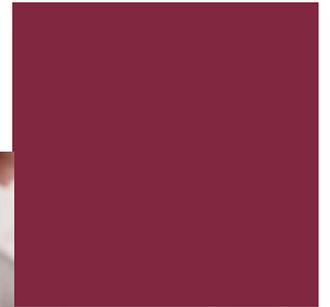


# EHR*S* *BLUEPRINT*

.....> an interoperable EHR framework

## SOA in the pan-Canadian EHR

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# Outline

- Infoway
- EHR Solution
- EHRS Blueprint Approach
- EHR Standards
- Services Oriented Architecture
- Summary & Conclusion

## Mission

To foster and accelerate the development and adoption of electronic health information systems with compatible standards and communications technologies on a pan-Canadian basis with tangible benefits to Canadians.

## Vision

A high-quality, sustainable and effective Canadian healthcare system supported by an infostructure that provides residents of Canada and their healthcare providers timely, appropriate and secure access to the right information when and where they enter into the healthcare system. Respect for privacy is fundamental to this vision.

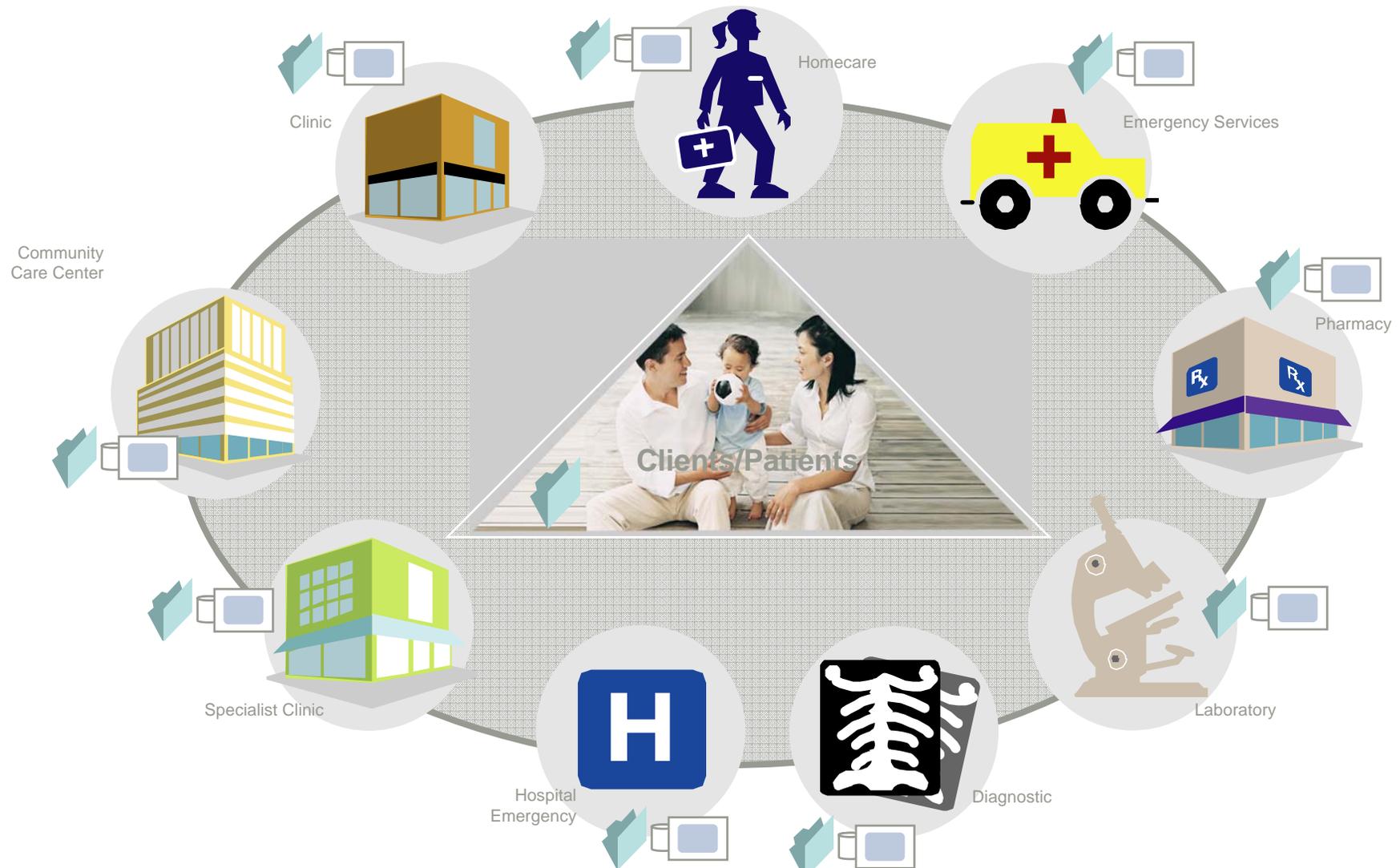
## Goal

By 2010, every province and territory and the populations they serve will benefit from new health information systems that will help transform their healthcare system. Further, by 2010, 50 per cent of Canadians and by 2016, 100% of Canadians will have their electronic health record available to their authorized professionals who provide their healthcare services

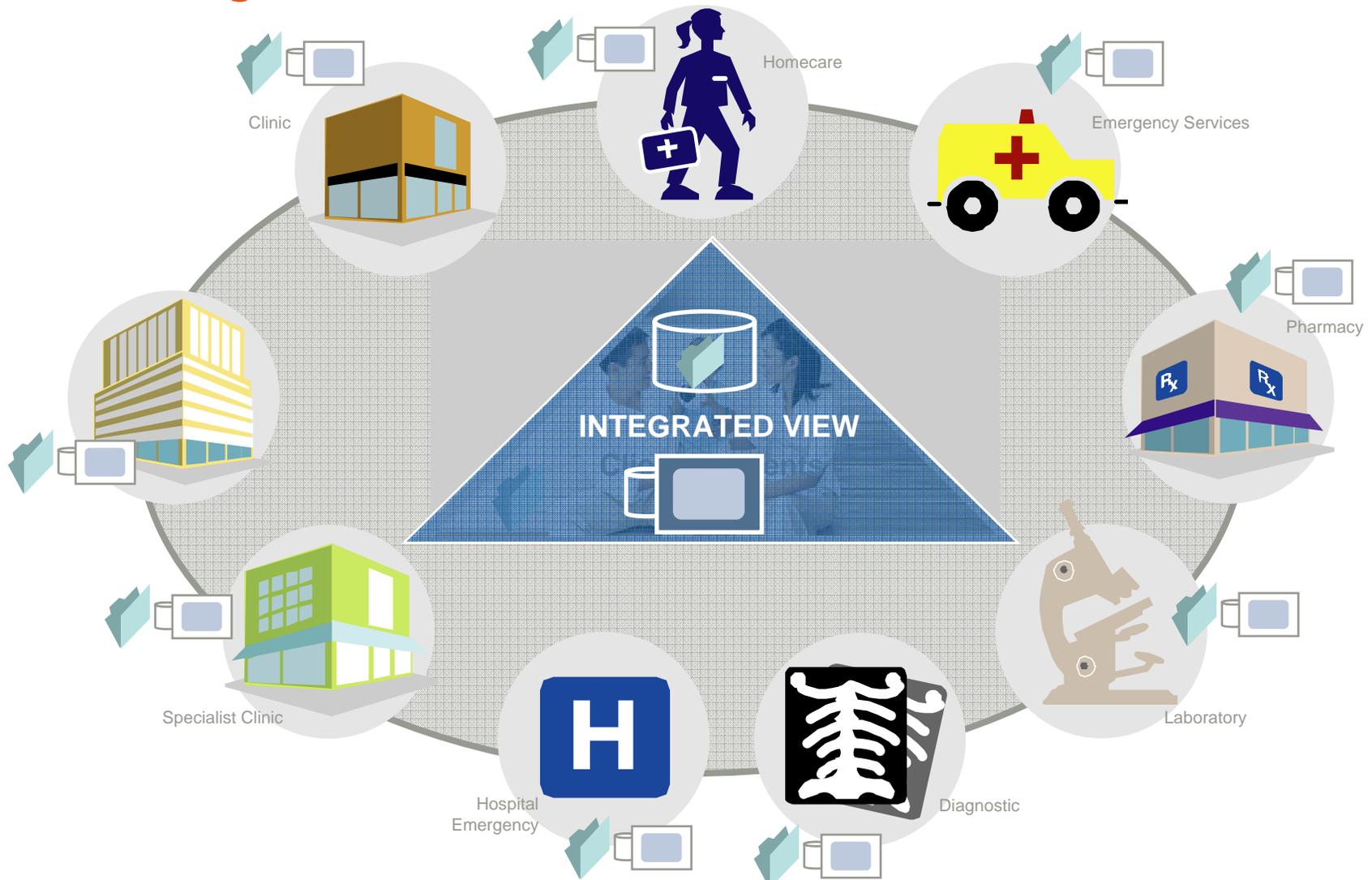
### **Shared Governance Facilitates Collaboration**

Canada Health Infoway is an independent not-for-profit organization, whose Members are Canada's 14 federal, provincial and territorial deputy ministers of health.

