REPORT OF THE VICE PRESIDENT FOR WORKING GROUPS
AND SPECIAL INTEREST GROUPS

Hyeoun-Ae Park

My report is divided into three parts.
   I. Part I covers the main issues.
   II. Part II consists of resulting recommendations for approval by the IMIA Board and
       General Assembly (GA).
   III. Part III is a compilation of WG/SIG reports and is included as a separate
        document.

Part I: Administrative and Special Issues

1. Chair and Vice-chair positions

There are seven chair positions (Biomedical Pattern Recognition, Critical Care Informatics,
Informatics in Genomic Medicine, Primary Health Care Informatics, Social Media,
Technology Assessment & Quality Development in Health Informatics, and Wearable
Sensors in Healthcare) and three vice-chair positions (Informatics in Genomic Medicine,
Primary Health Care Informatics, and Social Media) that will be ended with General
Assembly Meeting 2013, reappointment or replacement for these chair and vice-chair
positions will be proposed.

Kai Zhang, chair of the Organizational and Social Issues WG stepped down due to personal
issues. New appointment for this position will be proposed.

There are five WGs (Biomedical Pattern Recognition, Consumer Health Informatics, Critical
Care Informatics, Security in Health Information Systems, and Technology Assessment &
Quality Development in Health Informatics) without vice-chairs. Appointment for these vice-
chair positions will be proposed.

2. WG activity report

As of July 22, 19 WGs submitted their updated activity reports and three did not.
3. WG Name and Scope Change Request

Intelligent Data Analysis and Data Mining WG requested a change of WG name to Data Mining and Big Data Analytics. A proposal on the name change and scope change is provided in Appendix 1.

4. 2012 WG of the Year Award Selection

IMIA decided in 2011 (at the Oslo GA meeting) to recognize and reward the efforts and achievements of WGs in support of IMIA's mission by granting an award.

The VP for WG/SIG reviewed all of the WG reports and selected 10 top WGs for the Award Selection Committee Members to review.

Five Award Selection Committee Members scored each WG based on award selection criteria (outcomes, participation, collaboration and outreach). Each criteria can have a score from 1 to 5, 5 being the best.

Social Media WG received the highest score with 15.5 out of 20.

Part II: WG/SIG Recommendation and Motions

1. WG Name Change

Moved IMIA accept the request of Intelligent Data Analysis and Data Mining WG to change WG name and scope to Data Mining and Big Data Analytics.

2. Nomination of WG Chair and Vice Chairs

- Moved IMIA accept the nomination of Luis Luque as Chair of Social Media WG
- Moved IMIA accept the nomination of Chris Paton as Vice-Chair of Social Media WG
- Moved IMIA accept the nomination of Margaret Hansen as Secretary of Social Media WG
- Moved IMIA accept the nomination of Simon de Lusignan as Chair of Primary Health Care Informatics WG
- Moved IMIA accept the nomination of Siaw-Teng Liaw as Vice-Chair of Primary Health Care Informatics WG
- Moved IMIA accept the nomination of Farah Magrabi and Andrew Georgiou as Co-Chairs of Technology Assessment and Quality Development WG
- Moved IMIA accept the nomination of Balkanyi Laszio as Vice-Chair of Medical Concept Representation WG
- Moved IMIA accept the nomination of Graig Kuziemsky as Chair of Organizational and Social Issues WG
- Moved IMIA accept the nomination of Luca Mainardi as Chair of Biomedical Pattern Recognition WG
- Moved IMIA accept the nomination of Lewis Frey as Chair of Informatics in Genomic Medicine WG [NOTE change]
- Moved IMIA accept the nomination of Guillermo Lopez as Vice-Chair of Informatics in
Genomic Medicine WG  [NOTE change]
- Moved IMIA accept the nomination of Reza Shahpori as Chair of Critical Care Informatics WG
- Moved IMIA accept the nomination of Michael Marschollek as Chair of Wearable Sensors in Healthcare WG

3. 2012 WG of the Year Award

Moved IMIA accept the nomination of Social Media WG as the recipient of the 2012 WG of the Year Award.
APPENDIX 1

1. **Proposed Working Group Name:** Data Mining and Big Data Analytics

2. **Focus area or topic for the Working Group:** Methods for Data Mining and Big Data Analytics in Biomedicine

3. **Expanded description of the content areas that will be worked on by the proposed Working Group:** Data Mining, Big Data Analytics, Machine Learning, Statistical Modelling, Intelligent Data Analysis, Knowledge Discovery from Databases

4. **Proposed work plan:** This working group is the successor of the working group on Intelligent Data Analysis and Data Mining, that existed from 2001 to 2013. The working group's main activities are the organization of workshops, panel discussions, tutorials and business meetings at international conferences such as Medinfo, the AMIA Annual Symposium, Medical Informatics Europe and the Artificial Intelligence in Medicine Conference. The workshops and panel discussions are intended to provide a forum to meet and exchange knowledge and experiences for working group members and all others who are interested. The tutorials intend to introduce people with little knowledge and experience with data mining and big data analytics to the basic concepts, theories and software tools available in the field. Finally, the working group is involved in the publications of thematic special issues and methodological reviews in international scientific journals such as Methods of Information in Medicine and Journal of Biomedical Informatics.

Currently scheduled activities of the working group are panel discussions on the topic of Big Data in Biomedicine at the Medinfo 2013 congress in Copenhagen, Denmark (August) and the AMIA Annual Symposium 2013 in Washington, USA (November).

5. **Contact information of the proposal chair and co-chair(s)**
   - Dr. Niels Peek
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   - Dr. John H. Holmes
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     Tel: +1 215 898 4833
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6. **Review of the Scientific Map to locate the other IMIA working groups where interactions are expected:**
   Considering the Scientific Content Map of Healthcare Informatics, the working group's activities will primarily be in the areas of "Applied Technology" and "Applications and Products".

7. **Outline the potential overlaps with other IMIA working groups:**
   There exists a potential overlap with two other IMIA working groups, Biomedical Pattern Recognition and Informatics in Genomic Medicine. However, the Biomedical Pattern Recognition focuses on biomedical signal and image processing, a topic which is not covered by our working group. The Informatics in Genomic Medicine has
a strong focus on data integration, whereas our working group's interests are limited to data analyses.

8. **A list of individuals who will constitute the Working Group's initial membership:**
   Niels Peek, Amsterdam, The Netherlands
   John H. Holmes, Philadelphia, PA, USA
   Riccardo Bellazzi, Pavia, Italy
   Fernando Martin, Melbourne, Australia
   KC Lun, Singapore
   Jimeng Sun, New York, NY, USA
   Ameen Abu-Hanna, Amsterdam, The Netherlands
   Allan Tucker, London, UK
   Stephen Swift, London, UK
   Carlo Combi, Verona, Italy

9. **An outline of plans to recruit other working group members from throughout the world:** Initially, recruitment of members will take place through the professional networks of the founding members. A LinkedIn group "Data Mining and Big Data Analytics in Biomedicine" will be created and used to record membership of the working group and also to attract new members. Finally, membership recruitment will take place during all activities of the working group such as tutorials, workshops and panel discussions at scientific meetings.
REPORT OF THE WORKING GROUPS AND SPECIAL INTEREST GROUPS

Hyeoun-Ae Park

Part III: Work Group and Special Interest Group Reports

The following are the reports of each WG/SIG. Twelve WG/SIGs submitted updated reports and 12 WG/SIGs did not submit any updated reports this year I have indicated whether each WG/SIG submitted updated report or not as of April 2013.

Special Interest Group Nursing Informatics (Updated April 2013)

Website: http://www.imiani.org

Chair (2012 - 2016)
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Vice Chairs (2012 - 2016)
Prof. Kaija Saranto – Working Groups
Professor
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Lucy Westbrooke – Membership
Information Management Consultant
Information Management & Technology Services
Auckland District Health Board, Building 16 Greenlane Clinical Center
Greenlane Rd West Epsom
Auckland 1051, New Zealand
Phone (64 9) 307 4949 ext 3467 or 25827
Objectives

- Explore the scope of Nursing Informatics and its implications for health policy and information handling activities associated with evidence based nursing practice, nursing management, nursing research, nursing education, standards and patient (or client) decision making and the various relationships with other health informatics entities.
- Identify priorities or gaps and make recommendations for future developments in nursing informatics.
- Support the development of nursing informatics in member countries and promote nursing informatics worldwide.
- Promote linkages and collaborative activities with national and international nursing and health informatics groups and nursing and health care organisations globally.
- Provide, promote and support informatics meetings, conferences, and electronic communication forums to enable opportunities for the sharing of ideas, developments and knowledge.
- Participate in IMIA working groups and special interest groups to present a nursing perspective.
- Develop recommendations, guidelines, tools and courses relating to nursing informatics.
- Encourage the publication and dissemination of research and development materials in the field of nursing informatics.
- Support and work with patients, families, communities and societies to adopt and manage informatics approaches to healthcare.

