

# HEALTHCARE SYSTEMS MINIMUM VIABLE PRODUCT - ARCHITECTURE DESIGN

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# **About Us**



ACCESS Health International is a think tank and advisory group. We believe all people have right to access high quality, affordable healthcare

We have 5 Country offices across the globe.



**ACCESS Health Digital works as a strategist for** all digital health initiatives of Access Health.

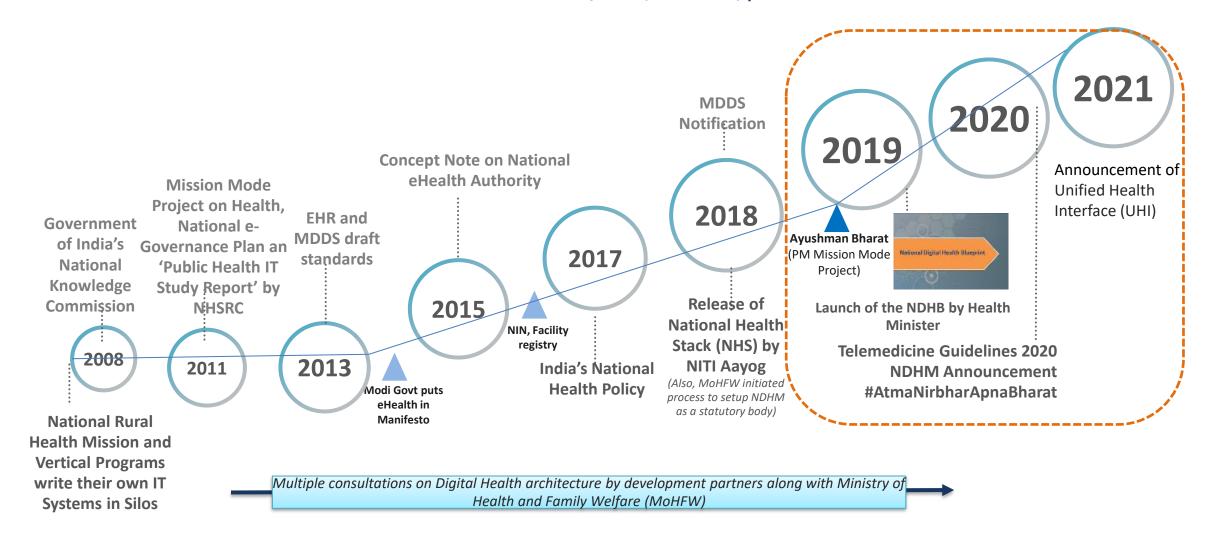
AHD expertise lies in supporting and building a harmonized digital health ecosystem to achieve Universal Health Coverage by opensource innovative healthcare systems and by leveraging cross-over skills between healthcare and technology.



## DIGITAL HEALTH | INDIA'S POLICY JOURNEY SO FAR....

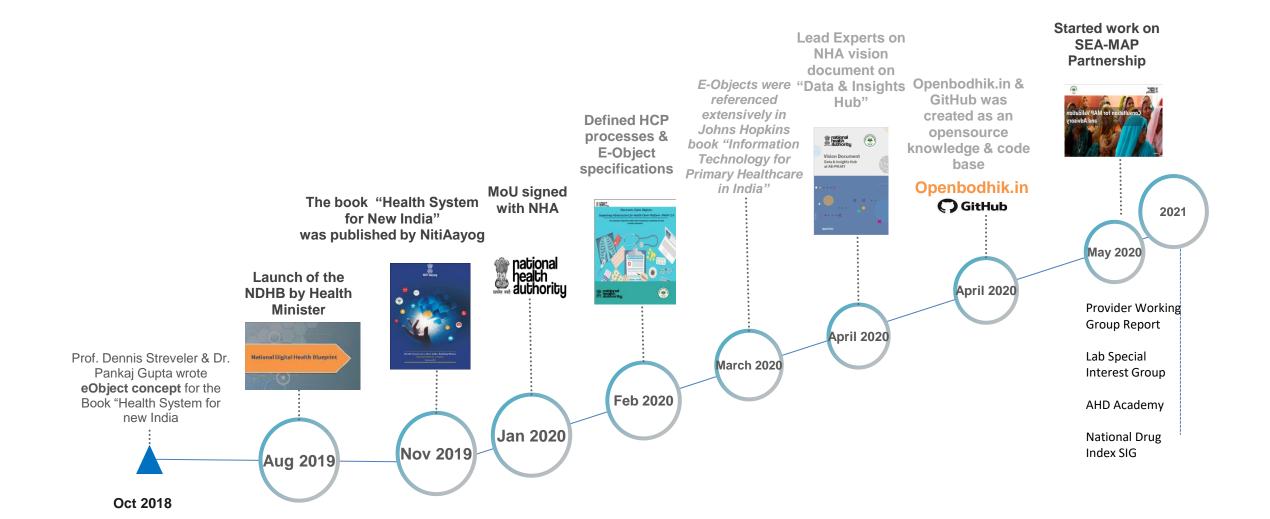


Over the past few years, in addition to analyzing global best practices, conducting landscape assessments, considerable consultations were conducted with relevant stakeholders at the center / state, academia, private sector.



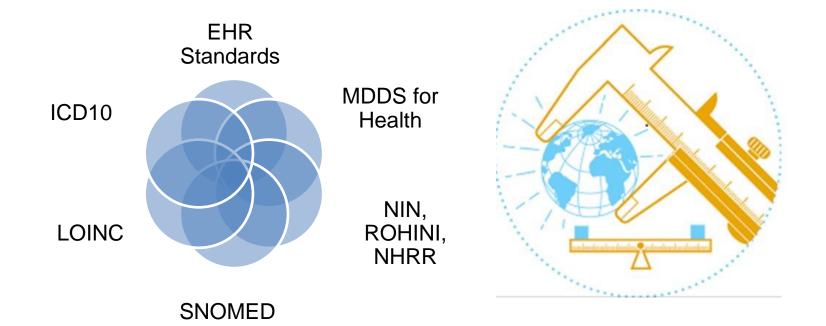
# DIGITAL HEALTH | ACCESS Health Digital JOURNEY SO FAR....





# **INDIA** has Implemented Standards\* In Isolated Fragmented Pockets





<sup>\*</sup> Implemented since 2018

# **Health Systems | Current Landscape**



Siloed data systems across public and private sector in the country, with no data standards followed



Need of the hour is to adopt

NDHB recommended Standards like MDDS for demographics and LOINC for Investigations.

For Semantic Interoperability, standard formats and metadata for efficient data exchange of encounter, episode, prescription, discharge summery, etc should be used.

# **Digital Health | Policy & Market Updates**



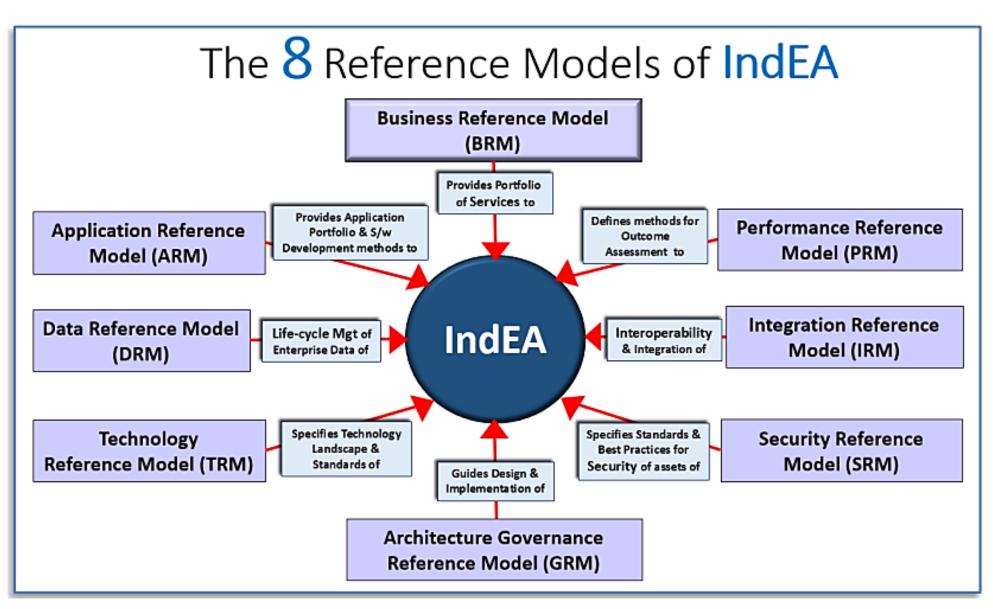


- Telemedicine guidelines released in April 2020. These will ensure an accelerated adoption of NDHB based standards
- \* National Digital Health Mission announced in May 2020 as part of the Government's response to the Coronavirus Pandemic. The mandate is to operationalize, execute and implement the National Digital Health Blueprint.



