HL7’s 30th Annual Plenary Meeting

Securely accessing and using the right health data when and where it is needed

September 19, 2016
Hyatt Regency Inner Harbor
Baltimore, MD
HL7’s 30th Annual Plenary Meeting
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Securely accessing and using the right health data when and where it is needed

8:30 – 8:40 a.m.
**Welcoming Comments**
*Charles Jaffe, MD, PhD, CEO, Health Level Seven International*

**Keynote Addresses**
A stellar group of senior leaders in government, academia, healthcare providers and healthcare technology have been invited to present in a series of keynote sessions reflecting on the past and looking forward to the future, focusing on the importance of data standards in achieving interoperability and improving healthcare.

8:40 – 9:05 a.m.
**Keynote Session 1:**
*Progress Toward Higher-Value Health Care: Biomedical Innovation, Better Evidence, and Clinical Data Standards*

Interest and activity around payment reform, new delivery models, and supporting electronic data infrastructure is increasing, with implications for the development of evidence of medical technologies, and how those technologies are used. Dr. McClellan will highlight some important recent trends in these areas, and the implications for clinical data standards and incentives for exchanging and using clinical data.

*Mark McClellan, MD, PhD,* inaugural director of the Duke-Robert J. Margolis, MD, Center for Health Policy at Duke University. Formerly, Administrator of CMS and later a senior fellow and director of the Health Care Innovation and Value Initiatives at the Brookings Institution.

9:05 – 9:25 a.m.
**Keynote Session 2:**
*Welcome to Baltimore: Comments on the Baltimore Fire of 1904, Standards, and FHIR at Hopkins*

*Dr. Paul B. Rothman, MD,* Frances Watt Baker, MD, and Lenox D. Baker Jr., MD, Dean, Medical Faculty; Vice President, Medicine of The Johns Hopkins University; CEO, Johns Hopkins Medicine

9:25 – 9:50 a.m.
**Keynote Session 3:**
*The American System for Evidence Generation*

*Robert Califf, MD,* Commissioner of food and drugs at the United States Food and Drug Administration. Prior to joining the FDA, Dr. Califf was a professor of medicine and vice chancellor for clinical and translational research at Duke University.

9:50 – 10:15 a.m.
**Keynote Session 4:**
*Progress → Rising Expectations: Standards, Interoperability, Health, Research*

A look in the rearview mirror reveals miles of progress in the deployment of electronic health records (EHRs) – and in the adoption of health data standards. The HITECH Act of 2009 and its implementing regulations were blunt and imperfect instruments for advancing use of terminology standards, but they were nonetheless effective in forcing a level of use that prompted collaborations, improvements, and new tools for implementers. The array of heavily used interoperability products and services available from NLM and others is substantially greater than it was in 2009, but significant interoperability challenges remain. How NLM can best partner with other agencies and organizations to advance interoperability across health care, public health, and research will be a key issue for the strategic planning process recently initiated by NLM’s new Director.

*Betsy Humphreys, MLS,* Deputy Director, National Library of Medicine, NIH, HHS

10:15 – 10:40 a.m.
**Break**

10:40 – 11:15 a.m.
**Panel Presentation:** *HL7 Blast from the Past*

Moderated by
*Ed Hammond, PhD*

Panelists:
*Sue Campbell, Wayne Tracy, Clem McDonald, MD*
NOW & THEN; THEN & NOW
This will be a brief look back to the early years of HL7 from a Board Chair’s perspective and how those experiences translate into today’s healthcare challenges and issues.

Sue Campbell, Trustee and Treasurer, North Sonoma Health Care District; Former Board Chair, Health Level Seven (1991-1993)

What I Learned from 45 Years in the Field
1. Technology is the most tractable of challenges—the sociology is not.
2. Big data in healthcare will be a failure unless the data representation issues are resolved.
3. Among the most important issues is workflow and ease of use while still maintaining robust data representation.