Recent Activities

1. NI2012

NI2012 (the 11th International Congress on Nursing Informatics) was held in 23 June – 27 June 2012, Hilton Montreal Bonaventure, Montreal, Canada. Theme was “Advancing Global Health through Informatics”.

This congress was hosted jointly by the American Medical Informatics Association (AMIA) on behalf of the countries in the Americas and the International Medical Informatics Association – Nursing Informatics (IMIA-NI). Tutorials were conducted on 23 and 24 June 2012 with the main congress opening on 24 June 2012 and concluding on 27 June 2012. Following the main congress there was an invitational only post-conference, held from 27-30 June 2012, for 29 delegates at Manoir, Saint Sauveur, about one hour away from Montreal.

The theme of the NI2012 conference was “Advancing Global Health through Informatics” which was reflecting the team-centred and interdisciplinary approach required to truly transform the health of nations, communities and patients. The conference provided an opportunity to meet with colleagues and leaders in informatics-enabled practice, education, management, research, health policy, global health and patient-centred care.
The congress was attended by over 600 delegates from 38 countries. The New Zealand contingent consisted of five people this year.

The scientific programme consisted of nearly 400 presentations which included 3 plenary keynote speeches, 1 plenary panel, 5 tutorials, 100 paper presentations, 7 scientific demonstrations, 5 workshops, 23 panel sessions and 250 posters. There were 20 exhibitors. The scientific programme was compiled from peer-reviewed submissions selected for inclusion by expert review committee with representatives from around the world.

This conference provided new opportunities for participation. Some of the sessions were, for the first time, webcast. Although an English language conference, there was a session presented in French and some sessions had simultaneous translation services from English to Spanish available. The plenary panel “Nursing Informatics: Perspectives from the Americas” had a number of Spanish speakers and that session was translated to and from Spanish and English depending on which language was used by the speaker.

Another reflection on how technology is now pervasive was the availability of a mobile NI2012 application allowing attendees to browse the programme and create a personalised electronic itinerary on their mobile device. The app was available as a native iOS (iPhone/iPad) or as a HTML5 Web app for all major mobile devices (iPhone/iPad, Android, Blackberry 7 and above).

2. IMIA-NI GA

IMIA-NI GA was held on 23 June 2012. There are currently 28 IMIA-NI country (now referred to as society) representatives. In addition there are some other countries who are observing members as they do not have a representative at IMIA level. During the meeting two new honorary memberships were awarded to Peter Murray (UK) and Paula Procter (UK) in recognition of their work supporting and leading nursing informatics.

One of the major topics discussed with the proposed new bylaws which had been redrafted to align with the new bylaws of the parent body, IMIA. These bylaws had previously been circulated for comments so only required final discussion on points that had changed or needing clarification. At the end of the meeting the bylaws were ratified by the IMIA-NI General Assembly. They will be tabled for approval by the IMIA General Assembly in their next meeting in September 2012.

Another major item for discussion was the NI conference cycle in the future. As IMIA now hosts a MedInfo conference every two years from 2013, it has been decided to hold NI conferences biennially in the intervening years, instead of triennially. The next NI conference is NI2014 in Taipei, Taiwan. From NI2016 (host country yet to be confirmed) the pattern of a full NI conference alternating with a “light” conference (NI2018) will be trialled. The format of this light conference is yet to be confirmed.

At the end of the meeting the current chairperson Heimar Marin (Brazil) stood down and Hyeoun-Ae Park (Korea) was inaugurated into the chairperson position. The meeting confirmed the Board positions for the term 2012-2016 as:

- Hyeoun-Ae Park (Korea) – Chairperson
- Lucy Westbrooke (New Zealand) – Vice-chair Membership
- Kaija Saranto (Finland) - Vice-chair Working Groups
- Susan Newbold (USA) – Vice-chair Communications
- Joanne Foster (Australia)– Vice-chair Administration and Finance
3. NI2012 Post-Congress Conference

An invitational only post-conference was also held 27-30 June 2012 for twenty-nine participants following NI2012 main congress. This was a three day “working” conference with the theme of “The Art and Science of Implementation”. The participants were from Australia, Brazil, Canada, Chile, China, Finland, France, Japan, Korea, Norway, The Netherlands, New Zealand, Qatar, Slovenia, Switzerland, Taiwan and the United States.

The introduction to post conference stated “In spite of the growing evidence of the efficacy of ICT to support practice, implementing them successfully into routine care remains a challenge. The fact that it typically takes 14-20 years to implement interventions that have demonstrated efficacy in controlled trials into practices, is an international concern that is gaining increased attention to practice implementation as a research and practice issue in its own right. Many ICT systems have failed, or have unintended consequences, because of neglect to systematically account for contextual factors such as; the collaborative nature of clinical work and need for organizational learning, organizational leadership, attitudes toward innovation, and neglect of users’ judgments about a systems’ feasibility, time requirements, and usefulness in daily life and clinical practice”

The purpose of the NI 2012 post-conference was to “address challenges related to the implementation of ICT systems from different perspectives: a science perspective, the state of art on methods and theoretical frameworks aiding effective translation of ICT systems into practice and guide informatics research. In addition, important implementation challenges as they pertain to leadership, informatics specialists, and education for practice and science was examined through presentations, case studies, and group work.

4. IMIA-NI Student Forum

After NI2012, a group of students got together online and created a student forum under the leadership of Max Topaz (U of Penn). Student Forum reviewed IMIA strategic plan and came up a list of comments. I took this to IMIA board meeting and officially introduced as a work of IMIA-NI students forum. These comments will be fed into a process of revising IMIA strategic plan.

5. HIMSS APac NI Committee

A NI symposium was held on Sep. 16 at the Marina Bay Sands Hotel Convention Center. HIMSS Asia Pacific NI Committee was formed at HIMSS APac 2012.

6. NI Committee in China

Professional Committee of NI in CMIA (Chinese Medical Informatics Assocaiton), China was formed at APAMI2012 held in Beijing, China. Chinese NI group called Professional Committee of Nursing Informatics was revived with a very formal ceremony held at the Crowne Plaza Hotel Sun Palace in Beijing during the APAMI 2012. After almost one hour long ceremony, nursing informatics forum with three presentations was held. Hyeoun-Ae Park, Peter Murray, Carol Hullin, and Polun Chang eyewitnessed this event. About 150 Chinese nurses participated in this event. Ying (Helen) Wu was elected as the chair of this group.

Future Activities

2013 IMIA-NI GA will be held on August 20(Tuesday) in Copenhagen during Medinfo 2013

NI2014 (the 12th International Congress on Nursing Informatics) will be held 21-25 June 2014 in Taipei, Taiwan.
Biomedical Pattern Recognition (WG7) (Updated April 2013)

Website of the WG: http://www.imia-medinfo.org/new2/node/136

Chair (2010-2013)
Dr. Luca Mainardi,
Member of LARA Laboratory
Chair of the IMIA WG7 - Biomedical Pattern Recognition
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Objectives
To promote applications in medicine and biology focusing on methods of pattern recognition and interpretation.

Recent Activities

● July 2012. The 7th Biomedical Signal and Interpretation (BSI2012) Workshop has been held in Como, Italy next July 2-4th 2012. The workshop is an initiative by the IMIA, IFMBE and IEEE-EMBS. IMIA WG7 has been deeply involved in the organization of the event: the WG7 chair is the Programme Chair of BSI2102 and a few members of the WG7 were involved in the Scientific Committee. The workshop aims at exploring the fields of biosignal interpretation including model based signal analysis, data interpretation and integration, medical decision making extending the existing signal processing methods and technologies for the effective utilization of biosignals in a clinical environment as well as for a deeper understanding of biological functions from the whole organism, system, to cellular, protein and gene scales. The workshop had a hundred of attendees coming from worldwide.

● July 2012. Two satellite symposia were organized in relation to BSI2012. The first one is on “Signal Processing in Dialysis Treatment” and the second on “PSYCHE: a Personalised monitoring SYstems for Care in mental HHealth”. These symposia addressed current challenges of signal processing and biomedical pattern recognition methods in nowadays clinical practice.

Future Activities

● The WG7 are planning to have a special issue (to be published on Methods of Information in Medicine) based on the selection of top 20-25 papers among those presented at the 7th International Workshop on Biosignal Interpretation (BSI). In line with the mission of the Workshop and the WG7, the selected papers deal with the most recent advances in medical informatics and biosignal processing methods that can be applied to biological and physiological systems so that interpretation of the results can lead to better detection, diagnosis and treatment of various diseases.

● December 2012-Jenuary 2013: The remaining contributes presented at the BSI2012 workshop will be published on special issues of the International Journal of Bioelectromagnetics (IJBEM). Two volumes have been already published (volume 14, 2012 and volume 15, 2013), others are in press.
Consumer Health Informatics (Updated July 2013)

Chair (2011-2014)
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Scope

The Consumer Health Informatics Working Group (CHIWG) became an official IMIA Working Group in 2000. The CHIWG is concerned with electronic information related to health care available to the public (e.g. Internet, wireless, standalone electronic media). For its purposes, it defines Consumer Health Informatics as “the use of modern computers and telecommunications to support consumers in obtaining information, analyzing unique health care needs and helping them make decisions about their own health” (U.S. General Accounting Office, 1996, p.1.), in which the consumer interacts with the applications with or without the presence of health care professionals. The group’s interests focus on, but are not limited to, world wide web sites that offer advice about healthy living, research findings, and recommendations on specific disease conditions, descriptions of products, medications, and self-care health programs available to the public. Issues of concern may be the evaluation of the quality of information, education of the public, ethical issues related to the electronic information, and the effect on a person’s health care and relationship with health care providers.

