5 – Who should or how should we handle variations in language versions?

Official updates/implementation

- Who is the official 'umpire' - reaching consensus is sometimes difficult as further feedback is often received post the WHO-FIC meeting when the draft official update document is circulated.
- Lack of dissemination of URC changes through WHO website.
- No translation/dissemination of different language versions of URC changes.
- Lack of timeliness of hard copy (books) of latest edition and electronic tools

  Q6 – Is the WHO appropriately resourced to support the work of this Committee?

  Q7 – Are the processes for reviewing recommendations comprehensive? E.g. are the downstream effects of decisions examined, i.e. effects on clinically modified versions versus purist versions and language versions?

  Q8 – Do we have the appropriate mechanisms/reporting structure for updating paper versus electronic?

WHO-FIC Network Meeting

- Time availability at the meeting for more in depth discussion of proposals is limited.
- There has been talk in the past of having a full-day meeting of URC (similar to MRG) prior to the start of the WHO-FIC meeting. Members feedback on this issue would be useful

  See Terms of Reference and Q3.

Succession plan

- A succession plan for the chair and secretariat of the URC needs to be in place. There was discussion on whether this should continue to be a predominately English-speaking country; the Nordic or German Centres are possible future candidates. It

was felt that two major update cycles, ie 6 years, was a good time frame for maintaining chair and secretariat duties. Again, members feedback would be useful. ***Q9 – What do the members think?***