IHE 2012-2013 Call for Proposals

IHE Brief Work Item Proposal

1. ## Proposed Work Item: PRomote Existing Profiles - PREP

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   Date: <Sept. 19 2012>

   Version: <1>

   Domain: CARD

2. ## The Problem

   We need to increase customer awareness and vendor adoption of existing profile work to bring the IHE interoperability benefits to actual cardiology practice.

   "if you build it, they will come" is only true in the movies !

   The IHE efficiencies can only be realized if customers demand IHE integration (not ignore, refer to but throw out later during scope negotiations). This non-negotiable demand is also necessary to convince the large majority of vendors to take IHE profiles from connectathon to product registry, and to convince them actually deliver (not just claim) IHE.

   We have made headway in CARD in profile *creation*: we have optimized existing profiles for cardiology usage and have developed profiles based on cardiology need and opportunity.

   Our challenge is in profile deployment – over 30 systems have claimed to support cardiology profiles, but we struggle to find solid evidence of actual deployment.

   The last few connectathons have been poorly attended,

   - in 2012 CARD testing was initially cancelled only to get a reprieve.

   - In 2013 to date (2.5 weeks left) 5 vendors have signed up for 5 profiles, and only 1 of which was developed in the last 3 years, and no profile has the minimum 3 vendors.

   Increased Promotion of IHE in the medical informatics (purchasing) community will require increased time/money from the members. If successful this will lead to increased real demand for IHE CARD profiles and with that increased benefits to the member organizations. We have been well aligned with the strategic goals of our sponsors in profile development, but we need increased focus on deployment to deliver on those goals.

3. Key Use Case

The CARD Planning and Technical committees should devote time (40 hours per member) to develop promotion material in terms of whitepapers for education, publication of success stories, linking IHE to clinical practice improvements, instructing people how and why to demand IHE. These publications and associated lectures/talks must appear in sponsor journals, other promotion events in 2013.

We need ways to measure our effectiveness with surveys on awareness, IHE deployment tracking, which we repeat to trend our effectiveness.

4. Standards & Systems

Not applicable

<List existing systems that are/could be involved in the problem/solution.>

<If known, list specific components of standards which might be relevant to the solution>

5. Discussion

The "more new profiles" bar is high enough.

We need to focus more time on deploying what we have and until we spend time on promoting existing profiles at the expense of NOT creating new profiles we will not be successful at increasing adoption.