

Consent-based Electronic Patient Information Exchange

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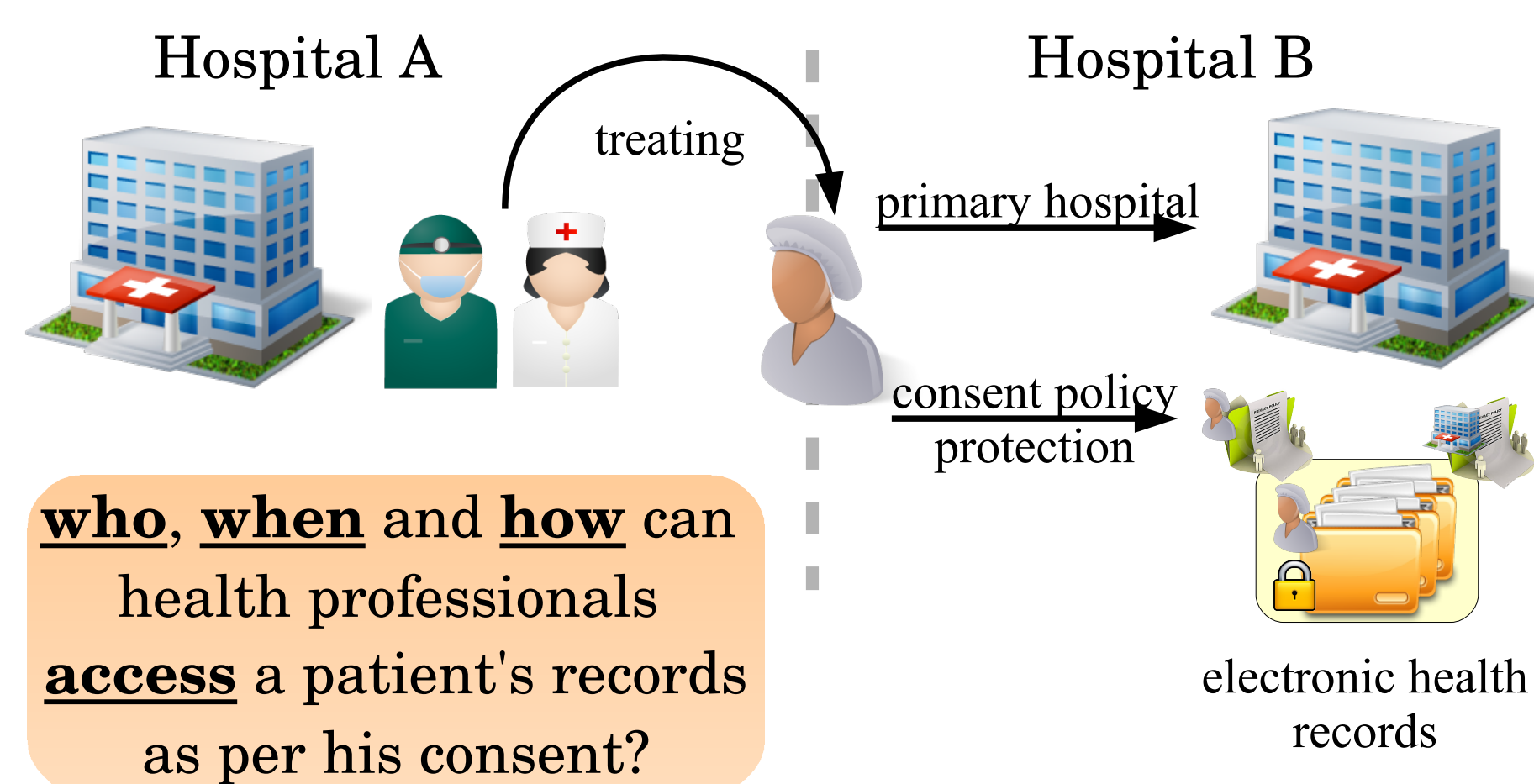
Motivation

