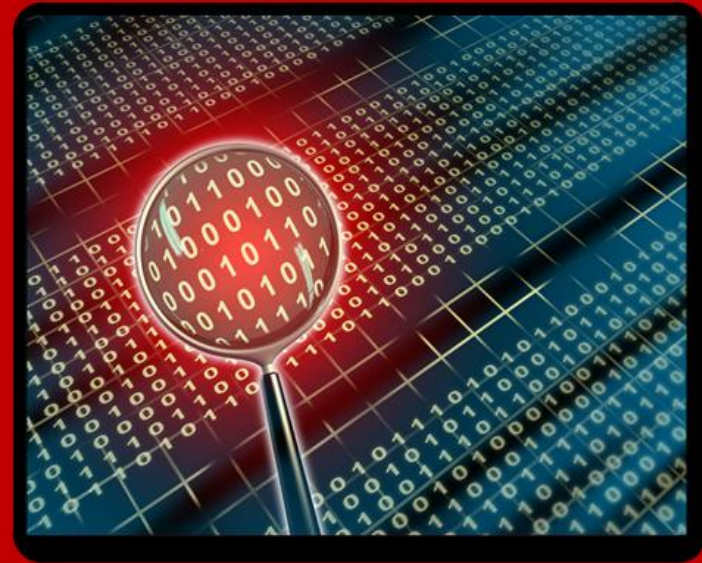


# Next Generation Secure e-Health Platform

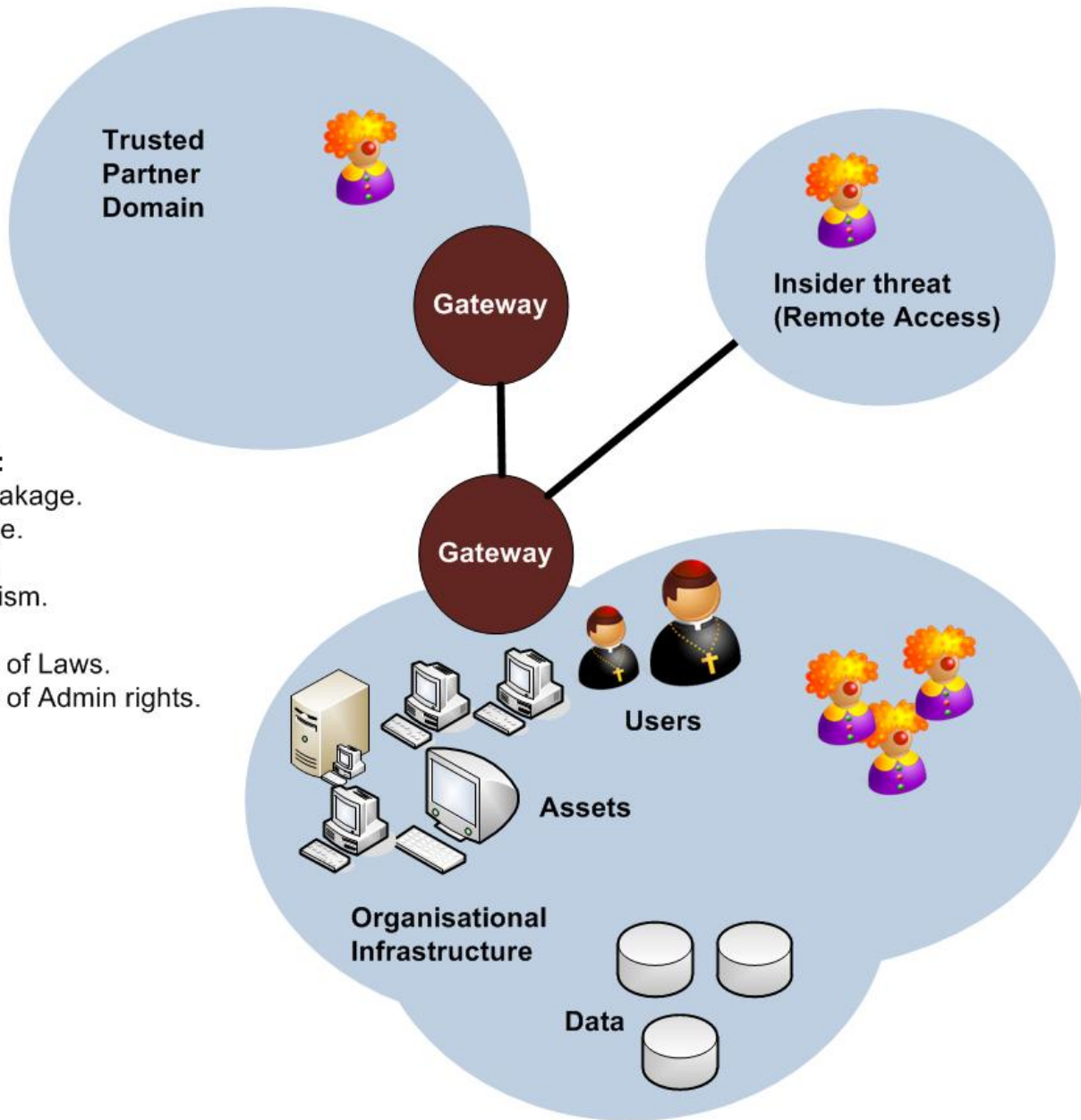
- Overview of information sharing.
- SPoC (Single Point of Contact) Principle.
- Information Sharing Context.
- E-Health Platform

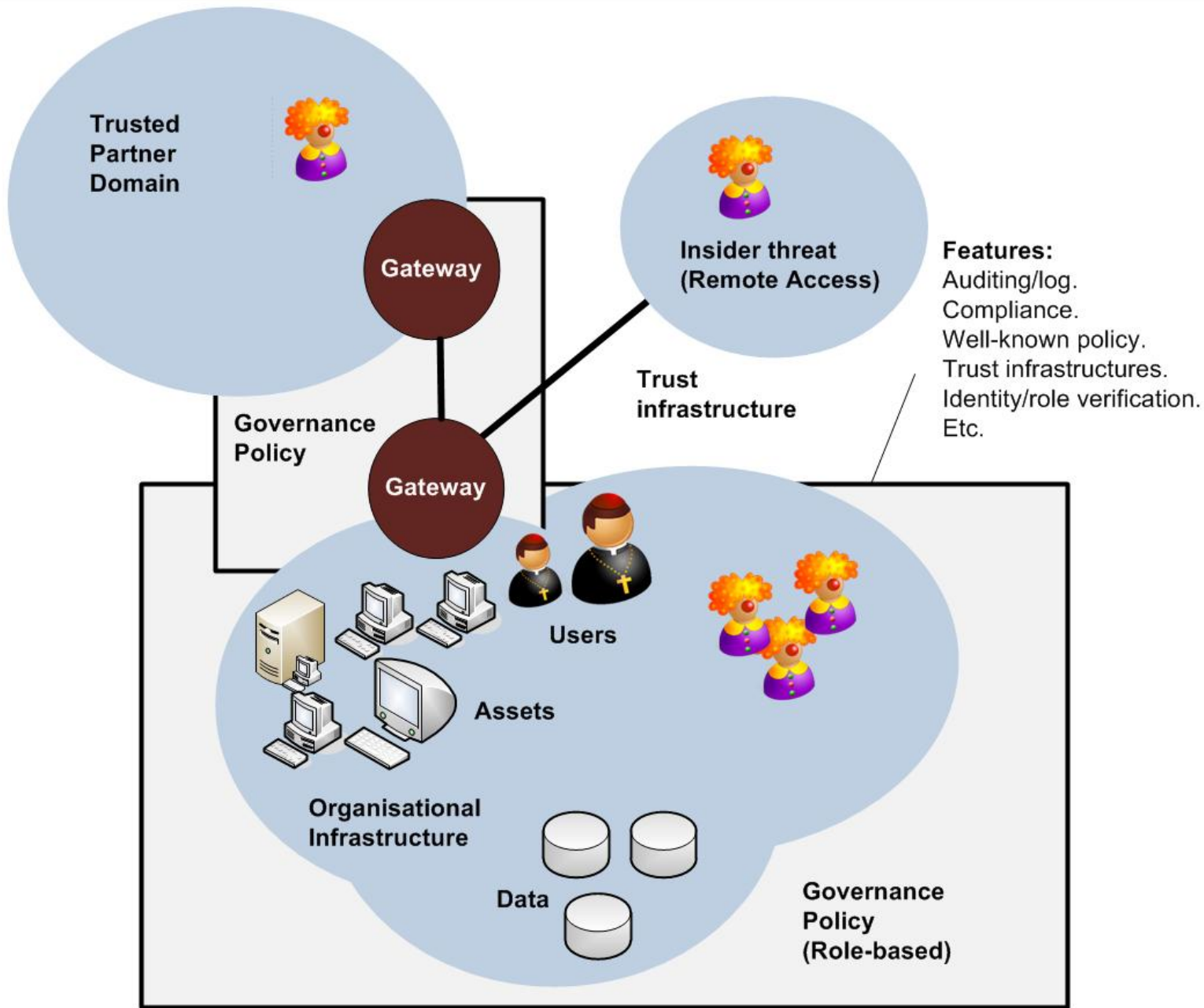


Prof Bill Buchanan

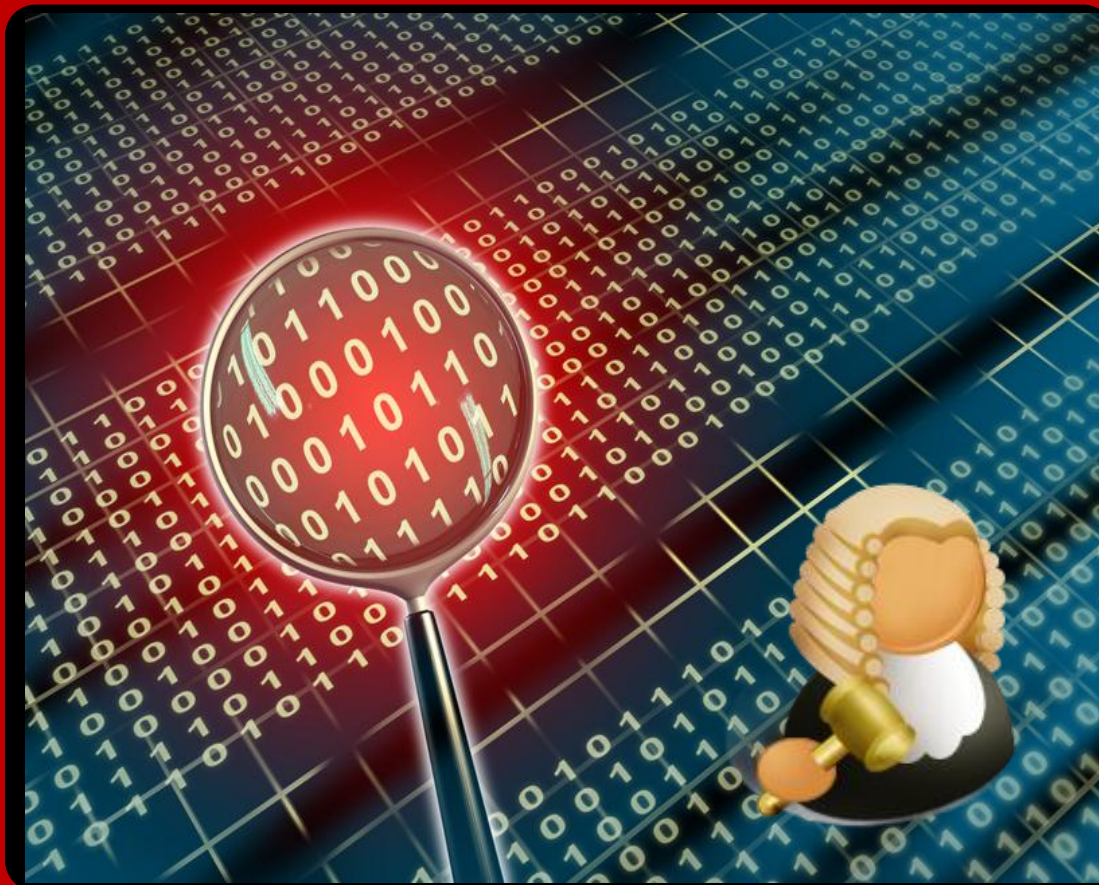


**Threat:**  
Data leakage.  
Damage.  
Abuse.  
Vandalism.  
Fraud.  
Breach of Laws.  
Breach of Admin rights.  
Etc.





# Information Sharing



Context



**Police domain**



**Social care domain**

**Information sharing**

DPA

RIPAA

**Educational Domain**



**Health care Domain (Primary/Secondary)**



**Sharing between domains**



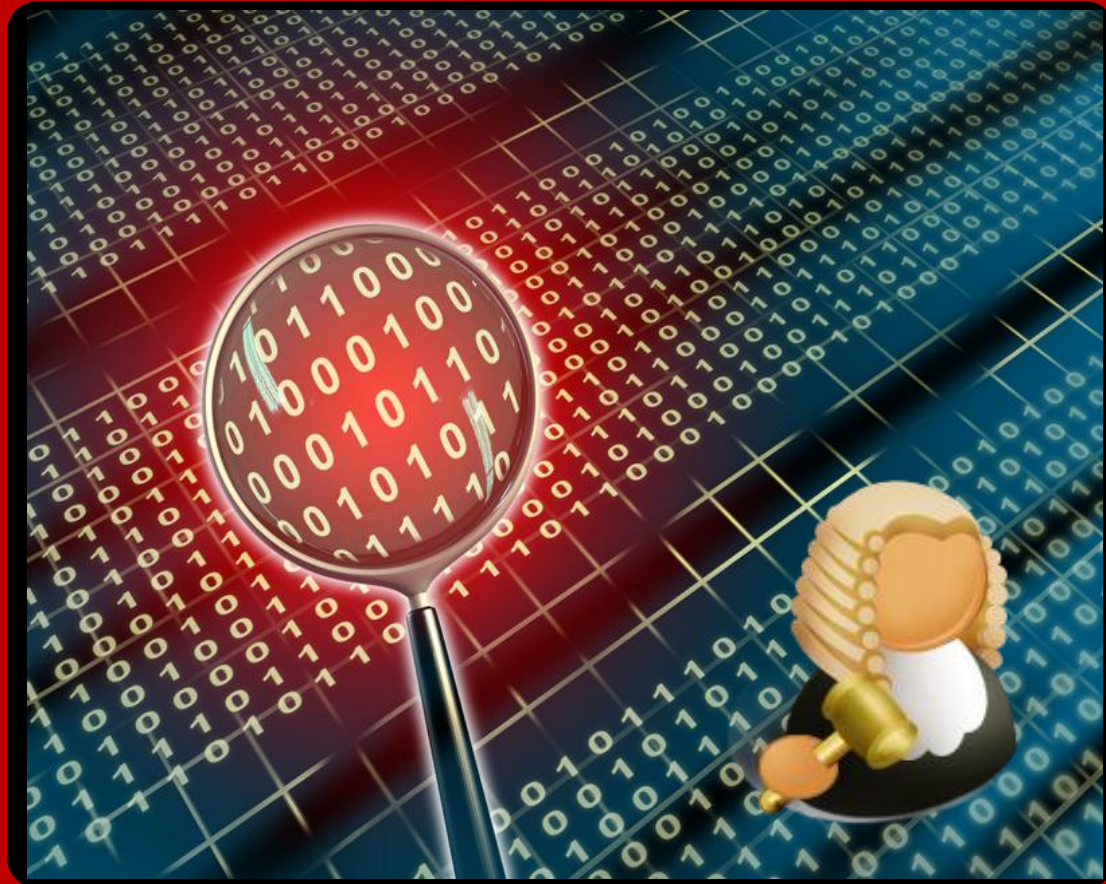
## Police domain

**ILP (Intelligence-led policing)** – proactive, researched and planned approach to policing and relies on a robust information-sharing mechanism.