Objectives for the next 3 years

The WG hopes to work with the IMIA leadership on strengthening the role of the Working Groups within IMIA. We look forward to greater participation in key IMIA activities, increasing the visibility and impact of CHI WGs in the world. Provide greater opportunities to share CHI related information from relevant and accessible sources such as the International Journal of Medical Informatics (IJMIA), and the Journal of Medical Internet Research (JMIR). Emphasis will be given to high-quality studies and randomized trials published in quality journals. The group plans to hold a business meeting at Medinfo, and plans a tutorial The group will continue to liaise with counterparts in other countries, such as the AMIA WG CHI, EFMI, IMIA's NI-SIG(WG on CHI). A priority will be to expand our contacts with CHI interest groups in Asia and Africa.

Recent Activities

Public relations

AMIA 2013 fall conference panel: “Ethical, legal, and public policy barriers to unleashing the full power of Consumer Health Informatics for care delivery”. Few successful Consumer Health Informatics services make it from research into practice, partially because it is illegal to practice medicine without any face-to-face contact and because national legislation prohibits utilization across state, let alone national borders although the character of a service would allow so. With a psychiatrist, nurse and two lawyers I will explore whether services are safe and mature enough for an ethical urge to advance legislation.
Textbook: “Consumer Health Informatics – new services, roles and responsibilities” to appear with Springer scientific publisher in 2014. We have the books by Slack, Cybermedicine, 2001, by Nelson and Ball, Consumer informatics, 2003 and more specialized ones such as Bauer’s and Kordy’s E Mental - Health 2008. But there is no systematic account of such aspects as user rights and responsibilities, of national economics need and impact, of clinical trial methodology for comprehensive services etc. Besides major parts by myself the book will contain specialist chapters on confidentiality, smart environments, and swarm intelligence.

Membership, leadership

My attempts to ground the working group with colleagues from Third World countries taking active roles is behind schedule. I am in contact with more young researchers in Africa, Asia and South America. However the persons I have identified believe it is too early for them to take a leadership role. I dearly hope that one or two of them will be ready in a year from now.

Future Activities

Activity to promote broader representation in 3rd world countries where the effort - effect ratio can be enormous. Concrete actions might then emerge upon request of newly engaging countries.

Activity to promote getting another MeSH keyword, to allowed focused search for all those we try to get on board.

Critical Care Informatics (Updated April 2013)

Website of the WG: Not launched yet

Chair (2010 – 2013)
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Objectives

To bring the critical care community and the medical informatics community together as many subjects such as quality registries, benchmarking, prognostic models, terminological systems, clinical decision support and clinical information systems are of interest for both communities.

Recent Activities

● In March 2012 I had an invitation by the French Association of Critical Care Medicine to develop a help develop a survey on environmental scan to measure the information management maturity of the Intensive Care Units in South Spain
Future Activities

- Continued work with SFAR to develop and launch an informatics maturity environmental scan survey in the French Critical Care
- We will be running a workshop on Clinical Information Management in Critical Care in the 4th MEAHI conference in Dubai from 22 to 24 April.
- I will be presenting a business intelligence bed-occupancy dashboard that we developed in Canada at the conference and by invitations to several Hospitals in Dubai.
- Selection of a new Vice-Chair

Francophone Special Interest Group (SIG) (Updated March 2013)

Website: [http://francophonesig.imia.info](http://francophonesig.imia.info) mapped from [http://francophone.wordpress.com](http://francophone.wordpress.com)

Chair: (2012-2015)
Pierre Zweigenbaum
Senior Researcher
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Vice chair: (2012-2015)
Cheikh Oumar Bagayoko
Bamako,
Mali
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Objectives

The focus of this SIG is to provide a collaborative environment for those Francophone members of IMIA whose ability to interact in English is limited, or when French language-specific issues may have a significant impact on medical informatics issues and would benefit from more synergies within the Francophone community.

Recent Activities

The SIG took advantage of the presence of a number of Francophone participants at the 2012 AMIA Fall Symposium in Chicago to hold a first meeting on November 7, 2012, shortly after its creation, with an attendance of 17 from France and the United States. The objectives of the SIG were presented, and discussions were engaged about French language processing. Legal and technical issues related to the creation of corpora of French clinical texts were discussed.

With the help of the IMIA CEO, a SIG Web site was created at [http://francophone.wordpress.com](http://francophone.wordpress.com) and was mapped to the IMIA Web site at [http://francophonesig.imia.info](http://francophonesig.imia.info).
Future Activities

SIG Leadership

The SIG currently has a Chair and a Vice-Chair. A larger board of members will be appointed with specific responsibilities. Propositions will be made during the coming months, to be finalized at the Francophone MEDINFO session (see below).

Means of communication

Beyond the Web site, a mailing list will be established to facilitate the communication of information to members and to promote discussions among members on SIG projects.

MEDINFO 2013 session

The Francophone session at MEDINFO 2013 will help map the state of French-language Medical Informatics. We expect in particular to create synergy for the construction of a distributable corpus of French-language clinical text.

The session will also foster discussions among colleagues from three continents (Africa, America, and Europe) on how best to increase participation and collaboration.

AMIA 2013 Symposium meeting

We plan to continue to hold SIG meetings at the major Medical Informatics conferences, including in 2013 the AMIA Fall Symposium and in 2014 the MIE Conference.

JFIM conferences

Building on the previous series of JFIM francophone conferences and on the pre-MEDINFO francophone session, the SIG will prepare the next JFIM conference, which will be the first to be organised under the auspices of this new IMIA SIG. It is planned for 2014.

Health Geographical Information Systems (GIS) (Updated July 2013)

Chair: (2011-2014)
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Focus Area or Topic for the Working Group

The role of place & the environment in health care management; disease prevention, promotion, screening & management.
Expanded description of the content areas that will be worked on:

The role of ‘place’ in healthcare has been underexplored for many years. With the advancement of GIS it has become relatively easily to map disease incidence and prevalence; even to explore changes in such over time. However, as yet the role of place and one’s environment remains largely underexplored in health care. This working group will therefore focus on both the traditional applications of GIS in health care, such as epidemiology and public health, but will also advocate for the use of GIS as a means of helping understand the role that both place and our environment play in health.

Proposed work plan:

The proposed work plan is in three parts:

1. To establish a new IMIA working group and to draw together the GIS community and the Health/Medical informatics group with a common interest in ‘place’ and the environment and the contribution they each make to health.
2. To develop a set of case studies, likely to be published as a book, of the validity of GIS in health care including that of traditional uses such as public health and epidemiology; but also demonstrating the use of primary health data, at the point of care, and the use of GIS to support and understand the roles of place and environment for individual patients.
3. To actively advocate for the appropriate use of GIS in healthcare and to demonstrate this through 1) organising a workshop at medinfo2013 in Copenhagen, Denmark; 2) submitting at least 6 high quality papers to medinfo2013

4. Future Activities

The WG is working on a book proposal. It is currently being signed off by an international team of editors and will then be submitted to ESRI International for agreement on publishing. The book will be a set of case Studies on the applications of GIS in health around the world intended to assist HI and Geography departments teach Health GIS more effectively.

Health and Medical Informatics Education (Updated March 2013)


Chair (2012 - 2015)
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Vice-Chair (2012 - 2015)
Mr. A.U. Jai Ganesh,
Senior Manager, Healthcare Information Technology,
Project Coordinator, Telehealth,
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India
Objectives

- To disseminate and exchange information on Health and Medical Informatics (HMI) programs and courses
- To promote the IMIA HMI database of programs and courses on HMI education
- To produce international recommendations on HMI programs and courses
- To support HMI courses and exchange of students and teachers
- To advance the knowledge of:
  - How informatics is taught in the education of health care professionals around the world
  - How in particular health and medical informatics is taught to students of computer science/informatics
  - How it is taught within dedicated curricula in health and medical informatics

Recent Activities

For the 2011 edition of the IMIA Yearbook of Medical Informatics that has the theme “Towards Health Informatics 3.0”, the WG was invited to contribute. Dr Otero and Dr. Hersh wrote an article entitled “Education in Biomedical and Health Informatics in the Web 3.0 era: Standards for Data, Curricula, and Activities” which describe a new scenario in education and training known as “Education 3.0” that can help in the promotion of learning in health informatics in a collaborative way. Because the Web 3.0 can propose new approaches to building the Biomedical and Health Informatics workforce so there is a need to build tools as knowledge infrastructure to leverage it. The usefulness of standards in the content and competencies of training programs in Biomedical and Health Informatics needs more experience and research so as to promote the interoperability and sharing of resources in this growing discipline.

