# Project Scope Statement 2015 Version Release 1

# HL7 Project Management Office Project Services Work Group

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http://www.hl7.org/Special/committees/projectServices/leadership.cfm

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URL to download document: <a href="http://www.hl7.org/permalink/?ProjectScopeStatement">http://www.hl7.org/permalink/?ProjectScopeStatement</a>

For prior versions of this document refer to:

http://www.hl7.org/Special/committees/projectServices/docs.cfm

The objective of this document is to communicate the type of activities a group is undertaking to achieve specific objectives or to produce specific work products. It's intended for projects to produce standards or Implementation Guides as well as infrastructure projects.

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# **Template Usage Information:**

- Replace Highlighted Courier New text with appropriate content.
- To use Track Changes, turn off "protection" by clicking on Tools > Unprotect Document; in Word 2010, select Review>Track Changes
- For assistance in completing each section, refer to <u>Appendix A</u>.
- Information on the Project Approval Process is documented in <u>Appendix B</u>.
- For FAQs (Frequently Asked Questions), refer to <u>Appendix C</u>
- Submit template change requests to PMO@HL7.org

# 1. Project Name and ID

Click here to go to Appendix A for more information regarding this section.	An ID will be assigned by Project Insight
Consumer Mobile Health Application Functional Framework	Project ID:
☐ TSC Notification Informative/DSTU to Normative Date :	

# 2. Sponsoring Group(s) / Project Team

Click here to go to Appendix A for more information regarding this section.

Primary Sponsor/Work Group (1 Mandatory)	Mobile Health Work Group		
Co-Sponsor Work Group(s)	EHR Work Group		
Co-Sponsor Group Approval Date	Co-Sponsor Approval Date CCYY-MM-DD		
Indicate the level of involvement that the co-s  Request formal content review prior to ballo			
<ul> <li>         ⊠ Request periodic project updates. Specify updates. S</li></ul>	od: Monthly update on EHR Work Group calls.  Encourage participation by EHR Work Group members who are not also members of the Mobile Health Work Group		
	In addition, while not formal sponsors, both the Security and Devices Work Groups have agreed to provide input to this project.		

Project Team:		
Project facilitator (1 Mandatory)	Tim McKay(Tim.A.Mckay@kp.org)	
	Mobile Health Co-Chairs: Gora Data	
	(gora@cal2cal.com), Matthew Graham	
	(mgraham@mayo.edu), Nathan	
	Botts(nathan.botts@gmail.com), Harry	
	Rhodes(Harry.Rhodes@AHIMA.org); EHR Work Group	
	Co-Chairs: John Ritter	
	(johnritter1@verizon.net), Gary	
	Dickerson(gary.dickinson@ehr-standards.com),	
	Pat Van Dyke(patricia.vandyke@modahealth.com),	
	Reed Gelzer( <u>rgelzer@provider-resources.com</u> ),	
Other interested parties and their roles	Diana Warner (Diana.Warner@AHIMA.org).	
Multi-disciplinary project team (recommended)		
Modeling facilitator	Gora Datta	
Publishing facilitator	Harry Rhodes (Harry.Rhodes@AHIMA.org)	
Vocabulary facilitator	Sandra Stuart(Sandra.Stuart@kp.org)	
Domain expert rep	Gora Datta, Tim McKay	
Business requirement analyst	Tim McKay	
Conformance facilitator (for IG projects)		
Other facilitators (SOA, etc)		

Implementers (2 Mandatory for DSTU projects)  FHIR Project Note: The implementer requirement will be handled by the "balloting" project. Therefore work groups do not fill out the above					
Thirt Toject Note. The implemental requirem	ent will be handled by the balloting project.	Therefore work groups do not his out the above			
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section. However, feel free to list implementers specific to your work group's resources if you know of any.

1)
2)

## 3. Project Definition

# 3.a. Project Scope

Click here to go to Appendix A for more information regarding this section and FHIR project instructions.

