

ICD-11 Governance and Process for ICD Revision

In the current Phase 2 of the ICD-11 Revision, the Joint Task Force has joined the top level revision advisory groups. This document supersedes earlier documents and it provides an overview of the governance arrangement that is in place in this phase. All groups are advisory to WHO, which has the final authority for the ICD.

RSG, RSG SEG, and Topic Advisory Groups have been replaced by the Medical Scientific Advisory Committee ([MSAC](#)). The transition to the standard maintenance process includes the formation of the Classification and Statistics Advisory Committee (CSAC). The CSAC replaces the Joint Task Force of the ICD-11 Revision and the Update and Revision Committee ([URC](#)) of ICD-10.

Joint Task Force (JTF)

The Joint Linearization for Mortality and Morbidity Statistics Task Force (JTF) is the steering group for the ICD-11 version for Mortality and Morbidity Statistics (ICD-II-MMS) \ The JTF provides strategic and technical advice to WHO for the finalization of the ICD-II-MMS development. The input to ICD-II-MMS will draw on scientific advice, where recommended by the JTF or WHO. Design of the ICD-II-MMS will not be subject to alteration by the RSG. Scope of the JTF is to provide strategic and technical advice to WHO on:

- The subset of the Foundation Component content to be included in the ICD-II-MMS
- The primary parents in the ICD-II-MMS that define the hierarchy in the ICD-II-MMS
- The recommended versions of coding and browsing tools, in print or electronic formats, and related inclusion of secondary parents
- The level of detail for single-code coding^{1,2}
- The relevant dimensions³ for use in optional post-coordination
- The morbidity and mortality coding and reporting rules⁴
- The suitability for use as a classification:
 - o categories to be mutually exclusive⁵
 - o jointly exhaustive⁶
- User guidance where using more than one code per condition⁷
- Seek advice, as necessary, from vertical TAGs, cross-cutting TAGs and other project stakeholders to inform their work

¹ICD-11 MMS: ICD-11 version for Mortality and Morbidity Statistics - usage equivalent of ICD-11 with current ICD- 10

²this refers to 'shorelining' or 'stem codes', i.e. the codes that will include pre-coordinated concepts vs. postcoordination, meaning using multiple codes to code one condition

³ Extension code chapter, clinical forms, etc.

⁴ included in the reference guide

⁵ non-redundant; exclusion notes, coding hints

⁶ appropriate residual categories and groupings

⁷ Sanctioning Rules, coding hints

RSG-SEG - ended 12/2016

The RSG-SEG advises on the high-level connections within and outside ICD-11, and helps resolve possible conflicts arising in the design of the ICD-II-MMS. The co-chairs of the JTF and the Primary Care Task Force may also be invited to be members of the RSG-SEG. The RSG-SEG meets on a monthly basis by teleconference, with occasional urgent meetings on an as-needed basis. This also includes ad hoc electronic communication as needed.

The RSG-SEG responsibilities include advice on:

- High-level ICD-11 design and the integration of components, specifically:
 - The Foundation Component
 - Relationships between and among linearizations
 - The Ontological Component
 - links to terminologies outside ICD
- Production of frozen versions of the Foundation Component to ensure the stability of derived linearizations
- Decisions regarding tools for the continuing development and use of ICD-11
- Work with all linearization activities to facilitate alignment or interoperability
- In conjunction with the JTF, review and coordinate TAG activities (including proposal activities with focus on the structure and user guidance) to ensure continued scientific validity, correctness, and ultimately completeness of the Foundation Component content and relationships
- Resolution of problems where they arise in the design

Vertical Topic Advisory Groups (TAGs) - ended 12/2016

Vertical TAGs have the role of scientific editorial boards, with responsibility to advise WHO on the scientific validity of content and relationships in the Foundation Component, upon request. This is designed for the maintenance of ICD-11. In more detail, the TAGs advise on:

- the accuracy and validity of Foundation Component content
- updates and revisions of the Foundation Component to reflect new knowledge or understanding
- new content and relationships in the Foundation Component to enhance completeness
- identification of possible third party reviewers upon request
- updates proposed by other groups
- changes to completed sections of ICD-II-MMS where strong medical or scientific evidence necessitates doing so, or upon request

Cross-Cutting Topic Advisory Groups (TAGs) - ended 12/2016

Cross-cutting TAGs provide expertise in coding practice and guidelines, as well as classification development and implementation, with responsibility to advise WHO on the utility and quality of the classification, particularly with regard to the structure, upon request. In more detail, the TAGs advise on:

- the accuracy of relationships between Foundation Component entities
- completeness of the coverage of the Foundation Component
- updates and revisions of the structure of the Foundation component to reflect new knowledge, understanding, or perspectives
- new relationships in the Foundation Component to enhance completeness
- identification of possible third party reviewers upon request
- updates proposed by other groups
- changes to completed sections of ICD-II-MMS structure where strong medical or scientific evidence necessitates doing so, or upon request
- requirements for use of ICD-11 in various Member States and clinical settings

Revision Steering Group (RSG) - ended 12/2016

In Phase 2 of the ICD-11 Revision, the RSG will serve as a forum for the bilateral exchange of information and concerns of the TAG chairs representing the membership of TAGs, and dissemination of revision or maintenance-related general information. Membership includes the RSG Chair, all Co-Chairs of the Topic Advisory Groups for ICD-11 Revision, and all Task Force Co-Chairs, as well as the WFIO-FIC Council Co-Chairs, the chairs of URC the FDC, as well as other Committee and Reference Group Co-Chairs as indicated. The group will meet by teleconference on a quarterly basis. Meetings will serve to cover:

- reporting of progress in the Foundation and ICD-II-MMS
- issues or resolutions relevant to all RSG members
- strategic reporting from the RSG-SEG
- other topics as necessary