Future Activity

- During MEDINFO 2013 at Copenhagen IMIA WG on Education Business Meeting will be held.
- WG meeting together with the APAMI 2014 that will be hosted by IAMI between Oct 31 – Nov 2 in New Delhi
- The Working Group on Health and Medical Informatics Education is involved in preparing an online survey on the various formats of health informatics training programmes and capacity building initiatives in eHealth being conducted worldwide

Informatics in Genomic Medicine (Updated May 2012)

Chair (2010-2013)
Julian Dorado
Spain
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Vice-Chair (2010-2013)
Mr. Lewis Frey
USA
Email: Lewis.Frey@hsc.utah.edu
Objectives

Opportunities arise within the discipline of biomedical informatics to facilitate the advancement of genomic and individualised medicine. To effectively link the genotype and phenotype a bi-directional flow of data, tools and methods between two traditionally separate areas of informatics (clinical informatics and bioinformatics) must be ensured.

These interests include, but are not limited to:
- Integrating molecular and genomic information (genetic testing, mutation analysis, gene and protein expression) into health information systems and tools (electronic health records, computerised protocols and clinical guidelines, clinical trials in the context of pharmacogenetics, molecular imaging).
- Generating structured, standardised, anonymous clinical data sets (phenomic data) to be used in the context of post-genomic research (for annotation and validation of experimental results).
- Facilitating new approaches for the integration and analysis of different levels of information (molecular, cellular, tissue, organ, patient, population) about diseases (grid, biobanks, disease modelling and simulation, mapping of clinical and genetic databases and ontologies).

The IGM WG aims to:
- Provide a forum to enhance collaboration, share experiences, and promote research in this field.
- Increase communication with other working groups at IMIA, AMIA and other organizations relevant to IGM including groups with an emphasis on genomic medicine and informatics from the biomedical community, computing research and bioinformatics as relevant.
- Establish itself as a scientific reference on issues related to information technology projects in genomic medicine.

Recent Activities

- In this year we develop the connection in Facebook and Linked-in of the WG and now we have pages in both social networks.
- Additionally, the WG collaborated with the professor Arie Hasman (University of Maastricht, Netherlands) to organize the “Interfacing bio- and medical informatics” workshop inside the 2012 International Federation for Information Processing (IFIP) World Computer Congress WCC2012 in Amsterdam.
- Finally, we send a contribution to the IMIA Yearbook titled “Data Integration in genomic medicine: trends and applications” as a review of the knowledge related to the WG.

Future Activities

- For the next year, we'll work to promote the area of the WG in different networks and collaborating in different conferences and publications.

Health Informatics for Development (Updated April 2013)

Website: hi4dev.iosnasean.net

Chair (2011-2014)
Dr. Daniel Luna,
Chief Medical Information Officer Hospital Italiano de Buenos Aires
Objectives

- Define the sub-domain of “health informatics for development” as it pertains to its parent “biomedical and health informatics” and as it relates to specific issues in low-to-medium income countries (LMICs)
- Characterize the unique issues in health informatics experienced by LMICs such as those found in the social, political, and economic contexts
- Identify best practice and lessons learned in health informatics that LMICs can adopt in order to build cost-effective health information systems
- Connect developed and developing country health informatics experts for possible partnerships and collaborations
- Redefine standards and interoperability in the context of the needs of LMICs
- Identify innovations such as mobile health that make it possible for LMICs to design and implement health information systems at a cost they can afford

Recent Activities

There have been several initiatives in Asia that are related to the IMIA Working Group on Health Informatics for Development.

Asia eHealth Information Network (www.aehin.org) is a network of formal govt representatives and advocates of eHealth in participating countries. Initially supported by WHO, AeHIN is emerging to be a meltingpot for convening eHealth workers around relevant topics such as civil registration and vital statistics. Its trademark capability building activity is the biweekly AeHIN Hour where experts are invited to deliver online lectures to the members.

Joint Learning Network is a Rockefeller-supported group of agencies working on social health insurance engaged in providing universal health coverage to their citizens. JLN has four tracks and one of these is the IT track where methods and tools such as health data dictionaries are discussed.

The Philippine Health Insurance Corporation (PhilHealth) has started to build a health information exchange after learning from the Rwandan Health Enterprise Architecture. PhilHealth is evaluating if this model, made up of all open standards and open source software, can boost the implementation of IT in UHC.

In summary, a new phenomenon being observed in developing countries is the important role universal health coverage (UHC) is taking in driving a strong agenda for health informatics promotion.

Future Activities  Proposed action: IMIA may wish to evaluate how it can leverage UHC as a vehicle for expanding health informatics in the developing regions. It may also wish to see if
the HIE model in Rwanda and the Philippines can be a source for consolidated support for all the other IMIA WGs.

Business meeting will be held in Medinfo 2013.

Health Informatics for Patient Safety (Updated May 2013)

Website: http://www.imia-medinfo.org/new2/node/345

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Co-Vice-Chair (2011-2014)
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Purpose

The purpose of the working group is to promote patient safety of health information systems and their associated medical devices. The focus of the working group is on safety in a broad sense including how healthcare information systems can be designed to improve patient safety, as well as identifying and rectifying safety issues that may arise from the use of health information systems.

Recent Activities

The IMIA Working Group on Health Informatics for Patient Safety has had a busy year.

We have undertaken several activities internationally. Much of our work has focused upon setting up and offering patient safety and healthcare quality panels and papers at health informatics and medical informatics conferences world wide. We have also been involved in supporting/organizing the Context Sensitive Health Informatics: Human and Sociotechnical Approaches conference in Copenhagen Denmark.

Paper


We have also set up our IMIA website at: http://www.imia-medinfo.org/new2/node/345. The site provides an overview of the working groups purpose, goals and objectives and an intro-
duction to its activities. We are currently extending our list of potential participants in the group and are in planning stages for a meeting at MedInfo 2013.

To increase the global representation of the group we have added: Christian Nohr from Aalborg University, Denmark as Vice Chair.

**Panel**


**Workshop**


**Future Activities**

**Panel**


**Paper**


**Conference**

Context Sensitive Health Informatics: Human and Sociotechnical, Copenhagen, Denmark, August 17-18, 2013.

We continue to extend our list of potential participants in the group. We plan to have a meeting at MedInfo 2013 in Copenhagen.

**Health Information Systems** (Updated April 2013)

**Website:** http://www.med.uni-marburg.de/imi/IMIA_WG10.html

**Chair (2012 - 2015)**

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Vice-Chair (2012-2015)
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Goals and Objective

- Promote systematic development and research in the field of health information systems;
- Promote research and efforts on efficiency and cost-effectiveness of health information systems for the healthcare, health delivery and access to health;
- Promote research and development in the domain of sustainability in health information systems;
- Promote evaluation, identify and assess problems and success factors of health information systems.

Recent Activities


A Facebook page, IMIA HIS Working Group 2010, has also been created.

Upcoming Activities

The HIS WG will be planning a meeting to discuss and plan future activities of the WG at Medinfo2013, in Copenhagen, Denmark.

The WG aims to develop a website, having a forum, and try to build up a Skype (or equivalent) community.

Human Factors Engineering for Healthcare Informatics (Updated April 2013)

Chair (2012-2015)
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Vice-Chair (2012-2015)
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Focus

Human factors can be the difference between systems that function well in the clinical environment and systems that function poorly. The Physician-Patient relationship has now become the Physician-Computer-Patient relationship. Human factors engineering is the field of study which deals with the cognitive aspects of the human computer interaction. This working group discusses methods for studying the computer-human interaction in health. Adapted research and methods are needed to evaluate the complex systems facing both clinicians and patients today. Further, this working group engages in discussions regarding optimal interface designs for health informatics software to make the computer a welcome partner with both the clinician and the patient in the empowered longitudinal care of the individual.

Objectives / Goals

● To promote methods and techniques devoted to the study of human factors in the field of Biomedical Informatics.
● To coordinate studies and actions in this particular domain and to develop standardization initiatives for usability studies and user-centered design in the healthcare domain. This international group of experts confronts state of the art methods, models, innovations and results.
● To disseminate rigorous scientific principles for performing formal usability evaluations to improve their degree of efficiency, acceptability and safety of health informatics applications.
● To support emerging teams in this field all around the world: an IMIA Working group is the opportunity for newcomers to benefit of the support of experts in this domain.

Recent Activities

We have also submitted a status paper to the IMIA yearbook with the title: “From Usability Testing to Clinical Simulations: Bringing Context into the Design and Evaluation of Usable and Safe Health Information Technologies”.

Future Planned Activities

MEDINFO 2013 pre-conference: Context Sensitive Health Informatics: Human and Sociotechnical Approaches that will be held August 17 and 18 2013 (the conference web site: http://cshi2013.org/).

It is chaired by Christian Nohr and Sanne Jansen and is hosted by the Danish region simulation laboratory at the regional hospital. This will be a joint HFE-HI and ITHC meeting supported by IMIA HFE-HI WG and EFMI Human and Organizational Factors for Medical informatics WG chaired by Jos Aarts. This promises to be an excellent meeting.

