

COMP0004 report

Feature overview

The app homepage allows the option to view the list of all patients, or view statistics about the medical practice and its patients. If you choose to visit the patient list, you can click a tile to view the full profile of a patient. The tiles are sorted into alphabetical order by surname to make it much easier to find a patient. The statistics allow you to view patients by city or age group, and view general medical practice stats such as male: female ratio and ethnicities represented.

There is also a navbar which allows you to quickly access the home page or search for a patient by name. Each page contains hyperlinking to ensure intuitive navigation without the need for using the back and forward arrows.

Design & implementation

In line with the specification, I built a DataFrame class that stored a list of Columns. In an instance of aggregation, the model accessed by the servlets initialises its own DataFrame with the patient details stored in the CSV file. This is performed with the DataLoader class, and the returned DataFrame is stored inside the Model class. The model itself is constructed and returned by the ModelFactory class. The ModelFactory class stores a path attribute which it passes to the Model to retrieve.

The actual model accessed by the program is a PatientModel class instance, which itself is a subclass of the initial Model class. The Model class contains general instantiation methods, a sort function, a search function, and a row count. The PatientModel class was extended from the Model to possess many more specialised methods. The new methods directly abstract away from the more specific DataFrame methods, such as the getPatientIDs method which uses the DataFrame's getColumnAsList method to simply return the patient ID column. These helper methods are utilised whenever possible to provide encapsulation.

The web interface utilises JSP files to display the correct content based on the model's reading of the CSV files. The content is provided by the servlet which calls the model using the previously mentioned abstracted methods. The servlets then post these attributes with the correct tag, to the web page. With CSS, I also built these pages with a UI that is friendlier to users. It is now cleaner and more natural to use.

Each class was designed intuitively to rely on the use of "getter" and "setter" methods. I ensured to initialise all instance variables as private so they could not be directly referenced outside of the class. I believe this is good practice as it strictly controls access to the internal state of each object, so data integrity will not be compromised. The "getter" methods also return the data in the required format, so no further manipulation is required by the caller. This was done with the intention of the user being a thin client, as it improves speed of access for users on all devices.

Meanwhile, my use of a base Model class is an example of forward-thinking design because if the program were ever extended in capability, new models such as my PatientModel do not have to be built from the ground up and may just simply inherit from the original Model.

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Evaluation

I feel this program provides a great base interface for viewing patient data and general statistics. The app is easy to navigate and runs quickly, having been tested extensively for bugs, and analysed thoroughly to improve efficiency. To build on this in the future, the app could provide more statistics, and include the ability to view graphs such as the age distribution of the patient base. The ability to add or remove patients to the CSV file, by reading and writing, is also a good idea as it would make monitoring new users easier.

The design of the class system is excellent for a multi-model system. Because there is already a parent Model class and I then created a new PatientModel child, I could create further subclasses, with specialised methods based on additional CSV files' contents. The ModelFactory class itself provides a framework to instantiate new models if required, maybe to cycle through different practices or view extra details such as appointments, prescriptions, or illness history. Then, another class could be created to aggregate all instances of the model classes and subclasses, with overarching methods to maintain the high levels of abstraction already present.