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**Repository Work Group**

**Meeting Summary**

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| **Date** | 06/30/2017 |
| **Time** | 2:00 – 3:30 PM ET |

**AGENDA**

* **Roll Call and Introductions**
* **New Operational CDS Repository**
* **Option Year Clinical Domain Considerations**
* **V0.5 CDS Authoring Demonstration**
* **Close and Next Steps**

**SUMMARY**

**Roll Call and Introductions**

CAMH welcomed the attendees to the June Repository Work Group (WG) meeting, and the WG chair provided an overview of the agenda.

**New Operational CDS Repository**

CAMH presented a demonstration of the latest version of the CDS Connect Repository. The latest features include the following:

* More explanatory information about the CDS Connect Project.
* Descriptive pages that provide an overview of the development process for CDS artifacts and its impact on clinician and health IT workflows.
* A page that describes the governance structure for the CDS Connect Repository.
* A frequently asked questions page.
* A page for the Statin Use for the Prevention and Treatment of CVD Artifact.
* A page that provides a list of artifacts slated for future development.
* Changes to how data is grouped and categorized to support more robust features, such as workflow and version control.

The WG members expressed excitement about communicating the repository launch to their external networks and asked what the communication plan was for the CDS Connect Repository beyond the CDS Repository WG. CAMH said that AHRQ had a couple of meetings planned for late July where they planned to share the repository launch details with broader audiences.

**Option Year Clinical Domains**

CAMH provided an overview of the Cholesterol Management Group Meetings to date and the status of the pilot and plans for testing. CAMH also provided considerations for potential option year CDS Connect Project tasking in the cholesterol management domain, as well as several other clinical domains. CAMH solicited the Repository WG’s feedback on benefits and challenges for developing CDS tasking in the following domains:

* Cholesterol management
* Diabetes and hypertension
* Opioids, specifically abuse or prescription monitoring
* Hepatitis C

The WG offered additional clinical domains for consideration:

* **Immunizations:** CDC is currently working on immunization CDS work.
* **Advanced diagnostic Imaging**: there is a new CMS requirement that states CDS must be used for advanced diagnostic imaging.
* **Direct drug interactions**
* **Sepsis**
* **Falls prevention**: CDS support oriented to patient choices would allow for easy implementation in a variety of settings.
  + There could also be a potential for CDS specific to geriatrics.
* **Prescription drugs**: there is a CDC group working on prescription drug CDS.

**V.05 CDS Authoring Demonstration**

CAMH provided a demonstration of the latest version of the CDS Authoring Tool. Recent user interface updates include the removal of color for a more toned down look, streamlined searching and filter capabilities, and a new functionality to download CQL. The Statin Use for the Prevention and Treatment of CVD Artifact was also implemented within the tool.

Involution Studios, the design team on the CDS Connect Project, provided a brief update on the latest authoring tool design. The workspace has been separated into three sections: includes, excludes, and recommendations, to help reduce cluttering of the workspace.

CAMH’s next phase of work on the authoring tool is integration with the CDS Connect Repository, so that there is automatic CQL deployment from the authoring tool to the repository.

**Close Out and Next Steps**

Prior to the close of the meeting, the WG offered additional items for consideration:

* Interest in conversation about FHIR terminology binding and API.
* AHRQ should include Federal Architecture Group in the communication plan for the CDS Connect Repository Launch.

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