

HL7 Electronic Health Record Technical Committee



Decision-making Practices Document, Version 0.2

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This paper documents the decision-making practices of the Health Level Seven (HL7) Electronic Health Record Technical Committee (EHR TC). EHR TC will lead by example, and adhere to a set of decision-making practices that ensure consensus, openness, and balance of interest¹. Furthermore, the practices as outlined in this document are designed to enable timely decision-making balanced with an earnest attempt to ensure that input from all affected parties is considered. The Decision-making practices are intended to govern the standard operating procedures of the committee and are not intended to conflict with rules governing ballot procedure as defined by ANSI and the HL7 Bylaws and Policies and Procedures.

1. Committee meetings are open to all interested parties including but not limited to members of HL7, HL7 affiliates, and guests of HL7 as referenced in the HL7 Bylaws – Article 3.02.

Meetings of the committee are open to everyone to ensure that viewpoints of all affected parties have an opportunity to be shared and considered. Everyone is given an opportunity to speak; however, the chair may limit discussion on topics deemed to be non-constructive. Depending on the purpose or mode of the meeting certain participants are expected to attend. Other HL7 members may be asked to attend to provide specific input regarding a particular issue. The following list identifies expected participation by meeting type. All committee meetings are open; this list simply identifies the anticipated participants.

- Weekly Status conference call meetings are attended by persons registered on the committee list server.
- Independent EHR Work Group conference call meetings are attended by persons registered on the respective EHR Work Group list server.
- Committee Meetings during Working Group Meetings are attended by any working group meeting attendee. Participants are asked to introduce themselves and identify the nature of their affiliation with HL7.

2. Venues of Notification.

All activities will be conducted in a public light with efforts made to ensure ample notification of those interested. The Committee shall utilize two key venues to notify the interested membership of its activities: the committee's listserv and the committee's website.

To satisfy any notification requirements dictates that relevant announcements/materials/etc. be posted to *both* the listserv and the website. Specific notification constraints are enumerated within the relevant sections of this document.

Any use of the terms **post**, **posted**, or **posting** refers to notification subject to these constraints.

¹ When related to ballot procedures. Refer to Bylaws for additional information on balance of interest.

3. Notification of meetings and the intended agenda is provided prior to the meeting.

Binding decisions can be made only at meetings with the required advance notification; only recommendations and non-binding decisions can be made at special purpose meetings.²

The chairs of the committee shall make every attempt to ensure that all parties with an interest in agenda topics are made aware of the meeting time and location subject to the documented notification requirements. As appropriate, committee activities will be cross-posted to other HL7 lists, depending upon the topic and type of meeting as indicated in the following list. Certain meetings are subject to Bylaws guidelines for notification. Please refer to the Bylaws for additional information.

- Working group meeting agendas are posted in the meeting brochure. A preliminary agenda is developed by Wednesday of the prior working-group meeting and posted with the minutes within 2 weeks. The preliminary agenda is finalized on the weekly conference call two weeks prior to the working group meeting and posted within 2 business days. Recognizing the dynamic nature of working group meetings, the agenda may require updates. Notification will be satisfied so long as at least two of the following venues are used:
 - E-mail notification by 6:00 pm local time the evening before the event
 - Notification on the bulletin board (near the registration desk) at least 2 quarters prior to the event
 - Announcement in the general session or lunch session prior to the event
- Weekly Status telephone conference call agenda outlines are to be posted by 7 PM PT the day prior to a call. Preliminary agendas are to be determined at the close of each teleconference.
- Should this Committee require action between scheduled meetings there are two alternatives. First, a Special Purpose Meeting can be called as defined in the Bylaws (Section 11.04), which requires 30 days notice. Alternatively, issues may be discussed as an informal group, bringing forward recommendations to the list or as a discussion topic for the next regularly scheduled committee meeting. Recommendations by the informal group are not binding decisions until acted upon by the committee.

4. Decisions made at committee meetings are recorded in meeting minutes and posted.

Minutes are recorded and posted for all committee meetings including the date, time, and location of the meeting, a list of attendees, the intended agenda, a brief summary of discussion topics, and the outcome of proposals made (including vote tallies if votes were taken). EHR Independent Work Group leaders are responsible for managing the agenda's and minutes of their group's meetings.

² A **binding decision** refers to any decision made by the committee that establishes a practice, formal recommendation, or formal action by the committee (e.g., creating a new program, rendering guidance, etc.).

Minutes from a working group meeting will be posted no later than 2 weeks after the last day of the conference and in compliance with HQ deadlines; minutes from a conference call will be posted within one week of the call.

5. Decisions made at non-working group meetings (conference calls and special purpose meetings) are summarized during the next working group meeting.