Ontario Personal Health Information Protection Act (PHIPA) – 2004

- defines rules that “health information custodians” must follow when **collecting**, **using** and **sharing** personal health information

Consent is a complex problem

- representation**, **management**, and **enforcement** (application & validation)
- institutional privacy & security policies provide additional complexity



Our Vision

An information exchange framework

- supporting distributed heterogeneous *health information systems*
- focusing on consent along with other privacy & security policies
- creating electronic consent models (*representation*)
- providing access control decision making (*enforcement*)
- auditing for all system-made decisions (*validation*)

Proposed Solution

Semantic policy based access control framework

- explicitly incorporates patient consent
- recognizes multiple interacting policies (consent, institutional security & privacy etc.)

Semantic knowledge representation

- facilitates modelling patient consent and other policies
- information sharing across heterogeneous systems using ontology-based data representation
- allows for automated machine-based processing of policies

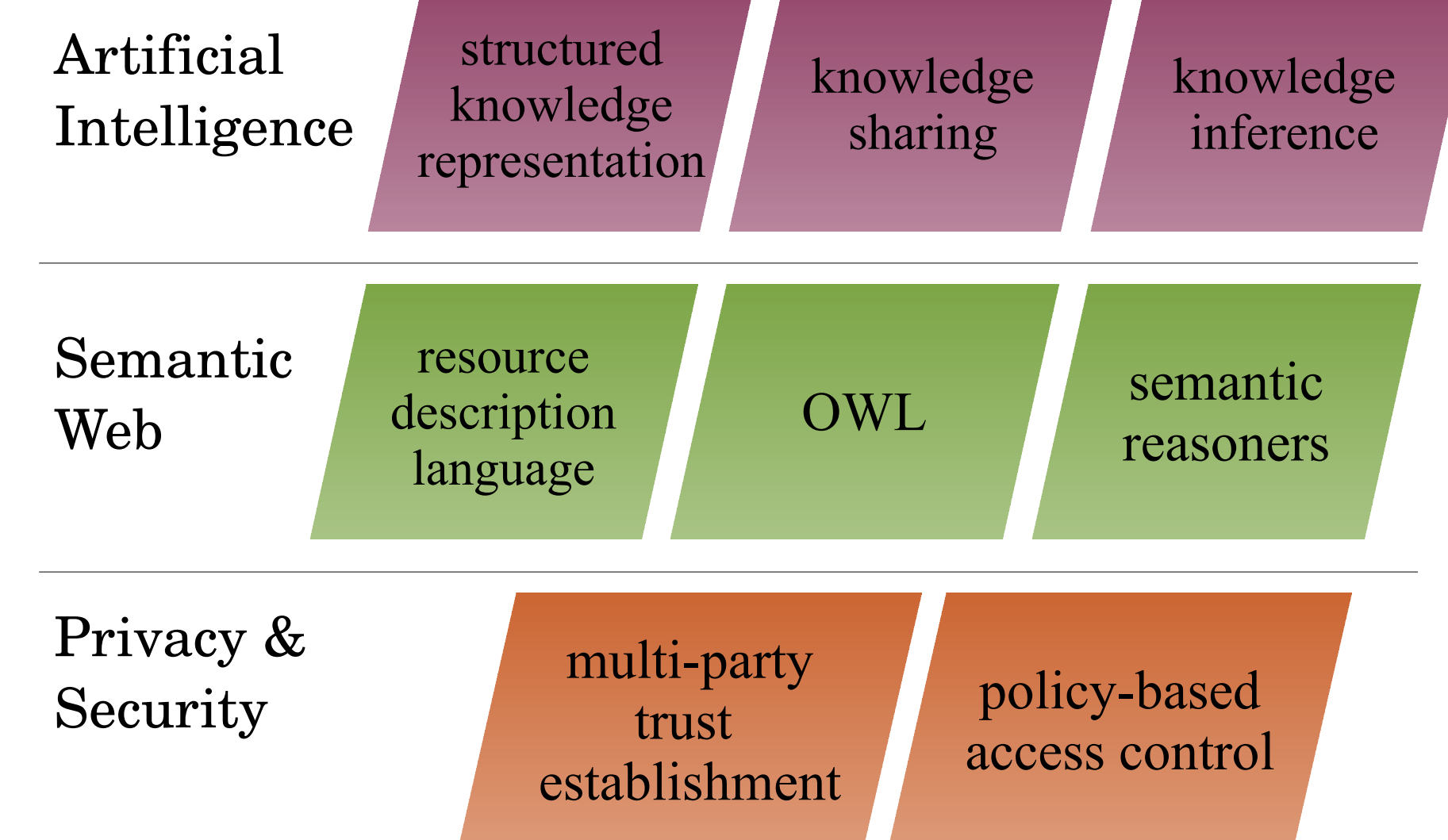
Semantic knowledge inference

- policies can be reasoned with
- inference of knowledge (explicit & implicit)

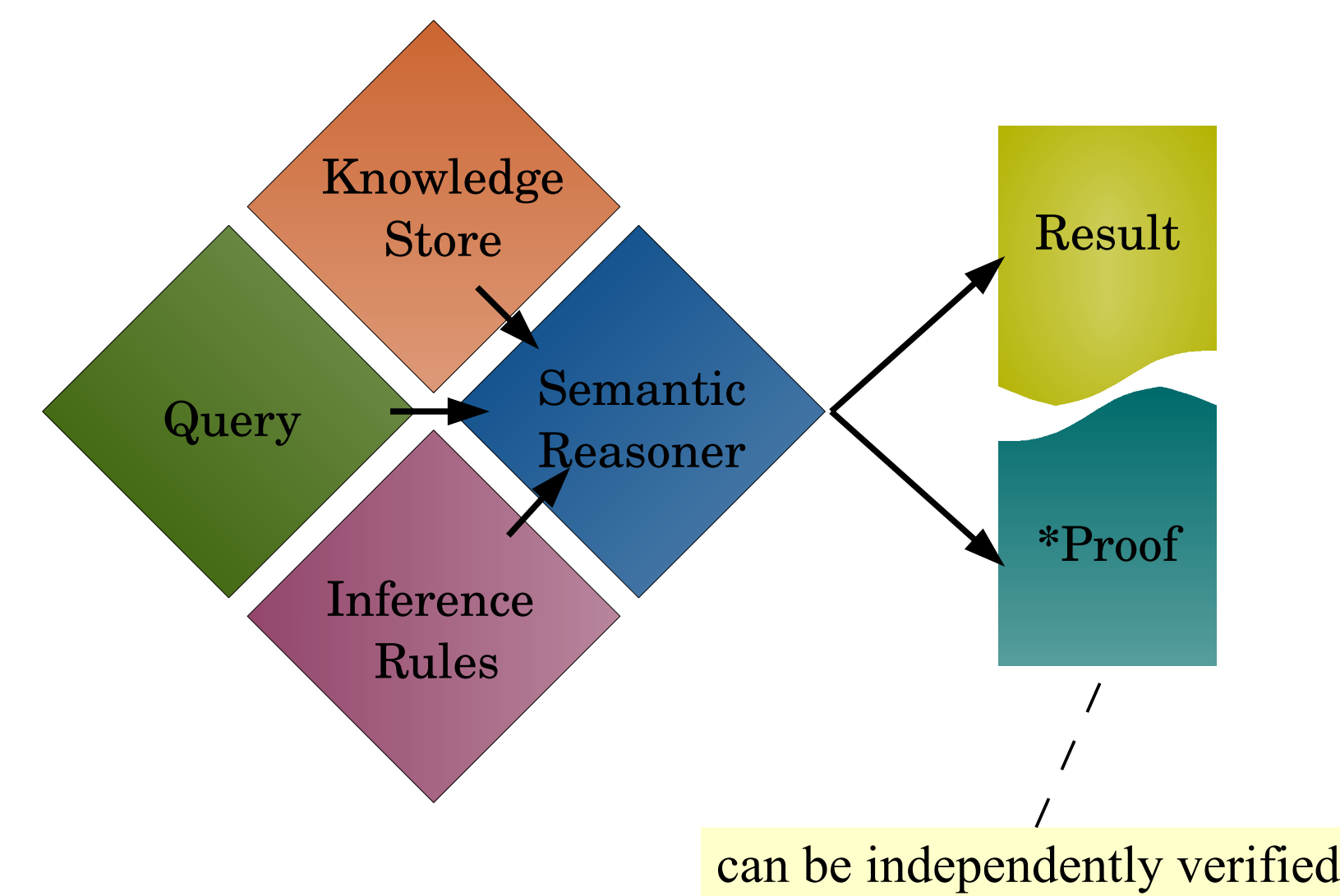
Multi-Agent systems (MAS)