Wayne Tracy, Former President and COO of Health Patterns, LLC

As Essential as the Air We Breathe: Standardizing Vital Data for Healthcare Since 1984
As an intern at Boston Harvard hospital, it took 4-6 hours to gather all of the data needed to manage a new patient. I dreamed of such data being as immediately available as air – just ‘breathe’ it. In 1972, at Wishard Hospital in Indianapolis, we built an electronic medical record (EMR) – one of the very first – in pursuit of that goal, but the interface between the data sources and the EMR was our heart of darkness. The methods we were using to gather and display the data (screen scraping, printer output capture, and smiley faces) were too hazy and fragile. We needed message and coding standards. In 1984, with Ed Hammond and others, we proposed a message standard (PMID: 6571270) that went on to become ASTM 1238-88. Then, with generous help from Don Simborg and Wes Rishel, it became part of the order entry (Chapter 2), and all of the observation reporting (Chapter 7). The Wishard EMR grew into the first and largest health information exchange (HIE) – now carrying 4 billion results – and without Version 2 messages it could not have happened.

Clem McDonald, MD, Director, Lister Hill National Center for Biomedical Communications

The interoperability standards embraced in Meaningful Use support not only transportable patient care information, but also “practical research,” the underpinning of a learning health system. The “digital dividend” of the Meaningful Use program is that healthcare data is now available in digital format, which can be used to improve care, whether it is on the individual patient, or patients in aggregate.

The promise of clinical informatics post-Meaningful Use is to provide insights not readily visible to the human mind. The concomitant advancement of natural language processing, distributed computing, real time processing and advanced “Big Data” analytics and visualization techniques has created enormous potential to improve quality of care and reduce its cost.

Dr. Perlin will describe and discuss with the audience how healthcare providers, policy-makers, and payers are increasingly using emerging data assets for higher-value, safer, and higher-performing healthcare.

Jonathan Perlin, MD, PhD, President, Clinical Services and Chief Medical Officer of Nashville, Tennessee-based HCA and their 169 hospitals and more than 800 outpatient centers and physician practices.

12:00 – 12:25 p.m.
Keynote Session 5:
The Future of Interoperability at UHN
This presentation will provide a brief overview of the current state of interoperability and the EPR at UHN and the strategies that have been deployed to date within the organization and within the province of Ontario to create an EHR. The presentation will provide an overview of current thinking on what it takes to build a better learning health system and the technology and information challenges UHN faces in getting there.

Jim Forbes, Chief Technology Officer, University Health Network, Toronto, ON, Canada

12:25 – 12:30 p.m.
Closing Comments/C-CDA Rendering Tool Challenge
Pat Van Dyke, Chair, HL7 Board of Directors
Steve Posnack, Director, Office of Standards and Technology, ONC
HL7’s 30th Annual Plenary

Keynote Session 1: Progress Toward Higher Value Healthcare: Biomedical Innovation, Better Evidence and Clinical Data Standards

8:40 – 9:05 am

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Mark McClellan, MD, PhD
Robert J. Margolis Professor of Business, Medicine, and Policy and Inaugural Director of the Duke-Margolis Center for Health Policy at Duke University. Formerly, Administrator of CMS and later Senior Fellow and Director of the Health Care Innovation and Value Initiatives at the Brookings Institution
Mark McClellan, MD, PhD, is the Robert J. Margolis Professor of Business, Medicine, and Policy, and Director of the Duke-Margolis Center for Health Policy at Duke University with offices at Duke and in Washington DC. The new Center will support and conduct research, evaluation, implementation, and educational activities to improve health policy and health, through collaboration across Duke University and Health System, and through partnerships between the public and private sectors. It integrates the social, clinical, and analytical sciences to integrate technical expertise and practical capabilities to develop and apply policy solutions that improve health and the value of health care locally, nationally, and worldwide.