This project will define security, privacy and data standards for secure mobile health applications (apps). The intent is to provide industry guidance and common methods to enable the development of mobile health smartphone apps targeted to consumers/citizens that use protected health information (PHI) and personally identifiable information (PII). These standards will not address the content of such apps, but will provide a framework for security, privacy and trusted integration of data generated from apps into Personal Health Record (PHR) and Electronic Health Record (EHR) systems as well as into other types of data repositories (e.g., personal data stores, population care systems).

This project will reuse conformance criteria already available within the HL7 PHR-S and EHR-S Functional Models, augmenting with new conformance criteria specific to mobile platforms (e.g., use of geolocation services, accelerometers, cameras, microphones).

In particular, standards will address the following areas:

- Privacy policy, terms of use, and in-app disclaimers
- User, device, and cross-system authentication
- Authorization to content and features
- Proxy designations
- Use of location services, camera, accelerometers and other smartphone services
- Security of data at rest (local and cloud)
- Security of data in transit (wired and wireless)
- Minimum data standards for device generated and device transmitted information
- Record system reliability; record authenticity (it is what it represents to be)
- Data provenance
- Audit
- Standards related to discontinuation of use of an app

#### 3.b. Project Need

<u>Click here</u> to go to Appendix A for more information regarding this section and FHIR project instructions.

Industry is in need of privacy and data standards in order to create consumer smartphone health apps which are secure, private, and that allow for data generated from and through these apps to be used in other health care contexts (e.g., personal data tracking, integration into a person's record of care, clinical decision making). While the HL7 PHR-S FM expresses many of these functional requirements, it is not possible to use the PHR-S FM as-is to create mobile application standards. Mobile apps are generally not comprehensive in scope and, as such, mobile app standards cannot be extracted as PHR system profiles as it is impossible for most apps to adhere to all the SHALL statements within the PHR-S FM.

#### 3.c. Success Criteria

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Creation of the functional framework

#### 3.d. Project Risks

Click here to go to Appendix A for more information regarding this section.

	This product intends to use the Sparx Systems `Enterprise Architect' Profile Designer Tool for documentation and publishing
	and is dependent on personnel with EA expertise to be available to
Risk Description:	work on the project.
Impact:	☐ Critical ☐ Serious ☐ Significant ☐ Low
Likelihood:	☐ High ☐ Med ☐ Low
Risk Type:	☐ Requirements ☐ Resources ☐ Social-Political ☐ Technology
Risk To HL7:	☐ Internal to HL7 ☐ External to HL7
Mitigation Plan:	Have at least two people on the project team trained to use the EA Profile Designer Tool. Rely on ad-hoc consulting with current implementers within the EHR Work Group for troubleshooting and support.

### 3.e. Security Risks

<u>Click here</u> to go to Appendix A for more information regarding this section.

Will this project produce executable(s), for example, schemas, transforms,	☐ Yes	⊠ No	Unknown
stylesheets, executable program, etc. If so the project must review and			
document security risks.			

#### 3.f. External Drivers

Click here to go to Appendix A for more information regarding this section.

No external drivers are known at this time.

# 3.g. Project Objectives / Deliverables / Target Dates

Within each row, enter the explicit work product(s) / objective(s). Indicate their target date at the right in WGM/Ballot Cycle format. Include the project end date as the last objective (for standards projects, the end date will be the projected ANSI approval date).  Click here for further information, FHIR project instructions, and an EXAMPLE	Target Date (in WGM or ballot cycle format, e.g. '2010 Sept WGM' or '2010 Jan Ballot')
Submit Framework for Comment Only Ballot(First Ballot Cycle)	2015 September Ballot
Complete consideration of comments	2016 January WGM
Submit for DSTU Ballot (1)	2016 May Ballot
DSTU Period - 12 months; complete reconciliation of comments	2017 May WGM
Submit for Normative Ballot	2017 May
Complete Normative Reconciliation	2017 Sep WGM
Submit Publication Request	2017 October
Receive ANSI Approval	2018 January
Project End Date (all objectives have been met)*	
*consideration will be given to beginning new project for V2 of the	
framework dependent on the continued evolution of consumer mobile	0010 -
devices and applications	2018 January

# 3.h. Common Names / Keywords / Aliases

Click here to go to Appendix A for more information regarding this section.