# **IndEA Architecture**



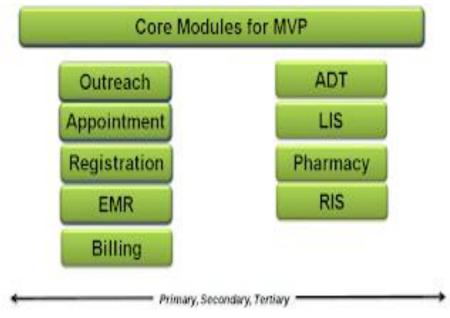


## **IndEA | Application Reference Model**



ARM captures guidelines and recommendations on **Application Architecture Standards**, use of **Open APIs**, **Microservices Architecture** and **Open-Source Software**.

#### HDIS MVP Microservices Published in GitHub



The first set of released microservices includes infrastructure microservices which serve as a base for setting up a microservice development environment.

How can the digital health Opensource community benefit from these microservices codes?

- New product development If you are planning to build a new product, it is recommended to build he solution on microservices architecture using the shared microservices.
- **2. Legacy application** If you have a Legacy system and you don't want to disrupt your ongoing business model then you have an option of building a Bolt-On a translator layer on top of the Legacy system such that it populates the eObjects.

# **IndEA | Non- Functional Requirements**



 The application must not have any Single-point of failure.
 There must be a graceful degradation of services in case of any failure

e

 The application should be able scale elastically to handle the increase or decrease in workload  All applications must be able to handle volume of X% Y-o-Y growth for the life of the application

**Graceful Failure** 

**Scale Elastically** 

**Handle Volume** 

 The Application must support horizontal and vertical scaling of Servers, compute, storage, network etc.

**Support Scaling** 

 The Application must support load balancing and routing

**Support load** 



# National Digital Health Blueprint- Quick Overview

# **National Digital Health Blueprint (NDHB)**



\*Released Standard Nov 2019

## Ecosystem, Not system



National Digital Health Eco-system (NDHE), Federated Architecture based on IndEA Stack, Health Information Exchanges – 'Think Big, Start Small, Scale Fast'

## **Principles & Building Blocks**



Minimum viable set of 35 building blocks, and more can be defined..

## **Applications & Digital Services**



Evolve and develop thematic areas for development and deployment of applications

#### **Standards**

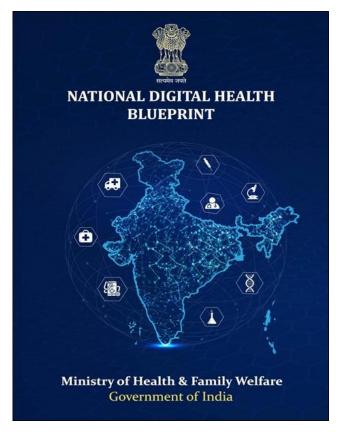


**Minimum viable set of standards**, for semantic interoperability: EHR, MDDS, NIN, SNOMED, FHIR..

#### **Institutional Framework**



Establish National Digital Health Mission (NDHM), govt. organization with complete functional autonomy



"The NDHB forms the foundation on which the edifice of an entire National Digital Health Eco-system can be built in a phased manner."

- J. Satyanrayana, Chairman, Committee on National Health Stack

# **NDHB | Design Principles**

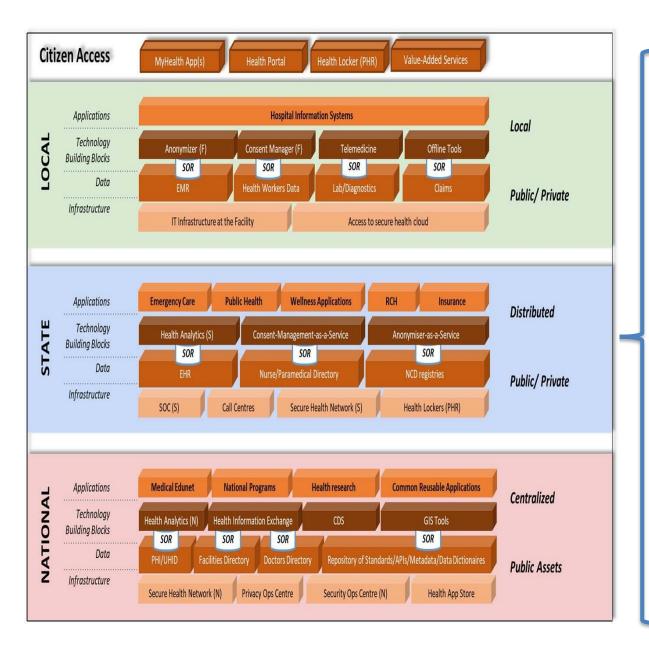


#### NDHB Design **Microservice Architecture Principles** Security Registries as Single Health Data fiduciary API based model Data Privacy, security and source of truth for data at local and state Domain driven design integrity by design Mobile First Design levels with central based decomposition of Controlled Data Visibility strategy Data lake for business concerns and Consent Based Data Open standards based indicators Scalability, Maintainability, Sharing **Building blocks** Resilience, Loose EHR and PHR for Data Provenance Interoperability Coupling by design Health data exchange Physical security Minimalistic Design with FHIR based open API Continuous Delivery and **Network security** Scale Fast Approach light container (Docker and for interoperability Patient control over his Pods) based Deployment Unique Identification of records entities (easy DevOps) Continuum of care Common meaning of Easy integration with existing Monoliths data

Ensure Compliance by conducting a **Standardization Testing and Quality Certification** (STQC) or STQC like audits

#### **NDHB | Overview of Federated Architecture**

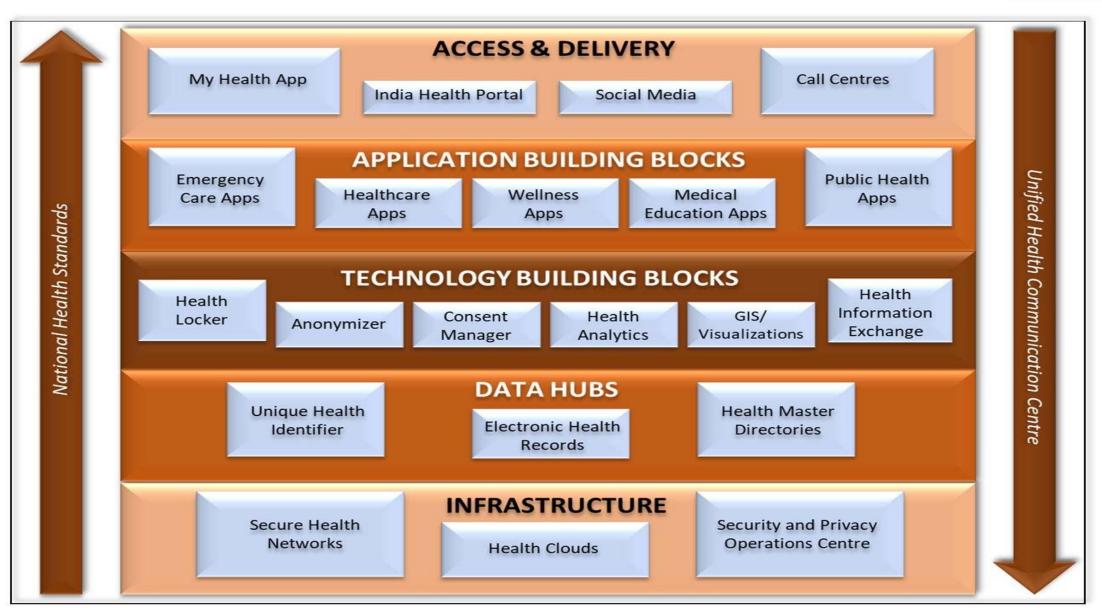




#### **Principles of Federated Architecture**

- 3 levels National, State and Facility levels for all digital health data and applications
- Patient data held at the Point of Care or closest possible physical location
- Citizen shall be in full control of the 'processing of health data' relating to him/ her
- Systems of Record (SoR) shall hold the primary data and all other IT systems, applications or entities will have access to it only through links, subject to the applicable permissions and consent.
- Large facilities and government health departments shall be **data fiduciaries**. Small facilities will perform the role of data processors.
- Data fiduciary shall be responsible for the data protection obligations and compliances under the applicable laws





