Apperta Foundation CIC

Terms of Reference

Clinical Content Subcommittee Terms of Reference

January 18

Quality Control

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Version	Name	Comment	Date
0.1	Susan Veitch	Draft for review	Dec 2017
0.2	Susan Veitch	Amended with comments from Clinical Content Subcommittee	Jan 2018

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1. Purpose

The Clinical Content Subcommittee is a group of clinicians and experienced professionals from appropriate specialities and backgrounds. The Subcommittee includes representatives from England, Scotland, Ireland, Northern Ireland and Wales.

The primary purpose of the Subcommittee is to drive and influence the development and quality improvement of open and shared clinical content for eHealth projects via a collaborative community, and to encourage and facilitate its use in real e-health implementations.

They will provide the technical tools, plus professional support and assurance to those responsible for and involved in e-health projects where clinical content is a factor.

The Subcommittee will work to promote open systems and standards for digital health and social care. They will support the aim to make the data, information and knowledge within IT systems open, shareable and computable. This will facilitate the creation of innovative digital services to transform the delivery of health and social care.

The Subcommittee is chaired by a qualified and practising health professional, and consists of members with the appropriate skills and experience to enable them to contribute to the development of the clinical content agenda and influence how it progresses on behalf of their nation.

2. Responsibilities and Function

The Clinical Content Subcommittee is responsible for guiding and encouraging the continued development of the clinical content maximum data sets, including facilitating and supporting others contributing to the same agenda.

The Clinical Content Subcommittee provides their function by:

- Complying with and actively promoting the 8 principles outlined in the document titled 'Defining an Open Platform' published by the Apperta Foundation
- Providing appropriate tooling to enable collaborative development of clinical content archetypes
- Providing appropriate tooling to enable multiple users to contribute to multiple iterations of reviews of the clinical content
- Building capacity & capability for clinical modelling to ensure sustainability of the creation and maintenance of clinical content; this will be achieved by facilitating learning events and developing/obtaining learning assets
- Coordinating reviews and guiding communities to access the correct level of clinical input into the e-health projects
- Facilitating the development of the appropriate skills to enable clinicians and others to contribute towards the development of clinical content
- Facilitating the links to resources, services and providers that are willing and able to work with the data models
- Providing guidance / act as mentor to others that want to be involved
- Work with the subcommittee and Apperta to influence national agendas towards collaborative development of these data models
- Showcasing Open Standard Software that uses Open Clinical Content with the aid of real successful implementations, whilst demonstrating the benefits of doing so. This will take place within the National and International Arena

- Work with international partners where appropriate to further progress the aims and objectives of both the Clinical Content Subcommittee and Apperta Foundation CIC
- Work in partnership with the Apperta Professional Partner(s)
- Ensure products are developed to the appropriate standards, in particular SCCI0129 clinical safety standards
- Ensure the projects stay within budget
- Provide progress reports to the Apperta Board of Directors via the agreed channels, currently Zoho Projects
- Store the agreed minimum documentation set within the electronic document management instance
- Ensure Apperta policies and procedures are adhered to

3. Membership

The Clinical Content Subcommittee is a group of clinicians, professionals and such other subcommittee members as the Chair may from time to time determine. The Subcommittee will include representatives from England, Scotland, Ireland, Northern Ireland and Wales.

4. Frequency

The Subcommittee will meet virtually at least every 2 months and face to face at least every 6 month.