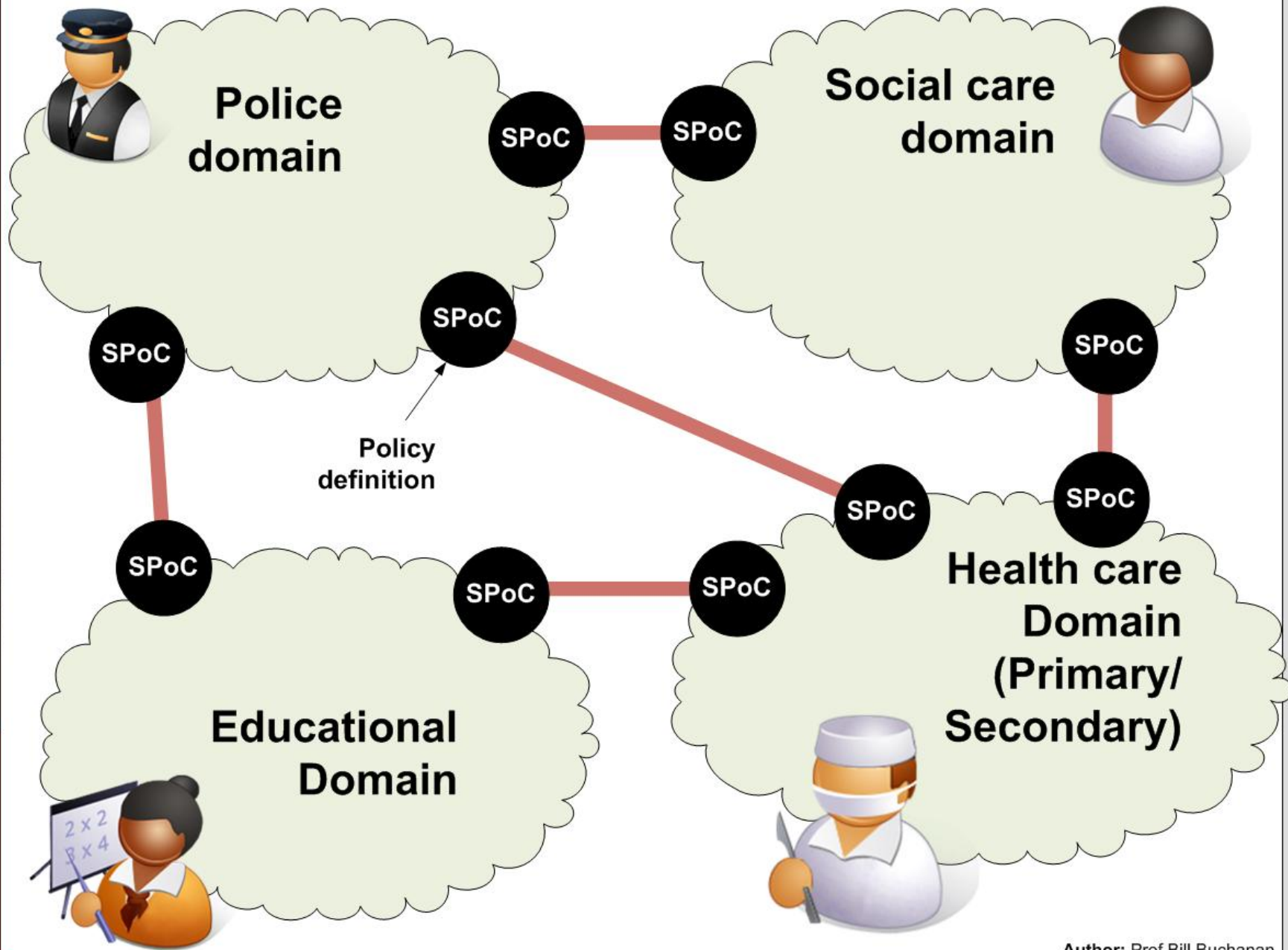
**MOPI (Management of Police Information)**– best practices for consistent information recording, management and sharing

**NIM (National Intelligence Model)** – principles for communities to achieve common strategic, tactical solutions to common problems