- model healthcare entities as intelligent agents
- model healthcare institutions as MAS

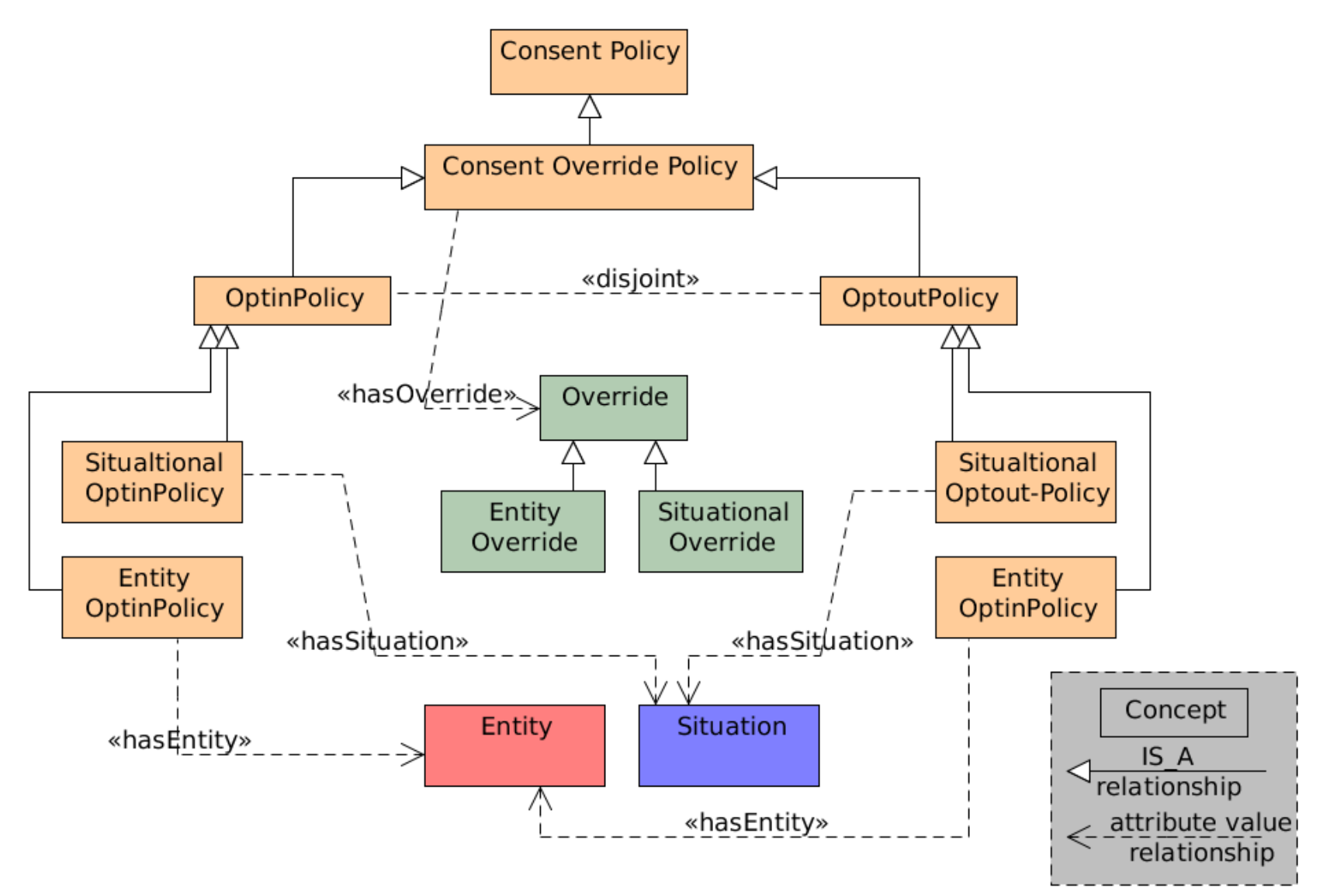
Building Blocks



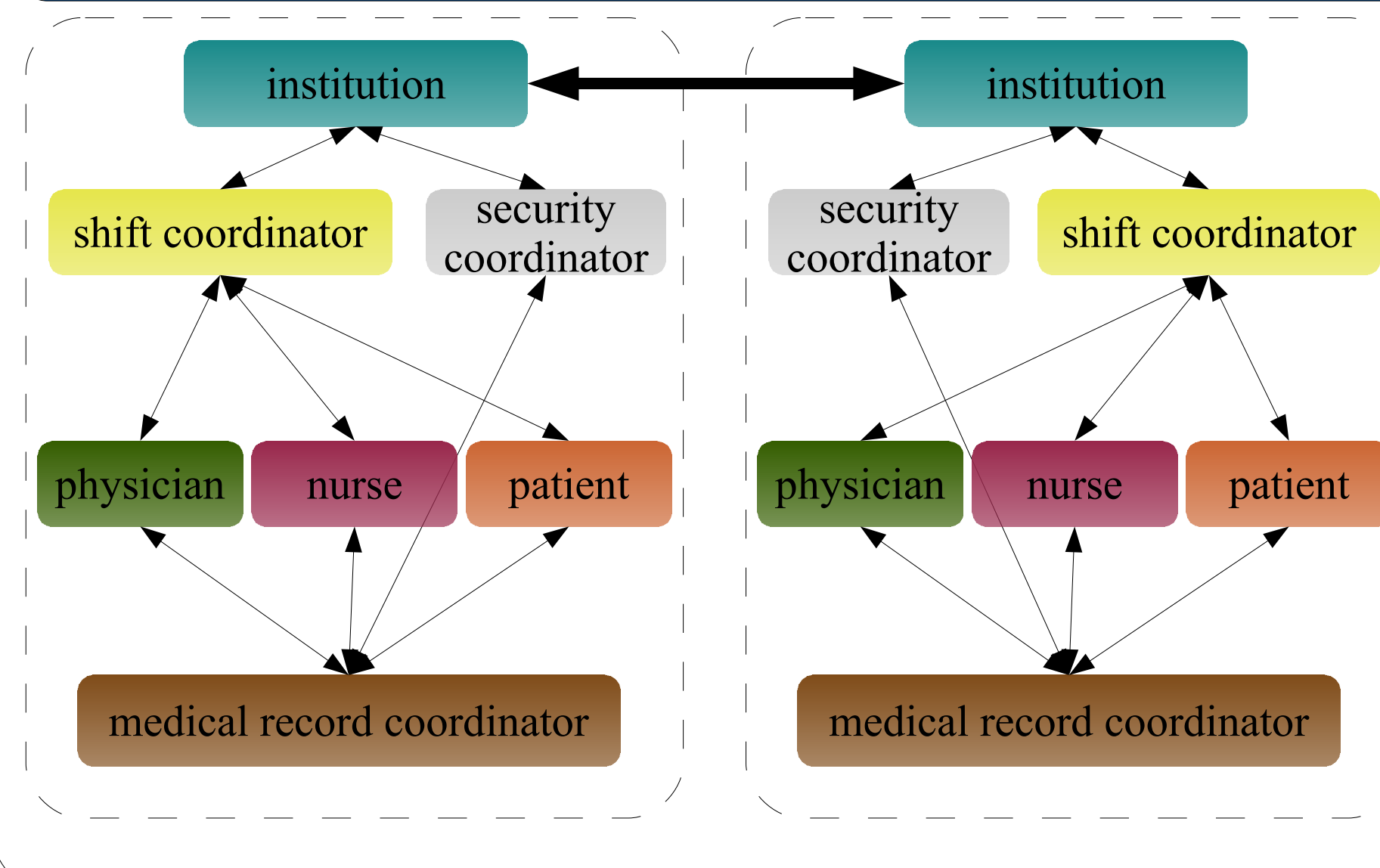
System Components



Semantic Consent Model



Institutional MAS Model



Example: Semantic Access Control

knowledge store

```
:John a :Patient; :hasPolicy :optin.
:HIV_MR a :MedicalRecord; :belongsTo :John.
:DrSmith a :Physician; :isTreating :John.
```

inference rule

```
{?P :hasPolicy :optin.
?MR :belongsTo :?P.
?DOC :isTreating ?P} => {?DOC :hasAccess ?MR}.
```

query

```
_WHO:hasAccess :HIV_MR.
```

Semantic Reasoner

proof

```
{(:John :hasPolicy :optin) e:evidence <knowledgebase#_2>.
(:HIV_MR :belongsTo :John) e:evidence <knowledgebase#_4>.
(:DrSmith :isTreating :John) e:evidence <knowledgebase#_6>} =>
```

result

```
{(:DrSmith :hasAccess :HIV_MR) e:evidence <rules#_1>}.
```

Semantic knowledge representation
all facts are stored in **triple format**,
therefore a knowledge store is a collection of triples.

A doctor has access to a medical record
if the doctor is treating the patient
and if the medical record belongs to the patient
and the patient has an optin consent policy

