
CHERRI II: Is it feasible? A case study

Proposal to the JISC and HEA, from TASI, on taking forward the recommendations of the CHERRI project: Common Healthcare Educational Recordings Reusability Infrastructure.

Background

The JISC's vision for the use of digital images is:

'To provide the UK education community with long-term access to the digital image resources that it needs, in a variety of convenient, flexible and easy-to-use ways'

JISC Images Working Group Vision, 2005

One of the key elements that such a vision will provide is an open-access virtual reservoir of images forming the basis of a permanent asset for education and one in which there is clarity of rights and usage (Digital Images in Education: Realising the Vision, 2007, Eds Carpenter and Milloy: http://www.jisc-collections.ac.uk/catalogue/images_book). The JISC's Digital Images Working Group realised that if this was to be the goal for images (and video and sound) within medicine and subjects allied to health, and in particular clinically sensitive recordings, issues of patient consent and licensing need to be solved. The availability of such recordings is critical to the teaching of all health care-related subjects, but there is both a lack of understanding and fear from creators and users of clinically sensitive recordings that is currently preventing the safe use of such visual material.

To this end, the JISC's Digital Images Working Group commissioned a study under the name of CHERRI – Common Healthcare Educational Recordings Reusability Infrastructure) to define a possible framework for the deposit of sensitive and clinical (medical, dental and health-related) recordings. CHERRIE made a number of recommendations of which the main one was to develop a UK-wide common consent and license model (C+LM) for the use and sharing of clinical recordings. The report also identified a lack of common processes and standards at local level and further recommended that all users of clinical recordings for academic non-clinical settings (CRANCS) be better educated and supported in the use of such recordings. <http://www.cherri.mvm.ed.ac.uk/>

Proposal

CHERRIE II will explore the CHERRIE findings further, understand how feasible they are within current practice and what changes need to occur both locally and nationally. Key activities along with deliverables are presented below. These will be further refined at the onset of the project and agreed with the JISC and HEA. The main areas of activity will:

1. Unpack the recommendations, and in particular the C+L Model, and understand in practice what is required at both local and national levels in order to achieve them. Questions such as 'Is it feasible?', 'What is in place now, what is not in place?', 'Have things moved on since the study (eg changes in legislation)?' need to be asked. This will take the form of a written commentary, developed and commented on by a closed group of individuals active in this area before going out to wider consultation (see workpackage 4)
2. Gain a more detailed understanding of how, in practice, implementation of the CHERRIE recommendations and the C+L model would work. This will be achieved through a limited number of case studies/scenarios based on GMC guidelines and local practices and for these to be mapped onto the C+LM. The case studies would focus on using clinical recordings in health professional education (generated within clinical settings; used within HE/FE non-clinical settings) and illustrate what needs to be done in order to be able to make images available to the wider community.
3. Host a conference, November 2008, on the use of CRANCS for health professional education open to creators and users of CRANCS within NHS and HE/FE. This will provide an opportunity for wider consultation and to revise, if required, the C+LM.

The conference will be organised and supported by the Higher Education Academy for Medicine, Dentistry and Veterinary Science and hosted by the University of Bristol.

4. A final report detailing findings with practical steps and actions towards implementation of the C+LM, case studies of its implementation and a possible revision of the C+LM.

Project team and management

A key stakeholder grouping will be established whom the project team will consult on all aspects. Dr Jane Williams, Director eLearning (Medicine), Centre for Medical Education, will lead the project. The majority of work will be carried out by consultants (Interactive Consultancies) already working successfully with the Centre for Medical Education and its NHS partner Trusts to establish local procedures for the use of CRANCS. Legal advice will be from Dr Andrew Charlesworth, Senior Research Fellow in IT and Law, School of Law. As this is a small study, formal project management will be kept to a minimum but time can be incorporated into existing arrangements with the consultants so allowing the majority of funding to focus on the actual work. Regular project updates will be provided to Karla Youngs, Image Case Studies Project Manager.

The Centre for Medical Education is in a good position to carry out this work; it has numerous contacts with individuals within the NHS and HE who are key stakeholders in this field and project start-up will be minimal and can be immediate. The project is able to exploit and build on the work carried out to establish the university's own safe use of CRANCS.

Dissemination

All deliverables will be hosted by the HEA's subject centre for medicine, dentistry and veterinary sciences and JISC's web sites. The GMC and BMA will be invited to join the key stakeholder group. A conference, presenting the findings of CHERRIE and CHERRIE II, will be hosted by the University of Bristol and supported by the Subject Centre for Medicine, Dentistry and Veterinary Sciences in November 2008. This will be open to both creators and users of CRANCS within the NHS, HE and FE. In addition, Caldicott Guardians, HE/FE personnel responsible for the safe use of digital information and Heads of Departments of Medical Illustration will also be invited.

Timeline

Assumes a start date of 1 May 08

Area of activity	M 08	J 08	J 08	A 08	S 08	O 08	N 08	D 08
Examination of CHERRIE recommendations and consultation; production of written commentary								
Development of case studies								
Conference: use of CRANCS within health education and wider consultation								
Final report								
Project Management								

Budget

Total costs			£18,130
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