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Annual report 2004 on classification activities in the Netherlands

Since February 1998, the National Institute of Public Health and the Environment (RIVM) is hosting the Centre at its Department of Public Health Status and Forecasts (VTV).

The WHO Collaborating Centre for the Family of International Classifications in the Netherlands received its redesignation only recently (September 2004).

This annual report follows the tasks and actions, mentioned in the terms of reference and work plan of the Centre for the period 2004-2007:

- Promotion of WHO-FIC
- Study of classification aspects
- Measurement methodologies
- WHO-FIC Network

Promotion of WHO-FIC

Action 1 Dutch translations, advices and training

The third most visited webpage (after the home page and Cologne meeting papers), more than 300 page views per month, is the page with basic information on ICF. Its layout is brought into line with the Dutch WHO-FIC website. The presentation is used for general information and in training situations.

Action 2 WHO-FIC in Europe

An attempt to enhance the collaboration between European countries was not successful, due to shortness of staff within the WHO-EURO office.

Action 3 Dutch and international exchange of information

Two Newsletters (8 p., January 2004 and 12 p. September 2004) were issued. A third newsletter will be prepared after the Reykjavik meeting.

The main updates of the website were the post meeting papers for Cologne October 2003 and the Centre's conference on 8 October 2004.

During an ICF tutorial in Halifax two presentations were given and also another one during the NACC meeting and the EUMASS conference in Lille.

Action 4 Reference centre

The Centre continued its documentation activities on the ICF literature, 76 new titles were added to the database available on the website.

The consultation activities in the Netherlands on the ICF, ICD-10, ICPC-2 and classifications of medical procedures, external causes and technical aids were continued at users' requests. Several presentations on these classifications were given and several meetings were held where the Centre was represented and presented papers.

A user guide, inspired by the Australian user guide, is planned for 2005.

Study of classification aspects

Action 1 A Dutch clinical terminology

The Centre organized a conference on 8 October 2004, entitled 'I believe it's going better with ...', asking users of international classifications, reimbursement systems, formal language or free text about their experiences with their different approaches of collecting, processing and delivering of data on health states.

How to describe health states at best, might be a matter of belief. There are 'thomistic classifiers', 'moderate calculators', 'orthodox terminologists' and 'free word processors'. The results of the conference will be reported in Dutch on the website, www.rivm.nl/who-fic/conferentie.htm, and in the next newsletter in English.

Action 2 Dutch ICD-10, ICF and ICPM-DE maintenance with the help of a classification browser

Three international classifications in Dutch are now available in electronic format and in CEN/TS 14463 (ClAML) format, and will be put on the website for online use. For ICF a check should be made, verifying if this is allowed by WHO copyrights and the publisher of the ICF in Dutch in hard copy format and on CD ROM.

Action 3 Dutch ICF study of implementations with the help of a classification manager

A Dutch pilot project on A and P in ICF is still in preparation, using the Classification Browser as an entrance for the structured collection of data concerning the use of the d codes.

The pilot also aims at collecting relevant measurement instruments, related to specific ICF-d codes.

Action 4 Development of a Dutch procedure classification

A 6th update of the national classification on health interventions (ICPM-Dutch Extension) will be implemented on January 1, 2005. The update is developed by an editorial committee, since 1989 consisting of a few experts from the main national users of the classification (CBV-corporation, Prismant and Dutch Association for Medical Records Administration) and chaired by Centre head Willem Hirs. The changes are based on comments of individual users of different information systems.

The editorial committee recommends a revision of the classification after this update.

Later developed Dutch procedure classifications for several specialist groups (radiologists, radiotherapists, medical microbiology and immunology) and allied health professions have often a multi-axial structure.

The revision process has to cope with two constraints:

- The content of each ICPM-DE code should be mapped to a code in the new structure by a 1:1 mapping;
- The multi-axial structure, based on the CEN/ENV 1828, which is also a Dutch national standard NEN 1828, should facilitate statistical analyses, especially the aggregation to the new International Classification of Health Interventions (ICHI) of WHO should be possible.