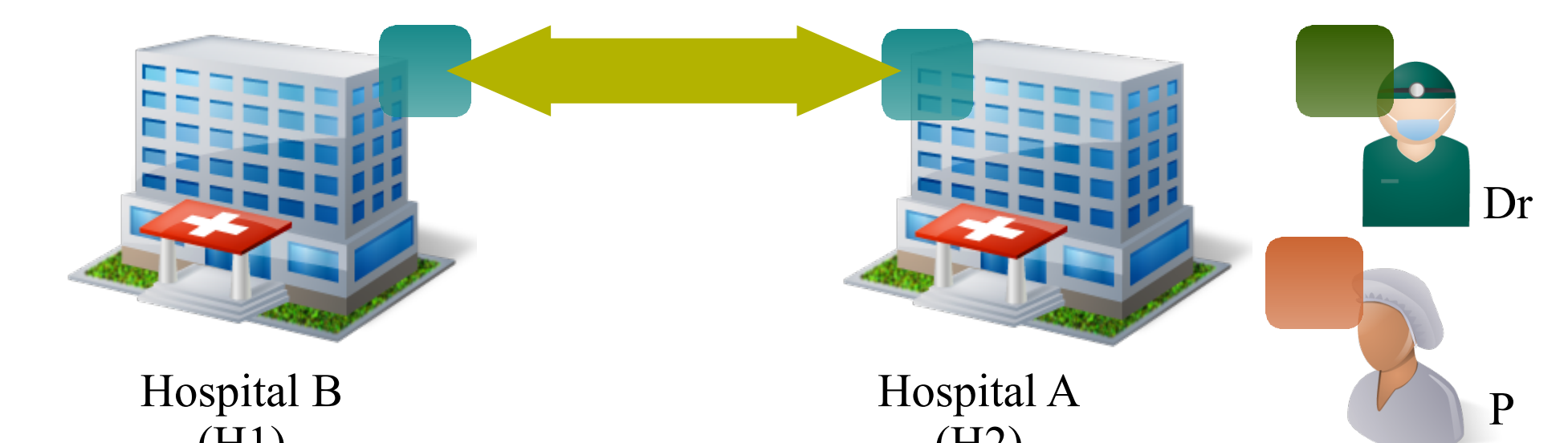