# Information Sharing

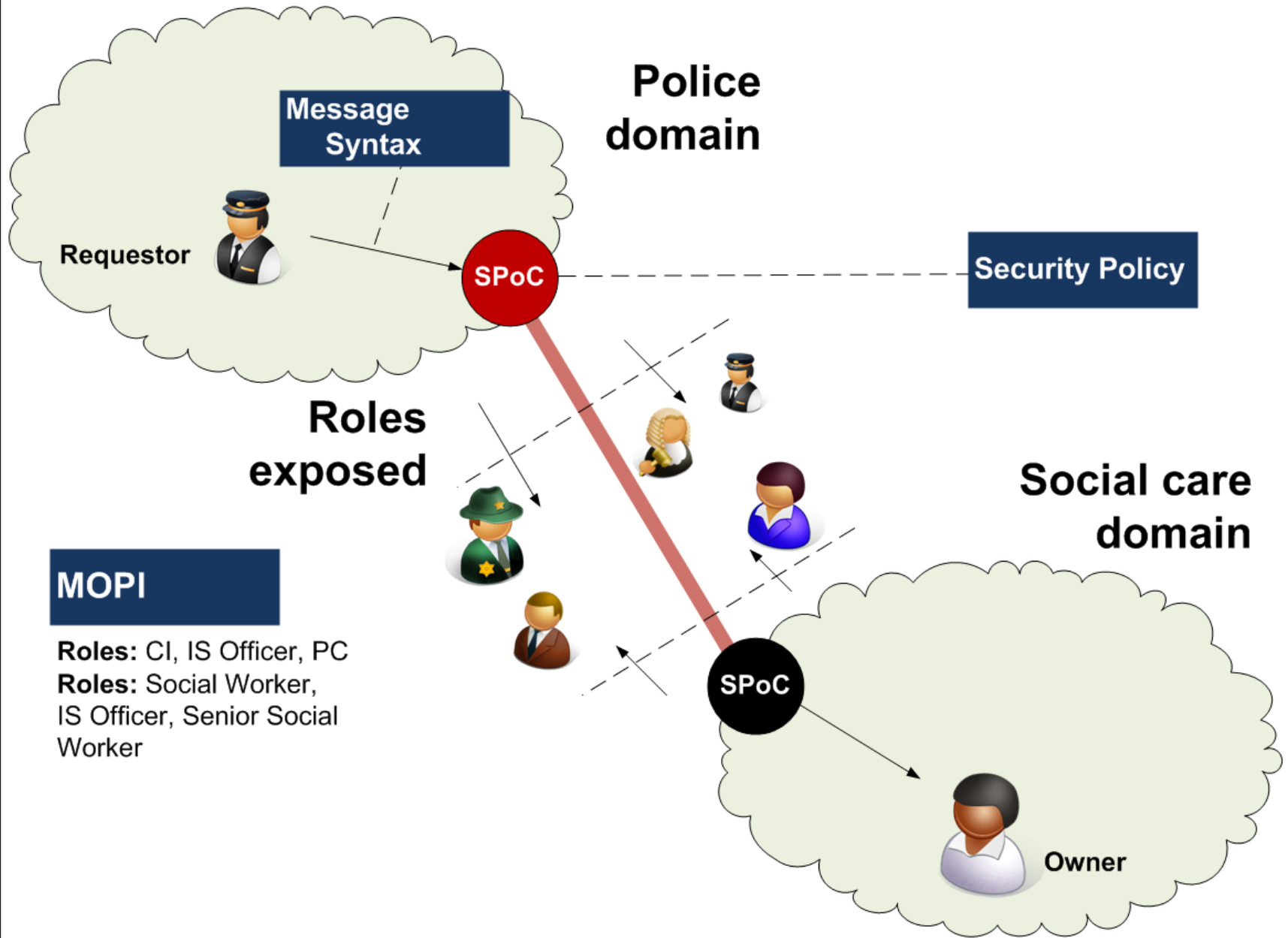


## Information Sharing Architecture

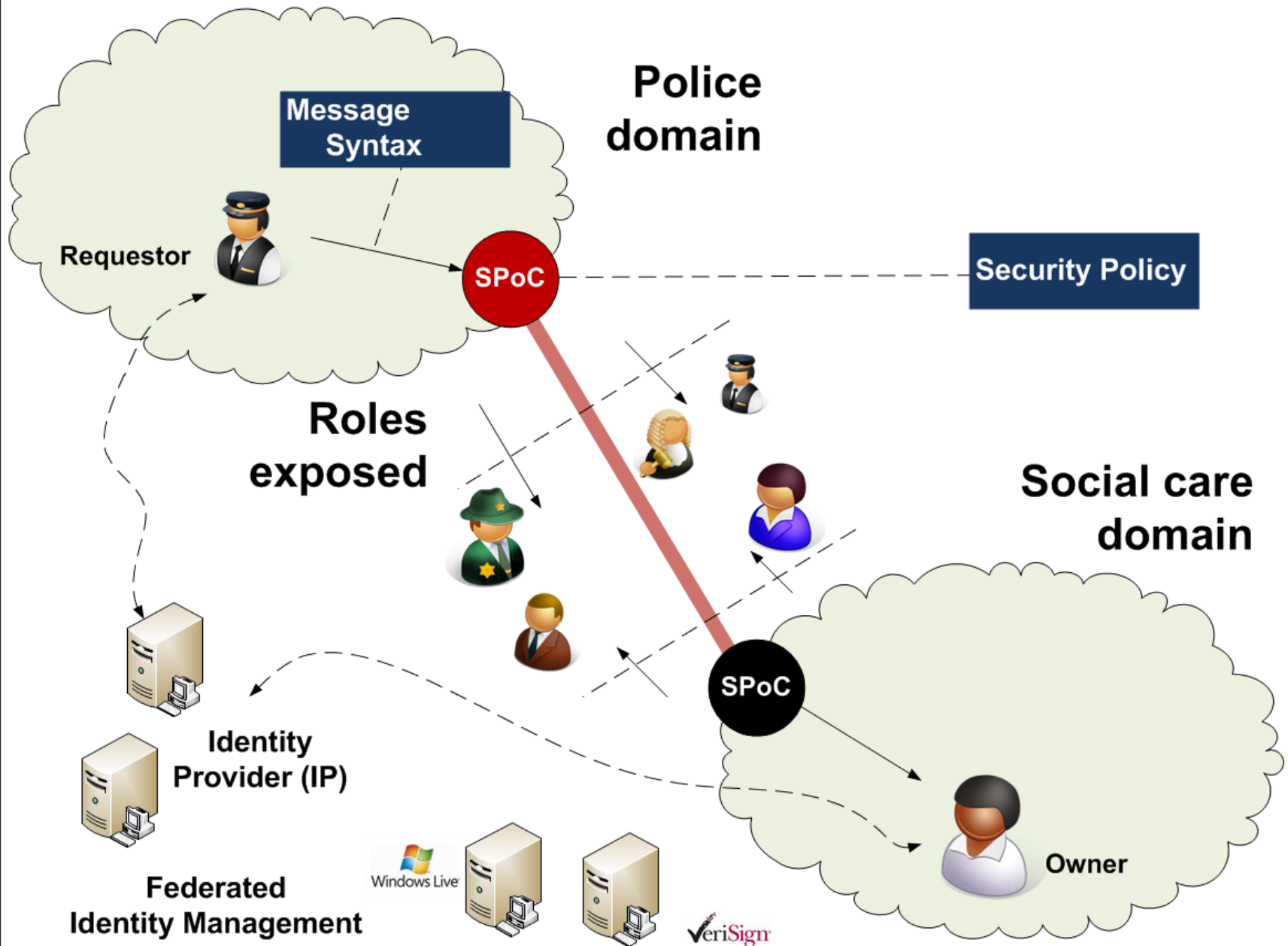


Author: Prof Bill Buchanan



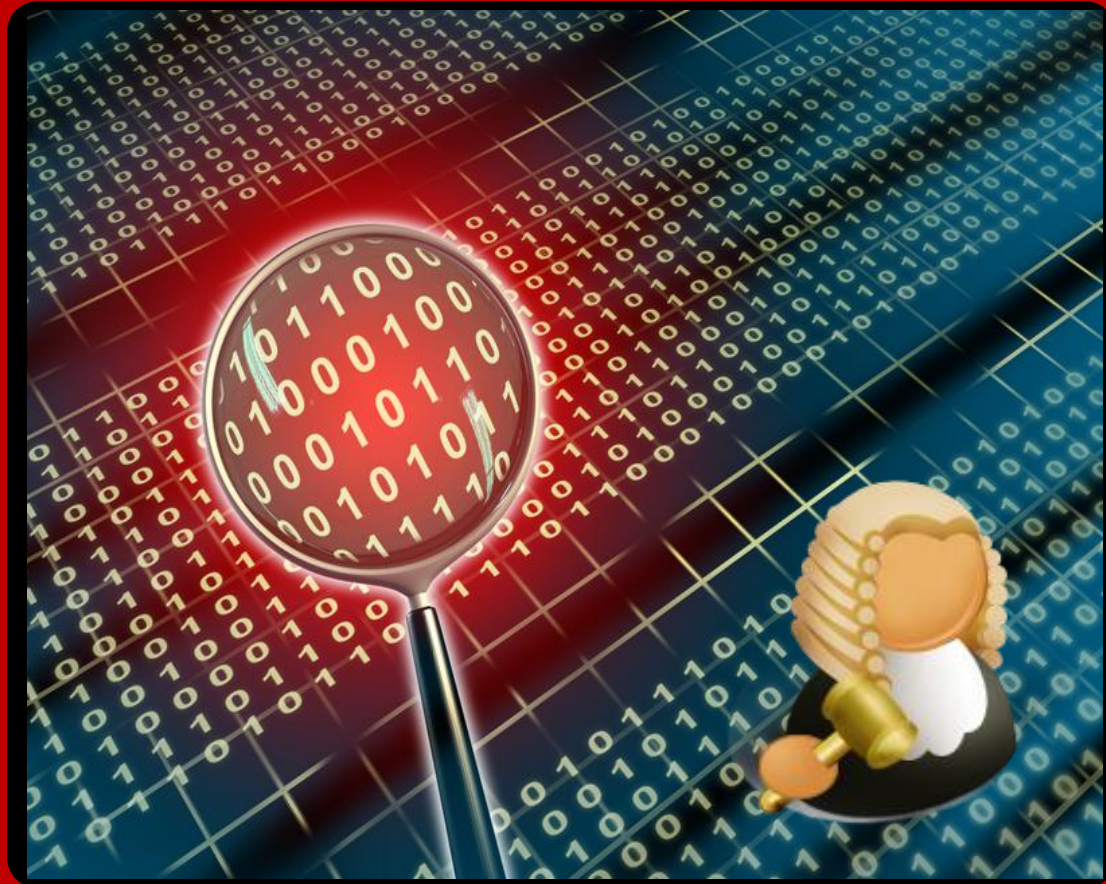


Author: Prof Bill Buchanan

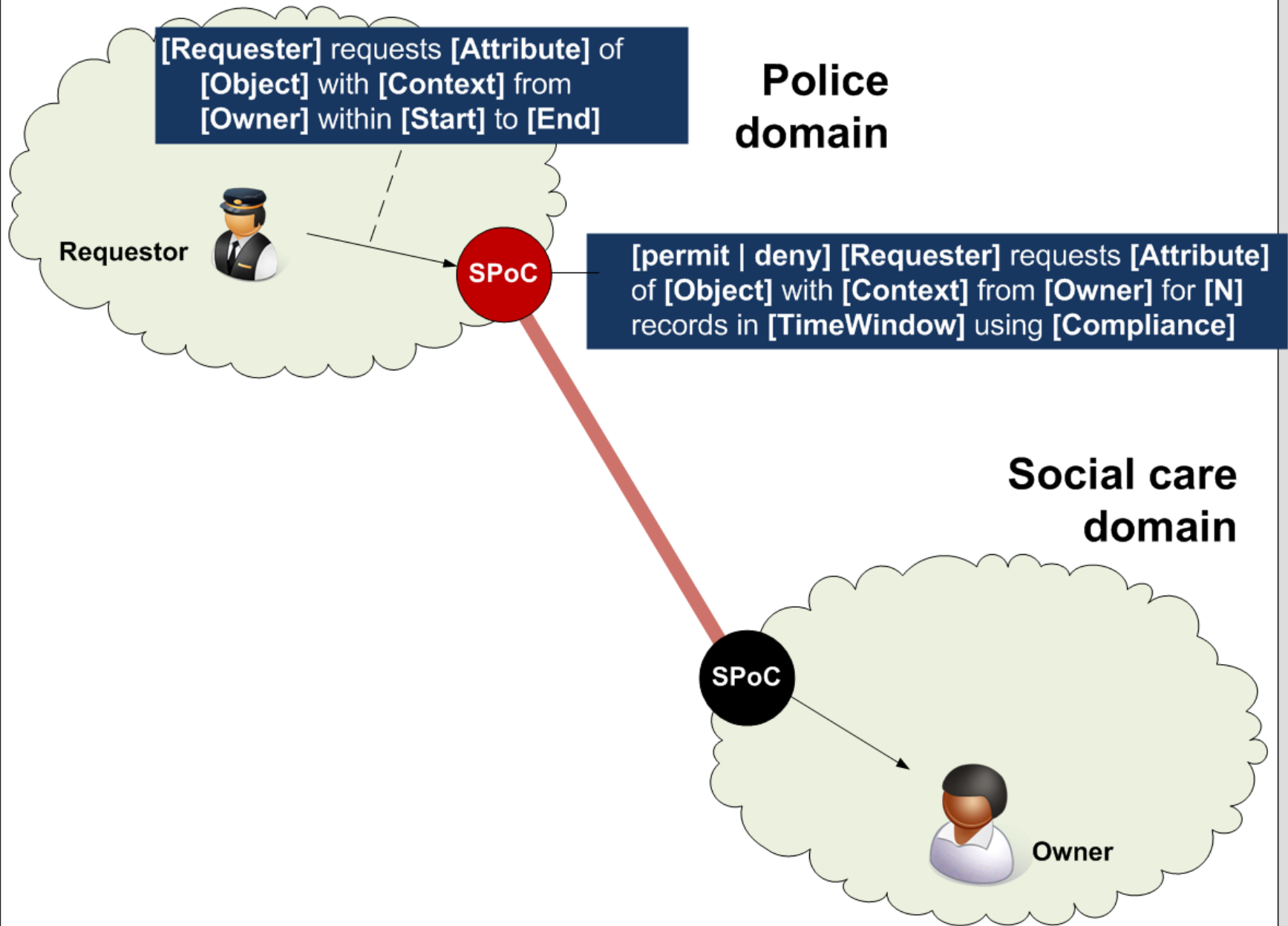


Author: Prof Bill Buchanan

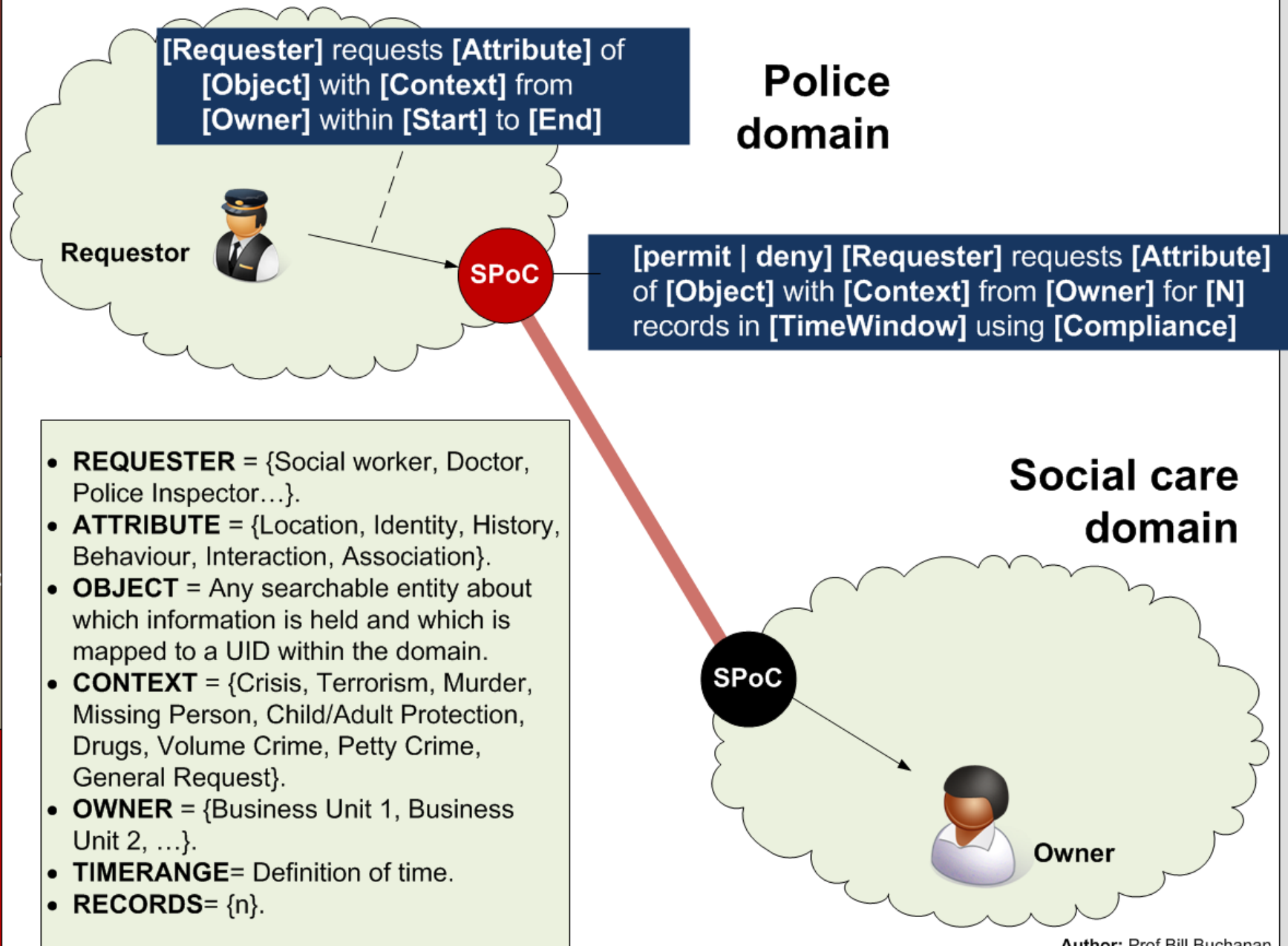
# Information Sharing



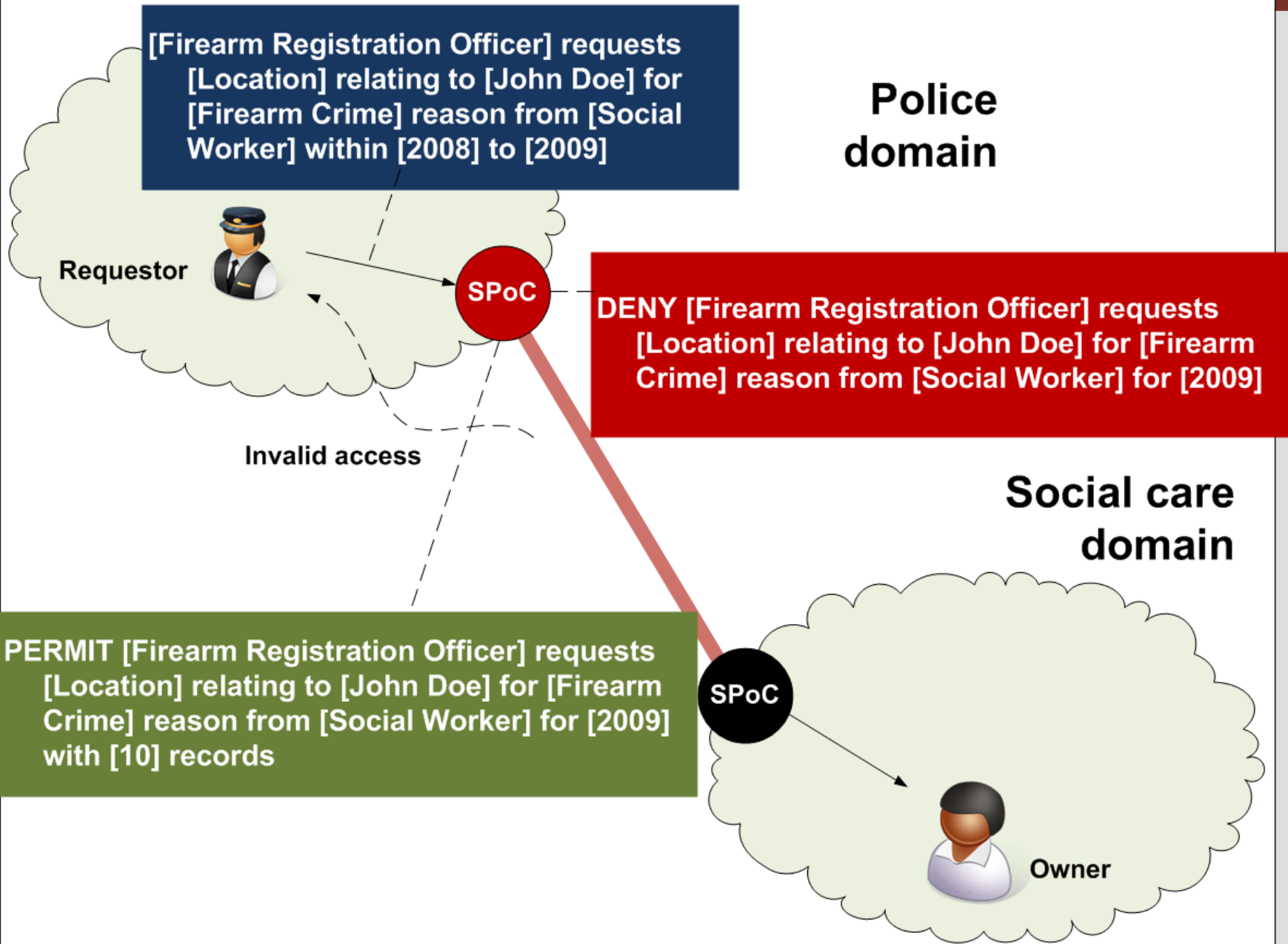
Message/Policy Syntax



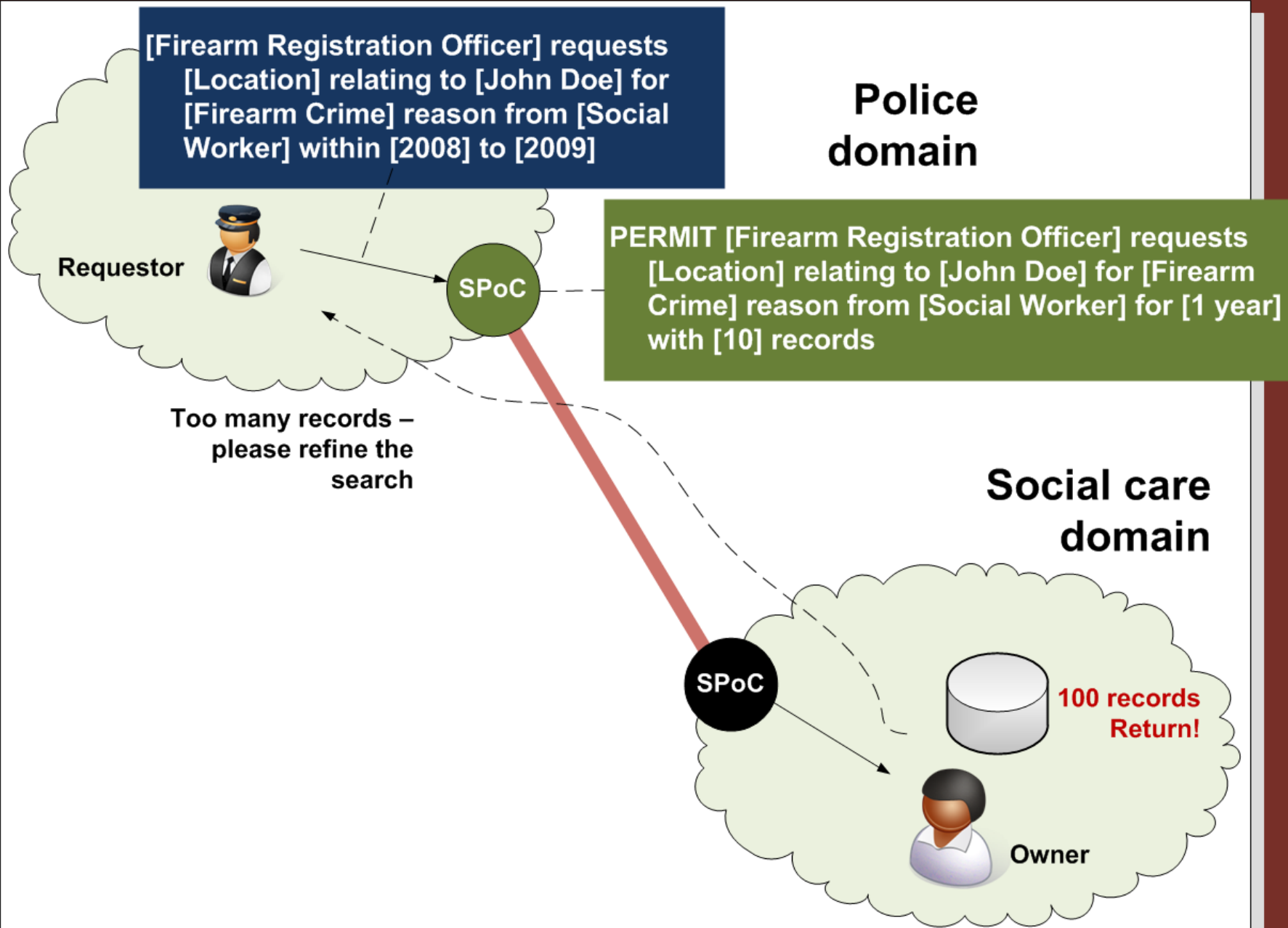
Author: Prof Bill Buchanan



Author: Prof Bill Buchanan

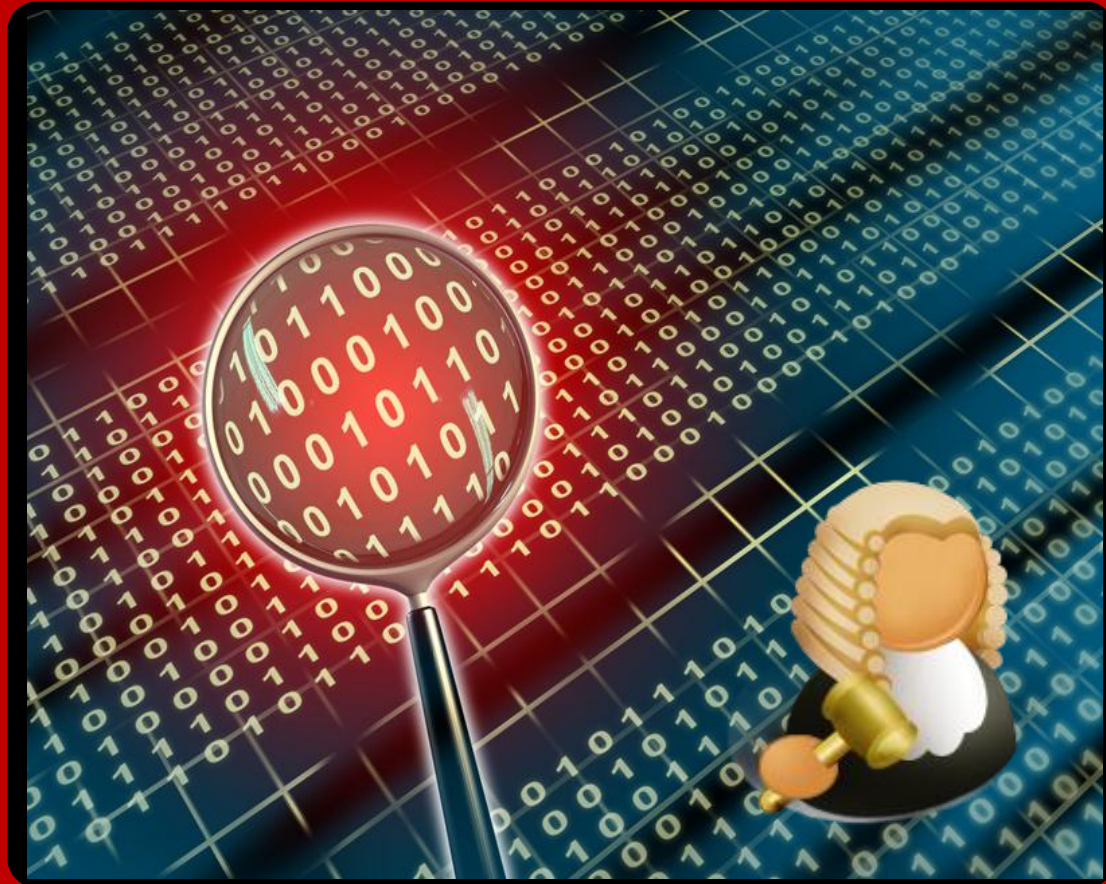


Author: Prof Bill Buchanan



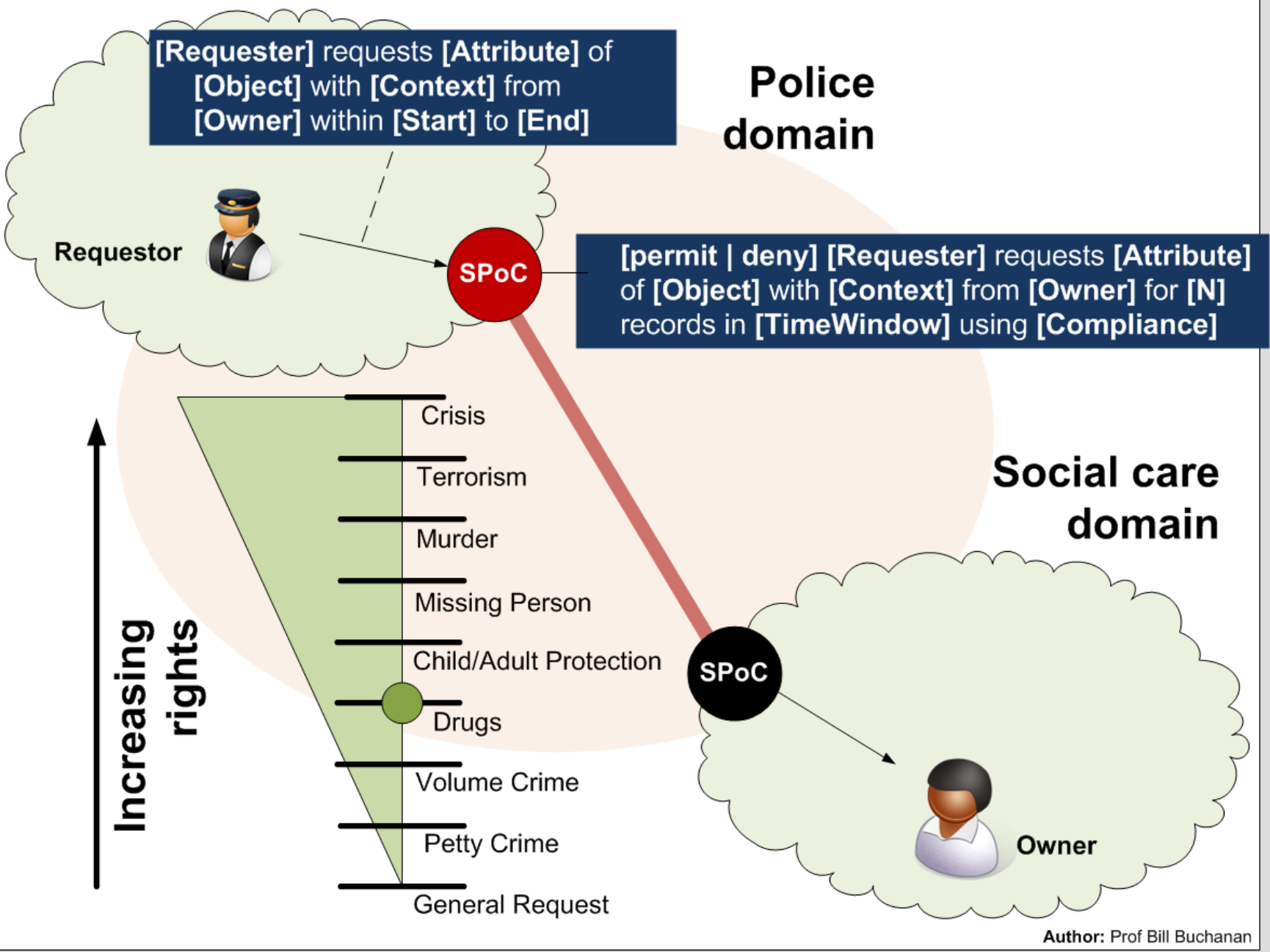
Author: Prof Bill Buchanan

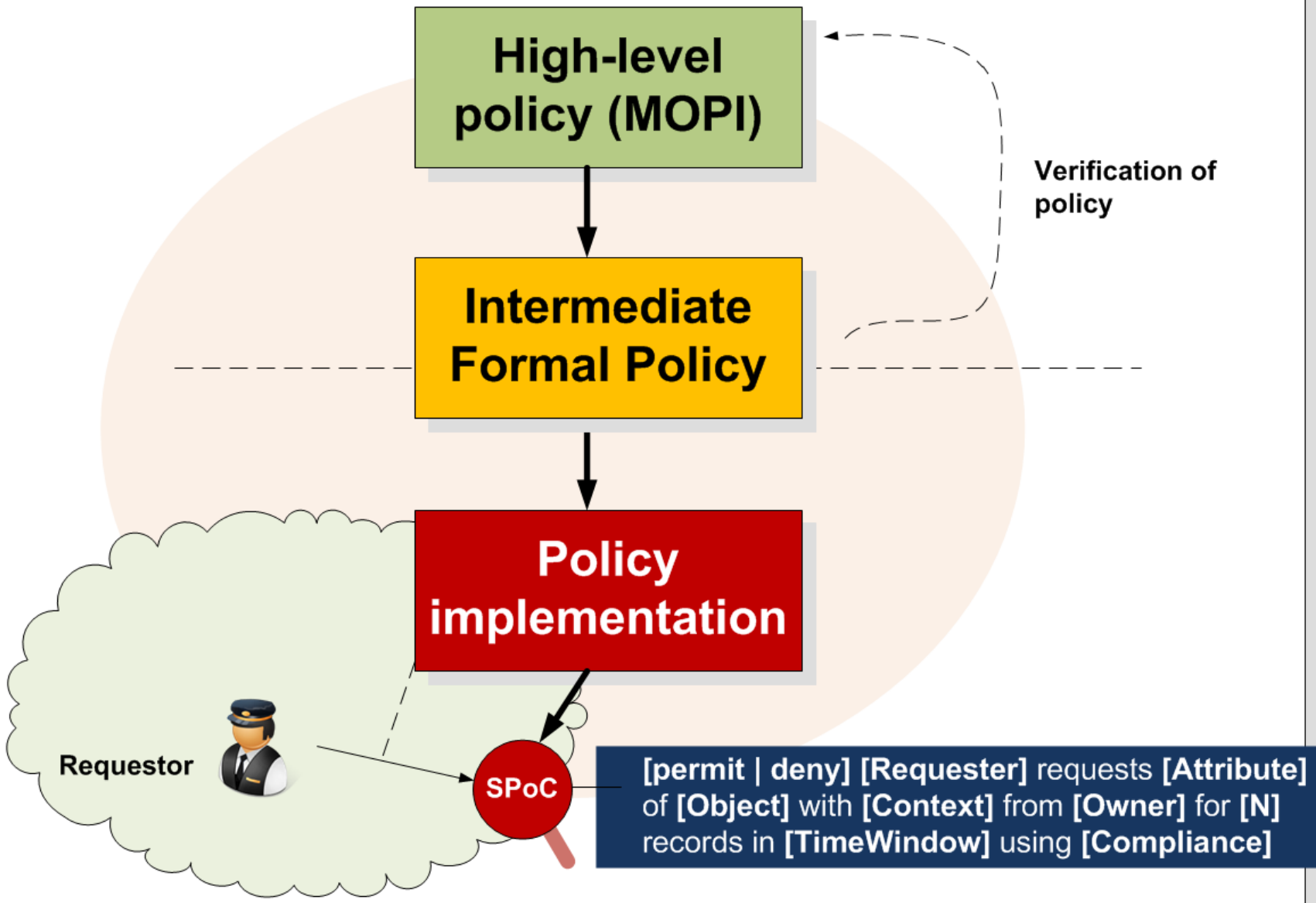
# Information Sharing



Context







# Next-generation Information Sharing Infrastructure

- Scalable architecture.
- Enhanced security.
- No need to expose data structure to other domains.
- Well defined policies.
- Integrated auditing/compliance.
- Context allows access, if required.
- Lock-down (explicit deny).
- Interchange between any domain.
- Links to any domain.
- Customised policies between domains.



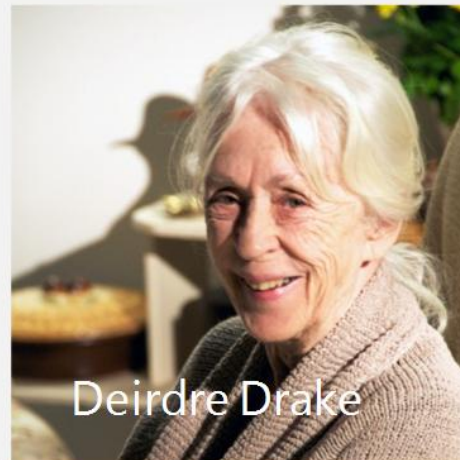
# A Next Generation Cloud-based Health Care Platform – Towards Trust and an Infinite Possibilities



Nurse Kate

- Healthcare Professional.
- Invited user

Napier: Bill Buchanan, Christoph Thuemmler, Lu Fan, Elias Ekonomou, Owen Lo.  
Imperial: Prof Derek Bell



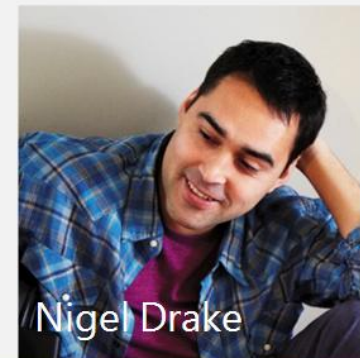
Deirdre Drake

- Care Subject
- 82 years old
- House bound
- COPD (Chronic Obstructive Pulmonary Disease)



Sam Drake

- Site Creator
- Primary Carer



Nigel Drake