Dr. McClellan is a doctor and an economist, and his work has addressed a wide range of strategies and policy reforms to improve health care, including such areas as payment reform to promote better outcomes and lower costs, methods for development and use of real-world evidence, and more effective drug and device innovation. Before coming to Duke, he served as a Senior Fellow in Economic Studies at the Brookings Institution, where he was Director of the Health Care Innovation and Value Initiatives and led the Richard Merkin Initiative on Payment Reform and Clinical Leadership. He also has a highly distinguished record in public service and in academic research. Dr. McClellan is a former administrator of the Centers for Medicare & Medicaid Services (CMS) and former commissioner of the U.S. Food and Drug Administration (FDA), where he developed and implemented major reforms in health policy. These include the Medicare prescription drug benefit, Medicare and Medicaid payment reforms, the FDA’s Critical Path Initiative, and public-private initiatives to develop better information on the quality and cost of care.

Dr. McClellan is the founding chair and a current board member of the Reagan-Udall Foundation for the FDA, is a member of the National Academy of Medicine and chairs the Academy’s Leadership Council for Value and Science-Driven Health care, co-chairs he guiding committee of the Health Care Payment Learning and Action Network, and is a research associate at the National Bureau of Economic Research. He has also previously served as a member of the President’s Council of Economic Advisers and senior director for health care policy at the White House, and as Deputy Assistant Secretary for Economic Policy at the Department of the Treasury. He was previously an associate professor of economics and medicine with tenure at Stanford University, and has twice received the Kenneth Arrow Award for Outstanding Research in Health Economics.
HL7’s 30th Annual Plenary

Keynote Session 2: Welcome to Baltimore: Comments on the Baltimore fire of 1904, standards, and FHIR at Hopkins

9:05 – 9:25 am

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Dr. Paul B. Rotham

Paul B. Rothman is the Frances Watt Baker, M.D., and Lenox D. Baker Jr., M.D., Dean of the Medical Faculty, vice president for medicine of The Johns Hopkins University, and CEO of Johns Hopkins Medicine.
As dean/CEO, Rothman oversees both the School of Medicine and the Johns Hopkins Health System, which encompasses six hospitals, hundreds of community physicians and a self-funded health plan.

Rothman was born in New York City in 1958 and grew up in Bayside, Queens. He began his research career as an undergraduate at the Massachusetts Institute of Technology, where he studied E. coli DNA repair under Dr. Graham C. Walker. He was also captain of the varsity crew team. He completed his B.S. in biology in 1980 and was elected to Phi Beta Kappa. He then entered medical school at Yale University. While attending Yale, Rothman had the opportunity to study T cell subsets in the lab of Dr. Leonard Chess at Columbia University. He received his medical degree in 1984, earning a place in the prestigious Alpha Omega Alpha Honor Medical Society.

He went on to a medical residency and rheumatology fellowship at Columbia-Presbyterian Medical Center in New York City before joining the medical faculty of the Columbia University College of Physicians and Surgeons in 1986. There, he also completed a postdoctoral biochemistry fellowship with Dr. Frederick W. Alt, a Howard Hughes Medical Institute investigator, studying immunoglobulin class-switch recombination. At Columbia, Rothman rose to become the Richard J. Stock Professor of Medicine (Immunology) and Microbiology and chief of the pulmonary, allergy and critical care division.

A molecular immunologist, Rothman's research focused on immune system molecules known as cytokines. Specifically, he investigated the role these molecules play in the normal development of blood cells, as well as the abnormal blood-cell development that leads to leukemia. He also studied the function of cytokines in immune system responses to asthma and allergies. His work was consistently funded by the National Institutes of Health.

In 2004, Rothman accepted a position as head of internal medicine at the Carver College of Medicine at the University of Iowa. In 2008, he was named dean of the Carver College of Medicine and leader of its clinical practice plan, a role in which he served for four years. In July 2012, he became the 14th dean of The Johns Hopkins University School of Medicine and just the second CEO of Johns Hopkins Medicine.