# Client / Patient at the Centre of the Circle of Care



# EHR: Integrated Shared View of Client / Patient Data



## EHR – The Infoway Definition

An **Electronic Health Record (EHR)** provides each individual in Canada with a secure and private lifetime record of their key health history and care within the health system. The record is available electronically to authorized health providers and the individual anywhere, anytime in support of high quality care.

This record is designed to facilitate the sharing of data across the continuum of care, across health care delivery organizations and across geographies.



## Guiding Principles for EHRS

- Patient-centric
- Mass customized views of all clinical data
- Value add for the provider
- Timely, accurate information
- Enable sharing at local, regional, cross-jurisdictional
- Interoperable, integrated
- Standards based
- Replicable solution – patterns, components

- Leverage legacy systems & solutions
- Design for phased rollout with near term results
- Scalable
- Extensible to support future growth
- Cost-effective
- Secure & private
- Allow for innovation & competition
- Comprehensive

## Key Factors Affecting How to Share

- Sharing creates some very profound issues & requirements
  - Unique identification of clients, providers, service delivery locations, etc.
  - Protecting privacy and confidentiality of patients and providers while simultaneously not limiting the ability to deliver appropriate services
  - Ensuring information is stored, shared securely
  - Ensuring compatibility of how data is interpreted/understood
- These issues are the same no matter which model is chosen to share patient identified information
- Canadian governance model for healthcare means these issues are F/P/T jurisdictional responsibilities – requirements vary
- People increasingly mobile, especially when considering long periods of time
- Provider's confidence in the mechanisms to enable sharing is crucial

## Integrating Health IT Systems: Key Challenges

- Protecting Privacy
  - Governance, accountability & data custodianship
  - Controlling access
  - Managing & applying consent directives
  - Controlling feeds and queries to the data
  - Trust relationships & contracts
- Existence & availability of data
  - Discovery capability
  - Availability in electronic format
  - Timeliness
- Harmonization
  - Data structures (format)
  - Vocabularies (encoding, normalization)
  - Semantics
- Heterogeneous technology environments
- Number of organizations, connection points & systems
- Costs inherent to integration

## Methods of Sharing EHR Information

### The “Big Database in the Sky”

- All Point-of-Service (POS) systems share same data store

### Broadcast to other systems

- Replication of data from one system to all other relevant/ participating POS systems
- Every POS system holds same information

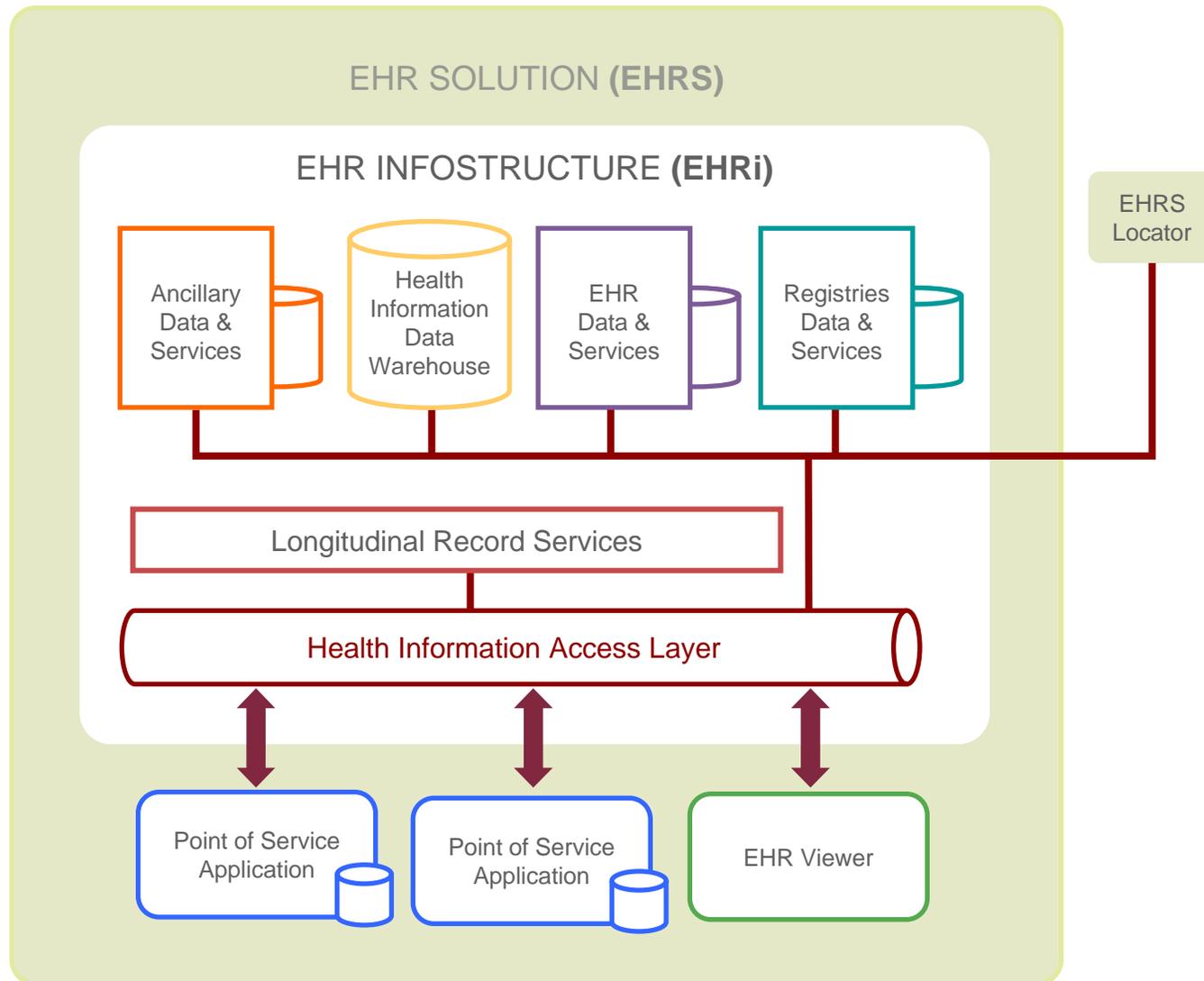
### The “Big Index in the Sky”

- EHR Index or locator service that holds links to all POS systems where information resides
- Each POS system interfaces to other systems

### Our Choice: A Shared Space

- POS systems populate Shared, Interoperable EHR
- POS systems or viewers reference it
- External to the “operational” store