- Invited user



# DACAR e-Health Platform

Trusted Services 

Chelsea and Westminster Hospital   
NHS Foundation Trust

Edinburgh Napier   
UNIVERSITY



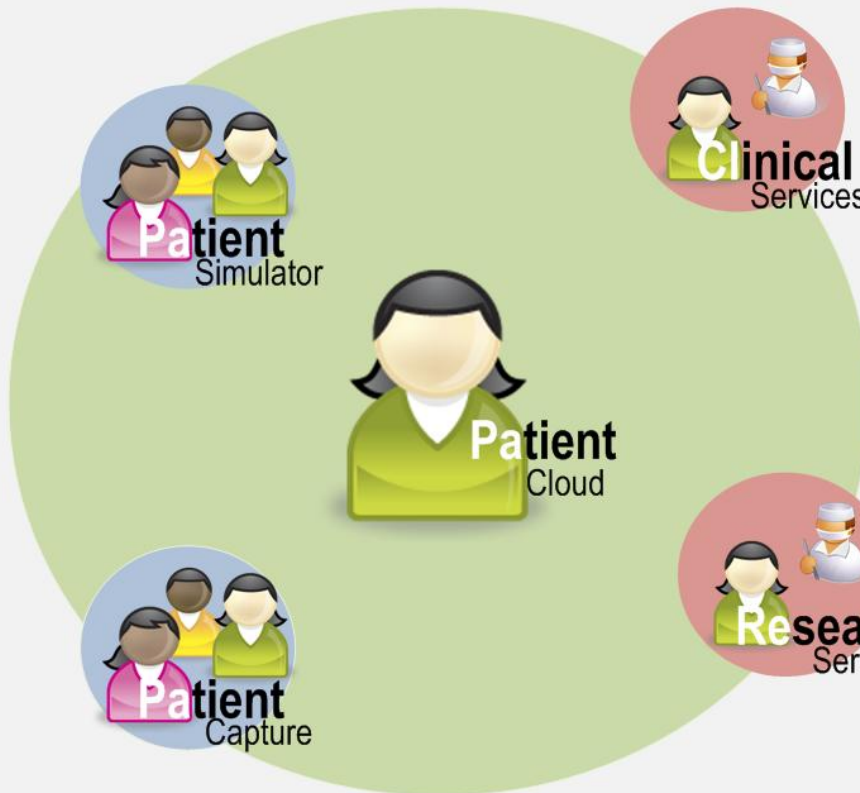
Imperial College  
London





Technology Strategy Board  
Driving Innovation

  
Pioneering research  
and skills







Edinburgh Napier   
UNIVERSITY

# Societal

# Technical

Lack of integration between assisted living, primary and secondary care

Patient records are often static

Aging population

Different systems/formatting used for data

Lack of information sharing across the public sector

Limited/difficult access methods ... typically Government infrastructures ... lack of trust

Strong demand to consume health care data

Poor access control to data

Lack of integration with careers and trusted people

Data often aggregated and context is often lost



**Digital Trust**

**Rights**

**Clinical Services**

**Human Trust**

**Identity**



**Strong**

**Governance**

**Infinite**

**possibilities**

Translation of rights  
Translation of identities

Strong Governance  
Policy



**Assisted Living  
(Informal and Trust based)**

**Primary Health Care (Formal and role-oriented)**

**Secondary Health Care  
(Formal and role-oriented)**

**Manager might ask:** What's difference in length-of-stay between different age categories for June?

**Consultant might ask:** How does the Early Warning Score affect the length-of-stay?

**Family friend might ask:** In which ward is Deirdre?

PatientID



Static Patient Record

- Often localised
- Different systems/formats
- Poor access control
- Poor identity verification
- Cannot be aggregated
- Etc.