Rothman’s honors include a James S. McDonnell Foundation Career Development Award, a Pfizer Scholars Award, a Pew Scholar in the Biomedical Sciences Award, a Leukemia Society of America Scholar Award and the Pharmacia Allergy Research Foundation International Award. He is a member of the American Society for Clinical Investigation and is a Fellow of the American College of Physicians. He was elected as a Fellow of the American Association for the Advancement of Sciences and as a member of the American Clinical and Climatological Association. He also served as President of the Association of American Physicians for 2014–15.
HL7 Plenary Meeting Notes:
Keynote Session 2: Remarks by the Commissioner of the FDA

9:25 – 9:50 am

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Robert Califf, MD

Commissioner of food and drugs at the United States Food and Drug Administration. Prior to joining the FDA, Dr. Califf was a Professor of Medicine and Vice Chancellor for Clinical and Translational Research at Duke University
Robert M. Califf, MD, MACC, is the Food and Drug Administration's commissioner of food and drugs. As the top official of the FDA, Dr. Califf is committed to strengthening programs and policies that enable the agency to carry out its mission to protect and promote the public health.

Previously, Dr. Califf served as the FDA’s Deputy Commissioner for Medical Products and Tobacco from February 2015 until his appointment as commissioner in February 2016. In that capacity, he provided executive leadership to the Center for Drug Evaluation and Research, the Center for Biologics Evaluation and Research, the Center for Devices and Radiological Health, and the Center for Tobacco Products. He also oversaw the Office of Special Medical Programs and provided direction for cross-cutting clinical, scientific, and regulatory initiatives, including precision medicine, combination products, orphan drugs, pediatric therapeutics, and the advisory committee system.

Prior to joining the FDA, Dr. Califf was a professor of medicine and vice chancellor for clinical and translational research at Duke University. He also served as director of the Duke Translational Medicine Institute and founding director of the Duke Clinical Research Institute. A nationally and internationally recognized expert in cardiovascular medicine, health outcomes research, healthcare quality, and clinical research, Dr. Califf has led many landmark clinical trials and is one of the most frequently cited authors in biomedical science, with more than 1,200 publications in the peer-reviewed literature.

Dr. Califf has served on the Institute of Medicine (IOM) committees that recommended Medicare coverage of clinical trials and the removal of ephedra from the market, as well as on the IOM Committee on Identifying and Preventing Medication Errors and the IOM Health Sciences Policy Board. He has served as a member of the FDA Cardiorenal Advisory Panel and FDA Science Board’s Subcommittee on Science and Technology. Dr. Califf has also served on the Board of Scientific Counselors for the National Institutes of Health and the National Library of Medicine, as well as on advisory committees for the National Cancer Institute, the National Heart, Lung, and Blood Institute, the National Institute of Environmental Health Sciences and the Council of the National Institute on Aging.

While at Duke, Dr. Califf led major initiatives aimed at improving methods and infrastructure for clinical research, including the Clinical Trials Transformation Initiative (CTTI), a public-private partnership co-founded by the FDA and Duke. He also served as the principal investigator for Duke’s Clinical and Translational Science Award and the NIH Health Care Systems Research Collaboratory coordinating center.

Dr. Califf is a graduate of Duke University School of Medicine. He completed a residency in internal medicine at the University of California, San Francisco and a fellowship in cardiology at Duke.
Keynote Session 3: Progress ➔ Rising Expectations: Standards, Interoperability, Health, Research

9:50 – 10:15 am

Betsy Humphreys, MLS
Deputy Director, National Library of Medicine, NIH, HHS
Betsy L. Humphreys was appointed the National Library of Medicine’s (NLM) Deputy Director in 2005. From April 1, 2015 - August 14, 2016, she also served as NLM's Acting Director. NLM is one of the 27 Institutes and Centers that comprise the National Institutes of Health. As Deputy Director, Humphreys shares responsibility with the Director for overall program development, program evaluation, policy formulation, direction and coordination of all Library activities. She also coordinates NLM's extensive activities related to health data standards, serving as US Member and founding Chair of the General Assembly of the International Health Terminology Standards Organization. She has contributed to the development of NIH and HHS policy on a range of matters, including health information technology, public access to research results, clinical trial registration and results reporting, and data science.