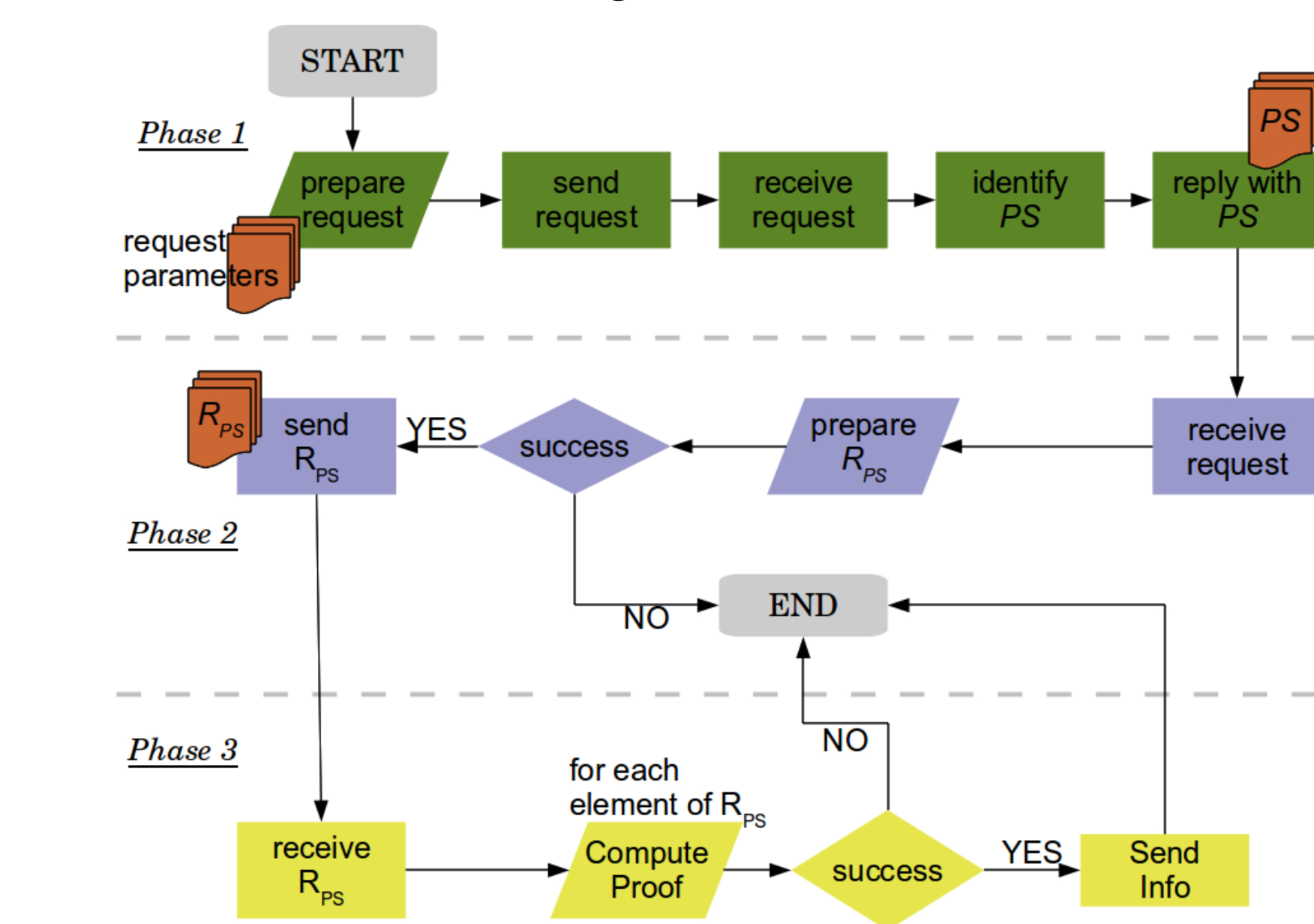
Characteristics of a Semantic Proof