ConsumerID (RoleID)

Domain A

Data Storage (within the Cloud in buckets)

PatientID Bucket

CaptureTime

EventID

LocationID

PatientID

ClinicalMeasureID (ClinicalUnitsID)

Capturer ID (RoleID)

DeviceID

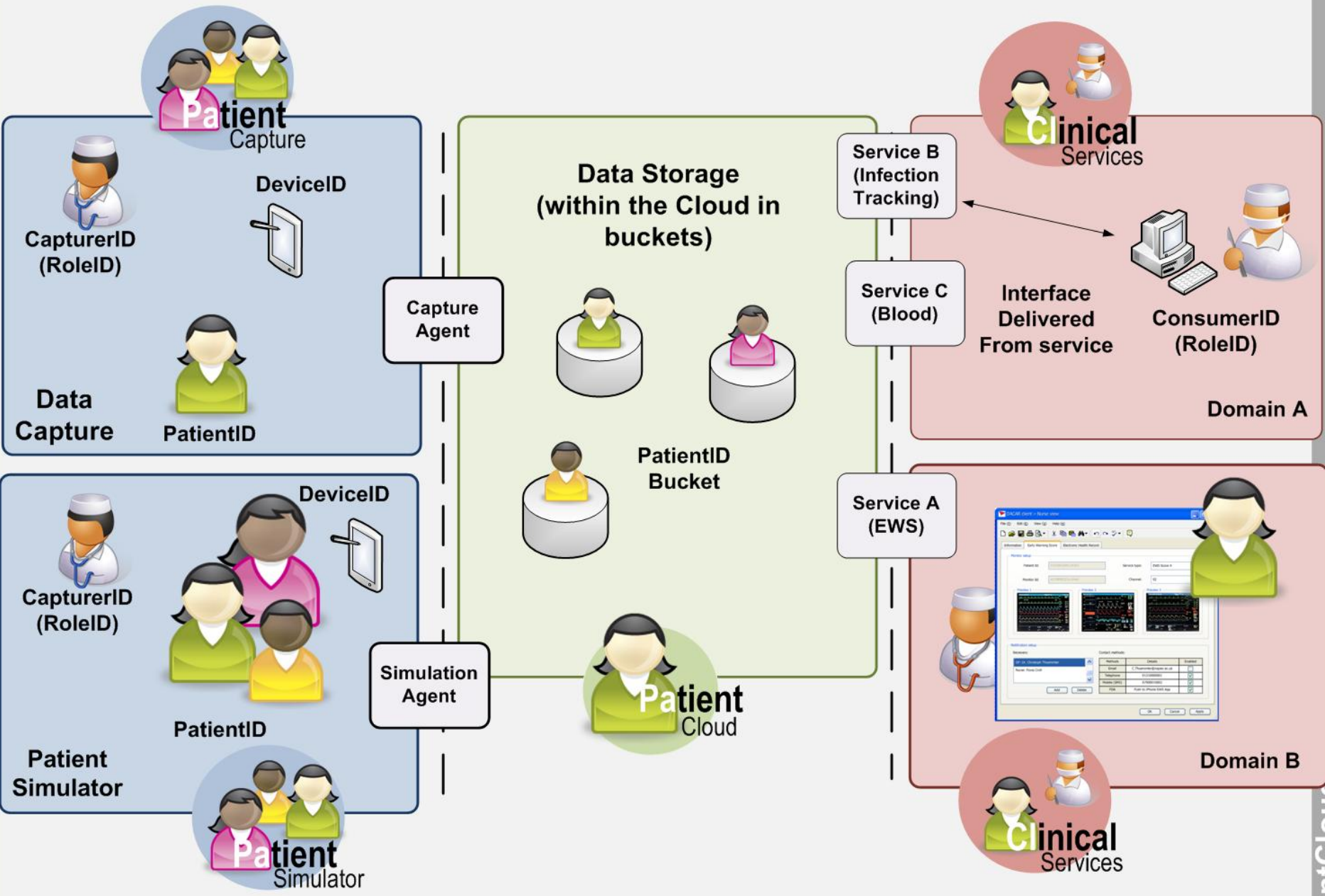
AreaID

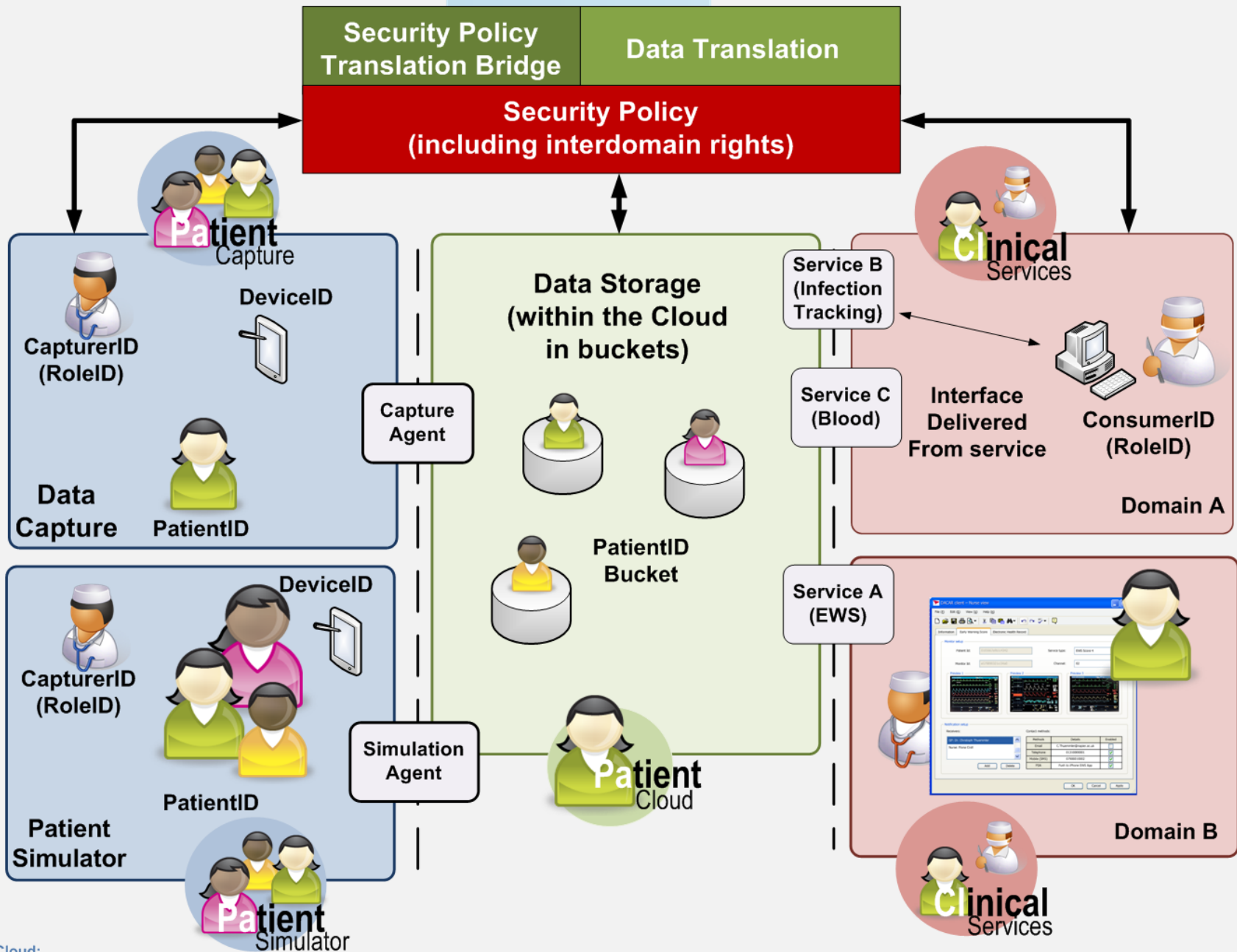


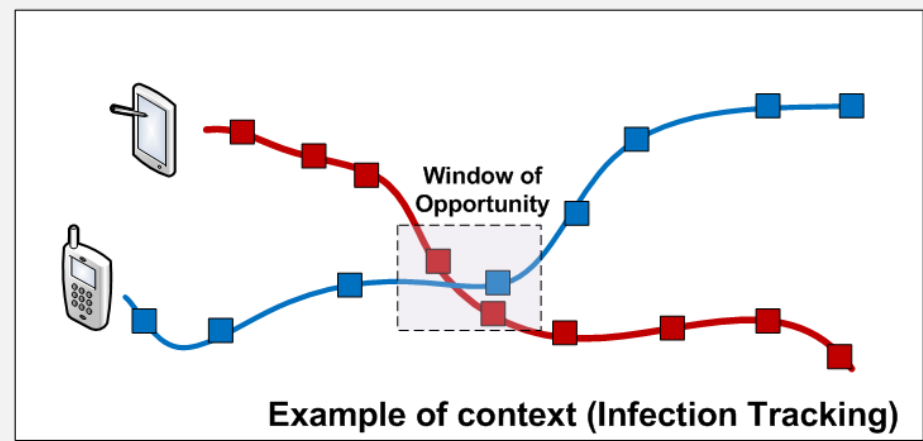
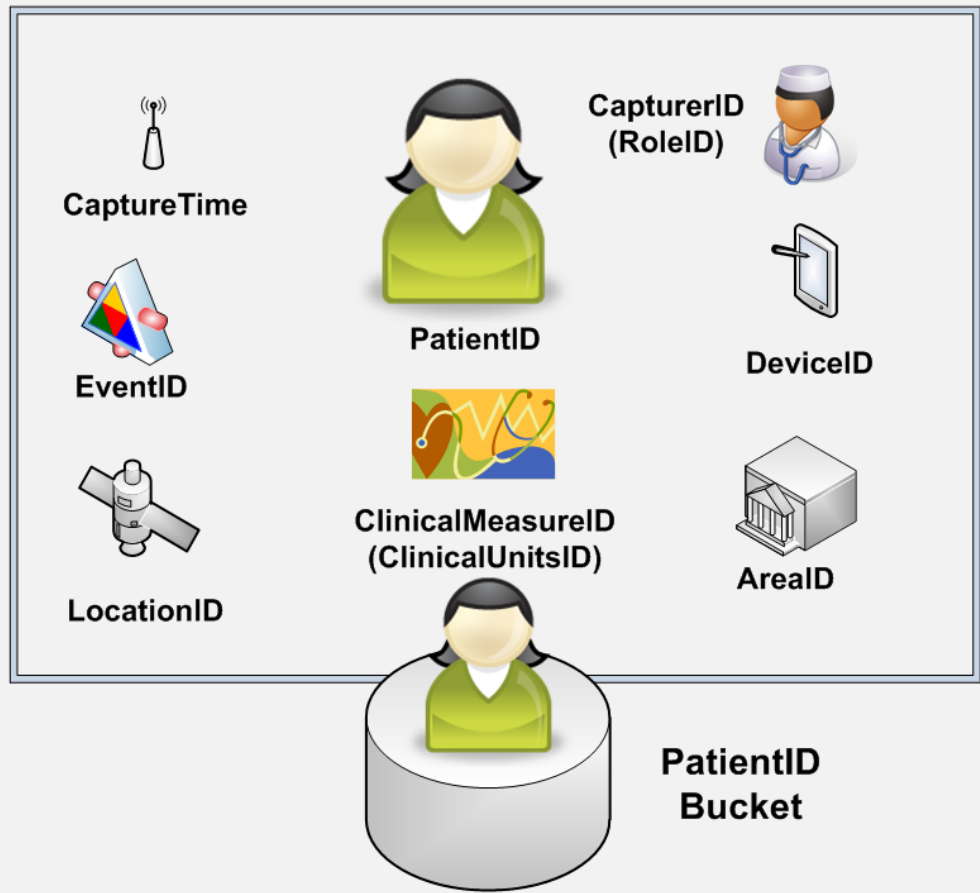
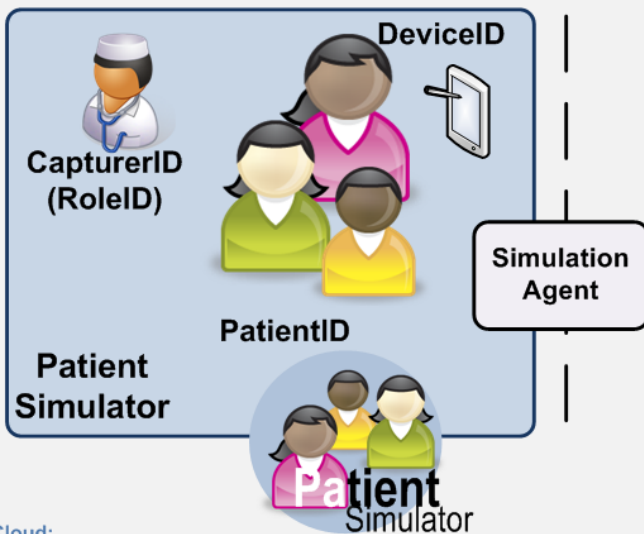
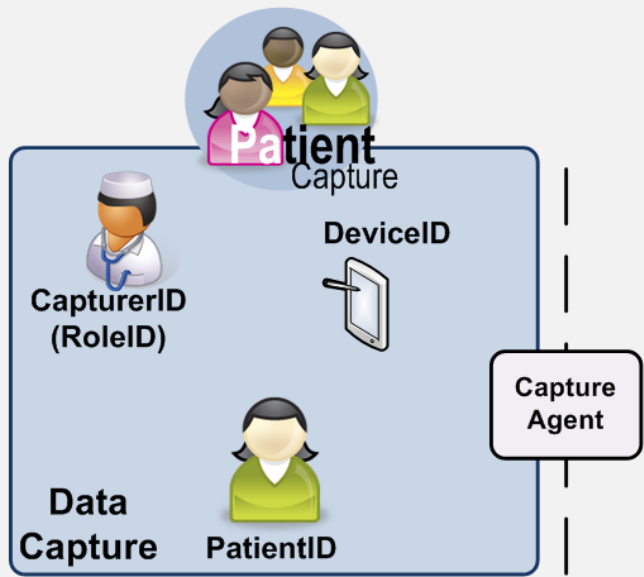
Dynamic Patient Records

