

Faculty of Science and Engineering

Department of Computing

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Assignment Two

Gino Sunny, 47814403

COMP8760: Enterprise Application Integration

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1. Introduction

As the worldwide population grows older, the use of AI technology has become more crucial in tackling the distinct challenges that the elderly encounter. With this intent, AWCare aims to provide online urgent care for the elderly by integrating AIACare's AI technologies to enhance the healthcare experience for seniors. The report's primary goal is to outline the redesign of the AS-IS process, incorporating AIACare's AI technologies and addressing potential integration challenges. It contains a comprehensive analysis of the AS-IS process, identification of suitable AIACare products/services for integration, potential integration issues, the design of a proposed TO-BE process model and process performance measures analysis.

2. AS-IS Process Model

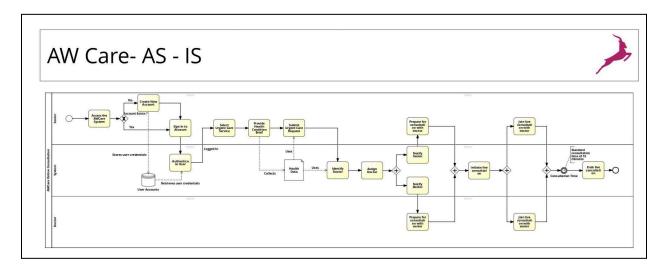


Figure 1: AS-IS Model

3. Identification of AI Technologies

To enhance the AS-IS process for AWCare, integrating AI technologies can address the challenges due to ageing such as hearing loss, speaking difficulty, and visual impairment (Ageing and health, 2022) during online interaction with the doctor. Research (Reddy, 2024) suggests that AI with the use of intelligent decision-making and automated systems has the potential to transform healthcare.

3.1 Enhanced Speech-to-Text and Text-to-Speech Services

3.1.1 Real-Time Subtitling

For those with hearing impairments, AIACare's AI-powered speech-to-text services via AIACare's NLP Engine can provide real-time subtitles (Martin, 2024) of what the doctor is saying during consultations.

3.1.2 Text-to-Speech for Patient Responses

Elderly patients who have difficulty speaking or prefer writing their responses can use AIACare's text-to-speech service via AIACare's NLP Engine to convert their typed words into natural language for the doctor to hear during consultations (Oyucu, 2023).

3.2 AI-Powered Visual Aids

For those with visual impairments, AI-powered visual aids (LLORCA et al., 2023) and visual assistance services via AIACare's Intelligent Reader help to magnify the doctor's image, adjust colors or contrast, identify things and read subtitles shown during the consultation.

4. Potential Application Integration Issues

To support the on-demand specific needs of individual seniors, AWCare, with AIACare being its AI supplier must address several potential application integration issues.

4.1 Real-Time Data Exchange and Processing

Challenge: Facilitating real-time or near-real-time data exchange to meet the on-demand needs of seniors.

Solution: Technologies that reduce latency in communication such as leveraging modern web services or API-based integrations, can enhance the responsiveness of services offered by AWCare through AIACare.

4.2 Scalability and Adaptability

Challenge: Scaling the integration solution to accommodate increasing users as AWCare expands its services and customer base.

Solution: As the demand for elderly care services grows, the system should handle a higher volume of users & transactions without degradation in performance. Researchers (Al-Said Ahmad and Andras, 2019) identified that this may require scalable cloud solutions or dynamic allocation of resources.

4.3 Security and Privacy

Challenge: Maintaining the confidentiality, integrity, and availability of seniors' health and personal information during data transmission between AWCare and AIACare.

Solution: Given the sensitive nature of healthcare data, robust encryption and secure communication channels (e.g., using AS2 protocols for secure data transport (Hasan and Ali, 2019)) are essential.

4.4 Interoperability and Standards Compliance

Challenge: Ensuring seamless data exchange between AWCare's and AIACare's systems, using different EDI standards or message formats (HL7 for healthcare).