# NDHB | Recommended Standards



Purpose	Recommended Standard
Consent Management	ISO/TS 17975:2015 Health Informatics - Principles and
Consent Framework	Electronic Consent Framework (Technology
Structured Clinical information	FHIR Release 4 (subject to section 3.4.2) (with any future
exchange	errata(s))
Still Images / Documents Audio / Video	Still Image: JPEG Document/ Scan: PDF A-2 Audio: MP3 /
	OGG Video: MP4 / MOV (embedded as Binary Content in
	relevant FHIR resource)
Diagnostic Images (Radiology	
including CT, MRI, PET, Nuclear	DICOM PS3.0-2015c (embedded as Binary Content in
Medicine / US / Pathology),	relevant FHIR resource)
Waveforms (e.g. ECG)	
Terminology/ Vocabulary	SNOMED CT- (for all clinical terminology requirements in
	health records)
Coding System	WHO ICD-10- (for statistical classification of diseases and
	related health problems)
	LOINC-(for observation, measurement, test-panels, test
	items and units)
Security	Digital Certificate, TLS / SSL, SHA-256, AES-256
Access Control	ISO 22600:2014 Health informatics - Privilege
	Management & Access Control (Part 1 through 3)



# HEALTHCARE SYSTEMS MDDS for India- Introduction & Usage of MDDS Code Directories

# META DATA AND DATA STANDARDS FOR HEALTH (MDDS)

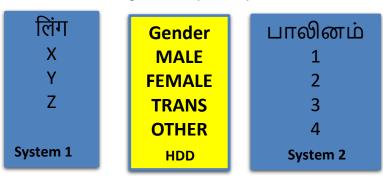


#### MDDS - Health Data Dictionary [HDD] for India for semantic interoperability.

- 1. Library of 1000+ Data Elements,
- 2. 140+ Code Directories
- 3. Registry Design
- 4. Health Information Exchange Concept
- 5. Governance



Common meaning conveyed by different code sets



#### \*Drafted in 2013-2014, Notified Standard since Aug 2018

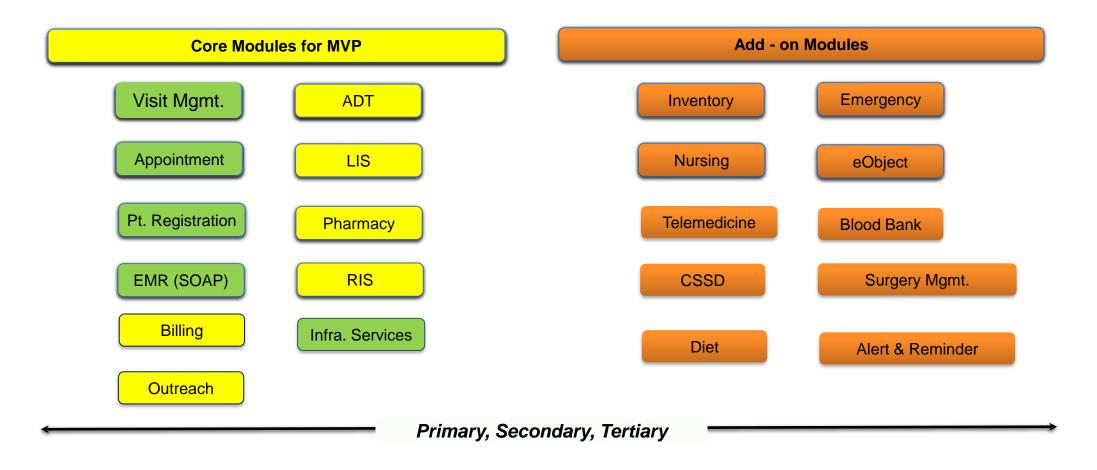




# Microservices for HDIS MVP- Recommended For New Product Development

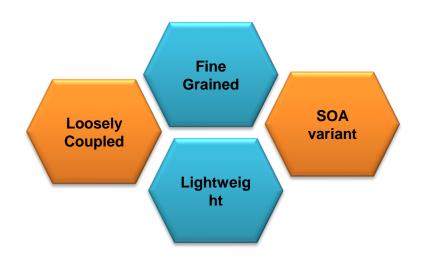
# Minimum Viable Product [MVP] Modules



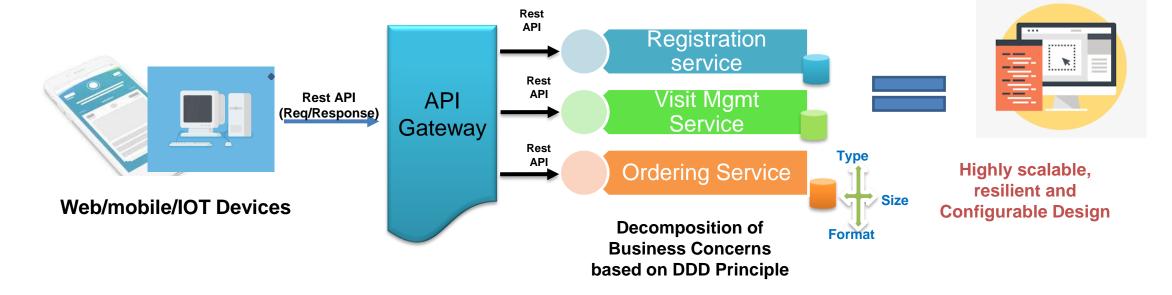


The core blocks above are representation of minimum functionality sets (also known as Minimum Viable Product Modules) within HDIS universe. All these core modules are required functions that any healthcare ecosystem will need. There can be add-on modules, but the core are the minimum that must exist in a healthcare system. These modules caters not only the hospitals but also public health delivery centres like PHCs, SCs, HWCs, Dispensaries, Pharmacies of private etc. But a PHC might not need full set of core functionality rather a subset of these MVP modules.





Microservice Architectural style is an approach to developing a single application as a suite of small services, each running in its own process and communicating with lightweight mechanisms, often an HTTP resource API.





