Title: Annual report 2005 of the WHO-FIC Collaborating Centre in The Netherlands
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Annual report 2005 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 in September 2004.

This annual report follows the tasks and actions, mentioned in the terms of reference and the 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 Centre’s webpage has approximately 100 page views per month. Its layout is brought into line with the WHO WHO-FIC website.
Publication of a short version of the ICF and a users manual are still under consideration.
In order to realize the tasks of the centre several classification teams are operational; most of them are relating to a certain classification. A new team is being created relating to clinical terminology in order to be able to coordinate and tackle more general aspects of the classification and terminology work in The Netherlands. At the level of WHO it is recommended to create an analogue system for the international level.

Action 2 WHO-FIC in Europe
An attempt to enhance the collaboration between European countries was not successfully, due to shortness of staff within the WHO-EURO office. It is clear that there is a need for assistance concerning classification issues in the East part of Europe.

Action 3 Dutch and international exchange of information
One Newsletter (16 p., May 2005) was issued. A second newsletter will be prepared after the Tokyo 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 a WHO Children and Youth Taskforce meeting in Atlanta, a seminar on ICF, ICF-CY and ICD was given for CDC officials and NCBDDD/Disability and Health Team workers.
The head of the centre participated in an ICF training in Bangkok last April.

Action 4 Reference centre
The Centre continued its documentation activities on the ICF literature, 80 new titles
were added to the database available on the website. A list of new titles is included in the newsletter.

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 still planned.
Study of classification aspects

**Action 1 A Dutch clinical terminology**
The Centre has been involved in the ongoing discussion concerning the need for a clinical terminology for supporting registration and documentation in everyday health care and social application as well. SNOMED is one of the candidates to fulfill this need, the relation with WHO classifications is still unclear. For the Dutch Centre it is clear that developments concerning SNOMED and WHO-FIC should be centralized, in order to build up expertise on this. For this purpose the Centre has established a Clinical Terminology Team.

We are advising other Centers to establish a Clinical Terminology Team as well, which could build up and share expertise on a global scale.

**Action 2 Dutch ICD-10, ICF and ICPM-DE maintenance with the help of a classification browser**
Four international classifications in Dutch are now available in electronic format and in CEN/TS 14463 (ClaiML) format, and have been put on the website for online use. The termserver has been visited +/- 1000 times in the past period. For ICF a check with WHO has been made to verify if this is allowed by WHO copyrights to make the ICF available online as well. The publisher of the ICF in Dutch in hard copy format and on CD ROM will be informed about the copyright arrangements.

**Action 3 Dutch ICF study of implementations with the help of a classification manager**
A Dutch pilot project on A and P distinction 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) has been 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 former 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.
For this purpose the Centre participates in a European pilot study on the semantic structure of ICHI.

Measurement methodologies

**Action 1 UN Washington Group on Disability Statistics**
The Centre head, Marijke de Kleijn, was a member of the steering committee representing Europe; she was also the convenor of a working group for the preparation of extended sets of disability questions based on the components of the ICF. The WG decided to use the ICF terms, definitions and concepts; a multi lingual list of ICF key terms and definitions will prepared in order to help the participants.

**Action 2 DISTAB**
Marijke de Kleijn is (together with Margie Schneider, South Africa) in charge with the analysis of Participation and Environmental questions of the six countries involved in order to discover a common set for international use. Preliminary findings have been presented to the WG meeting in Rion last September.

**Action 3 EUROSTAT**
Marijke de Kleijn participates in the Eurostat developments in the field of HIS and disability questions. On the request of Eurostat the European Health Status Module is mapped towards the ICF. She is also involved in a project proposal for the development of a European Functioning/Disability module.

**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). Publication is planned by the end of 2005.

**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 an international group. The final results should be used for the mapping of instruments towards the ICF.
WHO-FIC Network

Action 1 WHO-FIC network
Active participation in the work of the planning committee by the centre head (Bangkok and conference calls).

Action 2 WHO-FIC Implementation Committee
The centre head acts as the co-chair of the WHO-FIC Implementation Committee. The main activity has been the preparation and conducting of a pilot study on Information Sharing on ICF. This is a coordinated action in cooperation with the Education Committee and the Electronic Tools Committee. The pilot is managed by the Dep. Head of the centre and will be presented and discussed in Tokyo.
It was not possible to organize a face-to-face meeting of the committee. For this reason the work concerning the strategy and workplan of the committee is still premature. During the IC sessions it will be necessary to work on this and see how tasks can be distributed.

Action 3 Family Development Committee
Active participation by the centre head in general and specifically for ISO9999 and ICECI issues..

Action 4 Education Committee
As the co-chair of the IC Marijke de Kleijn participates in this committee as much as possible in order to create a good cooperation between the two committees and to avoid double work. The main activity has been the preparation and conducting of a pilot study on Information Sharing on ICF. This is a coordinated action in cooperation with the Implementation Committee and the Electronic Tools Committee. The pilot is managed by the Dep. Head of the centre and will be presented and discussed in Tokyo.

Action 5 Electronic Tools Committee
The Dep. head of the Centre is a member of the committee.
The main activities have been:
- revision work on ClaML in cooperation with the German CC and the preparation of a scientific paper on this revision process. Proposal of the revision on ClaML will be discussed in Tokyo.
- preparation and conducting of a pilot study on Information Sharing on ICF. This is a coordinated action in cooperation with the Education Committee and the Electronic Tools Committee. The pilot is managed by the Dep. Head of the centre and will be presented and discussed in Tokyo.
Participation in WHO and other international activities

ISO 9999 (international classification of assistive products for persons with disability)
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 has been prepared; a proposal for the collection of comments will be presented in Tokyo.

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) which is accepted as a related member of the WHO-FIC. The Coordination and Management Group meets annually. ICECI version 1.2 has been endorsed and is available through the centres’ website www.rivm.nl/who-fic. Implementation issues are under discussion.

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 it’s meetings in Bangkok, Geneva.and Atlanta. Dep. Head of the centre attended the meetings 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. The draft version of the ICF-CY has been made available in ClaML and RTF format for comments to WHO and for discussion in the Family Development Group at Tokyo.