The Electronic Tools Committee held two sessions at the WHO-FIC Meeting in Seoul. In the first Session the Terms of Reference were revised. Changes are included as annex. The ETC was updated by Lars Age Johansson on the status of IRIS, software for language independent mortality coding. About 15 countries from all over the world are working with or testing IRIS. The group welcomed the development of the IRIS and emphasized the importance of an international agreed standard for automated mortality coding.

Vincenzo della Mea presented the approach of evaluating the ICF, or parts of the ICF from an ontological point of view.

After that the iCat (Initial Collaborative Authoring Tool) for the ICD-Revision was presented by Can.

iCat ties closely with BioPortal, a software for ontology browsing. Slides of the iCat were shown and existing and planned features explained.

It was asked if the ETC should assist more in the development of ICD-11 Revision tools. The discussion showed that iCat, the ICD-Revision Tool from the University of Stanford and the CTK are complementary tools. Both tools build on ClaML.

It was also agreed that both should be reviewed by the ETC. The ETC emphasized the importance of the alignment of these Tools and added this topic to the workplan of the ETC.

The second session focused on the CTK (Classification Tool Kit) and ClaML (Classification Markup Language), the standard Markup Language for WHO-FIC Classifications.

Stefanie Weber gave an overview of the developments of CTK at DIMDI over the last year. The development of the CTK has reached a first final version and the CTK is used as routine application at DIMDI and WHO.

The Italian Centre has worked on putting the ICF into the CTK. After a meeting of some experts in spring 2009 an Implementation Profile for the ICF in ClaML was developed and according to this profile electronic versions of the ICF from the WHO-Database could be generated in ClaML. The Italian Centre developed style sheets for the CTK which have been included in the software in order to enable all users of the CTK to generate an output file of the ICF from the CTK for printing purposes. The ETC welcomed the work of the Italian Centre.

Young Tjoa reported from the Australian experience with the CTK. As the Australian Centre is planning to replace its old Classification maintenance platform a review of
the CTK was undertaken and the results were fed back to the ETC. It showed that the CTK was well fitted for the use in the Australian Centre but some additional features might be needed, such as for the Intervention Classification. The Australian Centre is considering developing these features and feed them back to the CTK.

Huib ten Napel reported on Experiences of the Dutch Centre in importing Text files to their workbench Clam. These files could then be exported to ClaML and be used within the CTK. The work of the Dutch Centre might help other countries converting their text files to ClaML.

He also reported the work that the Dutch CC is doing in collaboration with the Swedish National Health Board on the improvement of ClaM in alignment with CTK. This work will result in additional requirements for ClaML.

Some discussion evolved on changes to ClaML that might be necessary in the future. It was agreed to discuss this matter further with a small expert group, bringing in experiences of the involved CC’s.

As the content Model of ICHI it was discussed to try to develop an Implementation profile for ICHI in ClaML. The Australian Centre will try to develop a first draft and distribute to the group. The aim is to have the Implementation Profile ready as soon as the Content Model is agreed and the input the ICHI into the CTK and develop style sheets accordingly.

At the end of the session the work plan was revised and compressed.

**Workplan for 2009/2010 – main topics**

1. Solicit for “ClaMLisation” of ICD-10 in other languages (Portuguese, Spanish..)
2. ICD-10 production cycle
3. Paper on criteria for evaluation of tools
4. Maintenance and publication tool for WHO-FIC classifications
   - Beta version available, Version 1.0 by 10/2010
   - Harmonization of Classification Development & Maintenance Tools
   - Template for chronicle (from MbRG/ETC), History function of CTK needs output functionalities
   - Develop Implementation Profile for ICHI, Test in CTK
   - Develop Plausibility Checks for ICF for implementation in the CTK
Terms of reference

Purpose
Support WHO and the WHO-FIC Network in developing policies on electronic classification-related tools and their dissemination.

Functions
Agree on the scope and definition of ‘electronic tools’
Cover tools which are only for morbidity, mortality or functioning as well as ones with a more general application or for joint use
Work closely with other WHO-FIC Committees, such as the Education Committee or Terminology Reference Group, on overlapping areas
Establish liaison with other organizations/groups working in electronic classification such as the ICE on Automating Mortality Statistics, the European automated coding group or the UN Expert Group on International Economic and Social Classifications
Establish criteria for the evaluation and accreditation of electronic classification-related tools
Survey existing tools and identify gaps
Evaluate such tools on behalf of WHO or oversee such evaluation in some circumstances

Structure and working methods
The committee should have an integrated mandate of WHO-FIC electronic tools although the nature and phase of different members of WHO-FIC may differ in different countries. The Committee should be responsible to develop generic, overall principles that will apply to all members of the WHO-FIC. If necessary different subcommittees may be formed on ICD, ICF and other WHO-FIC classifications so as to address different issues.
The structure of the Electronic Tools Committee should involve permanent members that will primarily devote their time in actually developing methods and application of the tasks in the field.
Membership to the ETC is open to any individuals from collaborating organizations who wish to participate actively in the work and aims of the committee. They should submit their names to the Chair with copy to the WHO-FIC secretariat.
The committee shall draw up a workplan, which lists in detail aims, activities, deliverables, timelines and responsibilities.
Working methods should include e-mail and more interactive ways of electronic communication, conference calls and meetings, including an annual meeting during the WHO-FIC Network Annual Meeting. Official meetings of the committee must be held in conjunction with international WHO-FIC meetings.

Electronic Tools Subcommittees
Within the structure and mandate of the WHO-FIC Electronic Tools Committee, subcommittees for individual classifications can be established as the need arises. Subcommittees assist and advise WHO on electronic tools matters which are specific and unique to the individual classifications.
The sub-committees shall specify the WHO-FIC Electronic Tools Committee functions for the respective classification in detailed workplans. The workplans shall list in detail aims, activities, deliverables, timelines and responsibilities
Working methods should include e-mail and more interactive ways of electronic communication, conference calls and meetings, including an annual meeting during the WHO-FIC Network Annual Meeting. Official meetings of the sub-committee must be held in conjunction with international WHO-FIC meetings.
Committee members should give a commitment to work on both, committee and sub-committee tasks.