BPM+ Health Community Update

Vision, Overview, and Community Structure
The Problem

• Health processes & best practices are ever changing
• Every discipline, professional society, and organization uses their own “language”
• Adoption of best-practices is inconsistent and difficult

The Solution

• Industry convergence around a common “language” would simplify sharing, authoring, and adoption
• Need commercial tools to author, simulate, and consume workflows

Introducing BPM+ Health

• BPM+ is an open “community of practice”
• Based on industry standard languages
• Supported by commercial tools
• Focus is on advancing “sharable”, interoperable processes
What is BPM+?

- A community-of-practice advancing sharable pathways
- Launched Sept 2019
- Endorsed by key industry supporters, including HIMSS, HL7, NCQA, AHRQ, Logica Health
- Operating under the OMG – an established not-for-profit industry consortium
Key BPM+ Community Tenets…

• This is a value-driven peer community
• We operate with openness, transparency, and trust
• Work products of the community are freely available to use at no cost
• Anyone may participate, but being a member brings privileges (e.g., leadership roles, voting, initiating projects)
• The “community” does not “author”, “curate”, or “approve” models. Member (or non-member) organizations do.
• The “community” creates guidance, harvests “best-practices”, is a peer support structure, etc.
• Collaborate with others to the advantage of the industry (HL7, HIMSS, etc)
### BPM+ Sub-Communities: The Value of Peer Collaboration

<table>
<thead>
<tr>
<th>Authoring</th>
<th>Institutional Adoption</th>
<th>Implementers</th>
<th>Methodology</th>
<th>Academic and Professional Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Focus on writing/distributing content</td>
<td>• Bringing pathways into institutional use</td>
<td>• Approaches for IT implementation (tooling and execution)</td>
<td>• Maintain expression formalisms</td>
<td>• Develop curriculum for accreditation</td>
</tr>
<tr>
<td>• Healthcare practice patterns</td>
<td>• Intersect between pathways, HIT, and human resources</td>
<td>• Ingesting and using externally sourced pathways</td>
<td>• Develop/maintain authoritative guidance; feedback to SDOs</td>
<td>• Workforce development</td>
</tr>
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</table>
The big picture…

- Impacts of COVID
- Seeing more implementation pilots and interest
- Maturing of work within workstreams; increased participation
- Enhancing industry presence (pubs, conferences, collaborations)
- Continued advancement of core specifications

…and the details

- Availability of Confluence collaborative environment (courtesy of Logica Health)
- Substantial website improvements
  - Community calendar of events, teleconference calls, etc.
  - Webinars / training on-demand
- Commenced monthly co-chair calls
Five Things To Know…(updates since March 2020)

- Launched two COVID-related projects:
  - COVID Navigator/“Placemat” and Point-of-Care Emergency Room Assessment App
- Community governance (bylaws, policies, etc) review in September; *Anticipate elections at end-of-year* (3-month slip)
- Established a Clinical Steering Committee w/Authoring Group; *Elected Chair: Shane McNamee, MD*
- Partnered with Duke University on informatics masters capstone project
- Delayed the BPM+ “Award” until 2021
BPM+ Health By the Numbers...

- 13,000+ Website hits
- 2600+ list subscribers
- 3500+ Video/ on-demand views
- 600+ downloads of the Field Guide
- 37 Member Organizations
- 17 ambassadors
- 10 Co-Chairs
- 5 Working Groups
- 2 COVID Projects
- 1 Collaborative Community
- 0.8 years since launch

*As of June 2020
**Current Priorities…**

- Develop initial set of practical assets for field use
  - Assessment guides
  - Maturity Model
  - Authoring Guides
  - Educational Curriculum
  - Core Standards
- Establish test-beds and community infrastructure
- Promote pilot implementation and adoption efforts
- HIMSS collaboration & HIMSS 2021
- Finalize member benefits / elections
Thank You!

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Charles (Chuck) Jaffe, MD, PhD, FACP, CEO, Health Level 7 International
Thomas “Tom” Naughton, JD, LLM
President, Health and Citizen Services Division
MAXIMUS Federal Services, Inc.
Working Group Updates

June 24, 2020

An OMG Managed Community
Current Activities

• Focused on engagement, listening, and seeking to understand while we ensure the value of the BPM+ Health foundational elements, frameworks, and methods are actualized through our conversations and deliverables

• Executing completion of Business Case deliverable(s)

• Aligning with the newly formed Authoring Clinical Steering Committee
Clinical Steering Committee

• Aim: to provide a framework and parameters for the Authoring Work Group and drive BPM+ Health strategic priorities within and beyond the community.