Measurement methodologies

Action 1 UN Washington City Group

A strategic meeting was organized by the Centre in Brussels in February 2004 and another meeting was attended in Bangkok in autumn. Centre head, Marijke de Kleijn, is a member of the steering committee representing Europe, she is also the convenor of a working group for the preparation of an extended set of disability questions based on the ICF. A position paper, to be presented in September 2004 in Bangkok, will be the base for the way of development.

Action 2 DISTAB

Marijke de Kleijn attended the monthly conference calls and the face-to-face meeting in Halifax June 2004. She has the lead in analyzing Participation and Environmental questions of the six countries involved in order to discover a common set for international use.

Action 3 EUROSTAT

Marijke de Kleijn participates in the Eurostat developments in the field of HIS and disability questions and she participated in the ECE/Eurostat/WHO meeting last May in Geneva on the Measurement of Health Status.

On the request of Eurostat the European Health Status Module is mapped towards the ICF.

Action 4 National health indicators

On the request of the editor a contribution for the *International Disability Encyclopedia* has been contributed based on existing Dutch disability data (mainly participation and environmental factors issues).

Action 5 Hospital data group

Mr Lany Slobbe of RIVM, the Dutch member of this group, has studied the HDP diagnosis and procedure lists (HDP 2003), the Statistics Netherlands list of main causes of death and the Dutch National Public Health Compass list of RIVM (report 260201002). These lists will be used for producing statistics on a new dataset with Dutch health data, developed by Statistics Netherlands. Part of this set are hospital discharge data (LMR, Prismant) linked with data from the population register. The linkage enables analysis on the patient level, with the possibility of adding background characteristics of the patient to discharge data.

His report presents trial computations on this linked dataset. For some diseases the computed incidence has been compared with data from independent sources. It was concluded that the linked dataset is well suited for the production of statistics on use of hospital care and for clinical epidemiological measures.

Action 6 Existing measurement instruments

A first attempt for a mapping protocol has been prepared by Nancy Mayo and will be presented during the Reykjavik meeting with the Roadmap discussion paper.

WHO-FIC Network

Action 1 WHO-FIC network

Active participation in the work of the planning committee by both centre heads (Helsinki and conference calls), A contribution for the businessplan on functioning and disability is submitted.

Action 2 WHO-FIC Implementation Committee

One of the centre heads acts as the co-chair of the WHO-FIC Implementation Committee. The main activities have been the development of a strategy for implementation of the ICF, to be discussed in Reykjavik.

Action 3 Family Development Committee

Active participation by both centre heads. The Centre has assisted a number of Dutch gastro-enterologists in extending the ICD-10 with endoscopic diagnoses, resulting in a paper for Reykjavik, to be presented in one of the meetings of the FDC or the Update Reference Committee or one of the scientific sessions on Friday.

Action 4 Education Committee

As the co-chair of the IC Marijke de Kleijn participates in this committee (Prague meeting) in order to create a good cooperation between the two committees and to avoid double work.

Action 5 Electronic Tools Committee

Huib Ten Napel of the Centre is proposed to be a member of the committee.

Participation in WHO and other international activities

The Centre was represented in meetings of the ICD Revision Planning meeting (Helsinki), and the WHO-WICC joint working group (Amsterdam).

ISO 9999 (international classification of technical aids for persons with disabilities)

As the chair of the responsible ISO committee Marijke de Kleijn is also responsible for the revision of ISO 9999. The newest version of the classification contains the definitions of ICF. A document that refers every part of ISO9999 to ICF is in preparation.

ICECI

On request of the group in charge Marijke de Kleijn is the coordinator for activities relating to the International Classification of External Causes of Injuries (ICECI). She organized a meeting of the Coordination and Management Group in Vienna. ICECI version 1.2 has been endorsed and is available on the website. WHO is asked to formalize the relation of ICECI with WHO-FIC after the adoption of the ICECI as a related member of the WHO-FIC.

Children's Workgroup on ICFCY

The Dutch Centre has been invited by the Children's Workgroup for the development of the ICF for Children & Youth, funded by CDC in Washington, for participation in the development. The Workgroup had its meeting in Zurich. Huib Ten Napel attended the meeting and offered his support and expertise on structuring the ICFCY accordingly the

CEN/TS 14463 (ClAML), to be able to compare the ICFCY with the ICF. For this purpose the ICF has also been structured according the CEN Technical Standard. This means that the ICF can be made available to WHO in ClAML format (XML).