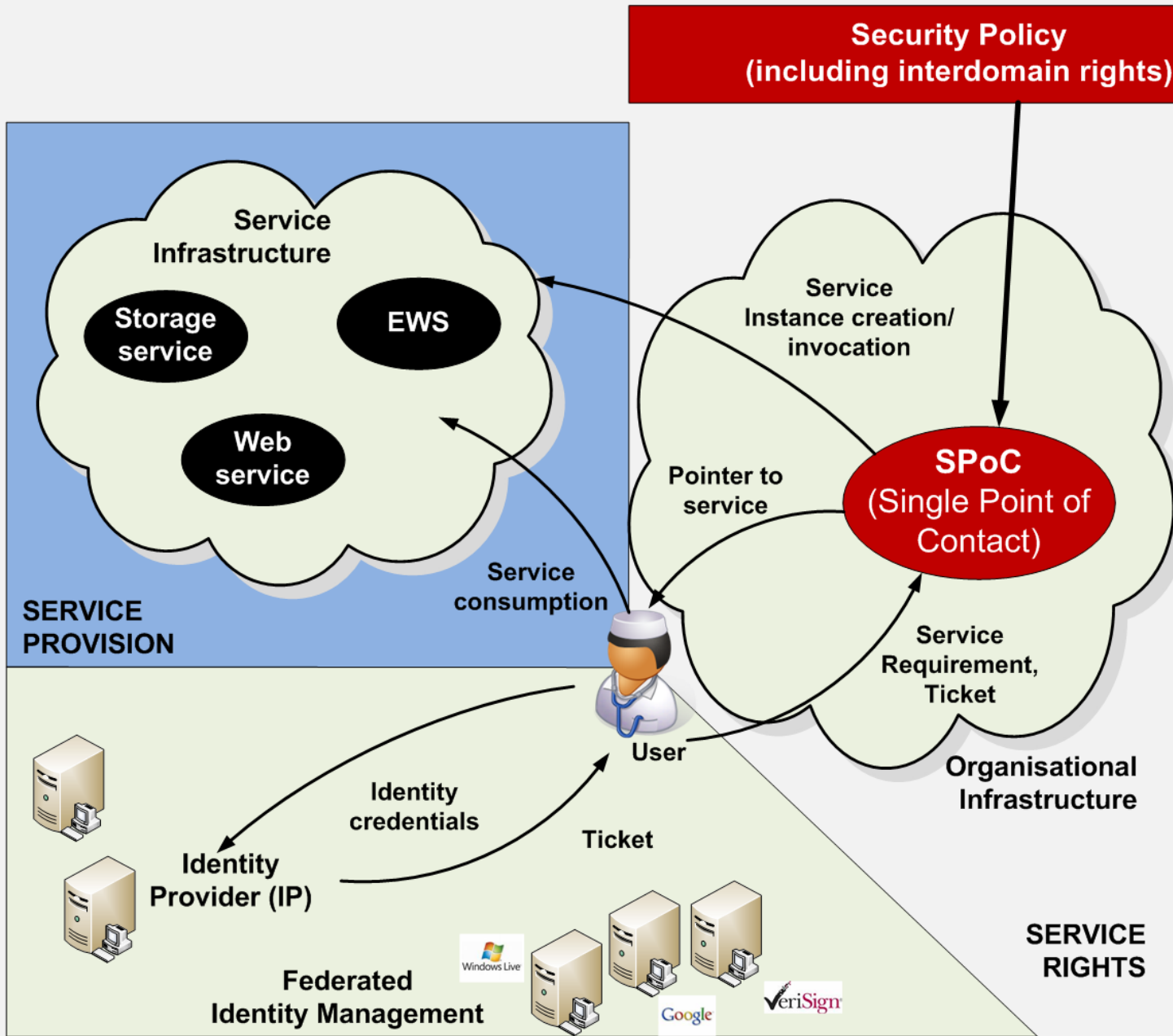
Security Policy (including interdomain rights)











**SPoC**  
(Single Point of Contact)

**Security Policy**  
(including interdomain rights)

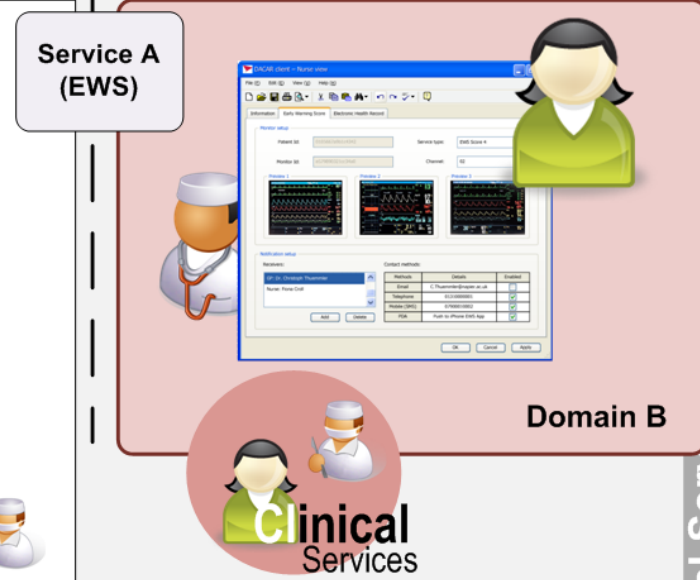
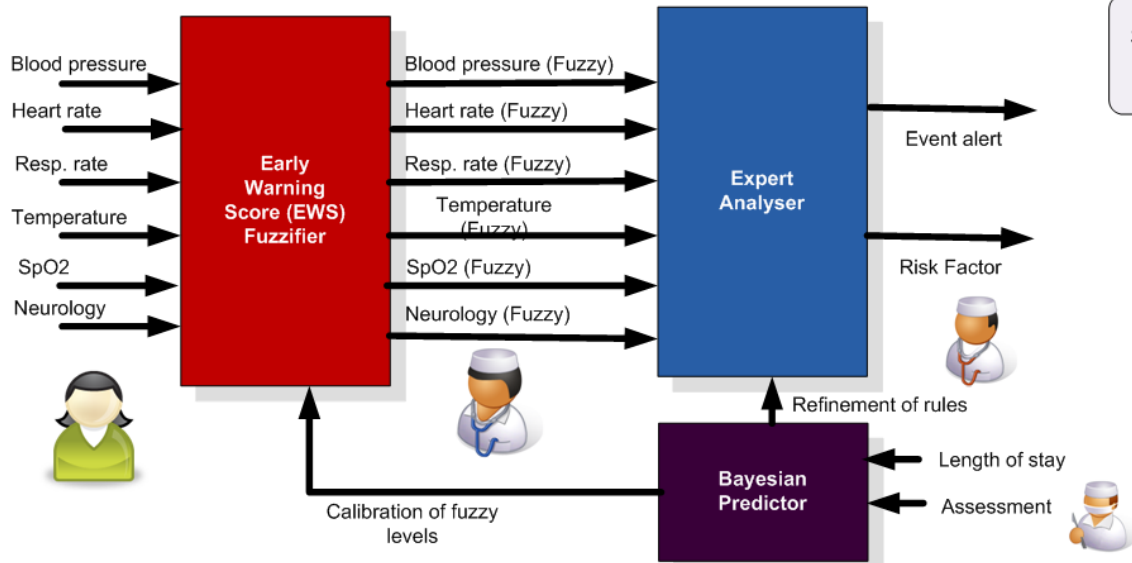
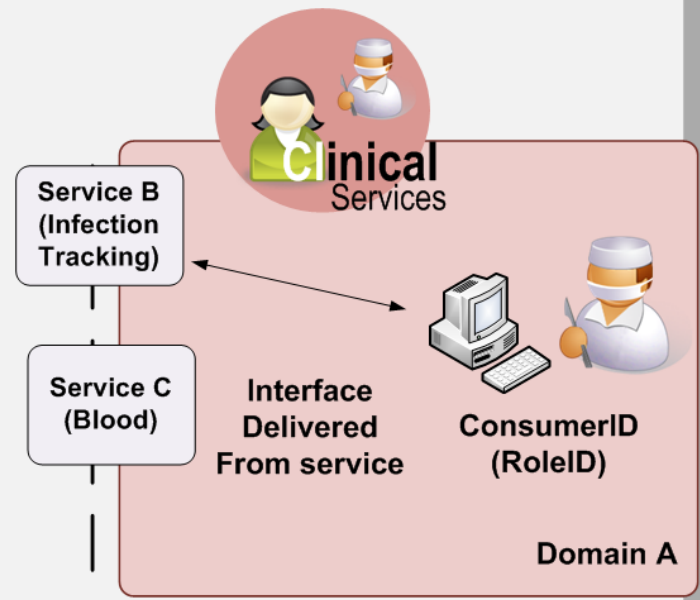
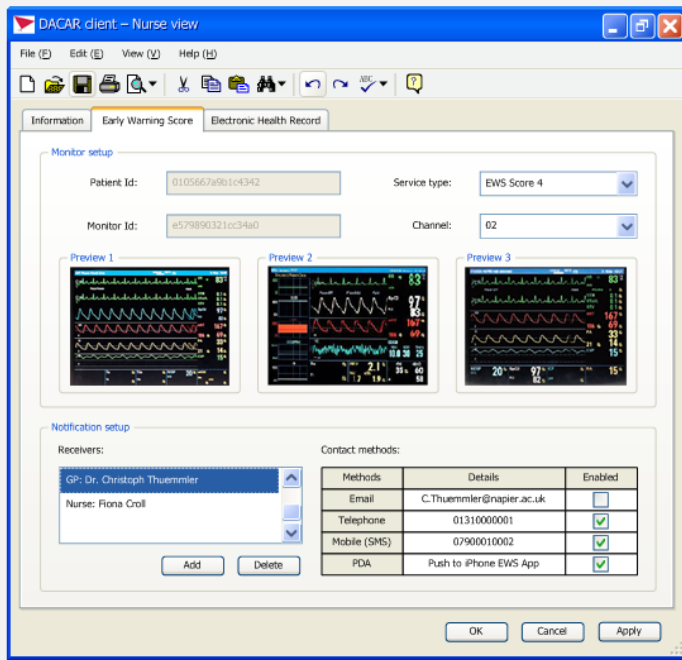
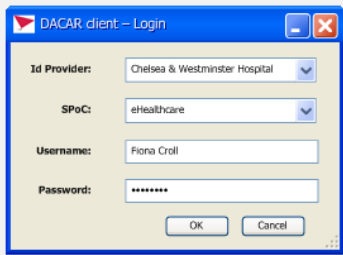
```
[permit] [Medical Staff] [C | R] [Temp | SpO2 | HR | BP | RR | Pain] of [Patient26078] with  
[EWS] from [Chelsea & Westminster Hospital] for [*] records in [P2010-12-30T00:00:00] using  
[Data Protection Act]
```

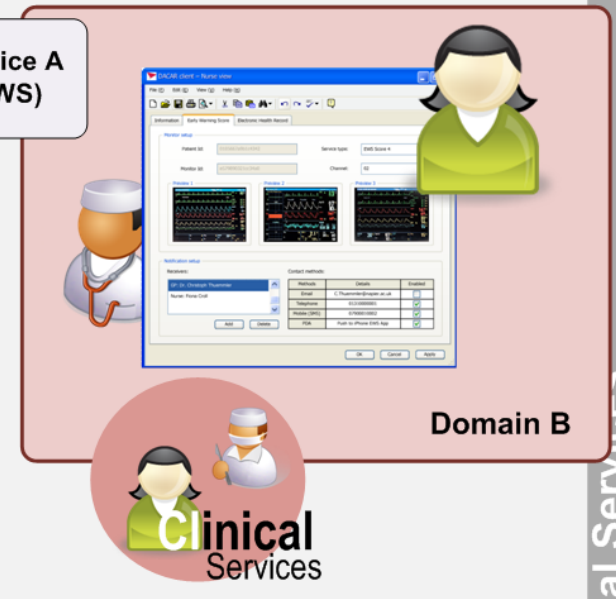
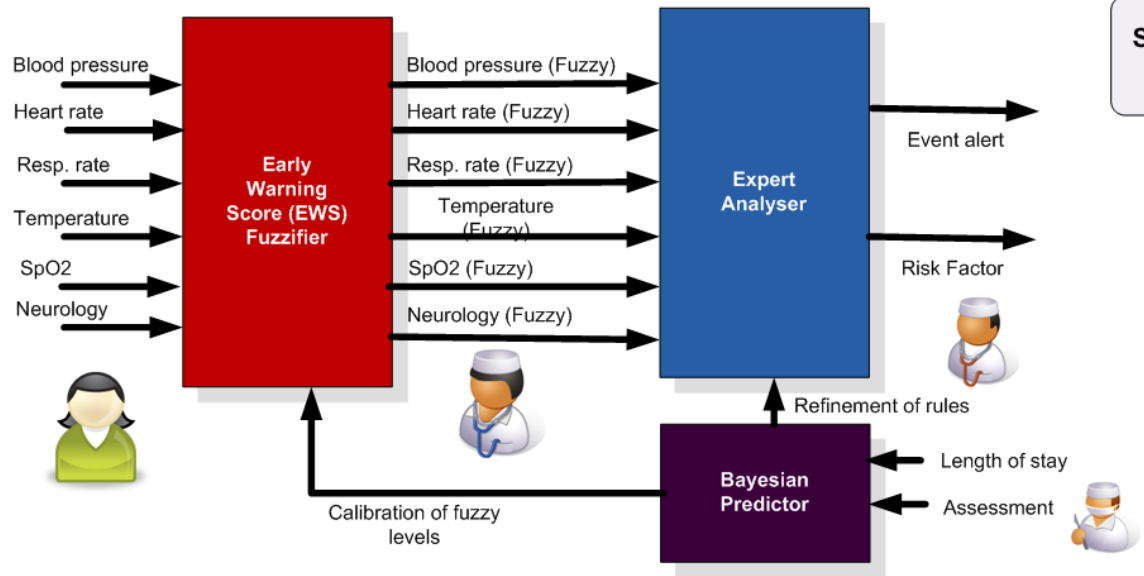
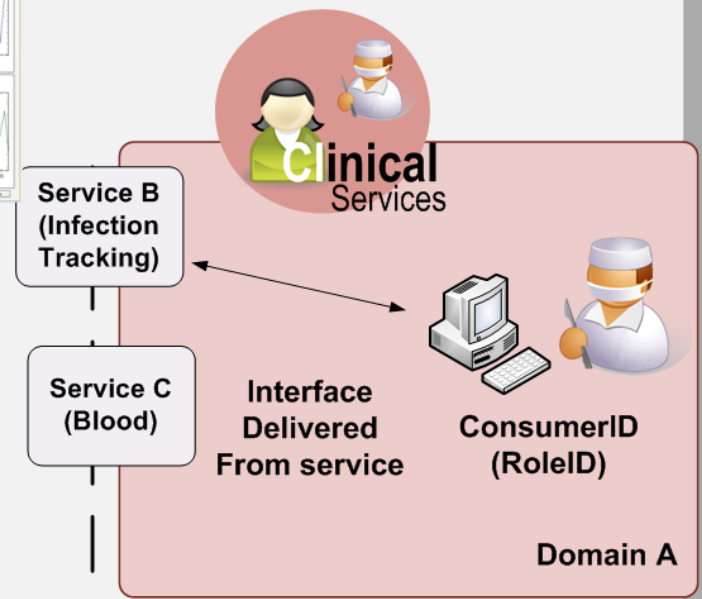
```
[permit | deny] [Requester] [C | R | U | D] [Attribute] of [Object] with [Context] from  
[Owner] for [N] records in [Time Window] using [Compliance].
```