• Activities
  • Promoting BPM+ Health:
    • IHE & HIMSS 2021 BPM+ Health strategic planning
    • HL7 & FHIR collaboration
    • Office Hours initiative
  • Formalizing membership and roles
  • Aligned with the Authoring Work Group
Project: Authoring Working Group

**Date:** 2020 June

### Key Points (“Highlights – Top 3 Things”)

<table>
<thead>
<tr>
<th>Owner: Pawan Goyal, Amy Stowers  Authoring Clinical Steering Committee  Shane McNamee; Facilitator: Cary Paul</th>
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</table>
| • BPM+ Health Authoring-New AIM-It Starts with Authoring (Authoring is not Creating Content)  
• Launched Authoring Clinical Steering to provide a framework and parameters for the Authoring Work Group and drive BPM+ Health strategic priorities within and beyond the community. |

### Risks/Concerns

<table>
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<tr>
<th>Resource Impacts</th>
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| • Clarifying effective modus operandi between Authoring WG and the new Clinical Steering Committee  
• Work toward greater involvement of interdisciplinary healthcare team members to support diversity of thought. |

### Milestones (+/- 30-day window)

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<th>Milestones (+/- 30-day window)</th>
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| • Refine Business Case Outline (Final August)  
• Refine Target Audiences (Why & Understand the Why Not)  
• Initiate Validation of the Business Case (High Level Value Adds)  
• Initiate List of Tools/Templates (How to Apply the Model) |

### Deliverables Completed (last meeting cycle)

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<th>Deliverables Completed (last meeting cycle)</th>
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| • Developed in collaboration with the group an expanded, aligned AIM  
• Executed business case deliverable (assigned dates for validation and completion)  
• Launched Clinical Steering Committee (minutes posted on confluence site)  
• Identified liaisons to other working groups |

### Deliverables In Process/Planned (1-2 meeting cycle outlook)

<table>
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<tr>
<th>Deliverables In Process/Planned (1-2 meeting cycle outlook)</th>
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</table>
| • Business Case  
• Step by Step Guide Outline-High Level Content  
• Use Case Outline |

### Project Next Steps

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<th>Project Next Steps</th>
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</table>
| • Refined Business Case (August 2020)  
• Determine Tools and Templates (Fall 2020) |

### Scope Added

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| • Group pivoted to subset of original 2020 goals and as requested added timeline for completion.  
• Develop and distribute tools, templates, and best practices on how to author models, get started, and “sell” BPM+ within an organization. |

### Scope Removed

<table>
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<th>Scope Removed</th>
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<tr>
<td>• Original 2020 goals have been revised for greater focus on the business case and step by step guide deliverables.</td>
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Current Activities

• Identifying parallel standards-related activities (outside of BPM+) and proactively engaging to leverage/align with current initiatives

• Developing reference implementation model/use case(s) for model enhancement validation

• Identifying/reviewing implementation guide recommendations/updates

• Documenting governance lifecycle recommendations for BPM+ Health cross-working group feedback loops and touchpoints
**Project: Implementer/Vendor Working Group**

**Description:** BPM+ Health Implementer/Vendor WG – Our goal is to test, validate, and ensure models are authored, specified, and deployed in a way which helps to simplify and enable adoption and use. Our findings will be shared with other WGs to inform and enhance the BPM+ Health initiative overall.

<table>
<thead>
<tr>
<th>Date:</th>
<th>Key Points (“Highlights – Top 3 Things”)</th>
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<tbody>
<tr>
<td>Owner:</td>
<td>Bo Dagnall, Ken Allgood</td>
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- Relaunched the Implementer/Vendor WG with new attendees
- Identified WG short term targets to include development of reference implementations for validation/test/communication
- WG success will require substantial communication with, and across other BPM+ Health WGs to ensure learnings are shared and drive recommendations/implementation guides