Solution: AWCare must guarantee that seniors' healthcare data is accurately and efficiently exchanged with AIACare. This includes compatibility with healthcare-specific protocols like HL7 for transmitting patient data securely and effectively (Lubamba and Bagula, 2017).

5. TO-BE Process Model

The To-Be model of the AWCare system is proposed with enhancements from AIACare's products and services to address the challenges faced during online interaction. The steps related to AI, provided by AIACare, are clearly defined as follows: The new tasks are highlighted in blue.

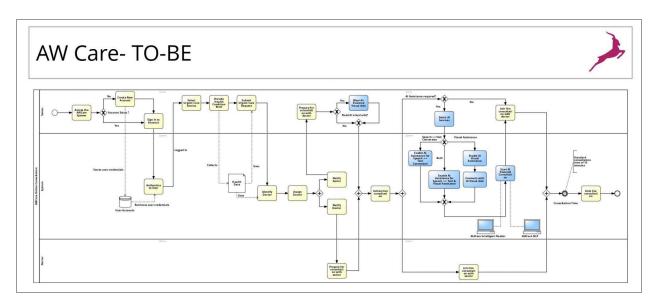


Figure 2: TO-BE Model

1. Visual Impairment Check

When a senior with potential visual impairment access the service, the system prompts them to determine if AI visual aids are needed.

2. AI Hearing Aid Placement

If visual assistance is required, the senior is instructed to use an AI hearing aid, which is integrated with the visual assistance feature of the system.

3. AI Service Selection During Consultation

At the start of a real-time consultation, the user is presented with options to enable AI support. They can choose speech-to-text conversion, visual assistance, or both.

4. Activation of AIACare Features

Based on the user's choice, AIACare's corresponding functionalities—speech recognition for converting spoken words into text, and visual aids for assisting with visual impairments are activated.

5. Live Consultation with AI Enhancement

The user then enters a live consultation session. This session is augmented with AIACare technologies, specifically:

• AIACare Intelligent Reader:

This system assists by interpreting visual information, helping visually impaired seniors to understand visual cues.

AIACare NLP:

The Natural Language Processing feature aids in comprehending and processing spoken language, making the consultation more accessible for users with hearing impairments.

6. Process Performance Measures Analysis

This section evaluates the To-Be process model for AWCare by analyzing it through various performance dimensions such as time, cost, quality, and flexibility using Process Performance Measures. The model is simulated in the Signavio Process Manager Tool for the two scenarios.

Assumptions:

Simulation duration for both cases = 1 day.

Cost, Duration, Frequency and Resource values are randomly given for simplicity and analysis.

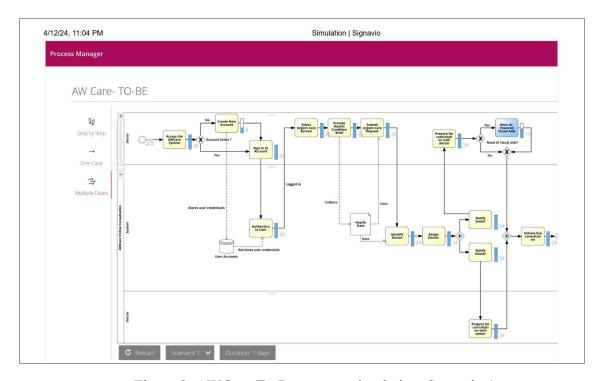


Figure 3: AWCare To-Be process simulation, Scenario 1

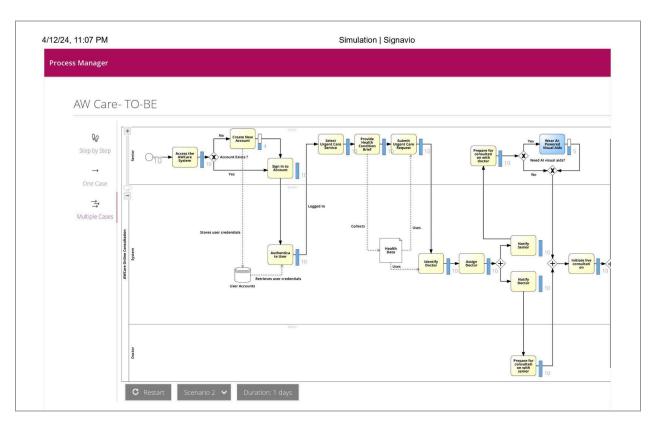


Figure 4: AWCare To-Be process simulation, Scenario 1

- Scenario 1

Daily frequency of the process = 25

Below are the process parameters for the Scenario 1 simulation.