Humphreys, who joined the NLM in 1973, previously led the NLM’s Library Operations Division and directed the Unified Medical Language System (UMLS) project, which produces knowledge sources to support advanced processing, retrieval, and integration of information from disparate electronic information sources.

Ms. Humphreys is an elected member of the National Academy of Medicine (previously the Institute of Medicine of the National Academy of Sciences), a Fellow of the American College of Medical Informatics, and a Fellow of the Medical Library Association. She is the recipient of a number of awards, including the Morris F. Collen Award of Excellence from the American College of Medical Informatics, considered the highest honor in the field of medical informatics, the Marcia C. Noyes Award, which is the Medical Library Association's highest honor, the first Cornerstone Award conferred by the Association of Academic Health Sciences Libraries, and the President’s Meritorious Rank Award, Senior Executive Service.

She received a B.A. from Smith College, which awarded her the Smith College Medal in 2012, and an M.L.S. from the University of Maryland, College Park.

Ms. Humphreys presents and publishes widely.
HL7 Plenary Meeting Notes:
30th ANNUAL PLENARY—PANEL SESSION:

HL7 Blast from the Past
10:40 – 11:15 am

Moderator
W. Edward Hammond, PhD
Chair Emeritus

Panelists

Sue Campbell
Trustee and Treasurer, North Sonoma Health Care District; Former Board Chair, Health Level Seven (1991-1993)

Wayne Tracy
Former President and COO, Health Patterns, LLC

Clem McDonald, MD
Director, Lister Hill National Center for Biomedical Communications
Sue Campell is a Past Chair of the HL7 Board of Directors who worked for Accenture for 22 years, from 1978-2001. While there, she worked exclusively in the healthcare industry and was involved in a number of information systems projects, including strategy, design, selection, contracting and installation. Sue also performed hospital operational and management reviews, visioning sessions, strategic plans, re-engineering and profit improvement projects. She served on several firm-wide committees, including the Training Investment Committee, Advancement and Retention of Women Task Force and Americas Diversity Committee. In addition, Sue served as the Regional Champion for Professional Development, Local Diversity Lead, West Health Services Lead and Community Lead.

Sue was also very active in HL7 during her Accenture years, most notably from 1989-1999. She held several leadership roles, including Implementation Committee Chair, International Committee Chair, Treasurer and Board Chair (1991-1993). In addition to her roles in HL7, Sue was also a member of the Healthcare Financial Management Association, Healthcare Information Management Systems Society (HIMSS) and AHA Trustee Leadership Network.

Sue went on to work for Kaiser Permanente from 2003-2006, where she was a member of the national team of Kaiser’s program-wide Epic systems implementation project. She worked on the start-up phase to involve all eight regions in the initial design efforts as well as to coordinate efforts to engage external consultants. During implementation, Sue served as the liaison between the national team and the Northern California region, actively assisting in the region’s implementation efforts.

Sue has a long history of volunteering. She was a member of the Marin Community Clinic Board (1990-6), serving as Treasurer during her last year, as well as the Operations Committee of the Marin General Board (2001-3). She served as a Trustee of the Board of Saint Francis Memorial Hospital (2003-12) and was Chair of the Quality and Finance Committees and Board Chair (2009-12). Sue also served on the Quality and Finance Committees of the Dignity Health Board as well as the IT Sub-Committee. She currently serves on the Board of the North Sonoma County Health Care District as a Trustee and Treasurer. Finally, Sue is also the Past President of the local branch of American Association of University Women.

Sue Campbell received her BA in human biology from Stanford University in 1974. She received her MBA from the Stanford Graduate School of Business in 1978.
Mr Tracy spent 40 years in the healthcare computer industry. He holds a BS degree in pre-medical sciences with a major in Microbiology and a minor in Biochemistry. Wayne received a fellowship from the NIH/NLM and received a masters degree in Medical Information Systems.