<table>
<thead>
<tr>
<th>Risks/Concerns</th>
<th>Resource Impacts</th>
<th>Milestones (+/- 30-day window)</th>
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</thead>
<tbody>
<tr>
<td>Cross WG integration is critical</td>
<td>Given demands on likely WG members, supporting staff availability will be critical to value being achieved</td>
<td>Finalize proposed initial implementation reference use case</td>
</tr>
<tr>
<td>Solid vendor base of engagement is key to success</td>
<td></td>
<td>Document WG information exchange/coordination recommendations</td>
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<table>
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<tr>
<th>Deliverables Completed (last meeting cycle)</th>
<th>Deliverables In Process/Planned (1-2 meeting cycle outlook)</th>
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<tr>
<td>Relaunched WG</td>
<td>Finalize proposed initial implementation reference use case</td>
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<th>Project Next Steps</th>
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<tr>
<th>Scope Added</th>
<th>Scope Removed</th>
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<tr>
<td>N/A</td>
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Current Activities

- OMG Healthcare Domain Task Force is developing new notations, Knowledge Package Model and Notation, Situational Data Model and Notation, and Pedigree and Provenance Model and Notation
- Working on Version 3.0 of the *Field Guide to Shareable Clinical Pathways*
### Project: Methodology

**Date:** June 24, 2020

**Key Points ("Highlights – Top 3 Things")**

- Knowledge Package Model and Notation on track for OMG RFC submission for Dec 2020
- Situational Data Model and Notation on track for OMG RFC submission for Dec 2020
- Pedigree and Provenance Model and Notation on track for OMG RFC submission for Dec 2020
- BPM+ Field Guide V3 for March 2021 at Risk

**Owner:** Robert Lario and Steve White

**Risks/Concerns**

- RFC Submission Strategy May Receive Resistance
- Definition of visual metaphors
- XSD definitions are isomorphic (not equal)
- Field Guide Release for Q2

**Resource Impacts**

- Need resources for Field Guide
- XSD Experts

**Milestones (+/- 30-day window)**

- Weekly meetings advancing KPMN, SDMN and PPMN

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**Deliverables Completed (last meeting cycle)**

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**Project Next Steps**

**Scope Added**

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<th>Scope Removed</th>
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Institutional Adoption Working Group

Current Activities

• Institutional Adoption Readiness Assessment and Maturity Model
• Institutional Adoption Playbook
**Project:** Institutional Adoption Readiness Assessment and Maturity Model

**Description:** The Institutional Adoption Readiness Assessment and Maturity Model (RAMM) for shareable clinical pathways is an evolutionary roadmap for continually improving the process of adopting shareable clinical pathways through technology and supporting processes in health care organizations.

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<tbody>
<tr>
<td>Owner: Institutional Adoption Work Group</td>
<td>• First draft of the model is completed</td>
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<table>
<thead>
<tr>
<th>Risks/Concerns</th>
<th>Resource Impacts</th>
<th>Milestones (+/- 30-day window)</th>
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</thead>
<tbody>
<tr>
<td>• Balancing of completeness with brevity</td>
<td>• Work group membership has limited time, many are in positions impacted by COVID-19</td>
<td>• First draft will be presented for community review on June 24, 2020.</td>
</tr>
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<tr>
<td></td>
<td>• Key deliverables: incorporation of community feedback</td>
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<tr>
<th>Project Next Steps</th>
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<th>Scope Added</th>
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**Project:** Institutional Adoption Playbook

**Description:** This BPM+ Health Institutional Adoption Playbook proposes an approach to the adoption of BPM+ shareable clinical pathways

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<tbody>
<tr>
<td>Owner: Institutional Adoption Work Group</td>
<td>• Playbook outline is completed and work is underway to write sections</td>
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<th>Risks/Concerns</th>
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| • Ensuring that the guidance in the playbook is practical and actionable | • Work group membership has limited time, many are in positions impacted by COVID-19 | • Outline completed  
• Several sections completed  
• Additional sections assigned for authoring |

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</table>
| Playbook outline | • Review of authored sections  
• Reconciliation of workgroup comments |

**Project Next Steps**

Completion of the body of the playbook

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<th>Scope Added</th>
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Current Activities

- BPM+ Educational Strategy Charter and Roadmap
- BPM+ APE Stakeholder Survey
- APE Student Capstone Projects in collaboration with Duke University, School of Nursing’s Informatics Program
Target Audiences:

Clinical Documentation Improvement (CDI) professionals, Informatics and analytics staff, Academicians, Business analysts, Standards developers

Vision (WHY):

Build workforce proficient in standards-based representation of data, information, and knowledge in health information technology (HIT) applications for sharing, use and re-use across participating stakeholders, so those who need to know have right information, at the right time, in a right format

Mission (WHAT):

Enable adoption of BPM+ standards through educational resources in support of academic and professional education