In the interest of facilitating good communication among the committee members, those decisions made between working group meetings will be summarized and available at working group meetings. This communication will contain, at a minimum, an abbreviated summary of the issues involved and the decisions made by the committee. All committee decisions are subject to the practices documented elsewhere in this paper. Quorum for EHR TC Teleconference votes is currently set at 14 members.

6. Quorum for committee meetings require that a co-chair and at least 30% of the average attendance of the first 2 days of the last WGM be present.

Attendance for all meetings is recorded in the meeting minutes, including the name of each participant and the organization (or organizations) they are representing. The presiding chair for the meeting is responsible for ensuring that minutes are taken and posted. Guests are welcome to participate in the work of the committee and are recognized as either guests of HL7, e.g., not a member of HL7, or guests of the EHR TC, e.g. a member of HL7 but not a declared member of the Electronic Health Record Technical Committee. In keeping with ANSI openness policies, guests may declare their intent to vote or abstain on any voting matter.

To ensure balanced committee decision-making, no single organizational interest may wield a “Preponderance of Influence” upon a committee. This is defined as having one organization with more than 50 percent of the voting committee members. This rule may be either stringently or loosely enforced, at the discretion of the presiding chair of the committee. However, if a committee member believes that committee decisions are being negatively impacted, he may invoke the “Preponderance of Influence Clause” requiring the chair to bring the voting membership into compliance with this 50% rule.³

The presiding chair may cast a vote in exactly two circumstances. First, the presiding chair may vote in the event of a tie. Second, the presiding chair may vote as a regular committee member when that vote corrects potential balance-of-interest concerns within the committee. (For instance, if 4 members are present, one of whom is the presiding chair and two others of whom are with the same organization, the chair’s vote removes the majority vote of the over-represented organization and thus brings the committee into balance).

In all circumstances, the committee can have no more than one presiding co-chair, with any other committee co-chairs acting as regular voting members when not presiding. Note that the presiding chair can change within the course of a given session so long as a public statement recognizing the shift of control is made.

³ Refer to Appendix A for Preponderance of Influence scenarios.

Although any issue may be discussed within committee meeting venues at any time, binding actions cannot be taken without sufficient notification and quorum. Absence of either of these conditions allows the committee to issue recommendations that must subsequently be ratified by the committee subject to satisfying constraints placed upon binding decisions.

7. Decisions made by the committee are reached using a simple majority vote.⁴ The EHR TC will always strive for consensus in decision-making.

While decisions are made by simple majority vote, the Committee shall endeavor to make decisions via a consensus process. For a decision to be called a consensus, it must receive two-thirds (67%) majority support. While determining if consensus is being reached, a variety of techniques may be used informally to assess the position of the group, including but not limited to straw poll, Robert's Rules of Order, seeking response to a hypothetical opposing view, and polling each participant to voice their position on the issue.

Before formal votes are taken, the chair will explain the eligibility for voting. Registered EHR TC members shall always receive a vote in keeping with ANSI openness rules. In support of this openness, any participant concerned that a given organization has undue representation or influence within a session of the committee may invoke the "Preponderance of Influence" clause (see #6). This invocation is non-debatable. For non-binding decisions only, all meeting participants may have the opportunity to vote at the discretion of the presiding chair.

Revisiting previously made decisions inhibits committee progress and should be discouraged. Circumstances might exist, however, that warrant re-opening discussion on a previously visited issue. To strictly manage this practice such re-opening requires a formal motion, a second, and simple majority affirmative vote of the committee as subject to the quorum rules in this document. However, in order for the decision to be considered binding, advance notification (as defined in this document) is required.⁵

8. The Committee shall rely upon Roberts Rules of Order in the event that formal guidance is needed or requested.

The committee intends to ensure the effective and active engagement of all participants. To ensure fair and just participation, the committee shall follow its documented decision-making practices, falling-back upon Roberts Rules of Order in the event of a question or concern. Since Robert's Rules of Order provides formalism for addressing almost all matters of process, this provides a "backup mechanism" of formality in the event that it is required.

It is the responsibility of the presiding chair to guide the committee to an efficient and effective outcome. The committee shall follow, in this order of precedence, these

⁴ Committees may choose to make more restrictive the thresholds on this, so long as those practices are agreed upon, voted by the committee, and documented in their practices. For instance, a committee may choose to require a two-thirds vote to revisit a previously discussed issue.

⁵ Committees may choose to make more restrictive the thresholds on this, so long as those practices are agreed upon and voted by the committee and documented in their practices.

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Decision-making Practices (which cannot conflict with HL7 Policies and Procedures or the HL7 Bylaws), HL7 Policies and Procedures, the HL7 Bylaws, and Roberts Rules of Order. Committee-established decision-making practices can refine the HL7 Policies and Procedures and Bylaws so long as they remain in accordance with those documents.