After graduate school Mr Tracy worked for a 500 bed hospital in Chicago managing their computer operations and developing software applications. Thereafter he worked for several healthcare systems vendors such as Technicon Medical Informations Systems and beginning in 1975 worked with El Camino Hospital that implemented the first commercial EMR in America. He also worked for Baxter Corp., Spacelabs Medical, and Cerner Corporation before serving as President of a startup company: Health Patterns, LLC.

He served for twenty years with HL7 and Chaired the Orders & Observation committee for two years, the Automated Data SIG for four years, and the Medical Records committee for fourteen years. In addition Wayne served on the IEEE P1073 (MIB) - Medical Information Bus, IEEE P1157 (Medix) - Medical Data Interchange, and the LOINC clinical vocabulary committees.

In a concurrent career Captain Tracy spent 28 years in the US Navy and Naval Reserve. He began as a hospital corpsman with the 5th Marines during Vietnam. Later he served with surface and special warfare units and also commanded a 500 bed Fleet Hospital before retiring.
Dr. McDonald is a distinguished physician and scientist, and one of the nation's most accomplished and most productive experts in the field of electronic health record (EHR) systems. Before becoming director of the U.S. National Library of Medicine (NLM) Lister Hill National Center for Biomedical Communications (LHNCBC) in 2006, he was Regenstrief Professor of Medical Informatics at the Indiana University School of Medicine and the Director of the Regenstrief Institute. Dr. McDonald developed the Regenstrief Medical Records System and directed its use in clinical trials that have illuminated the ways in which electronic records can improve patient care. He also created the Indiana Network for Patient Care, now considered a national model for regional health information exchange.

He is also an internationally recognized pioneer in the development of health data standards. He was also one of the founders of the HL7 standards organization and is the developer of Logical Observation Identifiers, Names, Codes (LOINC), an identification system for tests and results that is a US clinical data standard and also used in many other countries.

As director of the Lister Hill Center at NLM, Dr. McDonald also oversees five branches with investigators who conduct research and development in biomedical informatics related to consumer health, clinical data, image processing and visualization, and natural language processing to better inform and empower patients, health care providers, researchers, and the general public.

Dr. McDonald is a member of the National Academy of Medicine and recipient of the Morris Collen Award of the American College of Medical Informatics, among many other honors. He is a past-President the American Medical Informatics Association.

*The National Library of Medicine, the world’s largest medical library, is a component of the US National Institutes of Health.*
HL7’s 30th Annual Plenary

Keynote Session 4: The Digital Dividend of Meaningful Use and Standardization: Accelerating Learning Healthcare and Continuous Improvement

11:15 – 12:00 pm

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Jonathan Perlin, MD, PhD
President, Clinical Services and Chief Medical Officer of Nashville, Tennessee-based HCA and their 169 hospitals and more than 800 outpatient centers and physician practices.
Dr. Jonathan B. Perlin is President, Clinical Services and Chief Medical Officer of Nashville, Tennessee-based HCA (Hospital Corporation of America). He provides leadership for clinical services and improving performance at HCA’s 167 hospitals and more than 800 outpatient surgical, urgent care and other practice units. Current activities include: advancing electronic health records for learning healthcare and continuous improvement; driving value through (big) data science and advanced analytics; and elevating measured clinical performance and patient safety to benchmark levels. His team recently completed the landmark REDUCE MRSA study that demonstrated a 44 percent improvement on known best practices for reducing bloodstream infections.

Before joining HCA in 2006, “the Honorable Jonathan B. Perlin” was Under Secretary for Health in the U.S. Department of Veterans Affairs. Nominated by the President and confirmed by the Senate, as the senior-most physician in the Federal Government and Chief Executive Officer of the Veterans Health Administration (VHA), Dr. Perlin led the nation’s largest integrated health system.

At VHA, Dr. Perlin directed care to over 5.4 million patients annually by more than 200,000 healthcare professionals at 1,400 sites, including hospitals, clinics, nursing homes, counseling centers and other facilities, with an operating and capital budget of $37.4 billion. A champion for early implementation of electronic health records, Dr. Perlin led VHA quality performance to international recognition as reported in academic literature and lay press and as evaluated by RAND, the Institute of Medicine, and others.

