
Deliverable 2.2

Adaptation of MedCERTAIN software

The entire software developed in the MedCERTAIN project is currently being reprogrammed. As mentioned above, MedCIRCLE is working towards the vision that the user can either click on a “MedCIRCLE-button” on a health website (or invoke client-side software) to display a “Transparency Window” (also called “Label Window”), which displays metadata coming from the health information provider himself or from third parties. Technically, the data come from a database hosted at the MedCIRCLE website, previously “harvested” from health websites or gateway sites which use HIDDEL/RDF to express the results of their ratings or to express self-disclosure. We call this database also “Open Directory”, as the data can be used freely (eg by search engines) to ensure maximum dissemination.

While the Harvester is not yet implemented, it is already technically possible for CiSMEF to dump (export) evaluation data in RDF, which can then be imported into the Open Directory (red arrows in Figure 1).

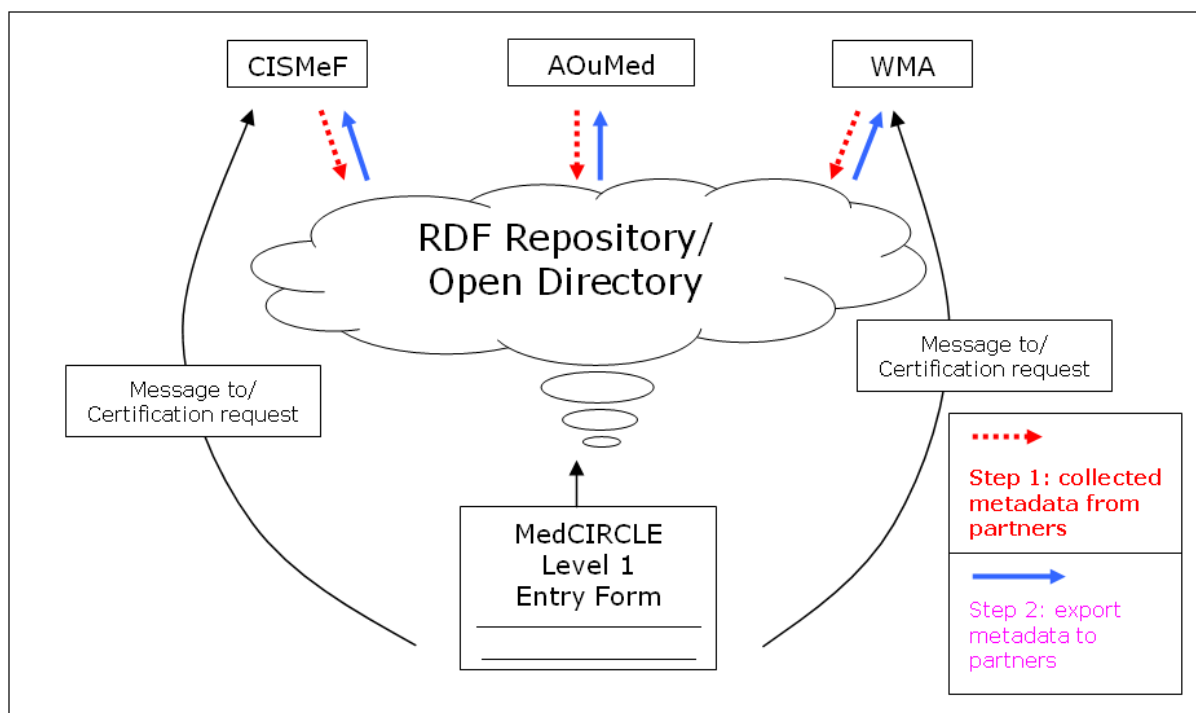


Figure 1. Import/export of HIDDEL/RDF metadata. Step 1 is partly completed.

By February 2003, we also intend to have implemented a generic Application Form for health information providers, who want to participate in the system, either by self-disclosing information (MedCERTAIN Level-1 metadata form in Archer) and/or by being rated/accredited by one of the partner sites (WMA, CiSMEF, AQuMed).

By February 2003 we also intend to be able to demonstrate some basic search functionality for the Open Directory (D2.3).

Archer (a software module developed in medCERTAIN to allow health information providers and evaluators to enter metadata values) will be used by AQuMed and WMA to enter evaluation data.

However, the interface needs to be revised in a sense that it still works under the assumption that “level-1” (self-description) data have been entered by the health information provider (which was in fact the MedCERTAIN process). In the end Archer also must allow third-party evaluators (such as WMA) to enter the primary data on behalf of the information provider.

The design of the “transparency label window”, which opens once the user clicks on the MedCIRCLE button, is still suboptimal (legacy of MedCERTAIN) and needs to be optimised (TRB). It must become more clear who entered the respective element values and when (provision of meta-metainformation: where the metadata comes from and when it was last changed). In the MedCIRCLE scenario, it is very well possible that many different values for a given element will exist (=are provided from different organizations or individuals). We are currently working on a revision of the way the information is presented without confusing the user. The distinction between level 1 (what comes from the health information provider), level 2 (non-medical experts), and level-3 (medical experts) should be made by using colors (using different background colors, e.g. blue for HIP, yellow for level-2, and red for level 3), and conflicting or concordant information should be highlighted (e.g. bold).