Mobile Health Framework; Consumer Health Mobile Framework

#### 3.i. Lineage

Click here to go to Appendix A for more information regarding this section.

While this is a new product, it will draw conformance criteria from both the EHR-S FM Release 2 and the PHR-S FM Release 1.

# 3.j. Project Requirements

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Click here to go to Appendix A for more inform	mation regarding this sec	tion.				
TBD						
3.k. Project Dependencies						
Click here to go to Appendix A for more inform	mation regarding this sec	tion.				
None						
3.I. Project Document Rep	ository Locatio	n				
Click here to go to Appendix A for more inform	•					
TBD	<u> </u>					
3.m. Backwards Com	natihility					
		mpatible?	☐ Yes	□ No	□ Unknown	⊠ N/A
Are the items being produced by this	project backward co	працые!			OTIKIOWII	ZJ N/A
For V3, are you using the current data	a types?		☐ Yes	☐ No	N/A	
(Refer to TSC position statement on new project		formation on the				
current V3 data types)  If you check 'No' please explain the re	acon:					
in you check two please explain the re	eason.					
3.n. External Vocabularies						
Will this project include/reference external	ernal vocabularies?		☐ Yes	⊠ No	Unknown	□ N/A
If yes, please list the vocabularies:				· I	1	·
4. Products						
Click here to go to Appendix A for more information				N (D)	M / DMMA)	
Non Product Project- (Educ. Marketing, E Arden Syntax	=lec. Services, etc.)	☐ V3 Domain☐ V3 Docume		,		
☐ Clinical Context Object Workgroup (CCC	DW)	☐ V3 Docume				
☐ Domain Analysis Model (DAM)		☐ V3 Docume			,	
☐ Electronic Health Record (EHR) Function	nal Profile	☐ V3 Foundat			0.1/ 1 0 /	
Logical Model V2 Messages – Administrative		☐ V3 Foundat			& Value Sets	
☐ V2 Messages - Administrative		☐ V3 Message		Silative		
☐ V2 Messages - Departmental		☐ V3 Message		nental		
☐ V2 Messages – Infrastructure		☐ V3 Message	es - Infrastru			
FHIR Resources		☐ V3 Rules - 0				
FHIR Profiles		_			Work Group)	
New/Modified/HL7 Policy/Procedure/Pro  New Product Definition	cess	☐ V3 Services	– Web Ser	vices (SO	4)	
New Product Definition  New Product Family						
This is a variation/extension	on of the EHR-S	and PHR-S	functio	nal mo	dels.	
						_
5. Project Intent (check all t	hat apply)					
Click here to go to Appendix A for more information	ation regarding this section	on and FHIR projec	et instruction	ns.		
☐ Create new standard			to a current	t standard		
Revise current standard (see text box b	elow)				be created/modif	
☐ Reaffirmation of a standard ☐ New/Modified HL7 Policy/Procedure/Pro	Reaffirmation of a standard  Project is adopting/endorsing an externally developed IG:					ea IG:
Withdraw an Informative Document	*/Process Specify external organization in Sec. 6 below; Externally developed IG is to be (select one):					
N/A (Project not directly related to an HL						
This project will create art					to the PHR	-S FM
but directly address the nee	eds of consumer	mobile app	licatio	ns.		
5.a. Ballot Type (check all	that apply)					
Click here to go to Appendix A for more information	,	on and FHIR proied	et instruction	ns.		
						<u> </u>
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□ Comment Only	☐ Norma	tive (no DS	STU)	
☐ Informative			other SDOs or HL7 W	ork Groups)
☐ DSTU to Normative  Intent is to produce an arti	fact for comment only	ballot	't go through ballot)	nd to move to
a DSTU ballot by mid-2016.		Dulloc	1119 111 2010 G	ina co move co
5.b. Joint Copyright				