Dr. Perlin was the 2015 chairman of the American Hospital Association. He also serves as chair of the Secretary of Veterans Affairs Special Medical Advisory Group. From July to September, 2014 Dr. Perlin took a “sabbatical” to serve as Senior Advisor to the Secretary of Veterans Affairs to help improve operations, accelerate access and rebuild trust with America’s Veterans. Dr. Perlin has served previously on numerous Boards and Commissions including the National Quality Forum, the Joint Commission, and the National Patient Safety Foundation and currently serves on the Board of Meharry Medical College. He was the inaugural chair of the U.S. Department of Health and Human Services Health IT Standards Committee.

A member of the Institute of Medicine (National Academy of Medicine) and recognized perennially as one of the most influential physician executives and health leaders in the United States by Modern Healthcare, Dr. Perlin has received numerous awards including Distinguished Alumnus in Medicine and Health Administration from his alma mater, Chairman’s Medal from the National Patient Safety Foundation, the Founders Medal from the Association of Military Surgeons of the United States, and is one of the few honorary members of the Special Forces Association and Green Berets.
Broadly published in healthcare quality and transformation, Dr. Perlin is a Master of the American College of Physicians and Fellow of the American College of Medical Informatics. He has a Master’s of Science in Health Administration and received his Ph.D. in pharmacology (molecular neurobiology) with his M.D. as part of the Physician Scientist Training Program at the Medical College of Virginia of Virginia Commonwealth University (VCU).

Dr. Perlin has faculty appointments at Vanderbilt University as Clinical Professor of Medicine and Biomedical Informatics and at VCU as Adjunct Professor of Health Administration. He resides in Nashville, Tennessee, with his wife, Donna, an Emergency Pediatrics Physician.
Keynote Session 5: The Future of Interoperability at UHN

12:00 – 12:20 pm

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Jim Forbes
Chief Technology Officer, University Health Network
Toronto, ON, Canada
Keynote Speaker

Jim Forbes
Chief Technology Officer, University Health Network, Toronto, ON, Canada

Jim has been with University Health Network for nearly two decades in total and has been Chief Technology Officer at SIMS for more than seven years. In his role as CTO Jim manages a budget of approximately $60M operating and 200 staff. His portfolio provides support to many of the enterprise clinical applications and technology infrastructure including Network, Data centre, Access devices, Service Desk, Telecommunications, Systems Engineering, Enterprise Architecture, as well as Health Records, Transcription, Switchboard and Project Management.

He was responsible for developing the ‘SIMS sets SAIL’ strategy in 2008. This strategy has since been rebranded and is now known as connecting Greater Toronto Area (cGTA). This project delivers an interoperability layer for healthcare in the GTA and lays the foundation for the province to establish an Ontario wide EHR serving approximately 13M patients. The initial cGTA implementation will connect 6.75M patients with approximately 20,000 clinicians across 20 Health Service Organization (HSO). The technology platform will also help with the integration of applications and technologies using a standards based approach and reduce the otherwise significant cost of rebuilding software/technology interfaces to each Health Service Organization and the overall time needed for deployment. Jim has been working with his peers to develop and build a private community cloud strategy for healthcare that enables Health Service Organizations, patients and clinicians to better meet their mobile information management requirements and to reshape the way health services are provided. He is an advocate for creating a Community cloud for Healthcare that would bring about the centralization of some of IT Services such as e-Mail, Calendaring, Unified Communication and Collaboration tools, etc. to help simplify the lives of physicians who are cross appointed and patients who often engage with multiple institutions.

A strong advocate for interoperability and standards, Jim served as a member of the HL7 Canada Board of Directors and HL7 Canada Standards Council. He currently sits on the eHealth Ontario Standards Committee and greatly enjoys collaborating via working groups and sharing his knowledge and expertise with others in the healthcare industry.