- first order logical proof
- verified by traversing the knowledge graph and applying the inference rules
- provides confidence in the result
- provides auditing capabilities

Information Exchange Protocol

3 Phase protocol

- provides consent enforcement before any information is exchanged

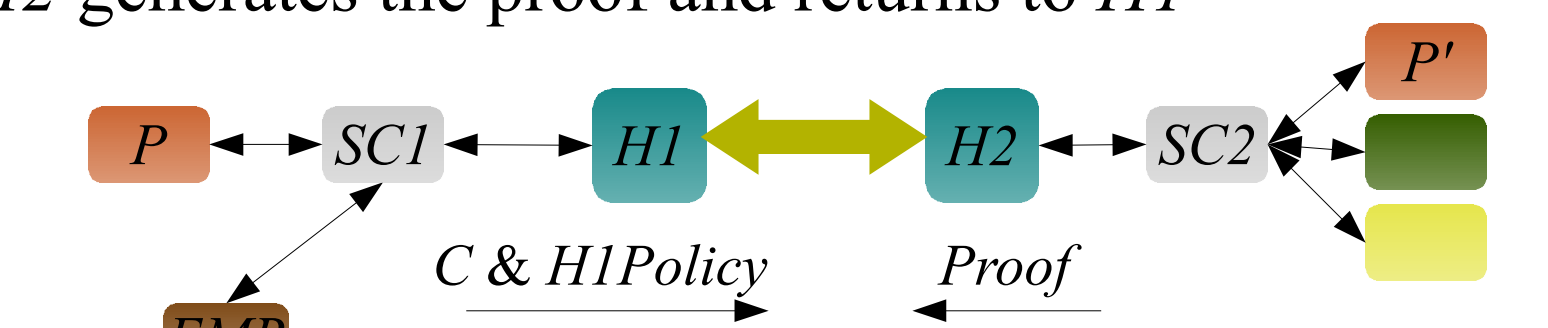


Request for information – Phase 1

- Dr request for P's medical record from H1
- H2 (institutional agent) propagates the request to H1
- H1 (institutional agent) receives and processes the request

Proof generation – Phase 2

- H1 identifies protection set (PS)
 $PS = \{patient\ consent\ C, H1\ privacy\ \&\ security\ policies\ HIPolicy\}$
- H1 requests H2 for provable validation of PS
 $C\ \&\ HIPolicy$
- H2 generates the proof and returns to H1



Example scenario

Consent



Opt-out with emergency override

Required Proof:

- confirm that patient is indeed in an emergency situation

Required Proof:

- DR is an employee of the hospital
- DR is treating the patient
- DR is on shift
- DR is a physician

Hospital B Policy



- employee has access to patient records
- employee must be treating the patient
- employee must be on shift
- employee must be a physician

Hospital A Policy



- all hospital employees have access to patient records

Proof validation – Phase 3

- H1 computes (verifies) the semantic proof locally or using a trusted third party proof checker
- Information is exchanged upon successful validation of proof (of consent & other policies)