In the event that an issue arises where formality is required and other guidance exists, Robert's Rules of Order shall take precedence. This provides a "common denominator" to keep in-check the power of the presiding chair and to confirm the rights of all committee participants and members.

HL7 Electronic Health Record Special Interest Group (EHR SIG)

Scenarios for quorum and voting in EHR SIG

Appendix A

Based upon the Process Improvement Committee's Decision-making Practices Document version 1.2, adopted August, 2003.⁶

1. Simple scenario

6 persons, all representing different HL7-member organizations, attend a meeting, including one co-chair.

Quorum is established and the committee can conduct its business as usual. All participants are eligible for voting; the presiding chair may not cast a vote.

2. Tie scenario

5 persons, all representing different HL7-member organizations, attend a meeting, including one co-chair.

Quorum is established and the committee can conduct its business as usual. As the presiding chair does not vote, the possibility of a tied vote exists. In the event of a tie, the presiding chair may cast a vote to remove the tie. However, this will not constitute a consensus decision, because the consensus majority (67%) criterion has not been met.

3. Preponderance of Influence scenario

4 persons, two representing the same HL7-member organization, attend a meeting, including one co-chair from a different HL7-member organization.

Quorum is established and the committee can conduct its business as usual. In case of a vote, however, the presiding chair may cast a vote to remove the majority vote of the HL7-member organization represented by two persons. Alternatively, one of the two members representing the same organization may recuse their vote, allowing business to be conducted.

4. Over-representation scenario

3 persons, two representing the same HL7-member organization, attend a meeting, including one co-chair.

Quorum is not established and the committee cannot conduct official business, because one party represents (more than) a simple majority and the presiding chair will not be able to correct the potential balance-of-interest.

5. Proxy-representation scenario

2 persons from different HL7-member organizations, one holding a time-limited proxy for a third HL7-member organization, attend a meeting, including one co-chair.

Business may be conducted because a quorum (Co-chair plus two) is satisfied. If no proxies were held, then business could not be conducted.

6. Non-voting scenario with chair intervention

5 persons, three representing the same HL7-member organization, attend a meeting, including one co-chair from a different HL7-member organization.

Quorum is established and the committee can conduct its business as usual. In case of a vote, however, one of the three persons representing the same HL7-member organization is denied a vote due to balance-of-interest issues. Hence, quorum is established based on the fact that, apart from the co-chair, **three** other HL7 EHR TC members are present, where no single organization or party represents more than a simple majority of the voting committee membership for that meeting. Based on the *balance-of-interest* scenario (no. 3 above) the presiding chair may cast a vote (and thus may cause a tied vote) to remove the 2 to 1 majority vote of the over-represented organization.

7. Non-voting scenario without chair intervention

5 persons, three representing the same HL7-member organization, attend a meeting, including one co-chair from the same HL7-member organization.

Quorum is established and the committee can conduct its business as usual. In case of a vote, however, one of the three persons representing the same HL7-member organization is denied a vote due to balance-of-interest issues. Hence, quorum is established based on the fact that, apart from the co-chair, **three** other HL7 EHR TC members are present, where no

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Scenarios for quorum and voting in EHR SIG

single organization or party represents more than a simple majority of the voting committee membership for that meeting. The presiding chair, representing the over-represented organization, may not cast a vote.

8. Non-voting proxy scenario

4 persons, two representing the same HL7-member organization, attend a meeting, including one co-chair; a proxy has been provided by the same HL7-member organization (either by way of a time- and/or issue-limited proxy to an attending member or by way of a statement of position)

Quorum is established and the committee can conduct its business as usual. In case of a vote, however, the proxy vote will be disregarded, due to balance-of-interest issues.

Meeting configurations quick reference

(Note: this table does not have a direct correlation to the scenarios above.) Some of the issues may be resolved by choosing the “right” presiding chair. Also, proxies are not considered in this summary.

	Examples										
Member Designation	1	2	3	4	5	6	7	8	9	10	11
Organization A Members Attending	1	2	2	1	2	3	2	2	3	3	3
Organization B Members Attending	1	1	2	1	1	1	2	2	2	3	2
Guests Attending	0	0	0	1	1	1	1	2	1	1	2
EHR TC Co-Chairs Presiding	0	1	1	1	1	1	1	1	1	1	1
Is a Quorum established?	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Notes		3	1		2	3	4		2	4	4

Notes:

1. If invoked, a possible “Preponderance of Influence” scenario.
2. If invoked, a possible “Preponderance of Influence” scenario, if the presiding chair is not representing HL7-member A.
3. One vote for HL7-member A is denied, even when presiding chair is representing A.
4. Possible tie scenario.