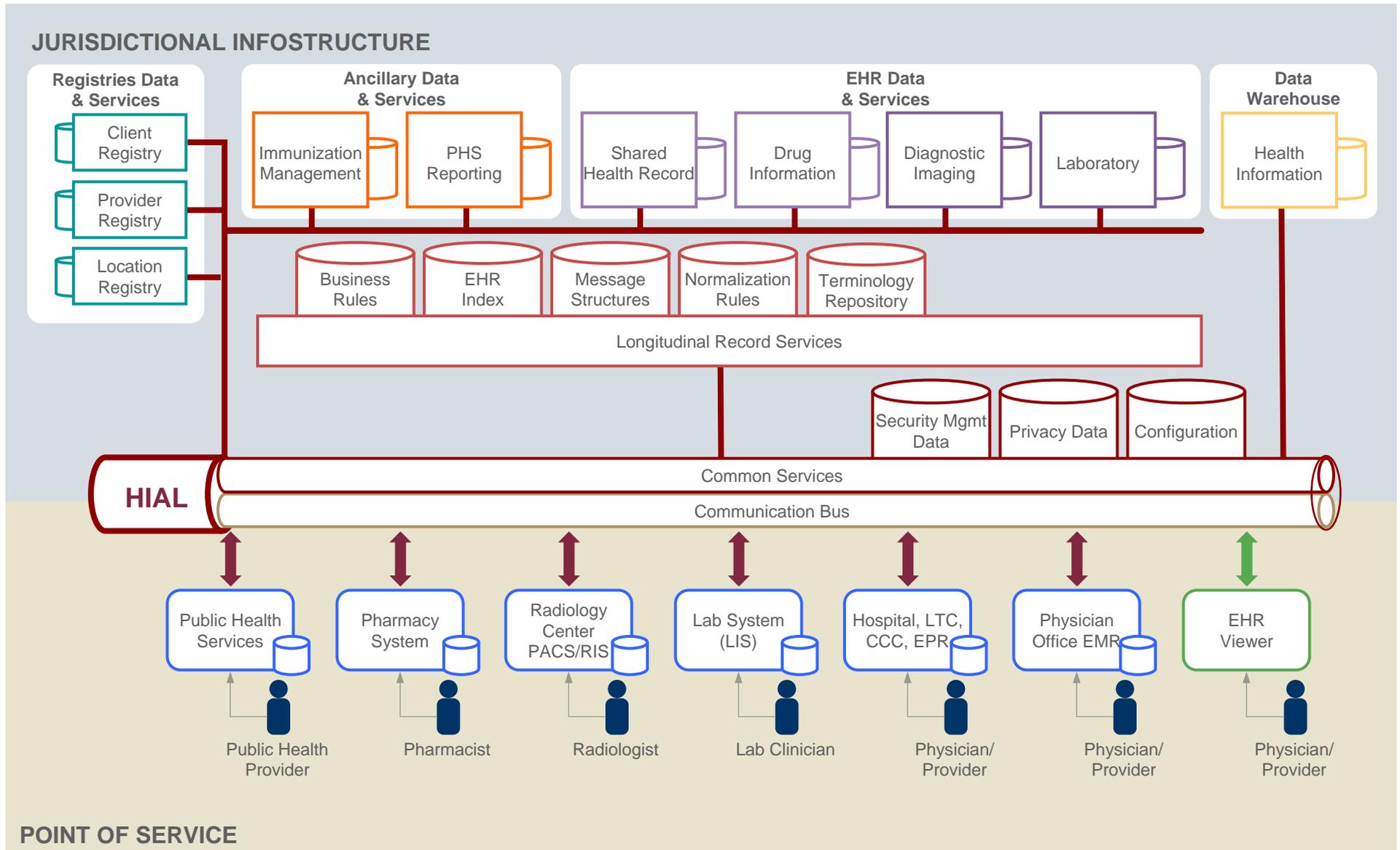
## EHR Infostructure – The Framework for Sharing



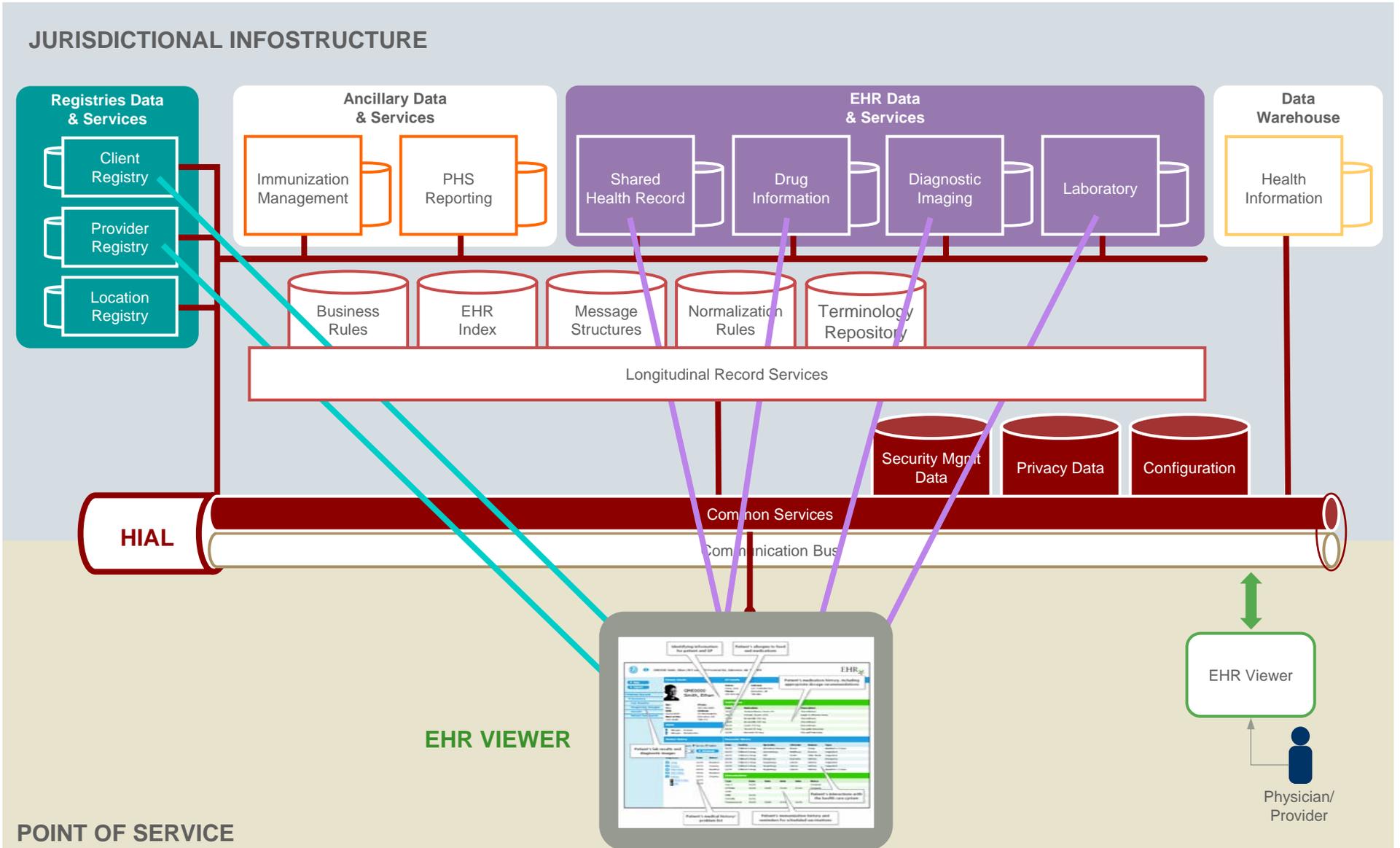
## EHR Infostructure

The **EHR Infostructure** is a collection of common and reusable components in the support of a diverse set of health information management applications. It consists of software solutions for the EHR, data definitions for the EHR and messaging standards for the EHR.