Small and Focused on one Business Functionality (Domain Driven Design) Functional & Team Scaling (Independent Development, Release and Deployment)

Compliance to NDHB
Standards

Fault Isolation vs. Bring all down

Well defined Module boundaries across domain functionalities with explicit interface declaration

Rewrite can be limited to one service

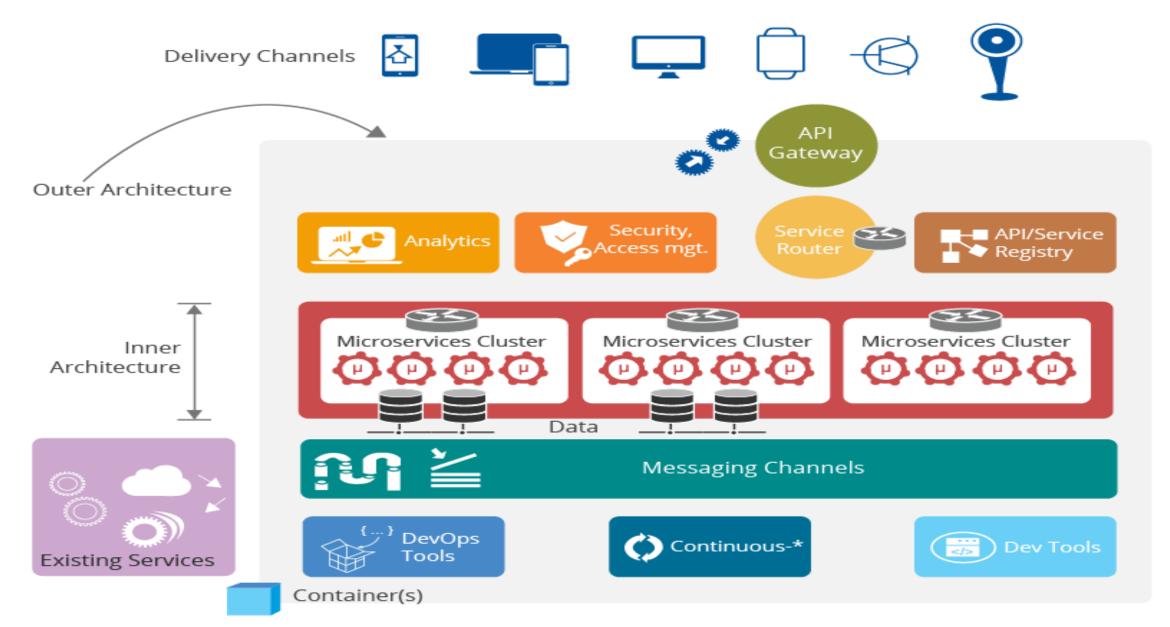
Polyglot Persistence (Decentralized)

Decentralized choreography vs centralized orchestration

Loosely Coupled
Maintainability, Reliability,
Extensibility, Scalability

# **Microservices Architecture | Detailed Layout**





# **Technical Approach: Microservices Architecture & its Implementation**



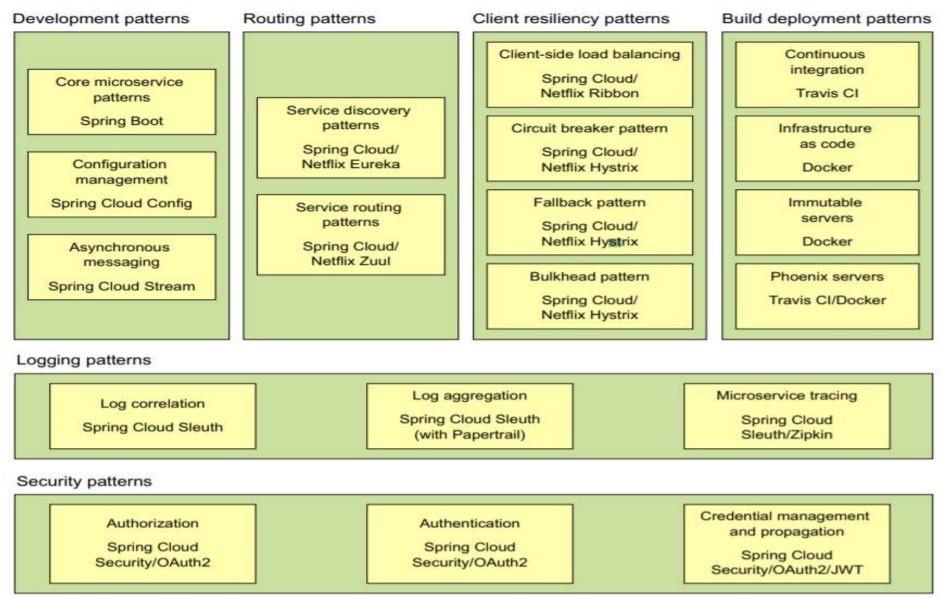


Fig. Technical Architecture: Microservice

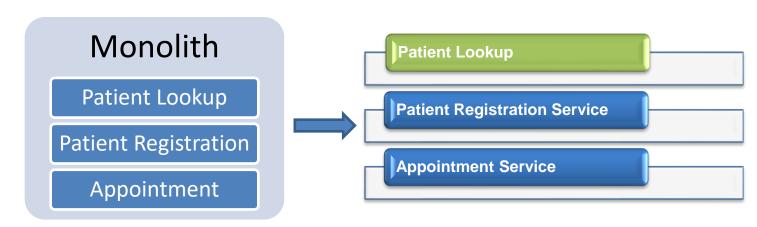
# **Technical Approach: Microservices Architecture & Its Implementation**



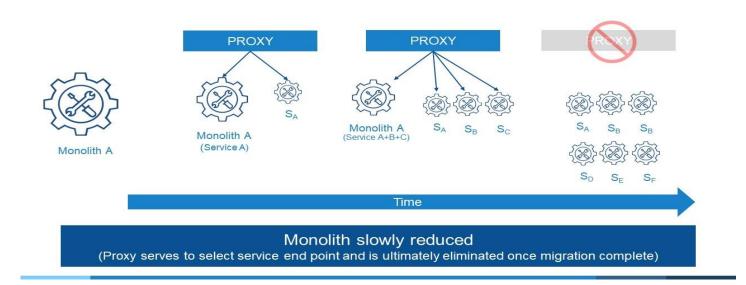
1. Decompose your monolith into smaller services.

Prioritize and finalize the simplest function/module to strangle to avoid the risk

2. Build, transport & eliminate using a router



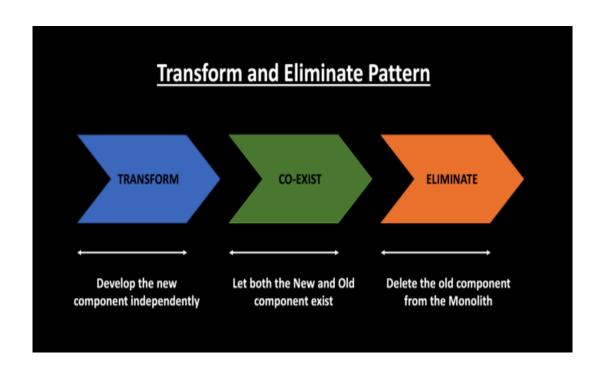
#### Strangler Pattern Progression

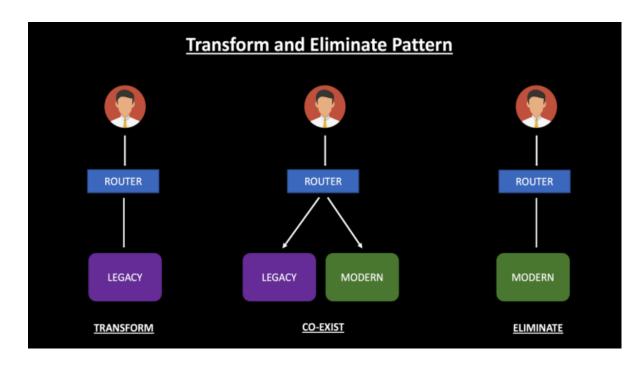


# Transit monolith application to microservices using "Strangler Pattern"



- ❖ Rewriting a large monolithic application from scratch is a big effort and has a good amount of risk associated with it.
- ❖ The Strangler Pattern reduces the above risk. Instead of rewriting the entire application, you replace the functionality step by step.







# **Microservices Communication Patterns**

#### **Microservices Inter Service Communication Plan**



# A. Synchronous / HTTP calls

- API gateway to discovery server
- All to discovery server
- All to config server
- API gateway to identity management server

# B. Asynchronous / Messaging

Microservice A to B through message queues (RabbitMQ,Kafka,Spring AMQP etc.)