Academic & Professional Education (APE) Workgroup

Goals/Outcomes: Build a proficient workforce to participate in developing:
- standards-based computable pathways at healthcare, public health and research organizations
- standards for computable clinical pathways at standards development organizations (SDOs) and
- Implementing standardized, computable clinical pathways in HIT products

Objective (HOW): Adopt BPM+ standard-based sharable clinical pathways via
- academic education in schools of medical, nursing, public health, their informatics and computer science programs
- professional development for health organizations, professional associations, public health agencies, clinical research organizations

Products and Services:

• Curriculum and content for educational modules for
  • academic courses
  • professional development
  • and certification
  • on-the-job training
• Online tutorials and materials for educational webinars, presentations and online training
• BPM+ Education Toolkit

Faculty: SMEs from academia, healthcare and vendor organizations
<table>
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<tr>
<th>PHASE 0</th>
<th>PHASE I</th>
<th>PHASE II</th>
<th>PHASE III</th>
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<tr>
<td>BPM+ JUMPSTART ASSESSMENT</td>
<td>BPM+ PRE-BPM+ TRAINING</td>
<td>BPM+ TRAINING</td>
<td>POST-BPM+ TRAINING (continuing)</td>
</tr>
<tr>
<td>6/22 – 7/7</td>
<td>7/8 – 8/31</td>
<td>9/1 – 12/31</td>
<td>Ongoing After 1/1/2021</td>
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**Target audiences:**
- BPM+ Jumpstart Attendees
- Selected universities, health org-s and vendors
- Extended list of stakeholders
- Expanding list of stakeholders

**Objective:**
- Jumpstart content/training review and piloting the survey instruments
- Pilot survey instrument, collect preliminary data
- Assess training needs
- Continuing training improvement

**Objectives:**
- Pilot survey instrument, collect preliminary data
- Assess training needs
- Continuing training improvement

**Duration:**
- 6/22 – 7/7
- 7/8 – 8/31
- 9/1 – 12/31
- Ongoing After 1/1/2021
APE Student Capstone Projects in collaboration with Duke University, School of Nursing’s Informatics Program:

APE Artifacts/Deliverables:
1 – guidelines, best practices -> business case
2 – clinical pathways -> use case
3 – Models (BPM+, UML, Data model(s))
4 – Standards (FHIR resources, etc.)

APE Process:
1 – Planning & Project Infrastructure Set-up (Confluence/Trello)
2 – Jumpstart training
3 – Poster submitted to MCBK* conference, June 30-July 1

*MCBK-Mobilizing Computable Biomedical Knowledge
**Project**: COVID Placemat Project

**Description**: To develop a “COVID Navigator” tool to assist in the browsing and discovery of COVID related assets to complement the many “search and filter” websites available. The goal is to help caregivers and others to more effectively discover, relate, and compare “like” assets based upon their focal interests without the need for detailed keyword searches.

<table>
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<tr>
<th>Date: 2020 June</th>
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<tr>
<td><strong>Facilitator</strong>: Ken Rubin</td>
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</table>
- Effort launched about 10 weeks ago and has been meeting as frequently as 4x weekly  
- Metamodel, user experience design is reasonably complete, and prototyping has begun  
- Exploring hybrid approach to pre-populate based upon academic outreach and alignment with key portal activities for data feed  
- Developer resources and other contributors are needed |

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</table>
| • Need to establish sustainable community to validate content  
• Promulgating awareness of the work once complete | • Development / hosting resources are needed | • Baseline metamodel and Classification Guide (end of June 2020)  
• Validate metamodel via classification of initial asset set (mid-July 2020)  
• Decide on visual framework codebase (Rgraph?) (July 2020)  
• Commence Sprint 1 development build (July 2020) |

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</table>
| • Metamodel and Classification Guide (nearly complete)  
• Visual/User Experience Design Concept (Alpha ready) | • Business Case  
• Step by Step Guide Outline-High Level Content  
• Use Case Outline |

**Project Next Steps**

- Produce Alpha Release of COVID Navigator (August 2020)  
- Develop support tooling (Classification Portal / Asset Lifecycle Support Tool; Data feed/ETL/Load)  
- Initiate asset classification backlog process

**Scope Added**

- This is a new project and the first time being publicly briefed

**Scope Removed**

- This is a new project and the first time being publicly briefed
Thank You Sponsors!

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- Follow Us on LinkedIn: https://www.linkedin.com/company/bpm-health/
- Join Our Next Workshop in September: https://www.bpm-plus.org/events