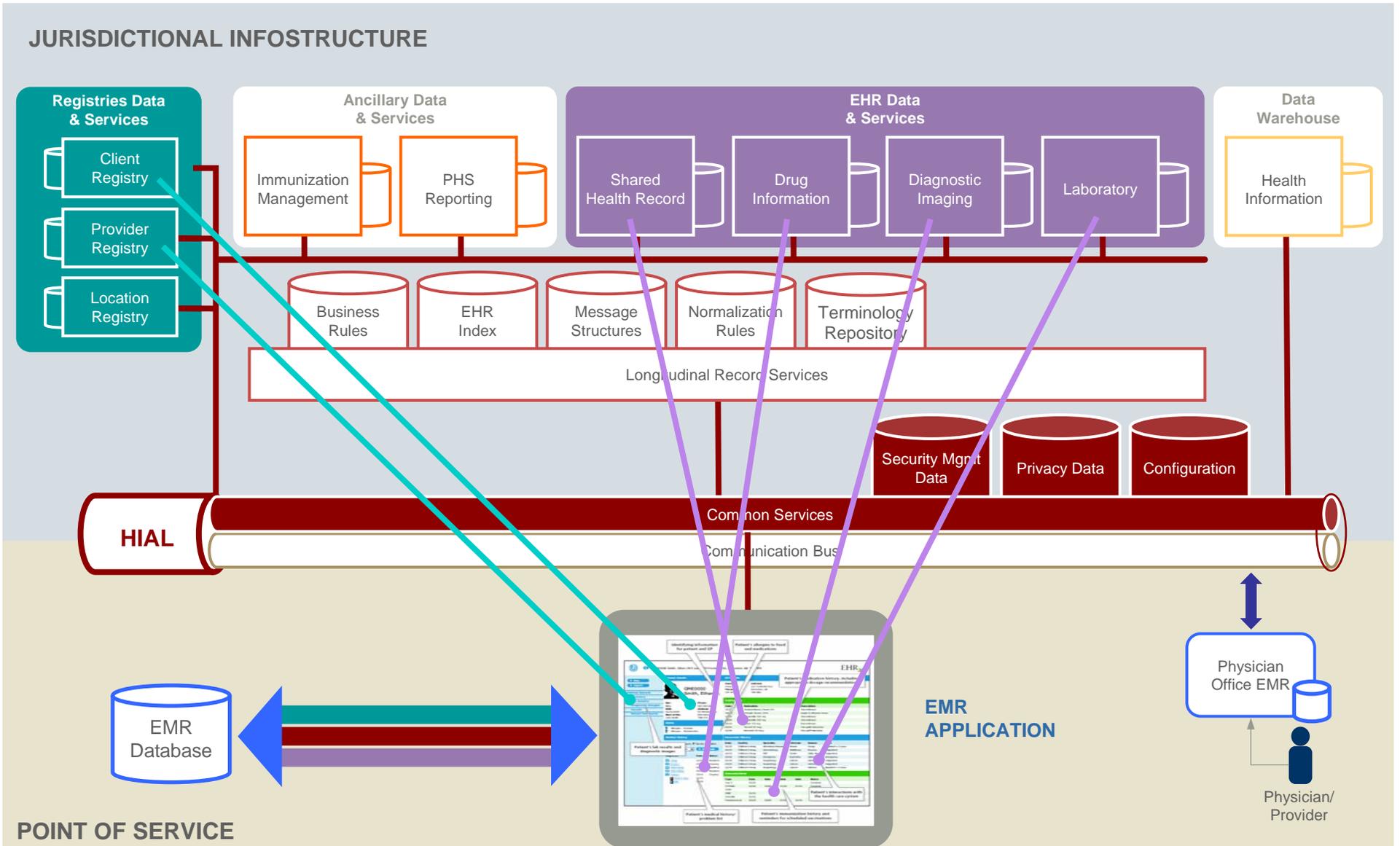
# EHR Infostructure: Conceptual Architecture



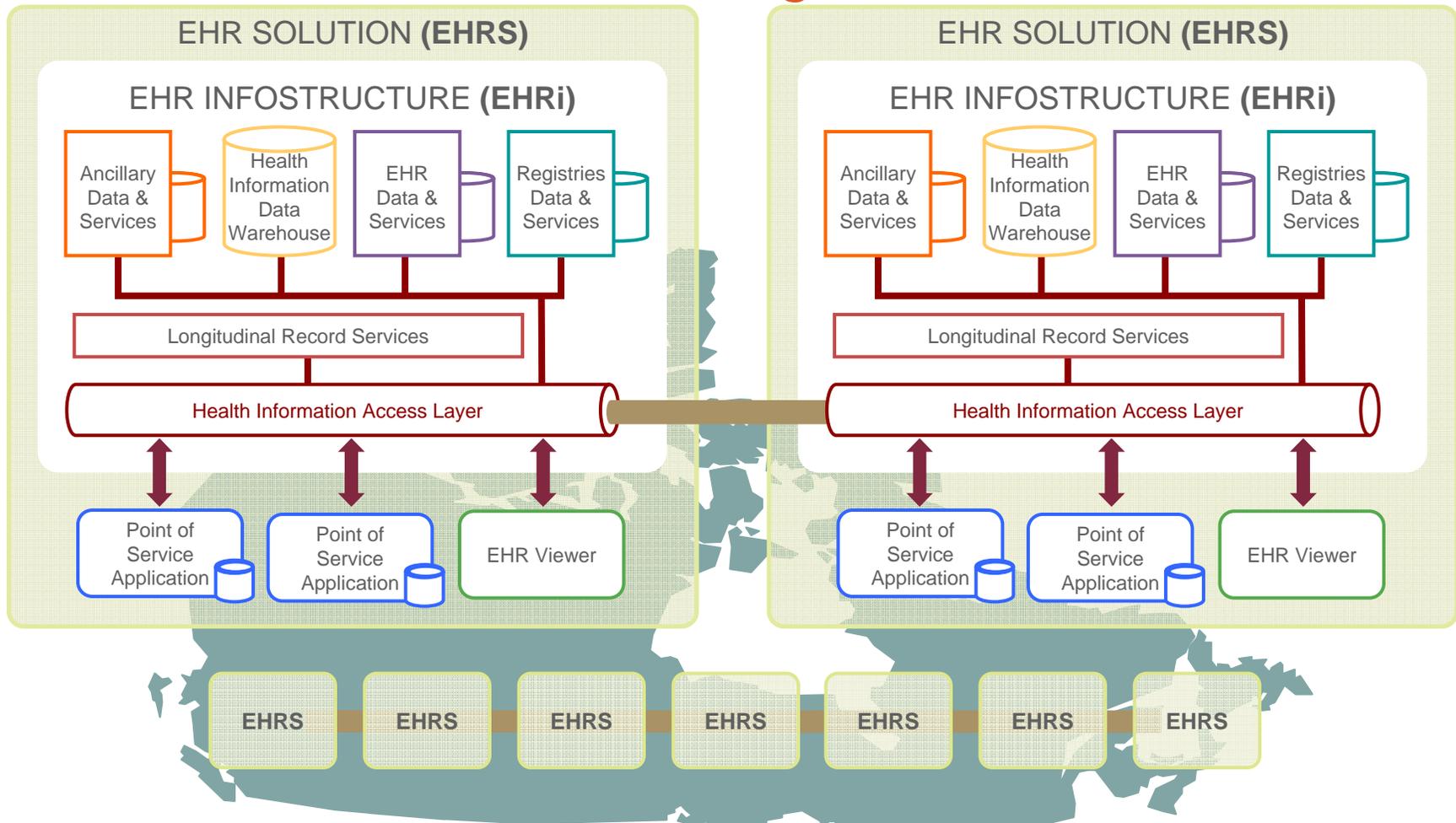
# End-User Perspective: EHR Viewer



# End-User Perspective: EMR Application



# Pan-Canadian EHR Infostructures as Peers Distributed, Federated, Message Based



## Rational for Recommended Approach

- Only cost effective scenario to handle degree of application integration required
- Maximized ability to deliver proper response time and consistent access to data across thousands of source systems
- Maximized ability to apply privacy and security policies in a harmonized and consistent fashion
- Enables evolutionary path to semantic harmonization of health information across service delivery points
- Enables high degree of scalability from local health services integration, to regional, provincial or territorial and cross-jurisdictional
- Enables high degree of flexibility in reconfiguration of health services delivery networks