The scientific program committee and local organizing committee is composed of Jos Aarts, Rotterdam, Marie-Catherine Beuscart-Zéphir Lille, Peter Elkin, New York, Andrew Georgiou, Sydney, Monique Jasper, Amsterdam, Sanne Jensen, Copenhagen, Craig Kuziemska, Ottawa, Claudia Moro, Curitiba, Marianne Sørensen, Aalborg, Dag Svarnaes, Trondheim and Johanna Westbrook, Samantha Adams, Erasmus University Rotterdam, Christian Nohr, Aalborg University, Denmark.
Potential Overlap with other IMIA WGs

The major overlap is with the IMIA Evaluation WG where human factors are only a small part of their agenda. We have established a liaison with the evaluation WG to ensure that overlap is minimized and that the output of the HFE WG is made available to the members of the evaluation WG. As the methods in human factors are quite particular to this field of study and with a large agenda, the discussions necessary to move the field of HFE forward are not possible within the evaluation WG. We also propose a strong relationship with the Organizational Issues IMIA WG.

There has been a joining of the EFMI Organizational Factors in Medical Informatics (OFMI) group with human factors to make the EFMI HOFMI working group. The group is led by Jos Aarts and Marie-Catherine Beuscart and has a strong liaison with the IMIA HFE working group.

Lastly, an effort to form a coordinate group at AMIA will be undertaken to complement the European effort and to bring the work of these two organizations forward to IMIA via the proposed working group. This will be accomplished through the symposiums and through ongoing dialog. IMIA will help to coordinate various cultural and regulatory differences between and among members that could not reasonably be understood in the context of a single nation or region.

Transition Planning

As the chair and vice-chair terms are ending mid 2012, we have started the process of succession planning. We have strong participants who are also interested candidates, so that we may be nominating new chair and vice-chair in the upcoming months.

Future Activities

The working group on Human Factors Engineering for Healthcare Informatics is engaged in the organization of the MEDINFO pre-conference: Context Sensitive Health Informatics that will be held August 17 and 18. Please find the conference web site here: http://cshi2013.org/

Intelligent Data Analysis and Data Mining (WG 03) (Updated May 2012)

Website: http://www.imia-medinfo.org/new2/node/144

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Vice-Chair (2008-2014)
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Objectives

- To increase the awareness and acceptance of intelligent data analysis and data mining methods in the biomedical community.
- To foster scientific discussion and disseminate new knowledge on AI-based methods for data analysis and data mining techniques applied to biomedicine. To promote the development of standardized platforms and solutions.
- To provide a forum for presentation of successful intelligent data analysis and data mining implementations in biomedicine, and for discussion of best practices in introduction of these techniques in medical and health-care information and decision support systems.
- Focus on specific topics of interest for the scientific community, in particular:
  - the exploitation of predictive data mining in clinical medicine,
  - knowledge-based functional genomics,
  - IDA of molecular phenotypes,
  - Data Mining models for the assessment of clinical risk,
  - temporal data mining in medicine and bioinformatics, and
  - evolutionary computation in biomedical knowledge discovery.

Recent Activities:

- The Intelligent Data Analysis in bioMedicine and Pharmacology (IDAMAP) 2011 workshop was held on July 6, 2011 at the 13th Conference on Artificial Intelligence in Medicine (AIME) in Bled Slovenia. The program chairs were Niels Peek, John Holmes, Al lan Tucker (Brunel University, London, UK), and Riccardo Bellazzi (University of Pavia, Italy). There were about 20 attendees.
- John H. Holmes presented the tutorial “Introduction to Clinical Data Mining Methods” at the 13th Conference on Artificial Intelligence in Medicine (AIME) in Bled Slovenia. There were six participants.

Future Activities:

- Yearly organization of the Intelligent Data Analysis in bioMedicine and Pharmacology (IDAMAP) workshop. This year, the workshop will be held at the MIE Conference 2012 in Pisa, Italy, in August, 2012. Program chairs are Lucia Sacchi (University of Pavia, Italy) and Barbara Di Camillo (University of Padova, Italy).
- A focus theme of the Methods of Information in Medicine journal will be published, entitled "Intelligent Data Analysis for Knowledge Discovery, Patient Monitoring and Quality Assessment", based on a selection of papers presented at IDAMAP 2010 en IDAMAP 2011. Guest editors are Stephen Swift (Brunel University, London, UK) and Niels Peek.
- As a satellite activity, a new workshop called "Machine Learning for Clinical Data Analysis" which will be given at the International Conference on Machine Learning (ICML 2012) in Edinburgh, Scotland, on June 30 and July 1, 2012. The program chairs are Noemie Elhadad (Columbia University, USA) and Milos Hauskrecht (University of Pittsburgh, USA).
- Organization and support of tutorials and master classes on all topics related to intelligent data analysis and data mining, at national and international medical informatics meetings. John Holmes has planned to present the tutorial “Introduction to Clinical Data Mining” at the AMIA 2012 Annual Symposium in Chicago, Illinois, in November, 2012.
- Further enrichment of the WG’s web site, in order to offer a list of most relevant publications, technical notes and recent results to the general audience.
- Continued linkage with the American Medical Informatics Association through the
Medical Concept Representation (WG 6) (Updated July 2013)

Website of the WG: http://www.imia-medinfo.org/new2/node/145

Chair (2012 - 2015)
Dr. Stefan Schulz
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Objectives

The goal is to provide a forum for state of the art dialogue and collaboration on medical concept representation in healthcare applications. IMIA’s Medical Concept Representation Working Group is the international forum for issues related to informatics in the classification and coding of health data. Since its formation, the working group was charged with: (1) Reviewing health data nomenclature and classification needs for the world community; (2) Evaluating information processing technology in meeting these defined needs; and (3) Recommending methods for future classification and nomenclature systems.

Recent Activities

- The IMIA WG6 was a sponsor of the International Conference on Biomedical Ontology (ICBO 2011), University at Buffalo, NY, USA, July 26-30, 2011 (http://icbo.buffalo.edu/). The conference was sold out. The proceedings are publicly available at http://ceur-ws.org/Vol-833/.
- The LinkedIn group (http://www.linkedin.com/groups?home=&gid=3680642&trk=anet_ug_hm), administered by Laszlo Balkanyi, provides a platform for exchange of information (e.g., about conferences and publications of interest) and has 51 registered members to date. A companion wiki (http://imia-mcr-wg.wikispaces.com/?goback=.gmp_3680642.gde_3680642_member_36033583) provides an overview of past meetings organized by WG6.
- On behalf of WG6 on Medical Concept Representation Laszlo Balkanyi, Oliver Bodenreider, Ronald Cornet and Stefan Schulz conducted a survey about the meaning of "medical concept representation", raising the issue of whether this is still an appropriate denomination for the working group. This survey was meant to serve as a starting point for a new scoping of future activities of this WG. Our descriptive study was based on bibliometrics, simple text mining and a social media survey. The results support the general understanding that the focus of research has clearly moved from "concept representation" toward formal ontologies. The study was planned during a joint meeting between Stefan Schulz and Laszlo Balkanyi in October 2012 in Stockholm, from which originated a manuscript which was accepted as a poster for MEDINFO 2013. We expect that around the poster presentation and the WP6 business meeting the discussion will be followed up and a decision about whether the WG should be renamed will be reached.

Future Activities

- A business meeting at Medinfo 2013
Open Source Health Informatics (Updated April 2013)

Website: http://www.imia-medinfo.org/new2/node/147

IMIA OS WG at MedFLOSS.org: http://www.medfloss.org/node/479

Chair (2011 – 2014)
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Vice Chair (2011 – 2014)
Holger Schmuhl,
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Objectives

IMIA OS WG has been formed in 2002 with the objective to focus on educational, promotional and 'evangelistic' activities to raise awareness of open source software in health care. The primary objectives of the IMIA OS WG are to:

● disseminate knowledge about the benefits and prospects of FLOSS in health care among IMIA members and outside of IMIA,
● provide a neutral collaboration platform for all stakeholders in health care in respect to FLOSS,
● to foster collaborations between FLOSS-HC projects and
● to lower the perceived barriers to the adoption of FLOSS in health care

Recent Activities

● The FLOSS in health care track is a joint activity of IMIA OS WG, EFMI LIFOSS WG and the International Society for Telemedicine and eHealth (IsfTeH). The cooperation is now in its 3rd year and is expected to continue in the future.
● Joint Workshop with EFMI LIFOSS WG and Ambient Assisted Living Open Association (AALOA): Common Infrastructure Software for eHealth, Telemedicine and Ambient Assisted Living based on Open Source Software, MIE2011, Oslo, Norway
● Submitted a manuscript for the IMIA Yearbook that is currently under review
● Participated as a coorganizer in the International Workshop for E-Health in Emerging Economies IWEEE2013 in Las Palmas de Gran Canaria (www.iweee.org) where Holger Schmuhl gave a presentation.
Future Activities

- Further community building at Medfloss.org
- Co-organization of IWEEE 2013
- Organization of a workshop for MEDINFO 2013 in Copenhagen
- Co-organization of a workshop for EFMI STC 2013 in Prague
- We are coorganizing the "Open Source Village" at Med-e-Tel 2013 which will take place from 10th to 12th of April 2013 in Luxembourg.
- We continuously work on the MedFLOSS.org database.
- A business meeting at MEDINFO2013

Organizational and Social Issues (Updated July 2013)

Chair (2011 - 2014)
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Objectives

- To investigate and evaluate organizational, social, ethical, and individual behavioural issues surrounding the introduction and use of informatics applications.
- To determine strategies for systems and workflow analysis, product design and implementation, and technological and organizational change to support health care delivery through information and communication technologies.
- To incorporate organizational change management and human concerns into information technology projects.