# C. Event-Sourcing

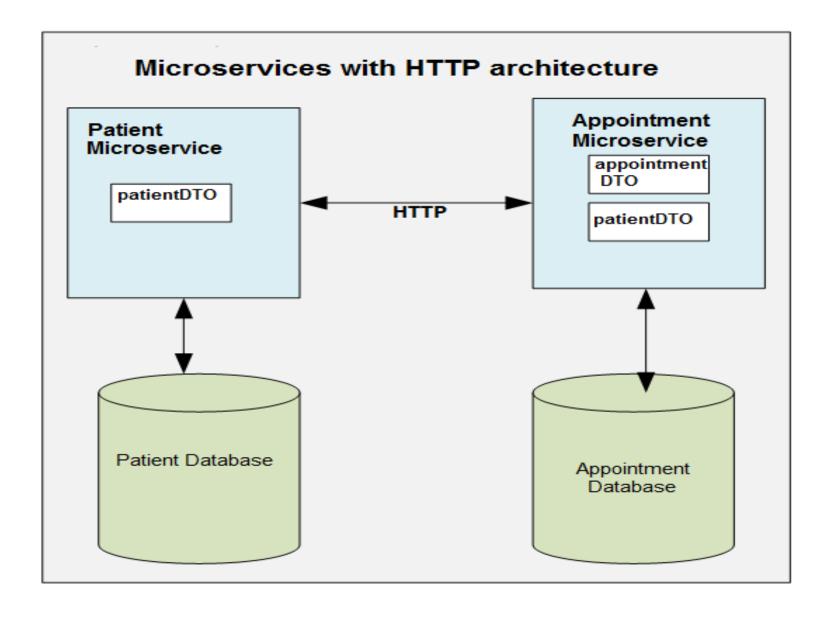
Microservices (e.g. A,B), Event Store, API Gateway, Message Bus