Standardized  
Architecture

Standardized  
Interfaces

Standardized  
Data Structures

Standardized  
Data Vocabularies

Standardized  
Functional  
Behavior

# Standards-based EHR Solutions

## Standards-based EHR Solutions

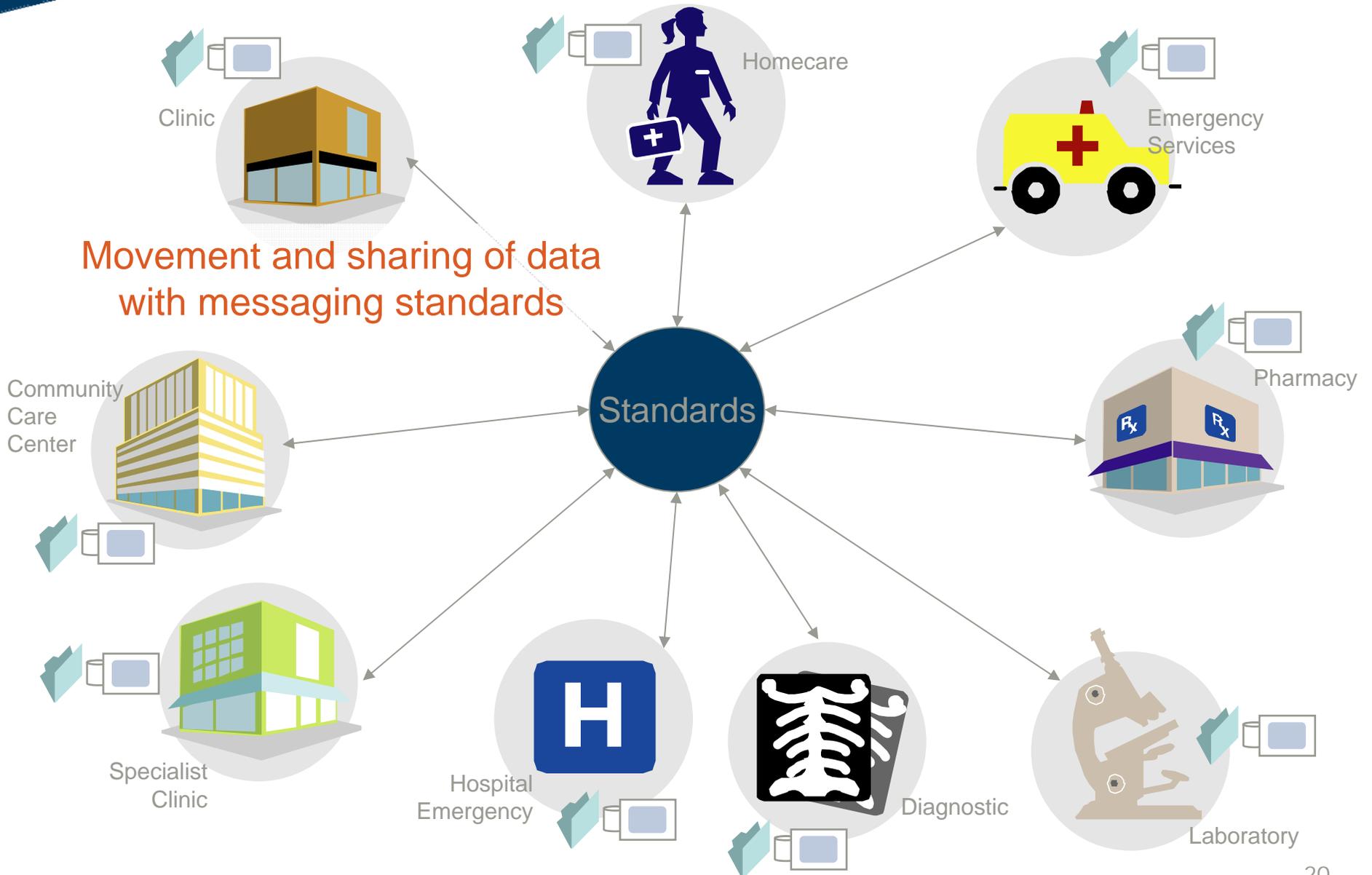
### Why Standards?

- They facilitate information exchange; are a critical foundation for EHR
- They create opportunity for future cost reduction as vendors and systems converge on pan-Canadian and international standards
- They ease effort required for replication

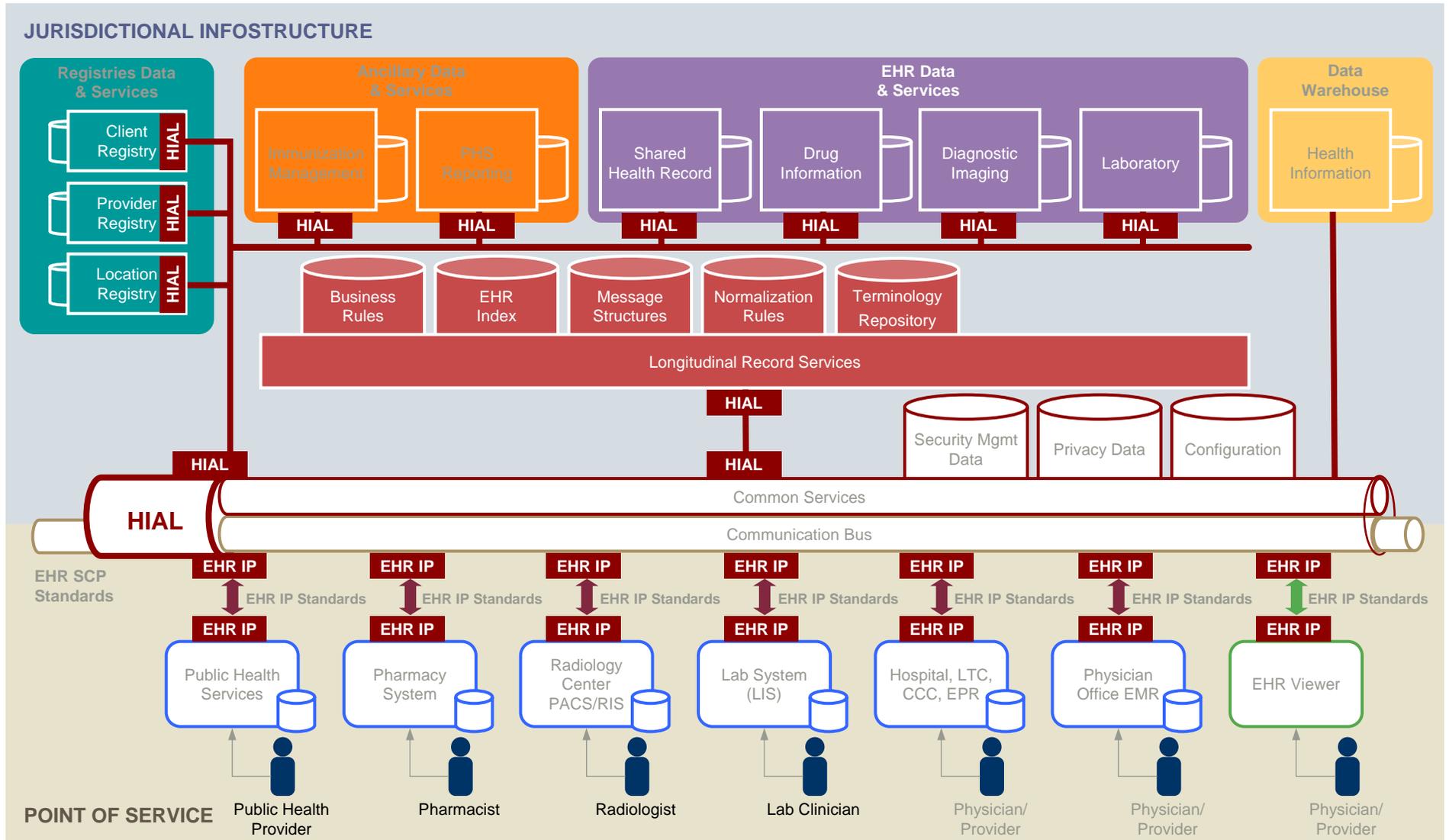
### Mandatory Investment Requirements

- Compliance to standards (infostructure, interoperability)
- Initiatives must comply with existing guidelines or standards adopted by Infoway
- Where standards or guidelines do not exist, projects must support longer-term interoperability and congruence of solutions