Recent Activities

Conference Activities

- Co-sponsor of a workshop at the ACM Conference on Computer-Supported Collaborative Work titled “CSCW Research on Healthcare: Past, Present, and Future." The conference was held Feb. 6-10, 2010 in Savannah, GA., USA.
**Outreach and Collaborative Activities**

To raise awareness of organizational and social issues in health care, the chair

- is serving as a lead editor for a Special Issue of the International Journal of Medical Informatics on "Supporting Collaboration in Healthcare Settings". The publish date is 2010.
- is serving on the steering committee for the Workshop on Interactive Systems in Healthcare to be held at the ACM Conference on Human Factors in Computing (CHI 2010) at Atlanta, GA, April 11, 2010.
- is the co-chair of the technical program committee for the ACM Conference on Supporting Group Work. Sanibel Island, FL, USA, November, 2010.
- Will be the invited speaker at the University of Michigan Health Informatics Grand Rounds. Ann Arbor, MI, December 10, 2009.
- Was a keynote speaker at the SIG-HEALTH Workshop held at the Americas Conference on Information Systems (AMCIS 2009). San Francisco, CA, August 6, 2009. The title of the talk was Publishing in Medical Informatics Journals: The Interdisciplinary Challenges

**On-Going Activities**

- Nominate papers for the Diana Forsythe Award of the AMIA People and Organizational Issues WG.
- Co-Sponsoring for a Special Issue of the International Journal of Medical Informatics on "Supporting Collaboration in Healthcare Settings". The publish date is 2010.
- Co-sponsor AMIA People & Organizational Issues WG Doctoral Symposium

**Future Activities**

- Will have a business meeting at Medinfo 2013

**Primary Health Care Informatics (Updated May 2012)**

**Website:** http://www.imia-medinfo.org/new2/node/149

**Chair (2013-2016)**

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Chair in Health Care Management  
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**Goal**

The aim of the group remains to promote and develop primary care informatics as a specialism within health informatics.
Objectives

Our current objectives are: (1) How to model research studies based on routinely collected data; (2) Ontologically rich approached to case finding in routine data; (3) The use of IT at the point of care – in the primary care clinical consultation; (4) Focus on diabetes – and the completeness and accuracy of recording in primary care records.

Recent Activities

MEDINFO 2010 South Africa

The working group put on two workshops at this event – one on the use of the computer in the consultation and the second on the barriers to using routine data for international research (http://www.clininf.eu/news/photos/69-medinfo-photo.html). The outputs from this informed our submission to the IMIA Yearbook of Medical Informatics, see later in the report.

EFMI STC 2011 Slovenia

From these and the discussions post conference emerged a submission to the EFMI STC (Special Topic Conference) in Slovenia in 2011, and a further workshop at MIE in Oslo at the end of August 2011. We have begun to recognise that part of the standard approach to research studies using routine data should be to develop and model use cases for the study; (we have used Unified Modelling Language (UML) to do this and also constructed data flow diagrams (DFD). We have created generic reference models for some types of study. The first versions of these can be found at: http://www.clininf.eu/refmodel/

EFMI MIE 2011 Norway

We extended this work at our workshop at MIE in Oslo August 2011. This involved international collaboration including a guest presenter (Dr. Chris Pearce) from Australia.

The presentation from this workshop can be downloaded from the Clinical Informatics website at: http://www.clininf.eu/news/presentations/116-mie2011oslo-presentation.html

EFMI STC 2012 Moscow

Two papers emanating from working group were presented at the conference. The working group vice-chair has co-authored a paper with Prof Matthew Swindells who was previously head of the English National Programme for IT. Olga Dmitrieva presents work on how the English NHS Hospital Episode Statistics (HES) data can be used to explore variation in the quality of care.

Publications in the Yearbook of Medical Informatics 2011

We have achieved two publications in the IMIA Yearbook developed from our MEDFINFO workshops. We hope that these will help standardise the way that we report observational studies of the computer in the consultation and help model the barriers to linking routine data in research.

Yearbook of Medical Informatics 2012

We have a paper accepted for the 2012 yearbook on how to requirements analyses using routine data. This builds on our modelling work within the working group. With more and more research being carried out using routine data, often primary care data but more and more often linked data – research protocols need to be adapted and move with the times.
We suggest how generic reference models for research projects should exist at four levels and be part of standard research protocols:

- Rich pictures /schema to give an overview
- Data flow diagrams (DFD) to document where data used in a research project originate and to describe the data flows during a research project
- Unified Modelling Language (UML) use-case diagrams to capture the processes within a research project
- Business process models modelled using business process modelling notation (BPMN) to capture the barriers to project participation.

Journal

Informatics in Primary Care remains the journal of choice for the working group. The publishers offer working group members a discount on subscriptions.

(http://www.radcliffe-oxford.com/journals/J12_Informatics_in_Primary_Care/default.htm)

Future Activities

**Summer School – SISS 2012 – How to measure quality and outcomes using routine data:**

We are holding a summer school 9th to 14th July. Further details and enrolment at: http://clininf.eu/siss2012

Or contact Natalie Berge N.Berge@surrey.ac.uk Special discount for IMIA working group members.

**MIE 2012 Italy**

We have had a workshop accepted at MIE2012 in Italy. This explores how we could improve the design of research and quality improvement studies using routine data by using ontologically rich approaches to identifying variables. The workshop objective is to develop consensus methods of consistent extraction and processing of data. Guest speaker at the workshop will be Professor Teng Liaw, from Australia. The workshop will include brief presentations on: (1) Capturing context by defining the domain ontology; and definition of a reference terminology; (2) Modelling data and metadata mechanisms; (3) Formalisation and ontology development tools; (4) Validation of data quality ontology; and (5) Governance framework. There will be a post workshop modified Delphi exercise to define and model these components into a usable toolkit that can be made available through the working group.

**MEDINFO 2013**

14th World Congress on Medical and Health Informatics - Conducting medical informatics by Converging technologies, Conveying sciences and Connecting people. Copenhagen, Denmark, August 20-23, 2013. Please contact the working group vice-chair if you would like to be part of PHCI contributions.

References

Security in Health Information Systems (Updated July 2013)

Chair (2012 - 2015)
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Objectives

To examine the issues of data protection and security within the health-care environment, the Data Protection in Health Information Systems Working Group addresses state-of-the-art security of distributed electronic patient records (EPR).

Recent Activities

September 2012: Prof Peter Croll attended the IMIA General Assembly in Beijing, China on where he was accepted as chair of WG4 until 2015.

Jan 2013: Prof Pekka Ruotsalainen was accepted by the WG4 committee to the role of Vice Chair. This will be ratified at the forthcoming IMIA General Assembly in Copenhagen.

March 2013: A meeting of the WG4 had been planned and announced for March 2013 in Australia. Unfortunately this event had to be postponed when Prof Croll departed Southern Cross University who were the hosts and sponsors of this event.
May 2013: Prof Croll agreed to be the HISA facilitator for the development of the guidelines for the ‘Protection of Health Information’ based on the highly successful Canadian’s COACH guidelines that has been in continuous development since 1995

June 2013: Prof Peter Croll and Prof Pekka Ruotsalainen met through teleconference to agree the way forward for the next WG4 workshop and the potential development of a set of International Principles for the Protection of Health Information.

July 2013: Prof Croll met with Don Newsham, CEO of COACH at the HIC2013 conference to discuss both the arrangements for the Australian guidelines and, more importantly, the way forward for licensing other countries who may wish to rapidly develop similar guidelines. Deriving a set of International Principles for the Protection of Health Information and the development of country specific guidelines will form the theme of the next WG4 workshop.

July 2013: With HISA (Australia) support, Prof Croll is establishing a web site at www.healthprivacy.org.au to facilitate the development of the proposed workshop and the standards for the proposed guidelines.

Future Activities

WG4 participants will meet at Medinfo, Copenhagen on Wednesday 21 August at 12:30 a.m. in room number 17. This meeting will establish the scope and activities for the postponed workshop expected to be hosted in early 2014.