| Costs and Duration | | Execution time |
|--|----------------------------------|----------------|
| Task | Execution costs | |
| Access the AWCare System | 11.00 | |
| Create New Account | 11.00 | 00h 05i |
| Sign In to Account | 11.00 | 00h 02i |
| Authenticate User | 11.00 | 00h 00m 15 |
| Select Urgent Care Service | 11.00 | 00h 00m 10 |
| Provide Health Condition Brief | 11.00 | 00h 05 |
| Submit Urgent Care Request | 11.00 | 00h 00m 10 |
| Identify Doctor | 11.00 | 00h 00m 05 |
| Assign Doctor | 11.00 | 00h 00m 05 |
| Notify Senior | 11.00 | 00h 00m 02 |
| Prepare for consultation with doctor | 11.00 | 00h01 |
| Wear Al-Powered Visual Aids | 11.00 | |
| Notify Doctor | 11.00 | |
| Prepare for consultation with senior | 11.00 | |
| Initiate live consultation | 11.00 | |
| Select Al Services | 11.00 | |
| Enable Al Visual Assistance | 11.00 | |
| Connects with Al Visual Aids | 11.00 | |
| Enable Al Assistance for Speech <-> Text Conversion | 11.00 | |
| | | |
| Enable Al Assistance for Speech <-> Text & Visual Assistance | 11.00 | |
| Start Al Powered Consultation | 11.00 | |
| Join live consultation with doctor | 11.00 | |
| Join live consultation with senior | 11.00 | 00h 00m 10 |
| Frequency and probabilities | | |
| Start event | Frequency | |
| Start event | On Mon; overall 25 times | |
| Gateway | Decision | Probability |
| Account Exists? | No | 40.00 |
| | Yes | 60.00 |
| Need Al visual aids? | No | 30.00 |
| | Yes | 70.00 |
| Al Assistance required? | No | 30.00 |
| | Yes | 70.00 |
| Gateway | Visual Assistance | 40.00 |
| Both | | 20.00 |
| | Speech <->Text Conversion | 40.00 |
| Resources | · | |
| Role | ₩ork schedules | Costs/hour |
| Doctor | 10 employees; 400 hours per week | 175.0 |
| Senior | 10 employees; 80 hours per week | 10.0 |
| System | 1 employees; 8 hours per week | 1100.0 |

Figure 5: Process parameters used for Scenario 1 simulation.

- Scenario 2

Daily frequency of the process = 10.

Below are the process parameters for the Scenario 2 simulation.