Infoway's role is to set standards and requirements for robust, interoperable products and outcomes



# EHR Infostructure: Standards Based Connectivity



## Service Oriented Architecture as an Enabler

### Application of SOA in EHRi Solutions

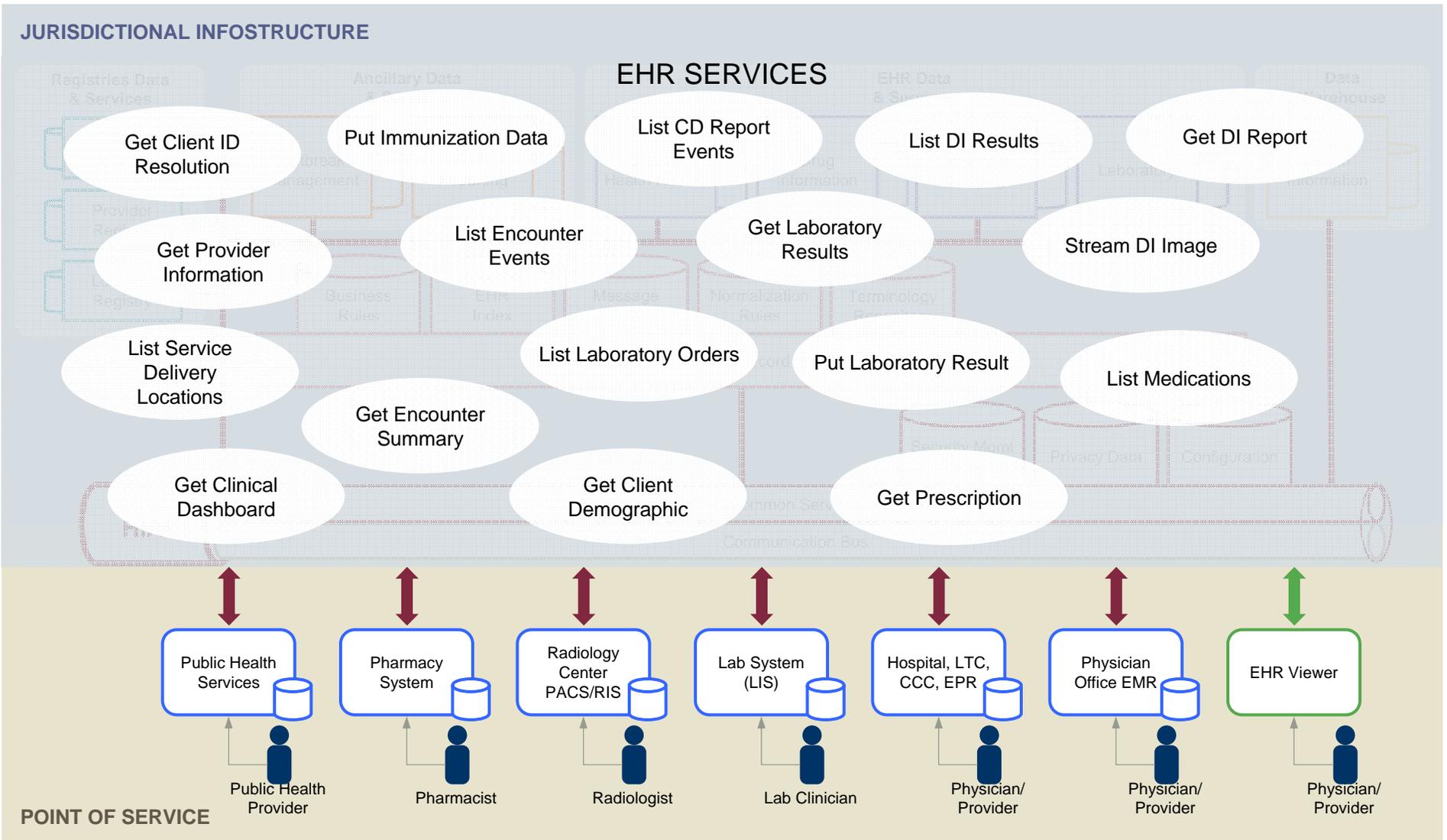
- Repurposed legacy applications to offer services as part of SOA-based EHR Infostructure
- New breed of services to enable coordinated transactions in an EHR Infostructure (e.g. Longitudinal Record Services)
- Use of commercially available solutions to enable components of EHR Infostructure

## Service Oriented Architecture as an Enabler

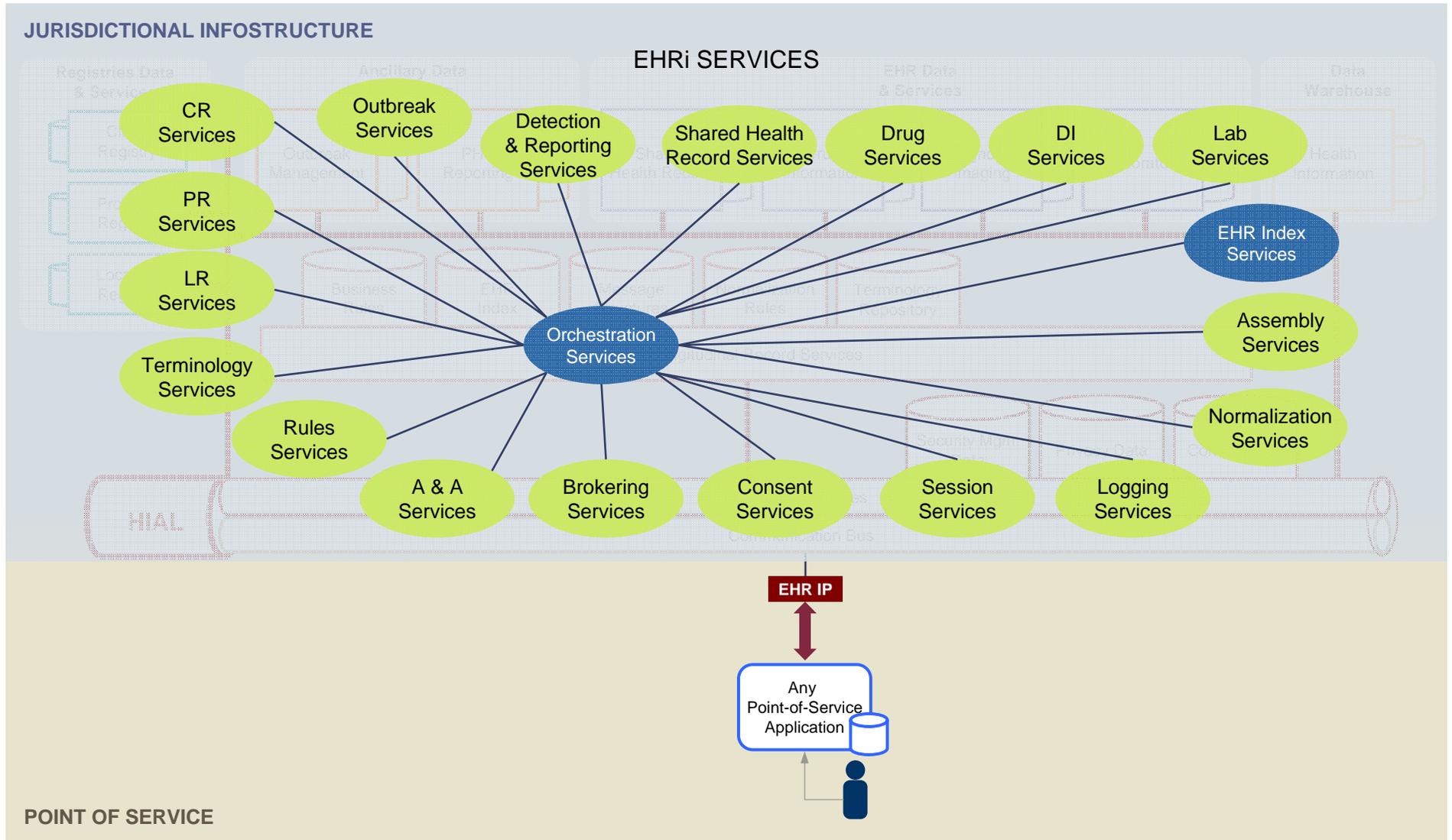
### The HIAL as an Application Abstract Layer

