

IN PERSON	BY PHONE	STAFF	GUESTS	ABSENT
	Henry Anderson	Michelle Clark		Annette Fox
	Sally Blom	Joe Kachelski		Jerry Halverson
	Howard Croft	Laura Widder		John Hartman
	Nancy Davis			Jo Musser
	Linda Drummond			Rogelio Pante
	Joan Greendeer-Lee			Aleksandar Rosich
	Robert Gribble			James Slawson
	Scott Hansfield			Karen Smith
	Chris Henkenius			Mike Wall
	Dan Johnson			Alexander Young
	Kim Pemble			
	Christopher Tashjian			
	Albert Tzeel			
	Prati Wojtal			



WISHIN CLINICAL ADVISORY COMMITTEE MEETING

Friday, May 18, 2012 – 9:00 – 9:30 a.m.

Conference Call

AGENDA ITEMS	END RESULT
Call to Order	Meeting was called to order by Dr. Hansfield.
Approve April Meeting Minutes	The April 2012 meeting minutes were approved.
Update on Operations and Workgroups	<p>Mr. Kachelski noted that contract negotiations with the technical services vendor are still proceeding, but WISHIN is nearing the end of the negotiation process. Once a contract has been agreed upon between WISHIN and the vendor, the contract will still need to be approved by the WISHIN Board at its next meeting on June 6. ONC will also have to approve the contract. ONC can take up to 30 days to review the contract and give its approval. Other groups that have been through the process say that ONC normally does not take that long to review the contract. Mr. Kachelski stated there is a lot of preliminary work that needs to start even before a final agreement with the vendor has been signed. Mr. Kachelski stated that WISHIN is still on course to go live the last week of October with initial early adopters and then soon after that with the other clients who have signed up.</p> <p>Mr. Kachelski said that two workgroups have been meeting. The first is the Clinical Data Workgroup and has been led by one of WISHIN's consultants, Bart Klaas. The Clinical Data Workgroup was charged with proposing a "minimum data set" for the HIE. Mr. Henkenius has been a part of the meetings and stated that there have been good discussions. Mr. Henkenius noted that there will be continuing discussions of the clinical data to be shared as WISHIN evolves. Mr. Kachelski said that although at the time the agenda was sent out, the proposed "minimum data set" was not identified as an action item, all members of the Clinical Data Workgroup have signed off on the proposed "minimum data set" as it stands right now and Mr. Kachelski would like to get the Clinical Advisory Committee's official approval if the committee felt ready to do so. Dr. Hansfield called for any discussion on the proposed minimum data set and as there was none, Dr. Hansfield called for a vote to officially support the "minimum data set" as proposed by the Clinical Data Workgroup. Motion approved.</p>

	<p>Mr. Kachelski then noted that the second workgroup is the Policy Workgroup, which is being led by a WISHIN consultant, Laura Widder. Ms. Widder explained that the Policy Workgroup is comprised of a wide spectrum of individuals. Ms. Widder noted that the workgroup started by looking at the Nebraska policies and determined which policies would apply to Wisconsin and which ones would not. The Workgroup broke down the policies into three groups: Privacy Policies; Security Policies and Baseline Participant Policies. The workgroup is presently working on the privacy policies and is still in the process of making some revisions.</p> <p>Mr. Kachelski then stated that WISHIN is in the process of developing an opt-out policy that will accommodate individuals who do not wish to have their clinical information accessible through WISHIN. Mr. Kachelski did note that there are some items of information that the individual cannot opt out of. Dr. Johnson made the statement that in an emergency situation it sometimes becomes difficult to get a release from the opt-out clause because of the administrative channels the hospitals must go through and the personnel available are only working Monday-Friday from 8:00 a.m. – 5:00 p.m., not at night or on weekends. Mr. Kachelski acknowledged this concern. He noted that the vendor system is configurable to allow “break the glass” access to patient information in emergency situations.</p> <p>Mr. Kachelski stated that by the next Clinical Advisory Committee meeting he should be able to discuss the capabilities of the technical vendor in more depth.</p>
Other Business	No other business.
ADJOURN	The meeting adjourned at 9:35 a.m.