

gpc-dev Meeting Notes for December 9th 2014

- Convene, take roll, review records and plan next meeting
 - [Meeting ID and access code: 686-845-717](#); call +1 (267) 507-0008
 - meeting notes ([#12](#)): previous notes OK? today's scribe UTSW - Susan
 - roll: all 10 [DevTeams](#) represented? Yes. Comments on the agenda? None
 - *KUMC, *CMH, *UIOWA, *WISC, *MCW, *MCRF, *UMN, UNMC, *UTHSCSA, *UTSW
 - next meeting: Dec 16. **scribe volunteer? (Angela?) This didn't get recorded.**
 - New/closed tickets:
 - Reminder to update Hackathon 2 survey
- #176 -Tom Mish - Due date -
 - Almost ready to close ticket; tracking quality items in the KUMC redcap; done when that is complete. Enter quality results in redcap. Tom can assign account; this is where results will be submitted on a quarterly basis.
 - Will everyone need access? Yes everyone will have access.
 - **Tom will assign new due date for #176**
 - Milestone drafted with sop, have not heard if approved because of receiving no feedback **Tom will follow-up with John Steinmetz.** to confirm approval.
- #202 - Data builder - Clarification that the expectation is to have a production implementation ready to create datasets.
 - Kansas - Complete
 - CMH - Will add an update to the ticket before the next call. **[NateA added a question on the ticket of whether DataBuilder is only required for breast cancer, if so, this is n/a for CMH.]**
 - Iowa - 2- 3 weeks
 - Wisconsin - February; delay because of holiday
 - MCW - George complete for test data. End of year for production.
 - Marshfield - 4 - 6 weeks; January completion.
 - Minnesota - Begin work in January; February completion.
 - Nebraska - Will send an update by end of this week when Tech team returns
 - UTHSCSA - Angela Bos; 3 weeks out from implementation
 - UTSW - February; determining where to install
- Ticket #33 - data cohort identity for obesity - **All sites need to run these queries**--even if the result is identifying issues or missing categories of information.
 - Currently Alex has feedback from Jim McClay (Nebraska), George Kowalski (MCW) and Laurel (Marshfield). Noted runtime of around 4 hours
 - Alex will refine the queries based on feedback and redistribute
 - Laurel requested 2 volunteers to be next to run through Alex's results
 - Jim Campbell - prior to the call next week, **Nebraska will translate the queries to shared GPC terms.**
 - Phillip: questioned if it is worth 40 hours or should the focus be on finalizing the GPC terminologies before any time is spent on queries. For example, diagnoses/medication modifiers not confirmed, but should be done before cohort identification as this could impact results.
 - Jim McClay: That's fair, but the exercise of running through these will identify gaps that need to be addressed.

- Phillip: Need to list 5 domains that we all agree on.
 - This is available as [KeyGoalTracking](#). If items are missing, then tickets should be created in Trac to work on these.
 - Nathan Graham - waiting on update from Hubert.
 - Jim Campbell - Volunteered to run obesity queries; cohort referencing update spreadsheet; will provide feedback before next we meet
 - Phillip - posed question what is process if terminologies not agreed on as standard and with terminology alignment among sites? How do you know when something is final? UTSW is waiting to do work until these decisions are made.
 - Laurel - Ticket item approval was that set of 2+ sites would implement then if item worked with these sites then item was approved and all agreed on for each site and the group as a whole; This is an incentive to get involved early.
 - Jim Campbell - will take action to methodology addition; notes that compliance with CDM should be expected, this notes approval and refining of agreed standards
 - If a ticket is being closed - item is approved and that was the standard
 - **Laurel will create a ticket for the process of approving terminology**; will hand it off to Philip
- PCORnet DRN/PopMedNet readiness
 - Laurel - waiting for a reply from DRN [**Update: late January is the earliest time to expect a live query of real data**]
 - Keith - Experiencing PopMedNet performance issues. sent email to them lincoln peak and they will set up meeting to discuss
 - **Laurel can work on getting a meeting scheduled**; Keith will get ticket to laurel
 - Justin Dale - noted that upgrading popmednet, should improve performance. It has issues across sites, especially with scheduled queries.
 - Keith - It can be difficult to even login. 11:00 at night typically works.
 - Susan - Why did GPC decide to go with a tool that has so many issues? Are we communicating these problems?
 - Laurel - PCORnet decided to use PopMedNet; not GPC [Our proposal was only based on the use of i2b2.]. The PopMedNet infrastructure wasn't prepared for the volume of users/sites that are required. They're working on updates. GPC has been sending feedback to the DRN team.