Smart Homes and Ambient Assisted Living (Updated July 2013)

Website: http://www.health-smarthomes.org

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Vice-Chair (2012 - 2015)
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Goals and Objectives

The aim of this working group is the study and promotion of research and development in the area of smart homes and ambient assisted living applications. A “smart home” is a residential setting equipped with a set of advanced electronics, sensors and automated devices specifically designed for care delivery, remote monitoring, early detection of problems or emergency cases and promotion of residential safety and quality of life. Information and Communication Technologies (ICTs) are utilized to allow individuals to live independently in their preferred environment. Thus, systems are patient-centered rather than institution-centered as they are designed to address the needs of individuals, their families and caregivers rather than these of health care facilities. Furthermore, such technologies can allow for the detection of emergencies and provide the means to increase social interaction and minimize isolation for residents (by increasing access to information, entertainment resources and communication with peers). The Working Group provides a forum for ongoing discussion.
and a collaborative platform for research and development combining expertise in engineering, sensor technologies, ubiquitous computing, health systems, gerontology and human computer interaction. We will address not only technical challenges but also the end users’ needs, ethical, clinical and policy issues and the design of sustainable and non-obtrusive interventions, providing a holistic examination of the current status and future trends in smart homes and ambient assisted living.

**Recent Activities**

The WG on Smart Homes and Ambient Assisted Living had its business meeting during Medinfo 2010 and discussed next steps and potential synergies with other working groups in sensors and telemedicine.

We also organized a workshop entitled SmartE (Smart Environments to Enhance Health Care) in conjunction with the Ninth Annual IEEE international Conference on Pervasive Computing and Communications (PerCom 2011) on March 25, 2011 in Seattle, USA.

The workshop focused on:

- innovative pervasive computing applications for health care settings and consumers
- context modeling and reasoning for health care monitoring
- adaptive, autonomic and context-aware computing for diverse populations
- mobile/wireless computing systems and services in the health care context
- sensors and RFIDs in pervasive health care monitoring systems
- wearable health care devices
- integration of smart environment data into personal health record applications
- visualization approaches to capturing wellness or health based on smart sensing data capture
- social, ethical and economic models for pervasive health care systems
- privacy and confidentiality considerations for pervasive health care applications.

The workshop website is at: [http://www.health-smarthomes.org/smarte/](http://www.health-smarthomes.org/smarte/)

The workshop was a full day event that included 12 peer reviewed paper presentations (papers were also included in the PerCom proceedings).

**Future Activities**

- The WG on Smart Homes and Ambient Assisted Living is going to have a business meeting at Medinfo 2013 on Friday 23 at 10AM and identify new activities
- Will submit a proposal to host a workshop to AMIA
- Inform the members of the WG about a special issue of Health Systems on Evaluation of Telehealth and e-Health Systems and Processes with deadline in now

**Social Media Working Group (Updated July 2013)**

**Websites:**
Blog: [http://imiasocialmedia.wordpress.com](http://imiasocialmedia.wordpress.com)
Twitter: [http://twitter.com/imiasocialmedia](http://twitter.com/imiasocialmedia)
LinkedIn: [http://www.linkedin.com/groupRegistration?gid=3508923](http://www.linkedin.com/groupRegistration?gid=3508923)
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Objectives

The Social Media Working Group (SMWG) aims to be IMIA's vehicle for stakeholder engagement in Social Media. Its membership will be international, inclusive, and multidisciplinary.

The IMIA SMWG will engage members from the international health informatics community, across sectors, to identify, explore, collaborate, and disseminate research on the use of social media for health. Of particular interest are the drivers of change, barriers, facilitators, and policies necessary for the application of the various social media categories in the health domain.

These categories include: 1) Social Networks (e.g., Facebook); 2) Professional Networks (e.g., LinkedIn); 3) Thematic Networks (e.g., PatientsLikeMe, TuDiabetes); Microblogs; 4) Blogs; 5) Wikis; 6) Forums/Listservs; 7) Social Photo and Video Sharing Tools; 8) Collaborative Filtering Tools (e.g., RSS, recommender systems, tagging); and 9) Multi-User Virtual Environments (e.g., Second Life) 10) Social applications and games; 11) Integration of Social Media with Health Information Technologies (e.g. EHRs, PACS, SNOMED); 12) Other (e.g., FriendFeed).

The sectors that will be engaged and invited to participate in this group, include (but are not limited to): 1) IMIA Member Organizations; 2) Academic Bodies; 3) Industry; 4) Governmental research institutions (e.g, US CDC); and 4) Intergovernmental Organizations (e.g., WHO, PAHO, ITU, WMA).

The applications of social media will be explored with particular applications to: 1) health care delivery, 2) health care professional education; 3) public health; 4) clinical and disaster medicine; and 5) research.
Background

Over the last decade, social media tools and services are transforming health and medicine. The need for a more coordinated work in the area of health social media ignited the creation of a Web 2.0 Exploratory Taskforce at IMIA under the leadership of Dr. Peter Murray (IMIA-CEO) in 2007. The aim of the task force was to “bring together interested individuals from within and outside IMIA to explore the nature and potential of Web 2.0 applications, aiming at developing background materials and proposing specific lines of action for the IMIA Board and General Assembly”. The task force rapidly attracted attention due to the active networking at several conferences and, in 2012, the IMIA Social Media Working Group was accepted by the General Assembly of IMIA under the leadership of Chris Paton.

The Social Media Working Group (SMWG) aims to be IMIA's vehicle for stakeholder engagement in Social Media. Its membership will be international, inclusive, and multidisciplinary. The IMIA SMWG engages members from the international informatics community, across sectors, to identify, explore, collaborate, and disseminate research on the use of social media for health. Of particular interest are the drivers of change, barriers, facilitators, and policies necessary for the application of the various social media categories in the health domain, including 1) health care delivery, 2) health care professional education; 3) public health; 4) clinical and disaster medicine; and 5) research.

As described in this report the first term of the SMWG was to be consolidated as an active working group. During the last three years the SMWG have been actively involved producing research papers, workshops and panels in nearly all the leading conferences of medical informatics.

Membership

The IMIA SMWG has established a protocol for the inclusion of new members. The prospective members will fill a web form available at the IMIA SMWG website and then the Secretary will invite them to the mailing list which is the official communication channel of the group. Until end of 2012, 45 members have filled the web form for becoming part of the IMIA SMWG. Many of those joined after attending events organized by the working group in major conferences. The mailing list has 55 members mainly because it is inherited from the task force and some duplicates.

There is a global representation in the group with members from 17 different countries. By continents the wider representation is in Europe with 25 members followed by North America with 13 members from USA and Canada. In Asia-Oceania there are four members, two in Middle East and one in South America.

Participation and outreach

With regards of active participation within the group the best metric is the usage of the mailing list, since 2007 there have been 114 threads. In the year 2012, there were 19 threads that had 106 posts in total roughly two emails were sent weekly.

The participation in the mailing list doesn't include the collaborative work towards publications. There have been at least 8 scientific publications (available in a group created in Mendeley) due the collaboration in the IMIA SMWG including 4 publications in the IMIA Yearbook and several other official IMIA Journals:

2. Experience in the Use of Social Media in Medical and Health Education. Contribution of the IMIA Social Media Working Group. C Paton, P D Bamidis, G Eysenbach, M Hansen, M Cabrer in Yearbook of medical informatics (2011)


Panels, workshops and group meetings have been organized in MIE, Medinfo, Medicine 2.0 and Medicine X. In the Medicine 2.0 series of conferences the members of IMIA-SMWG have been actively involved in the scientific aspects of the conference, including abstracts reviews, awards, etc.

Collaboration has been consolidated with the organizers of the conference Medicine 2.0 since 2007 and IMIA SMWG has been very active in the review process and also with the creation of an IMIA Award for young researchers. In addition, collaboration in other conferences (MIE, Medicine X, etc) has been sought. Informal meetings at those events have taken place with several other working groups (e.g. Consumer Health Informatics). Although it has not be concretized there is an interest to co-arrange events.

At MedInfo 2013, the group is holding a WG business meeting and presenting a number of papers and panel discussions including:

1. New Trends in Health Social Media: Hype or Evidence-based Medicine by Luis Fernandez Luque, Annie Lau, Carol Bond, Kerstin Denecke, Fernando Martin-Sanchez

2. Health Education in the Era of Social Media, the Semantic Web and MOOCs by Stathis Konstantinidis, Margaret Hansen, Panagiotis D. Bamidis, Chris Paton
Other activities

There was a project planned for the creation of a textbook for health social media but the funding was not guaranteed to make it highly visible (e.g. Open Access) and has therefore been put on hold.

Plans for the Future

• Change in leadership
  Planned leadership for 2nd term (2014-2016)
  Chairman: Luis Fernandez-Luque
  Vice-chairman: Chris Paton
  Secretary: Margaret Hansen

• Co-organization of a wider event with collaboration of other working groups

• Teaching and education on health social media.