# D. Event-Sourcing with CQRS

Microservices (e.g. A,B), Write /Read Event Stores, API Gateway, Message Bus

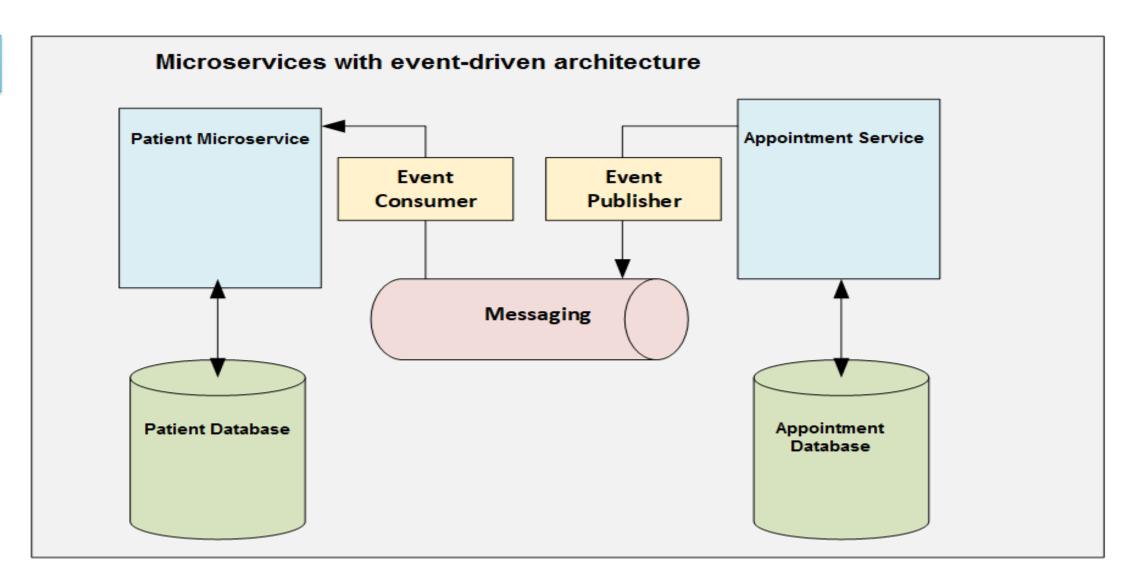




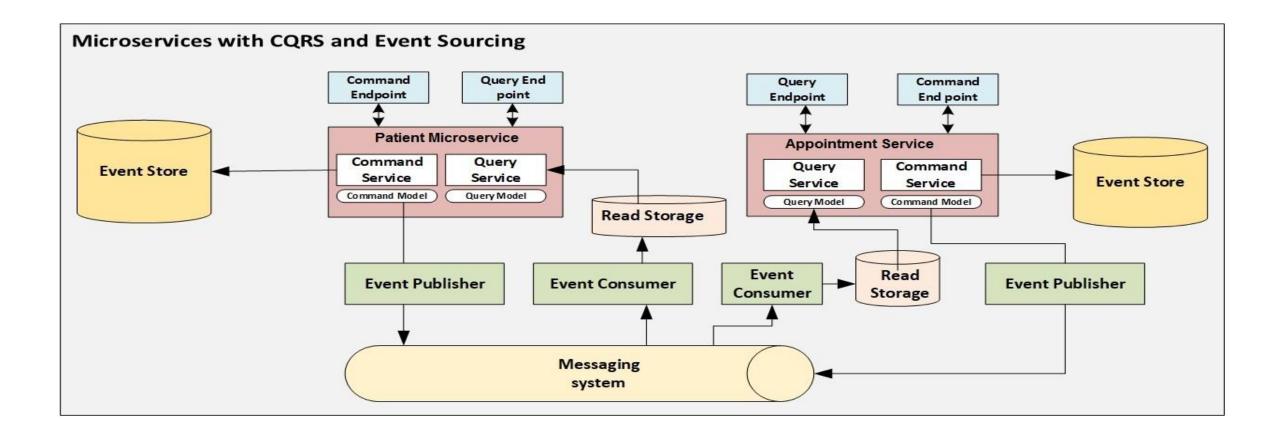




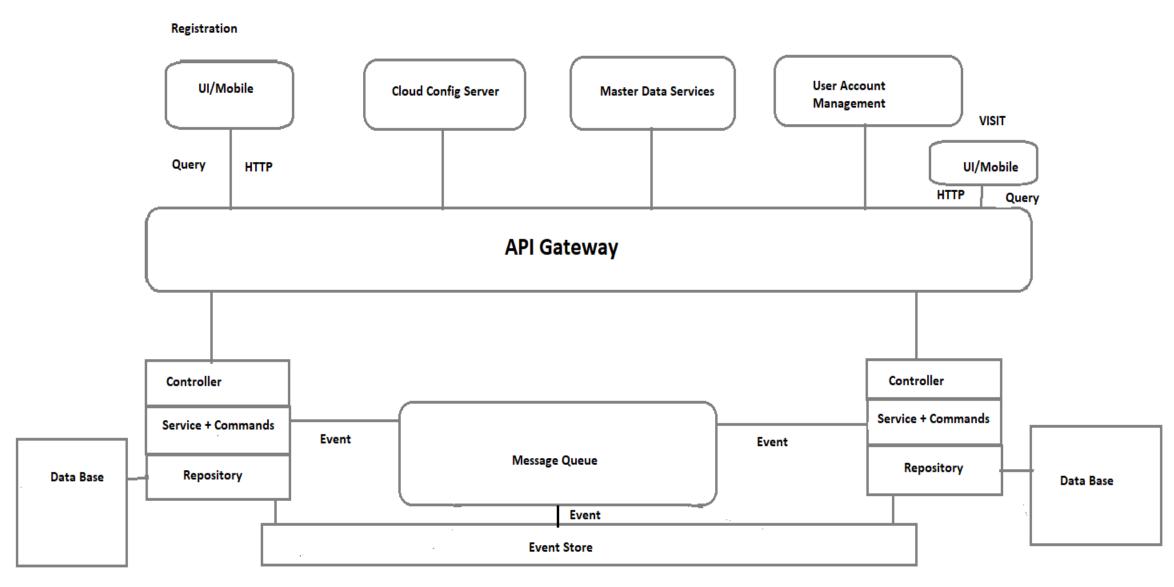






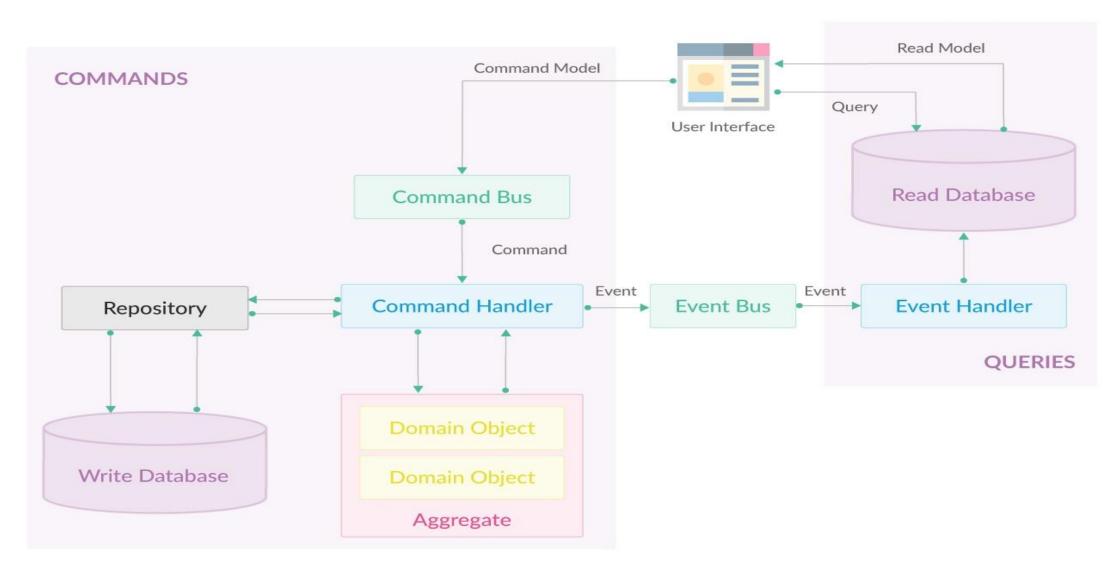






## **Microservices with Axon Network**

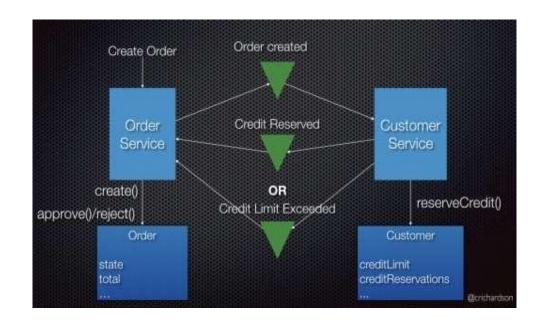




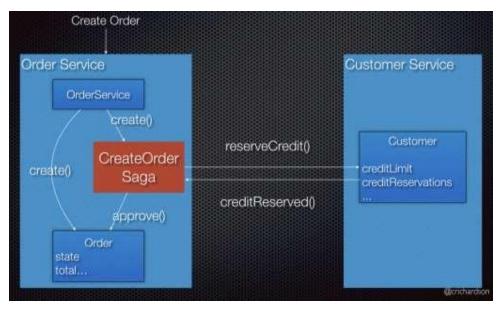
# **Microservices Coordination – Choreography Vs Orchestration**



#### **CHOREOGRAPHY**

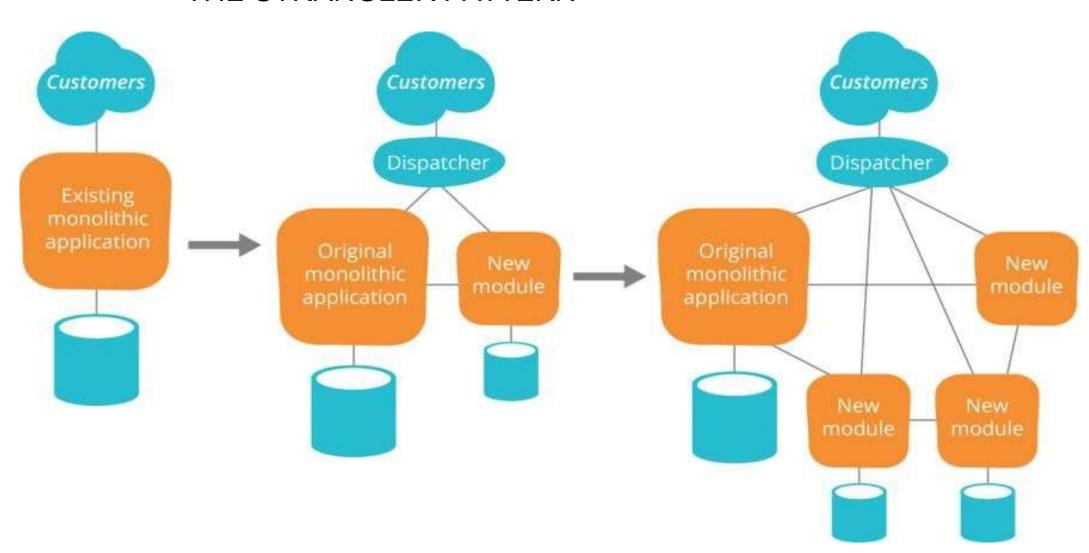


#### **ORCHESTRATION**





### THE STRANGLER PATTERN





# **Patient Registration Microservice**

**Business Entities** 

Person

**Patient** 

**Source of Payment** 

**Facility** 

Care provider

**Business Concerns** 

**Walk in Patient Registration** 

**Registration on Patient Portal** 

**Update Registration** 

**Link PHID with Hospital Registration Number** 

**Bulk Registrations** 

Merge Patient
Insurance Patient Registration

User
 Authentication
 service

 Registration service

 PHID Registry Lookup Service

Billing Service

 Update Patient Service Responsibility: Authenticates user and assigns system functionality based on Roles and Permissions

Owns: User database

Responsibility: Manages Registration Processes Owns: Patient Database

Responsibility: Looks up PHID from Person Health registry

Triggers: Patient event store

Responsibility: Manages Insurance Patient Registration

Owns – Billing database, Triggers – Bill Payment event store

Responsibility: Updates Patient

Owns - Patient database, Triggers - Patient event store

Merge/UnMerge Patient Service

Responsibility: Merges/Unmerges Patient

Triggers – Patient event store



# **Patient Registration Microservice**

#### **Commands**

CreatePatientCommand
UpdatePatientCommand
MergePatientCommand
UnMergePatientComman
d
LinkPHIDWithFacilityRegi
strationCommand

#### **Events**

PatientCreatedEvent PatientUpdatedEvent PatientMergedEvent PHIDCreatedEvent etc.

#### Queries

getPatientByCareProvide r getPatientBased



#### **Visit Microservice**

#### **Commands:**

CreatePatientEncounterCom mand **UpdatePatientEncounterCo** mmand **ActivatePatientEncounterCo** mmand DeactivatePatientEncounter **Command PatientEncounterVisitCancella** tionCommand CreateEpisodeCommand ActivateEpisodeCommand **UpdateEpisodeCommand** DeactivateEpisodeCommand

#### **Events**

PatientEncounterCreatedEve nt
PatientEncounterUpdatedEv ent
PatientEncounterActivatedE vent
PatientEncounterDeactivate dCommand
VisitCancellationEvent
EpisodeCreatedEvent
EpisodeUpdatedEvent
EpisodeDeactivatedEvent

#### Queries

**GetPatientEncounterByuniq** ueHealthIdentificationNumb getAllPatientActiveEncou nters getAllPatientDeactivatedEnco unters getPatientEpisodeByuniqueHe althIdentificationNumber getAllPatientActiveEpisodes getAllPatientDeactivatedEpiso des getPatientCohortGroupsByDis easeCode

# **Microservices Architecture Ecosystem**



- Business Microservices
- API Gateway
- Discovery Server
- Configuration Server
- Identity Management Server
- Authentication Server
- Logs Aggregator Server
- Logs Analyzer
- Admin Server
- Databases
- Message Queues
- Load Balancers
- Reverse Proxies