- Each jurisdictional HIAL deployed will have different
  - Physical deployment model
  - Some interfaces which are unique to that implementation
- HIAL acts as an abstraction of the EHR such that applications see the EHR in a consistent way across EHR implementations
- Services exposed outside of an EHRi in the form of supported EHR Interoperability Profiles for an entire Infostructure perceived as a single system with transactional services
- Services within an EHR Infostructure to optimize scalability, maintainability and functional flexibility
  - Interfaces not necessarily exposed or standardized

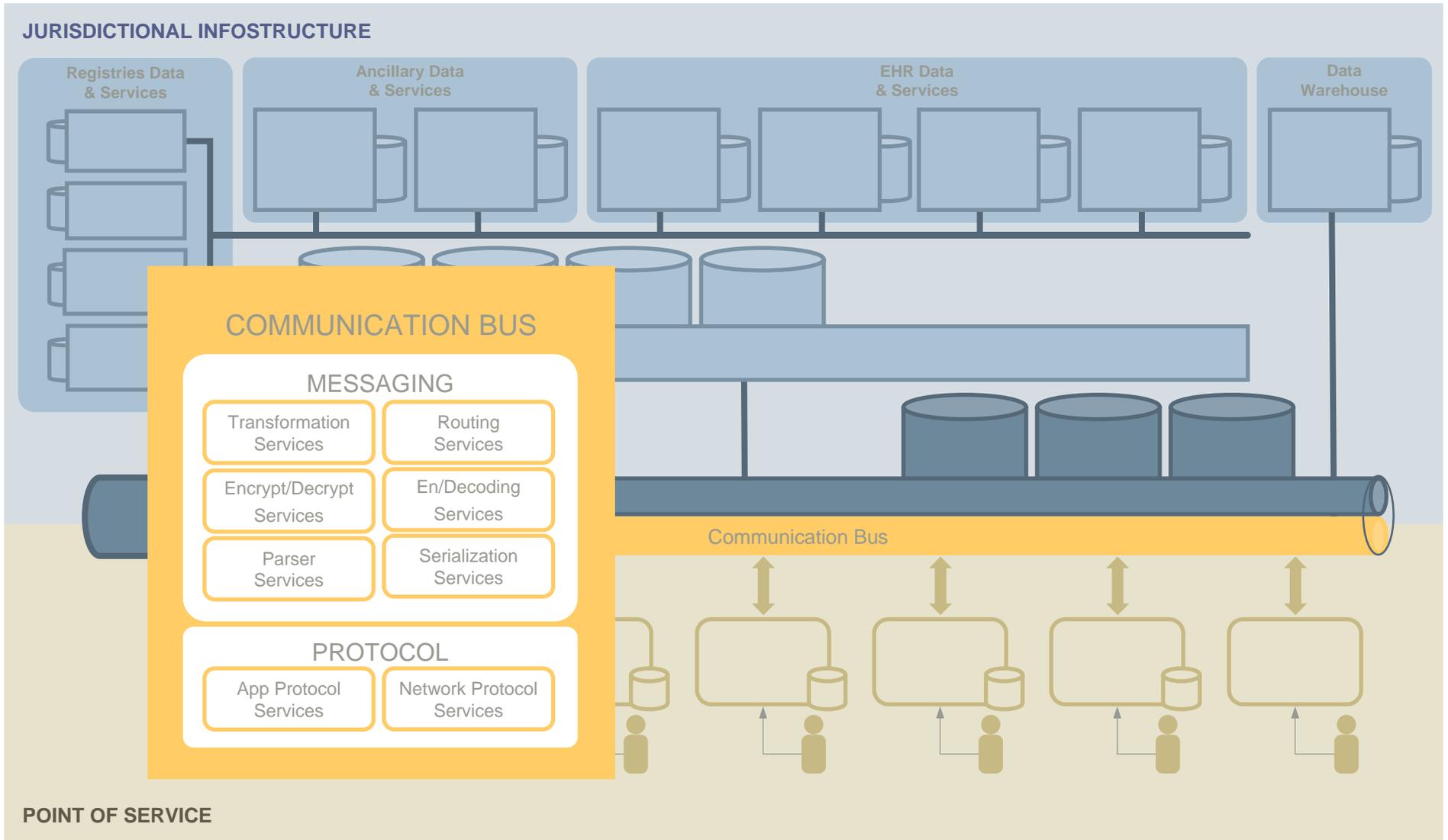
# First Type of Abstraction: The EHR as Services