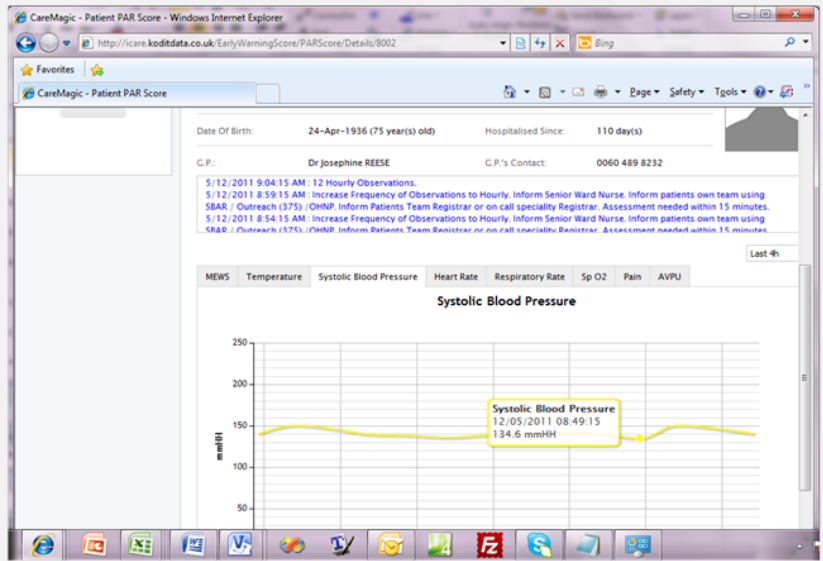
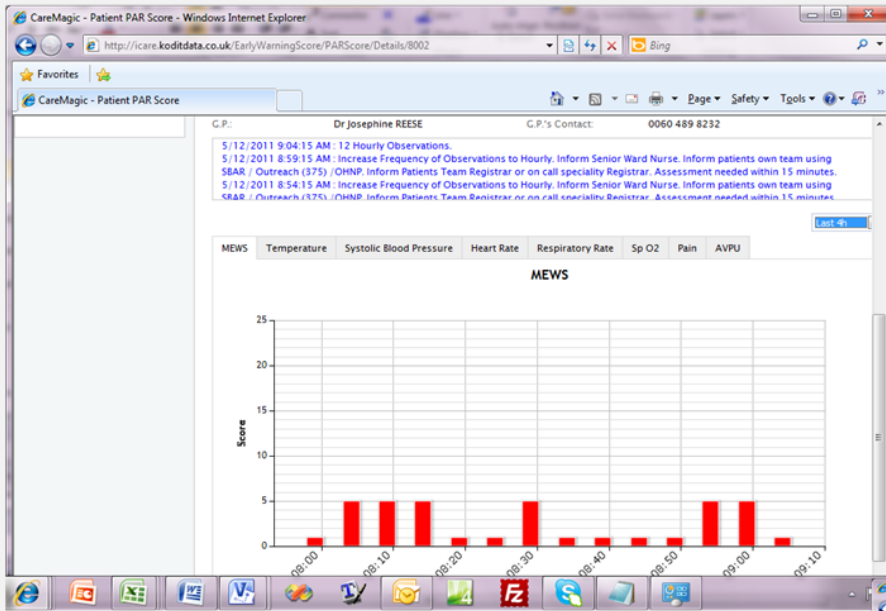
A similar syntax is also applied to the request messages:

```
[Requester] [C | R | U | D] [Attribute] of [Object] with [Context] from [Owner] within  
[Start] to [End]
```

- { [permit | deny] This is part of the rule syntax which indicates the action of the rule. This defines whether a request meeting the rule criteria will be permitted or denied access.
- { [Requester] This identifies a request sender's role, e.g. GP, or pseudonym, e.g. 10420, or a combination of the two, e.g. GP10420.
- { [C | R | U | D] This defines detailed permissions for a requester to create, read, update and delete certain information.
- { [Attribute] This is a unit of information describing an object. An attribute may be a primitive data type, e.g. the pseudonym of an object as a string, or a complex data type, e.g. a person's ECG record for 45 seconds.
- { [Object] This is part of DACAR's system model. It refers to any entities in a healthcare scenario, about which information is held.
- { [Context] This identifies the reason why the information is being shared. The context governs the level of access and permissions associated with information exchange, and hence defines the priority accorded to information requests.
- { [Owner] This species a role with sufficient privileges to manage all aspects of an information source. The owner has the authority to allow or deny access to an information element, as required by legislation and defines responsibilities.
- { [N] records in [Time Window] This defines the number of records permitted over a period of time, where N can be any positive integer.
- { [Compliance] This refers to legislative requirements that support the exchange of information, such as the Data Protection Act, the Human Rights Act, the Freedom of Information Act and so on.
- { [Start] and [End] These identify the start and end of the date/time period over which information shown.







CareMagic - List of Patients - Windows Internet Explorer

Search

File Staff Patients

Home Hospitals Wards Medical Staff Patients PAR Score Food Admissions Laserband Notifications Settings

Notifications: Last PAR Score (Expired Pending)

Hosp. Number	Patient Name	Last Score	C.P.
8000	Mr Wesley FRAZIER	5	Dr Josephine REESE (d1)
8002	Mr Barry GARRETT	5	Dr Josephine REESE (d1)
8001	Mr Kibo GARDNER	2	Dr Josephine REESE (d1)

Showing 1 to 3 of 3 entries

CareMagic - Patient PAR Score - Windows Internet Explorer

Search

File Staff Patients

Home Hospitals Wards Medical Staff Patients PAR Score Food Admissions Laserband Notifications Settings

Notifications: Last PAR Score (Expired Pending)

**Mr Barry GARRETT** 8002

NHS Number: 851 732 0757 PAS Number:

Ward: Intensive Therapy Unit Admit Date: 21-Jan-2011 19:01

Date Of Birth: 24-Apr-1936 (75 years) old Hospitalised Since: 110 day(s)

G.P.: Dr Josephine REESE G.P.'s Contact: 0060 489 8232

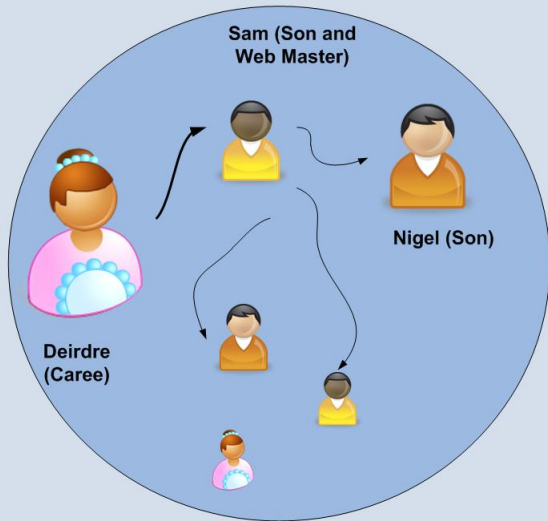


PatientCloud:

Funded by EPSRC and TSB, and is a collaboration between C&W, Imperial College, Edinburgh Napier University, Kodit, GS1 and Ciperlab



## Assisted Living

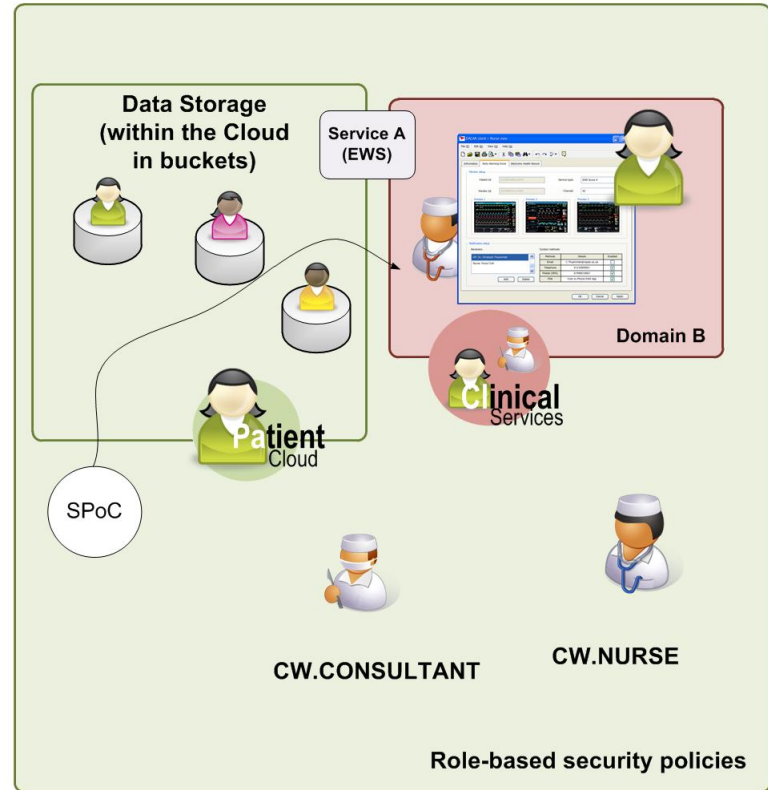


### Circle-of-Trust

Circle-of-Trust-based Polices

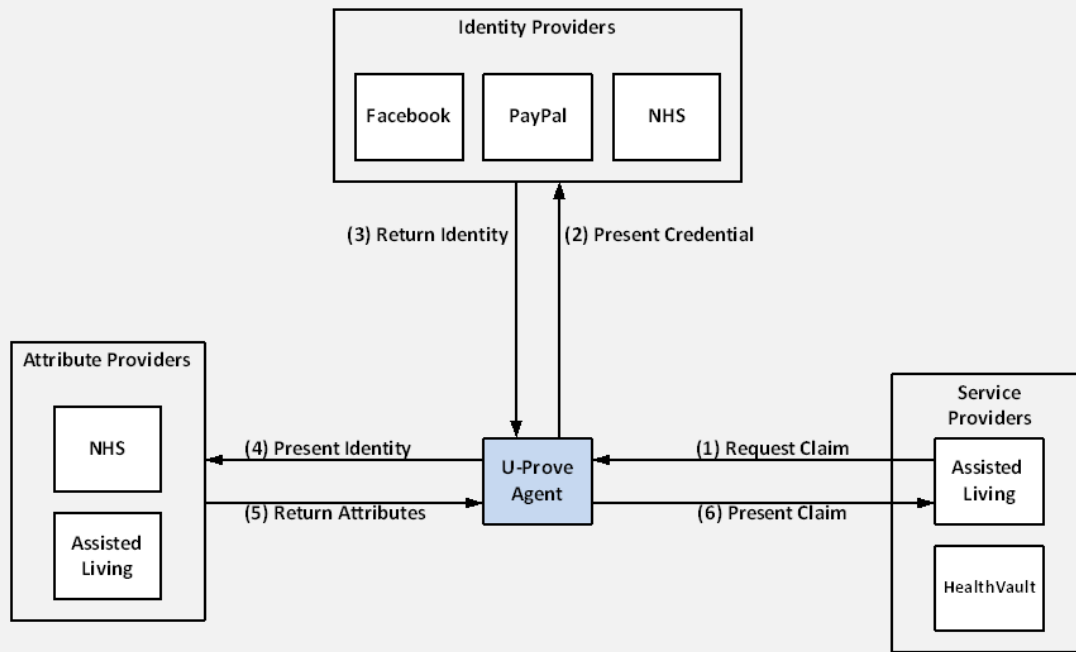
Translation Gateway  
(Security Policy/  
ID Mapping)

## Primary/Secondary Care



```
[permit] [C&W.NURSE] [C | R] [Temp | SpO2 | HR | BP | RR | Pain] of [Patient26078] with [EWS] from [Chelsea & Westminster Hospital] for [*] records in [P2010-12-30T00:00:00] using [Data Protection Act]
```

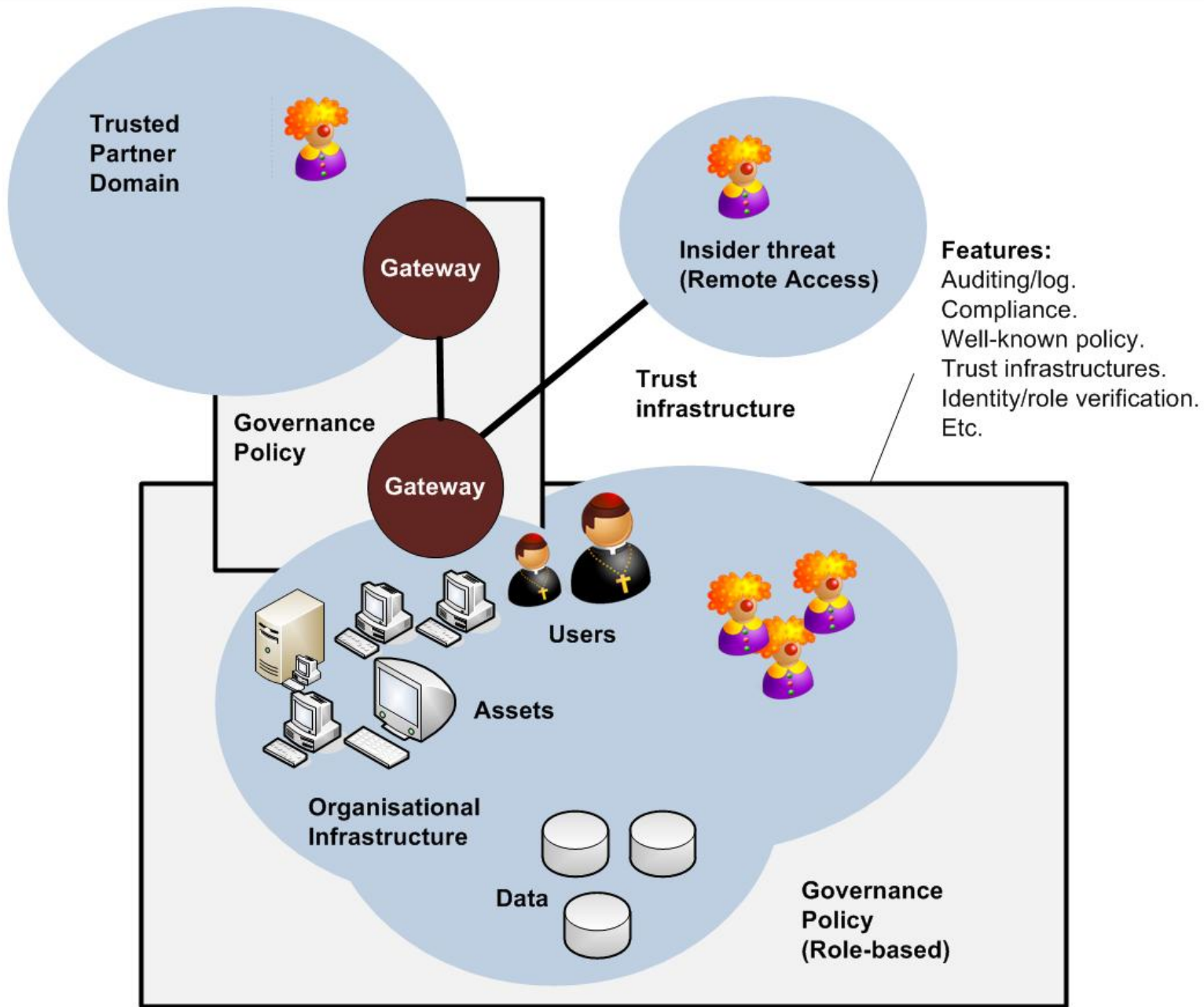
```
[permit | deny] [Requester] [C | R | U | D] [Attribute] of [Object] with [Context] from [Owner] for [N] records in [Time Window] using [Compliance]
```