Click here to go to Appendix A for more informa				
Check this box if you will be pursuing a joint copsubmitted to the TSC in order for the PSS to re		ecked, a Jo	oint Copyright Letter o	f Agreement must be
☐ Joint Copyrighted Material will be produce				
30int Copyrighted Waterial Will be produce				
6. Project Logistics				
6.a. External Project Collab	ooration			
Click here to go to Appendix A for more informa		project inst	tructions	
Short Hore to go to Appendix A for more informe	ation regarding the deciden and 11 mil	project met	radiono.	
For projects that have some of their co	ontent already developed:			
How much content for this project is a			Assuming 30%	
			material wil	
				rom existing
				criteria from
Was the content sytemally developed	(V/NI)2		NO	I and EHR-S FM
Was the content externally developed  Date of external content review by the			N/A	
Is this a hosted (externally funded) p		nt just if	Yes	⊠ No
funded)	roject: (not asking for amoun	iii jusi ii		
Tanaday				
6.b.Realm				
Click here to go to Appendix A for guidelines re	garding choosing Universal or Realm	Specific		
☐ Universal ☐ Realm Specific	garamgenessing ermonsarer neam	оросии.		
Check here if thi	s standard balloted or was previously	approved	as realm specific stan	dard
6.c. Project Approval Dates	8			
Click here to go to Appendix A for more informa				
Affiliate/US Realm Task Force Approv				
(for US Realm Specific Projects)	a. 24.0	USRT	F Approval Da	te CCYY-MM-DD
Sponsoring Work Group Approval Date	te	_	pproval Date	
Steering Division Approval Date		SD A	pproval Date	CCYY-MM-DD
PBS Metrics and Work Group Hea	alth Reviewed? (required for S	D Appro	val)	☐ Yes ☐ No
FHIR Project: FHIR Management Gro	up Approval Date	FMG 2	Approval Date	CCYY-MM-DD
		_		
Technical Steering Committee Approv			Approval Date	
TSC has received a Copyright/Dis within the SOU), signed by both p		ontains th	ne verbiage outlin	ed □ Yes □ No
6.d.Stakeholders / Vendor	s / Providers			
Click here to go to Appendix A for more inform				
This section must be completed for projects con		pproved, as	s it is an ANSI require	ment for all ballots
Stakeholders	Vendors		viders	
☐ Clinical and Public Health Laboratories☐ Immunization Registries	☐ Pharmaceutical ☐ EHR, PHR		Clinical and Public Hear Emergency Services	ith Laboratories
Quality Reporting Agencies	☐ Equipment		ocal and State Depart	ments of Health
Regulatory Agency			ledical Imaging Servic	ce
☐ Standards Development Organizations (SDOs)	☐ Clinical Decision Support Systems		lealthcare Institutions , home care, mental h	
,		Laie	, nome care, mental n	•
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□ Payors	Lab	Other (specify in text box below)		
Other (specify in text box below)	HIS	□ N/A		
□ N/A	Other (specify below)			
	□ N/A			
Other: Mobile Health application developers				
6.e. Synchronization With Other SDOs / Profilers				
Click here to go to Appendix A for more information regarding this section				
Check all SDO / Profilers which your project deliverable(s) are associated with.				
☐ ASC X12	☐ CHA	LOINC		
☐ AHIP	□ DICOM	☐ NCPDP		
□ ASTM	☐ GS1	□NAACCR		
☐ BioPharma Association (SAFE)	☐ IEEE	☐ Object Management Group (OMG)		
☐ CEN/TC 251	☐ IHE	☐ The Health Story Project		
☐ CHCF	☐ IHTSDO	☐ WEDI		
CLSI	□ISO	Other (specify below)		
onsor" dropdown field. The search results will reflect projects which your Work Group is sponsoring and co-sponsoring.				

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