## Second Type of Abstraction: Generic Application



# EHR Infostructure: Communication Bus



# EHR Infostructure: Common Services

## JURISDICTIONAL INFOSTRUCTURE

### COMMON SERVICES

#### INTEROP

Interoperability Services

Search/Resolution Services

#### INTEGRATION

Service Catalogue Services

Broker Services

Mapping Services

Queuing Services

#### CONTEXT

Caching Services

Session Mgmt Services

#### PRIVACY & SECURITY

Identity Protection Services

Identity Mgmt Services

Access Control Services

Anonymization Services

User Authentication Services

Secure Auditing Services

General Security Services

Consent Directives Mgmt Services

Encryption Services

Digital Signature Services

#### SUBSCRIPTION

Alert/Notification Services

Pub/Sub Services

#### MANAGEMENT

Management Services

Configuration Services

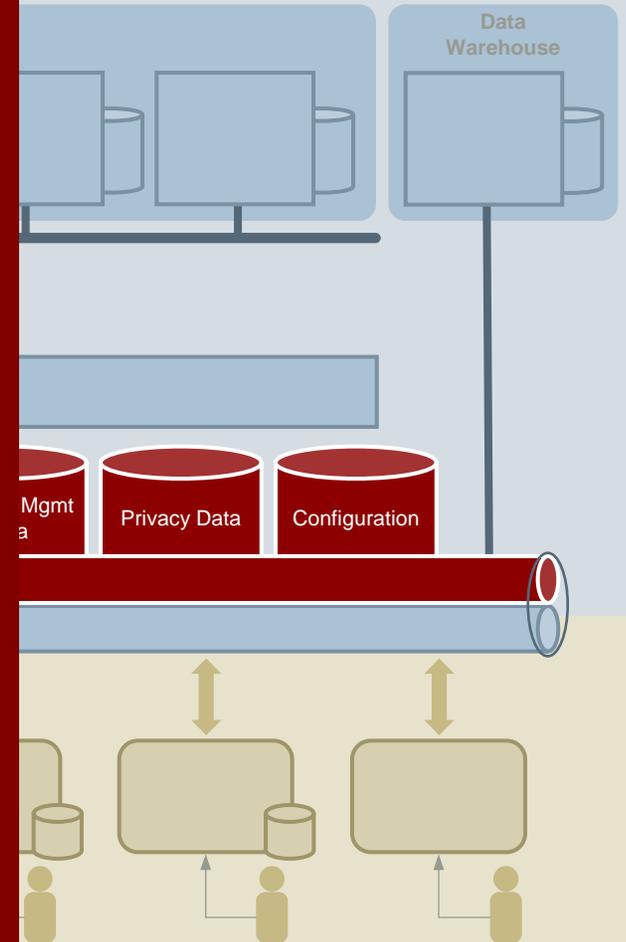
Policy Mgmt Services

#### GENERAL

Auditing Services

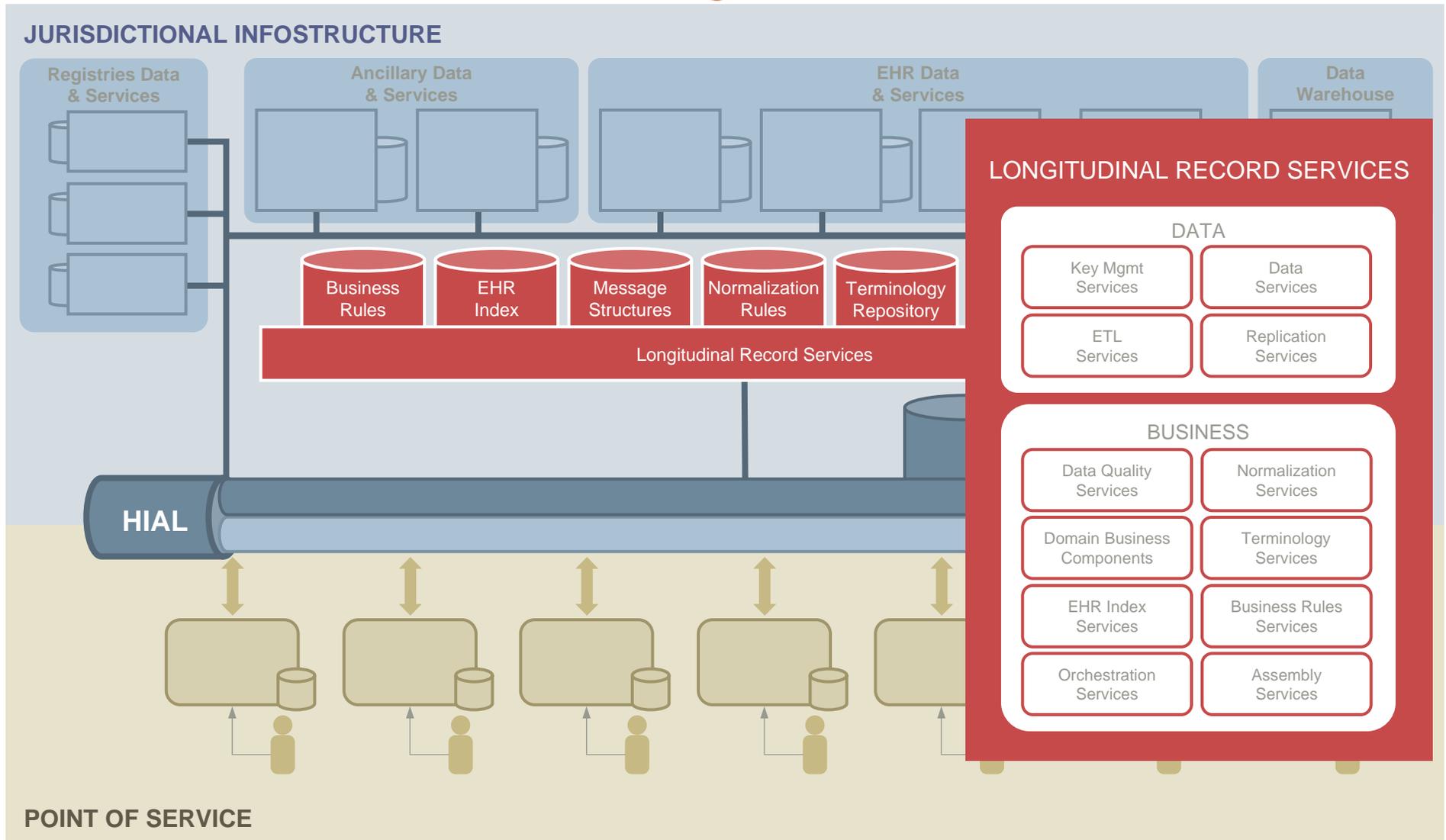
Log Mgmt Services

Exception/Error Handling Services

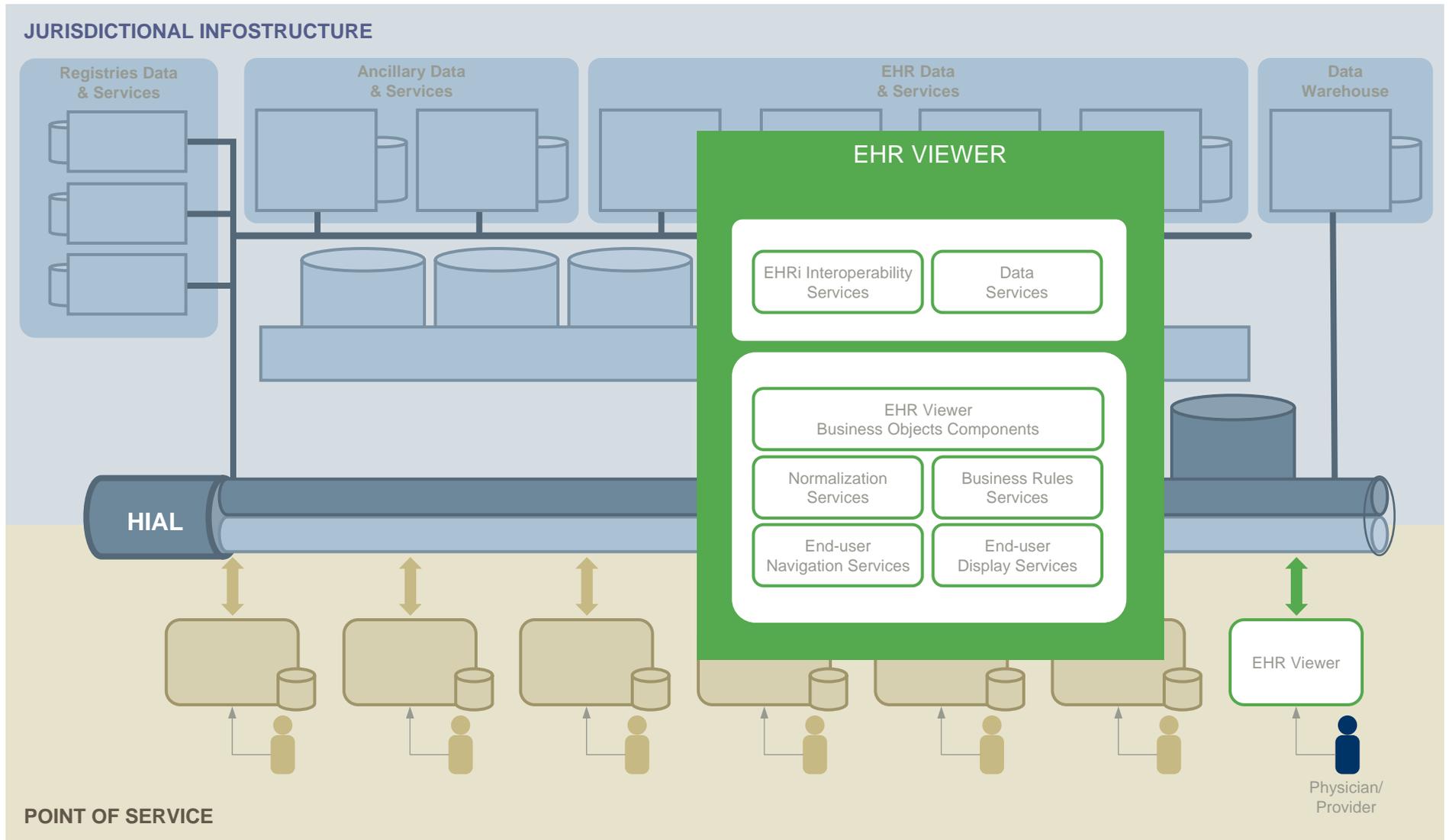


## POINT OF SERVICE

# EHR Infostructure: Longitudinal Record Services



# EHR Infostructure: EHR Viewer





In Conclusion

## Summary

### Supporting Clinicians

- Provider adoption – Approach designed to support use cases across continuum of care with timely and accurate information for the clinician
- Mass customized views of data tailored to provider needs that is authoritative, reliable, responsive
- Semantic interoperability of health information across service delivery points

## Summary

### Health Care Information Solution Architecture

- Interoperability that is cost effective using a SOA approach
  - Standardized within a jurisdiction
  - Standardized to some degree for inter-jurisdictional interoperability
- Common model of integration, secure and private, scalable, extensible, preserves current investments – an application abstraction layer that provides a common integration view and EHR view across Canada
- Standards – common messages and nomenclatures adopted across Canada
- Enables high degree of flexibility in reconfiguration of health services delivery networks



# Thank you!

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