# **Microservices Architecture – Technology Framework**

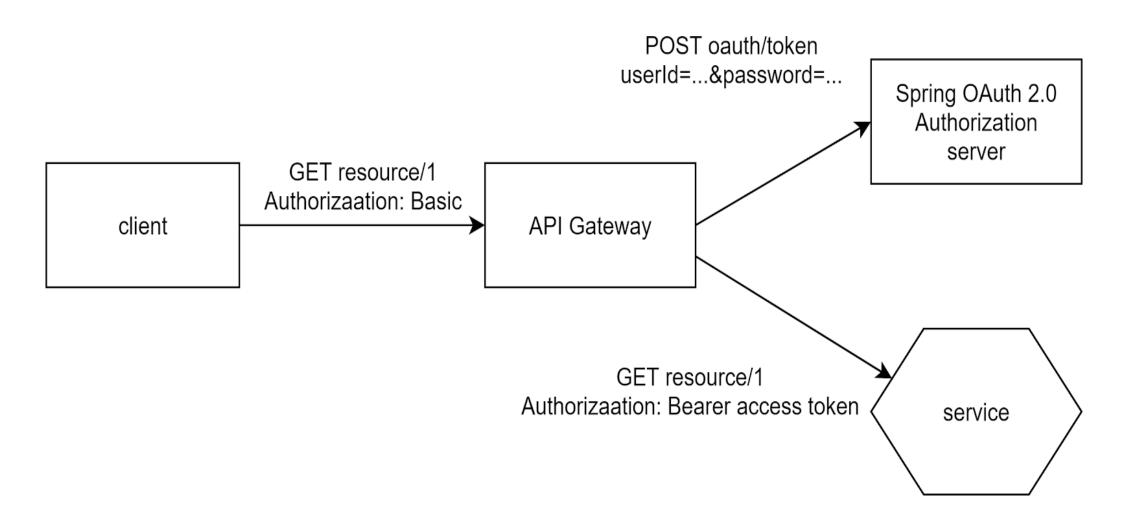


#### Technologies, frameworks ...

Netflix Ribbon	Used to implement client side load balancing.	Spring cloud config service	Used to provide centralized configuration for all microservices
ELK	Used to provide centralized logging in microservices architecture	Zuul Gateway	Used to provide public API routing
Sleuth	Used to provide corelation id between inter- microservice comunication	Sidecar Proxy	Infrastructure components
Consul	Discovery service from Hashicorp with Spring Cloud support.	Docker	Container Management
Hystrix	Communication resilience wrapper from Netflix provides impl. for circuit breaker, timeout, bulkheads, fallback, etc.	Kubernetes	Container Cluster Management
Resilience4J	Communication resilience wrapper library that provides impl for various resilient patterns including circuit breaker, bulkheads, etc.	Axon Framework	CQRS Event Sourcing Framework
OpenFeign	A HTTP client from Netflix that provides client side load balancing, and can work with Hystrix.	Apache Kafka	Message Broker
Apach e HTTPClien t	A HTTP client from Netflix that provides support for basic resilience patterns like timeouts, retrys, etc.		