• Increase presence in the continents with lower memberships

• IMIA SMWG is expected to be actively involved in the European research project CAMEI which got highly rated in the last ICT-research call of the European Research Programme. The project is expected to start by end of 2013

Standards in Health Care Informatics (Updated July 2013)

Website: http://mi.hama-med.ac.jp/stds/index-en.html

Chair (2012 – 2015)

Beatriz de Faria Leao
Brazil
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Vice Chair (2012 – 2015)

Jun Nakaya
Japan
Email: junnaka@med.tohoku.ac.jp

Objectives

● To advise about standards from an academic perspective
● To promote the mutual identification of needed standards world-wide
● To share information to facilitate mutual coordination of standards development in health informatics
● WG 16 itself does not create new standards; rather, it devotes its activity on promotion of mutual identification and coordination by posting and maintaining an inventory of health informatics standard activities.
Usually, standard development activities are by volunteers, vendors, and immediate users. It is quite natural and fine for them to devote efforts to acquire fruitful outcomes. Sometimes, however, potential future users’ profit could be underrated.

IMIA is academically oriented, and is a world-wide organization which has connections with countries which participate less currently in existing standard development activities.

Therefore, IMIA WG 16 inputs thoughtfulness for future users and for multicultural environments, as advisory to standard development activities.

Recent Activities

Future Activities

- Will have a business meeting on August 23 (Friday) from 08:00 to 09:25 in conference room 19 during Medinfo 2013

Technology Assessment & Quality Development in Health Informatics (Updated March 2013)

Website: (shared with/ hosted by the EFMI WG Evaluation) on http://iig.umit.at/efmi/

Chair (2008-2014)
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Objectives

- To foster interdisciplinary discussion on evaluation issues in health informatics.
- To support communication of experiences and education by organizing tutorials and workshops.
- To promote international networking on evaluation issues in health informatics.

Recent Activities (May 2011- May 2012)

- The working group continues its close collaboration with the EFMI Working Group Assessment of Health Information Systems, mostly by joint publications and joint workshops and tutorials at international conferences.
- GEP-HI, the Guidelines for Good Evaluation Practice in Health Informatics, has been published by the International Journal of Medical Informatics:
- Besides, the working group issued the following international publications:


The working group is working on two explanation papers for STARE-HI and GEP-HI that will give further explanations and justifications as well as examples.

Members of the working group contributed to workshops at the International Conference on Integrated Care 2011 in Odense/DK.

The working group organized the following activities at MIE2011 in Oslo:
- a workshop on Minimum Dataset for monitoring eHealth implementations;
- a panel on the Medical Device Directive;
- a paper on "next steps in evaluation and evidence";
- a workshop on STARE-HI;
- a business meeting to discuss future activities. The business meeting at MIE 2011 was well attended with around 30 participants and produced a list of planned actions and further potential future activities (the complete list of discussed activities is available on the web-site of the working group).

As a follow-up of the business meeting at MIE, Jan Talmon gave a one day tutorial on writing for bioinformatics journals, including a presentation and discussion on STARE-HI, at the University of Münster for 15 PhD students from various places in Germany.

Members of the working group contributed to a paper describing eHealth-related activities in EFMI countries. The paper is just under review for an international biomedical informatics journal.

A workshop on GEP-HI at STC2012 in Moscow was accepted. Unfortunately due to visa problems the workshop could not take place but a paper is included in the proceedings.

Future Activities

- Organization of a workshop on indicator development methodology at MIE2012 in Pisa.
- Submission of three papers related to evaluation and indicator development to MIE2012.
- Analysis of the Medical Device Directive and its implications for health IT evaluation.
- Analysis of the usability standards mentioned in the Medical Device Directive.
- The development and testing (in Nordic eHealth project) of a methodology to develop indicators for national eHealth strategies and projects.
- The preparation of a special issue in Artificial Intelligence in Medicine on the evaluation of CDSS systems in health care.
- Finalization of the STARE-HI explanation paper.
- Business meeting will be held at Medinfo 2013
- Workshop will be organized at Medinfo 2013 by three members of the WG
Telehealth (Updated July 2013)

Website (Online Discussion Group): IMIA_tele@googlegroups.com

Chair (2012 - 2015)
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Vice Chair (2012 - 2015)
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Objectives

The Telehealth Working Group aims to be IMIA's vehicle for stakeholder for advocacy and capacity building to use Informatics towards enabling as well as providing quality healthcare to areas outside the precinct of medical establishment.

The IMIA Telehealth WG hopes to engage members from the international health informatics community, across sectors, to identify, explore, collaborate, and disseminate research on the use of technology to foster Telehealth.

The main focus areas we are working in are
- Low resource areas under which include developing countries as well as unreached populations as well as tribal communities even in Developed societies.
- Community based services - important both for service delivery as well as data collection for health planning.
- Home based care and personalised medicine
- We are finalizing our projects

Recent Activities

The Working Group was proposed at Cape Town in 2010 and was officially approved in 2012. However our working group as well as online activities started immediately with the very first preliminary meeting taking place in 2010 itself. Since then we have been discussing and sharing our work. Two papers which have been published in IMIA yearbook as follows:

IMIA Yearbook
Individual achievements of the members pertaining to the WG activities in the past year

Dr S B Gogia
● President of SATHI (www.sathi.org) an NGO working in Telemedicine. One of our current activities pertain to using Telehealth systems for Eyecare. This project is currently running in Mizoram district in North Eastern India, and is planned to expand to other locations. The other is establishment of Telemedicine supported Limb Care clinics in the Filaria affected districts of India as well as in Cancer Hospitals.
● Papers related to the above were presented at NCMI 2012 (biennial conference of IAMI - Indian Association for Medical Informatics) and later at APAMI 2012 in Beijing as well as few other meetings in India and Bangkok
● India has been selected to host APAMI 2014 which shall be held from Oct 31st to Nov 2nd in New Delhi. We hope to have special session on Telehealth.

Prof Anthony Maeder
● President, Australasian Telehealth Society, 2012-3
● General co-chair, Global Telehealth 2012 Conference, Sydney
● Co-chair, Standards Australia Telehealth Subcommittee and Australian delegate to ISO TC215
● Distinguished Visiting Professor, Rhodes University, South Africa Feb-March 2013 working on ICT4D and mHealth

Prof G Hartvigsen
● Has written a book that documents the telemedicine effort in Norway the last 20 years. The book will be presented as a 3 hours tutorial at Medinfo 2013 in Copenhagen, Denmark.
● As part of his sabbatical leave at UC Davis, California (2011-12), he was studying the development of telemedicine/telehealth services in California. Currently working on a book about the development of telemedicine in California.
● Shall also be attending ATA 2013 (San Antonio, TX) and HIC 2013 (Adelaide)

Future Activities
● The official submission of our working group - Working Solutions for Telehealth in Low Resource Areas (Id=936) by Gogia SB, Basu A, Meher S, Mars M, and Hartvigsen G has been accepted for presentation in Medinfo 2013. The authors will be presenting 4 real life case studies from these areas and guide the audience to the path to success.
● We shall be holding our physical meeting at Medinfo 2013. We look forward to more membership from IMIA members as well as increase in activities

Wearable sensors in healthcare (Updated July 2013)

Website: http://www.wearable-sensors.org

Chair (2010 - 2013)
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Vice-Chair (2011 – 2014)
Prof. Feng Tian
Institute of Software
Objectives

The WG aims to promote medical informatics research in the area of wearable sensor technology in healthcare by providing a joint comprehensive platform for information exchange and scientific collaboration. The group aims to attract experts from different areas of expertise, such as medical informatics, biomedical engineering, nursing and medicine.

The following areas of research will be addressed by the WG:

- sensor application and research areas in healthcare: diagnostics and therapeutics, in terms of primary, secondary and tertiary prevention
- methods for sensor data analysis, with a special focus on the analysis of multimodal data
- integration of sensor data resp. extracted information with health information systems and decision support systems to achieve individualization of diagnostics
- acceptance of wearable sensor technologies for healthcare, both by potential users/relatives and healthcare professionals.

Recent Activities

- Co-organization (Michael Marschollek) of the PervaSense2012 workshop (“Situation Recognition and Medical Data Analysis in Pervasive Health Environments”) on May 21st, 2012 in San Diego (held in conjunction with the IEEE Pervasive Health conference); 9 accepted full papers
- Frequent updates of the WG’s website (domain: wearable-sensors.org) and postings to the mailing list
- Current WG members: 20
- Current mailing list subscribers: 53
- Published a CfP via WG and IMIA websites and WG mailing list for ‘Enabling Technologies in Geriatric Medicine and Rehabilitation’ in Methods and ZFGG joint journals special theme issues, several submissions from within the group
- Published a paper based on MIE 2011, Medinfo 2010 Workshop and ICAMPAM 2011, Marschollek M, Schulze
- Planned a workshop at medinfo2013 on 'Wearable sensors in cohort studies – technology, outcome parameters and common pitfalls’. However, this proposal was rejected by the PC

Future Activities

- Poster presentation at Medinfo 2013: Together with some members (Stephen Redmond, Nigel Lovell) of the group, will present the results of another MIE2011
workshop, a medinfo2010 workshop and an ICAMPAM 2011 workshop as a poster at Medinfo 2013 under the title "Sensor-based fall risk assessment - Dagger of the mind?"

• Business meeting at medinfo2013

• Selection of Chair and Co-Chair of the WG