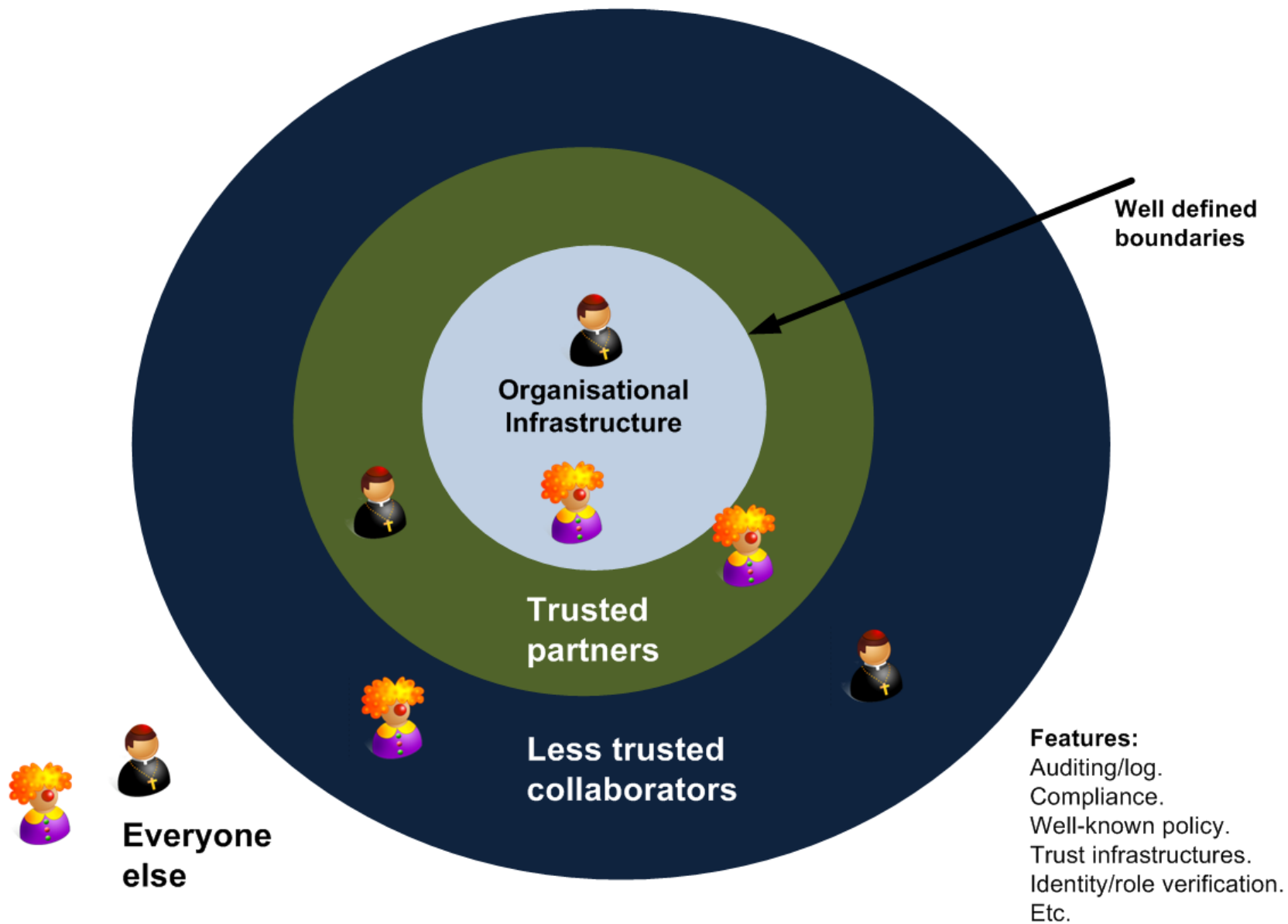


CW.CONSULTANT



CW.NURSE





**Technology Strategy Board**  
Driving Innovation

**EPSRC**  
Pioneering research  
and skills



Alan Bennett

**Edinburgh Napier**  
UNIVERSITY



Dr Christoph Thuemmler

Prof Bill Buchanan



Dr Lu Fan

Owen Lo



**Patient**  
Simulator



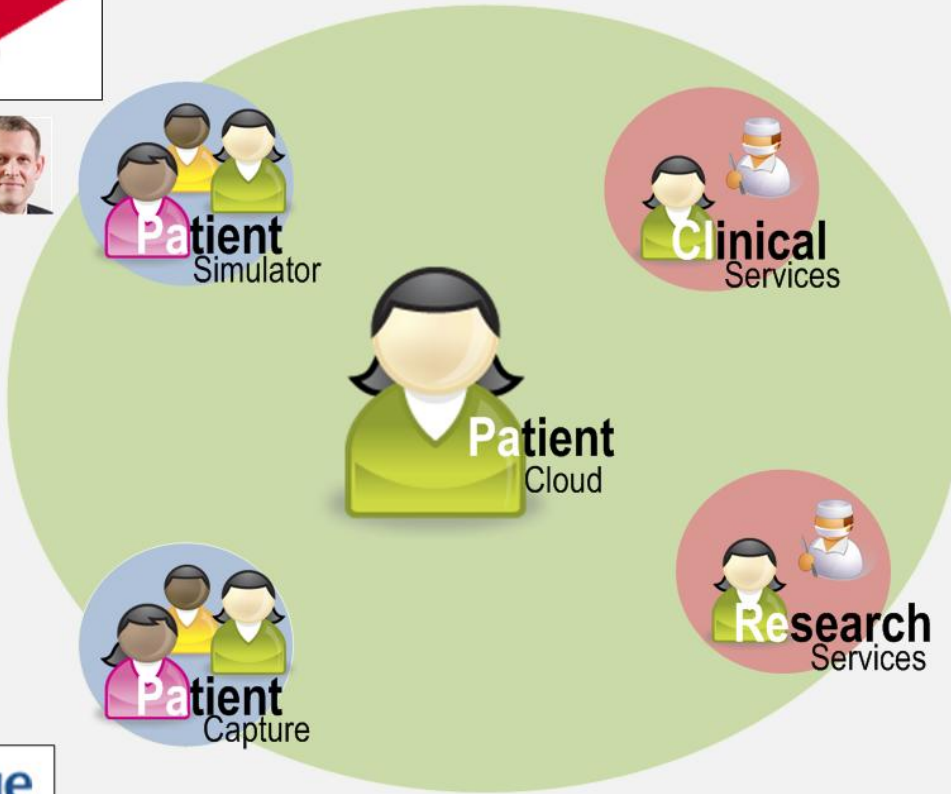
**Clinical**  
Services



Roger Lamb

**kodit**

Craig Story  
Sofyane Khedim



**Patient**  
Capture



**Research**  
Services



Altaf Sadique

**Imperial College**  
London

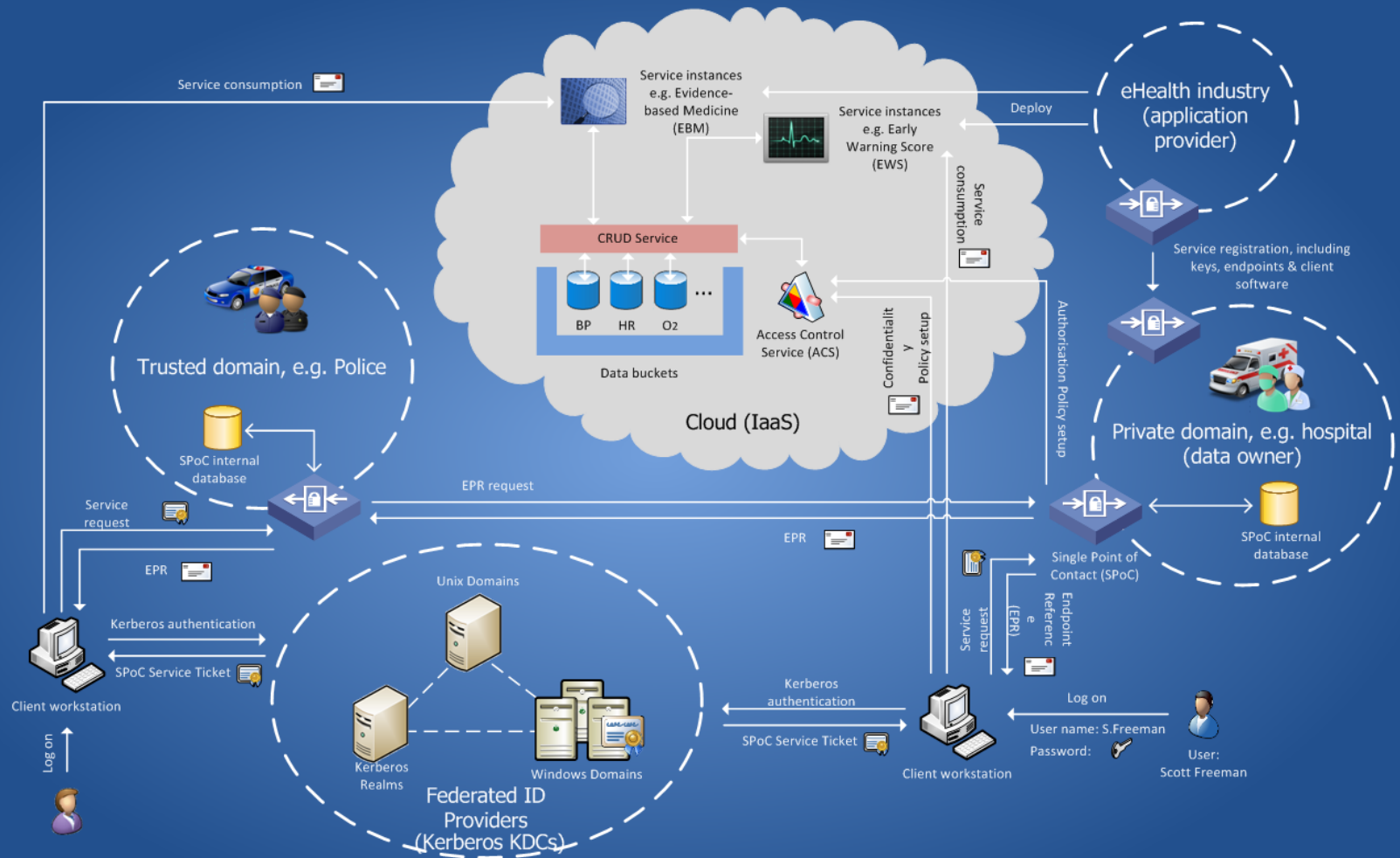


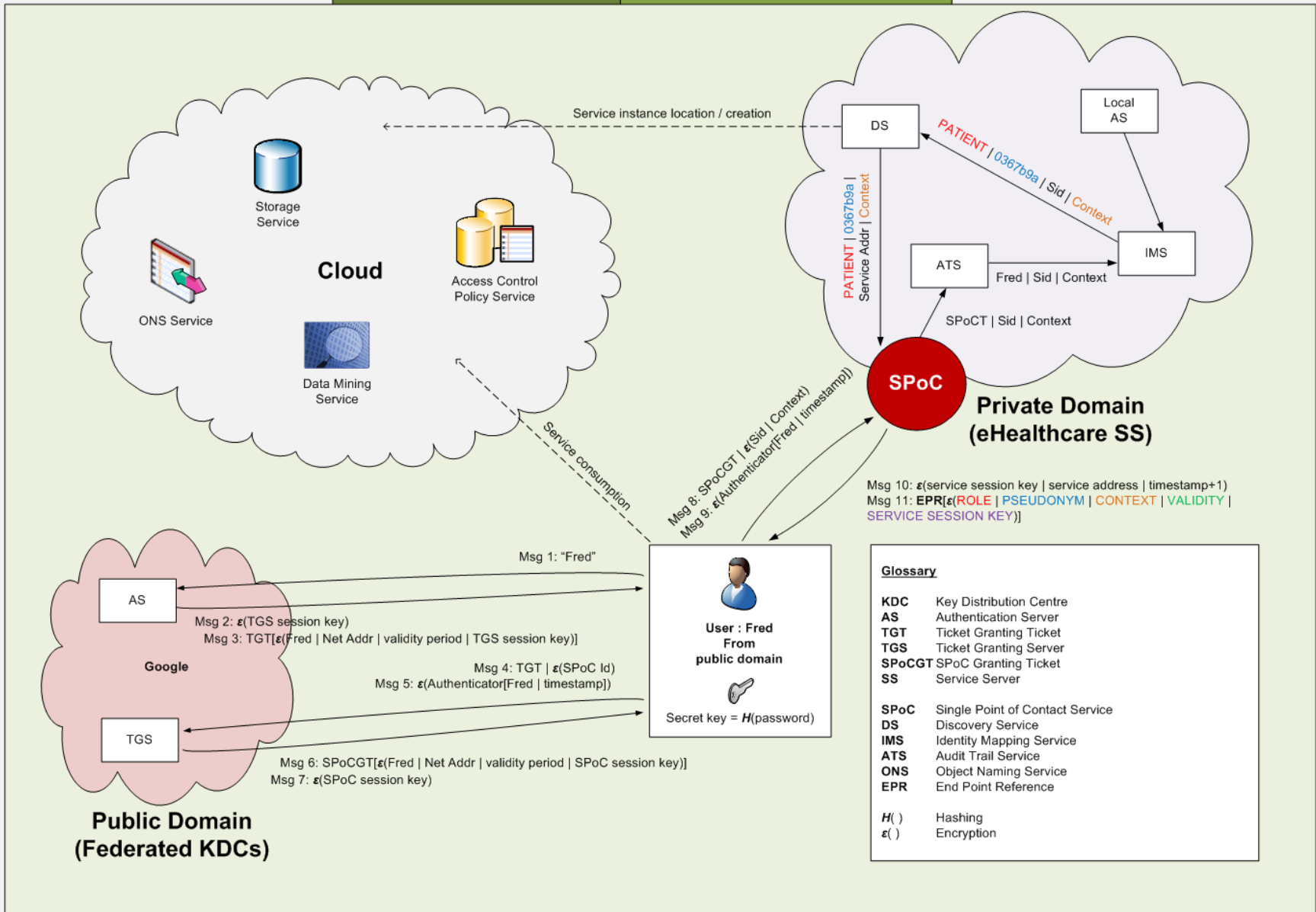
Prof Derek Bell

Ganesh Sathyamoorthy

**Chelsea and Westminster Hospital** **NHS**  
NHS Foundation Trust

Prof Derek Bell  
Tajumal Malik





**Glossary**

<b>KDC</b>	Key Distribution Centre
<b>AS</b>	Authentication Server
<b>TGT</b>	Ticket Granting Ticket
<b>TGS</b>	Ticket Granting Server
<b>SPoCGT</b>	SPoC Granting Ticket
<b>SS</b>	Service Server
<b>SPoC</b>	Single Point of Contact Service
<b>DS</b>	Discovery Service
<b>IMS</b>	Identity Mapping Service
<b>ATS</b>	Audit Trail Service
<b>ONS</b>	Object Naming Service
<b>EPR</b>	End Point Reference
$H()$	Hashing
$\epsilon()$	Encryption