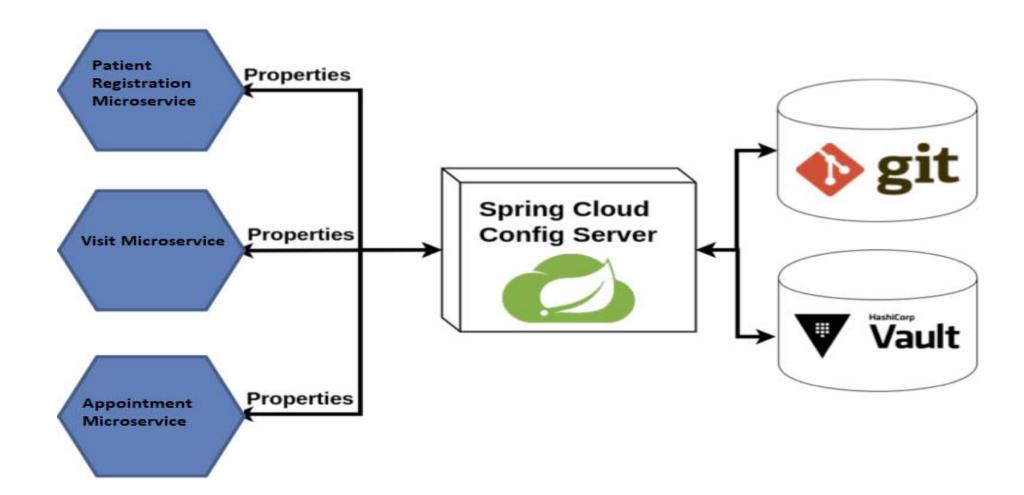
# **APIGateway (Edge Server)**



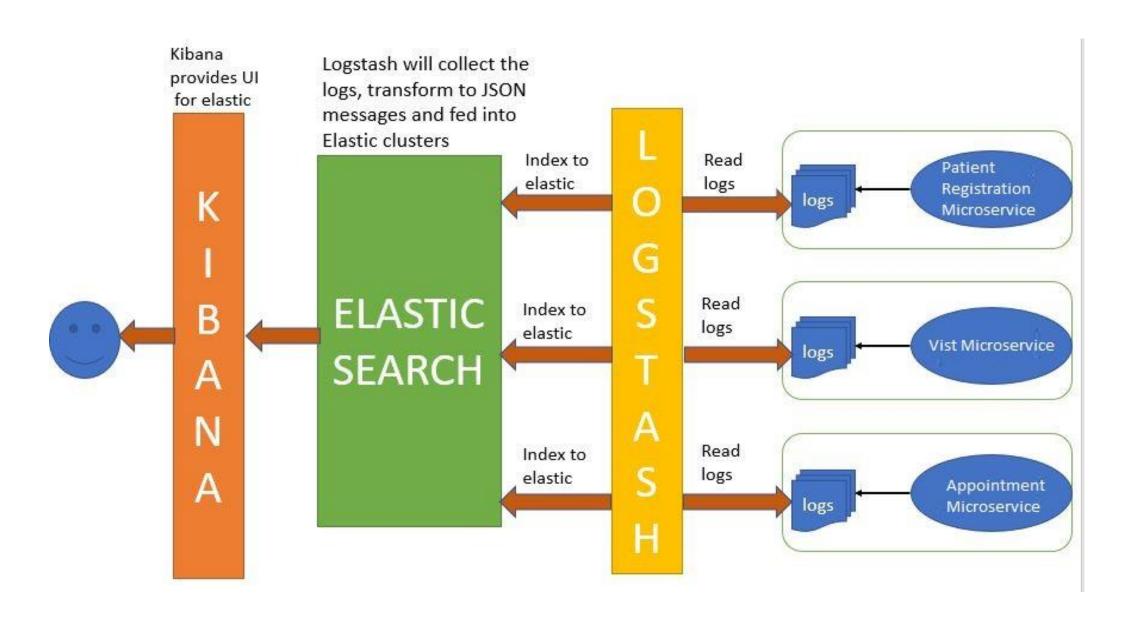


# **Cloud Config Server for Externalizing the boot configurations**



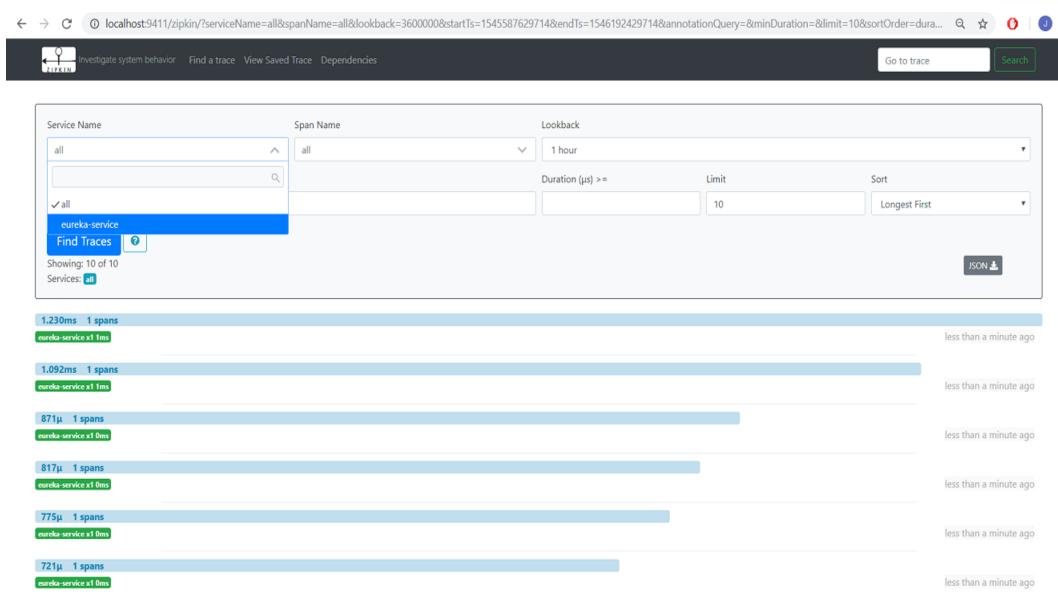






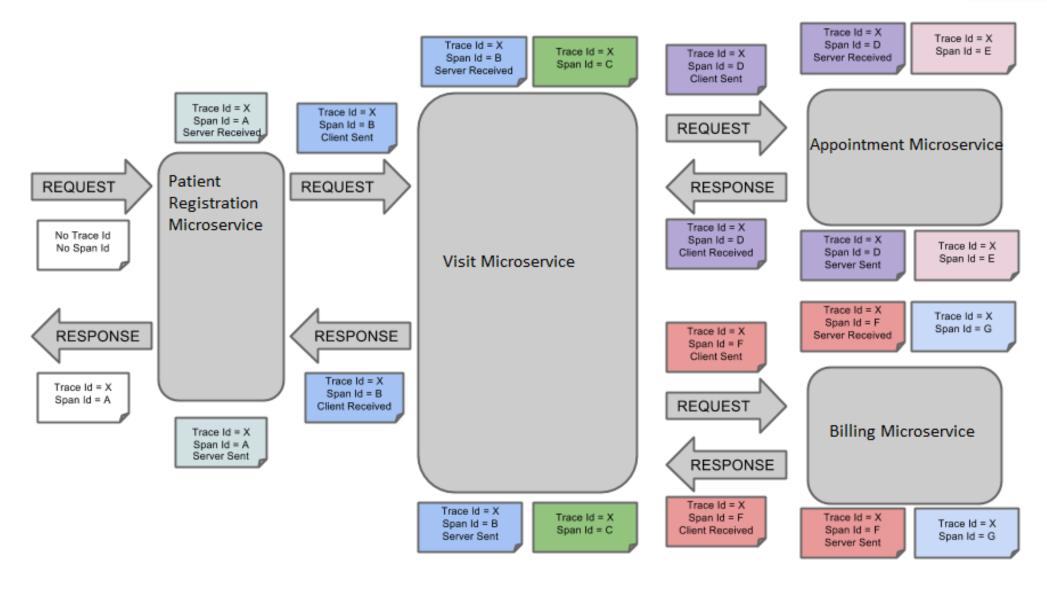
# **Zipkin (TraceID Admin Panel)**





### **Sleuth Trace And Span Id Management**





# **THANKS!**

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### NDHB & Digital Health Regulatory Updates (Detailed)



- ✓ MAY 17 2020 NATIONAL DIGITAL HEALTH MISSION TO be LAUNCHED <a href="https://ehealth.eletsonline.com/2020/05/national-digital-health-mission-to-be-launched-major-announcements-by-sitharaman/?fbclid=lwAR0WBxJz-xNUDO0E7gjhkOYw\_zQzVjaBEe1Dl2kEv8g09UkHvzYoOnqM4X8</a>
- The Ministry of Health & Family Welfare released the report on National Digital Health Blueprint (NDHB) on 15th July 2019- <a href="https://www.jagranjosh.com/current-affairs/national-digital-health-blueprint-released-by-health-minister-harsh-vardhan-1563269295-1">https://www.jagranjosh.com/current-affairs/national-digital-health-blueprint-released-by-health-minister-harsh-vardhan-1563269295-1</a>
- ✓ Personal Data Protection Bill draft was submitted by Srikrishna Committee in 2018. The **Bill** was approved by the cabinet ministry of India on 4 December **2019** as the **Personal Data Protection Bill 2019** and tabled in the Lok Sabha on 11 December **2019** and is under review by the Standing Committee.

  http://164.100.47.4/BillsTexts/LSBillTexts/Asintroduced/373\_2019\_LS\_Eng.pdf
- ✓ <u>Medical Devices- A Perspective & The Medical Devices (Amendment) Rules, 2020</u>- Before any rules were notified for medical devices, they were being governed solely by the dated and redundant Drugs and Cosmetics Act, 1940 with no specific provisions or aspects pertaining to the regulation of medical devices in India.
- ✓ 25th March 2020- Telemedicine guidelines <a href="https://www.mohfw.gov.in/pdf/Telemedicine.pdf">https://www.mohfw.gov.in/pdf/Telemedicine.pdf</a>
- ✓ Electronic consent framework-technical specifications http://dla.gov.in/sites/default/files/pdf/MeitY-Consent-Tech-Framework%20v1.1.pdf
- ✓ Aarogya setu data processing protocols and punishment on violation of guidelines (data sharing) <u>Aarogya-setu-data-access-and-knowledge-sharing-protocol-2020</u>
- ✓ Health database- <a href="https://www.livemint.com/science/health/covid-19-india-to-maintain-interoperable-health-registry-of-citizens-11590934227117.html">https://www.livemint.com/science/health/covid-19-india-to-maintain-interoperable-health-registry-of-citizens-11590934227117.html</a>
- ✓ Medical insurance for workers made mandatory- <a href="https://www.timesnownews.com/business-economy/personal-finance/insurance/article/post-lockdown-medical-insurance-for-workers-made-mandatory/583022?fbclid=lwAR2\_uunMvZ4NCdsIRMjkbnwk7r472lipW\_cCkJGOz7\_NGanBWQuV8jJo0l4</a>
- ✓ Clinical Establishment Amendment Rules 2020 http://clinicalestablishments.gov.in/En/1062-notifications.aspx
- ✓ COVID19 updates in standards (NRCES) <a href="https://www.nrces.in/news">https://www.nrces.in/news</a>
- ✓ Arogya Setu, open source code <a href="https://pib.gov.in/PressReleasePage.aspx?PRID=1626979">https://pib.gov.in/PressReleasePage.aspx?PRID=1626979</a>
- ✓ Standing Finance Committee approves NDHM <a href="https://ehealth.eletsonline.com/2020/06/govt-set-to-implement-national-digital-health-blueprint-standing-committee-okays-proposal/?fbclid=lwAR17slGFZQwyl94Er9GjoEvFlZlEbsJHYSGPsQ6SLu91mPXb84\_r5yU9j3E</a>
- ✓ COVID Bio Repositories (ICMR) <a href="https://www.icmr.gov.in/cbiorn.html">https://www.icmr.gov.in/cbiorn.html</a>

# **Digital Health | Access Health Digital's Contribution**



- eObjects were first written by Prof Dennis Streveler and Dr Pankaj Gupta in a white paper in Nov 2018 that was published by Niti Aayog in the book Health Systems for New India, Chapter 5 Reimagining India's Digital Health Landscape Wiring the Indian Health Sector in Nov 2019.
- ❖ The eObjects have now been adopted by Joint working Group of National Health Authority NHA and Insurance Regulatory Development Authority IRDAI Subgroup on common IT infrastructure, in its report published on 11 Sep 2019 and will be built into the India's national Health Claims platform.
- Vision Document on Data & Insights Hub at AB-PMJAY was articulated and published for National Health authority.
- AHD NHA partnership for folding AHD's SEA program into NHA's Health Innovation Program. This will enable all current SEA members to be immediately supported in their efforts by the Government of India through NHA's Market Access Program.
- National Registries Concept Note- Published Concept Notes on various NDHB recommended National Registries- Facility Registry, Health worker Registry, Drug Index and Doctor's registry in open source to provide techno-functional roadmap to develop these registries in India.
- \* OpenBodhik.in- Open Body of Digital Health Insights and Knowledge, is an Opensource digital health community run by ACCESS Health Digital [AHD]. Open source community created to foster a culture of contribution, collaboration and innovation in digital healthcare as a key component of nation building. The objective is to move India towards digital health democracy, freedom and global leadership. Initial NDHB standards and building block based digital health assets, have been made available to all through volunteer and SEA member contributions.