| Costs and Duration | | |
|---|----------------------------------|----------------|
| Task | Execution costs | Execution time |
| Access the AWCare System | 11.00 | |
| Create New Account | 11.00 | |
| Sign In to Account | 11.00 | |
| Authenticate User | 11.00 | |
| Select Urgent Care Service | 11.00 | |
| Provide Health Condition Brief | 11.00 | |
| Submit Urgent Care Request | 11.00 | |
| dentify Doctor | 11.00 | |
| Assign Doctor | 11.00 | |
| Notify Senior | 11.00 | |
| Prepare for consultation with doctor | 11.00 | |
| Wear Al-Powered Visual Aids | 11.00 | |
| Notify Doctor | 11.00 | |
| Prepare for consultation with senior | 11.00 | |
| nitiate live consultation | 11.00 | 00h 00m |
| Select Al Services | 11.00 | 00h 00m |
| Enable Al Visual Assistance | 11.00 | 00h 00m |
| Connects with Al Visual Aids | 11.00 | 00h 00m |
| Enable Al Assistance for Speech <-> Text Conversion | 11.00 | 00h 00m |
| Enable Al Assistance for Speech <-> Text & Visual | 11.00 | |
| Start Al Powered Consultation | 11.00 | |
| Join live consultation with doctor | 11.00 | |
| Join live consultation with senior | 11.00 | 00h 00m |
| Ends live consultation | 11.00 | 00h1 |
| Frequency and probabilities | | |
| Start event | Frequency | |
| Start event | On Mon; overall 10 times | |
| Gateway | Decision | Probability |
| Account Exists ? | No | 40.0 |
| | Yes | 60.0 |
| Need Al visual aids? | No | 30.0 |
| | Yes | 70.0 |
| Al Assistance required? | No | 30.0 |
| | Yes | 70.0 |
| Gateway | Visual Assistance | 40.0 |
| | Both | 20.0 |
| | Speech <-> Text Conversion | 40.0 |
| Resources | | |
| Role | Work schedules | Costs/hour |
| Doctor | 10 employees; 400 hours per week | 175. |
| Senior | 10 employees; 80 hours per week | 10. |
| Sustem | 1 employees; 8 hours per week | 1100. |

Figure 6: Process parameters used for Scenario 2 simulation

1. Cycle Time

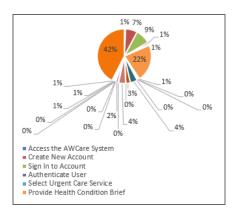
The figure below displays the duration of a process instance, measured from its start to its completion:

| | Used scenario | Duration in days | Average | Minimum | Maximum | Total cycle time |
|---|---------------|------------------|------------|------------|------------|---------------------|
| | Scenario 2 | 1 | 0h:32m 09s | 0h:29m 56s | 0h:35m 12s | 5h:21m 32s |
| | Scenario 1 | 1 | 0h:37m 15s | 0h:30m 54s | 0h:43m 15s | 14h:17m 06s |
| П | | | | | | |

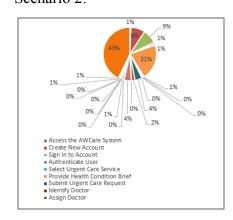
Figure 7: Cycle Time for Scenario 2 & 1

Time charts

Scenario 1:



Scenario 2:



2. Cost

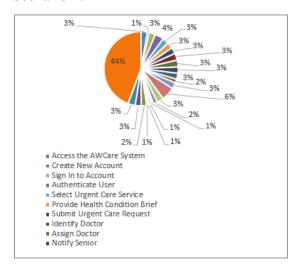
The table below presents the execution costs of a process instance, which include both fixed activity costs and resource costs, along with the total sum of all costs.:

| Used scenario | Duration in days | Average | Minimum | Maximu m | Total costs |
|---------------|------------------|---------|---------|-------------|----------------|
| Scenario 2 | 1 | € 38.10 | € 37.07 | | € 380.97 |
| Scenario 1 | 1 | € 38.63 | € 37.07 | € 40.68 | € 920.03 |
| | | | | | |

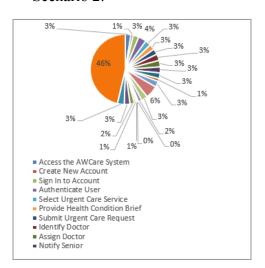
Figure 8: Costs for Scenario 2 & 1

Total cost charts:

Scenario 1:



Scenario 2:



3. Resource Consumption

The table below displays the workload of all resources involved in executing activities in your scenario:

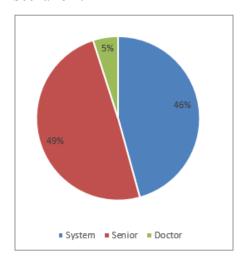
| Used scenario | Duration in | Consumed | Worklo |
|---------------|---|--|---|
| | days | time | ad |
| Scenario 2 | 1 | 1h:47m 02s | 22.91% |
| Scenario 1 | 1 | 4h:18m 25s | 53.84% |
| Scenario 2 | 1 | 1h:54m 40s | 2.45% |
| Scenario 1 | 1 | 4h:39m 00s | 5.81% |
| Scenario 2 | 1 | 0h:11m 40s | 0.25% |
| Scenario 1 | 1 | 0h:28m 00s | 0.58% |
| | Scenario 1 Scenario 2 Scenario 1 Scenario 2 | Scenario 2 1 Scenario 1 1 Scenario 2 1 Scenario 1 1 Scenario 2 1 | Scenario 2 1 1h:47m 02s Scenario 1 1 4h:18m 25s Scenario 2 1 1h:54m 40s Scenario 1 1 4h:39m 00s Scenario 2 1 0h:11m 40s |

Figure 9: Resource Consumption for Scenario 2 & 1

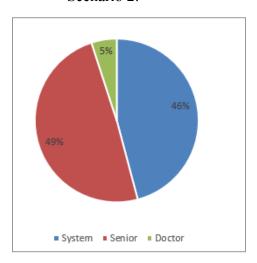
| Legend | Legend | | | |
|--|---------------------|--|--|--|
| All values are relative to the highest value | | | | |
| Latest run | Previous run | | | |
| 100% | 100% | | | |
| >87.5% | >87.5% | | | |
| >75% | >75% | | | |
| >62.5% | >62.5% | | | |
| >50% | >50% | | | |
| <=50% or smallest | <=50% or smallest → | | | |

Resource Consumption Charts:

Scenario 1:



Scenario 2:



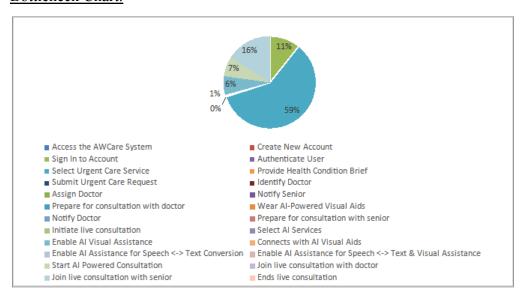
4. Bottlenecks

The following table illustrates the activities that experienced delays in a process instance due to resource shortages, occurring when an activity was ready for execution but all resources were already allocated:

| Resources | Task | Used scenario | Duration in days | Total waiting time | Instances waiting at termination |
|------------------------|---------------------------------|------------------|---------------------|-----------------------|--|
| System | Notify Senior | Scenario 2 | | 0h:00m 00s | 0 |
| | | Scenario 1 | | 0h:00m 00s | 0 |
| | Ends live consultation | Scenario 2 |] | 0h:00m 00s | 0 |
| | | Scenario 1 | 1 | 0h:15m 24s | 0 |
| | Identify Doctor | Scenario 2 | 1 | 0h:00m 00s | 0 |
| | | Scenario 1 | 1 | 1h:25m 30s | 1 |
| | Notify Doctor | Scenario 2 | 1 | 0h:00m 20s | 0 |
| | | Scenario 1 | 1 | 0h:00m 48s | 0 |
| | | Scenario 2 | 1 | 0h:00m 00s | 0 |
| | for Speech <-> Text & | Scenario 1 | 1 | 0h:00m 00s | 0 |
| | Start AI Powered | Scenario 2 | 1 | 0h:00m 00s | 0 |
| | Consultation | Scenario 1 | 1 | 0h:00m 00s | 0 |
| | Enable AI Visual | Scenario 2 | 1 | 0h:00m 00s | 0 |
| | Assistance | Scenario 1 | 1 | 0h:00m 00s | 0 |
| | Connects with AI Visual Aids | Scenario 2 | 1 | 0h:00m 00s | 0 |
| | | Scenario 1 | 1 | 0h:00m 00s | 0 |
| | Initiate live | Scenario 2 | 1 | 0h:00m 00s | 0 |
| | | Scenario 1 | 1 | 0h:09m 18s | 0 |
| | | Scenario 2 | 1 | 0h:00m 00s | 0 |
| | | Scenario 1 | 1 | 0h:00m 00s | 0 |
| | | 0h:00m 00s | 0 | | |
| | | Scenario 1 | | 0h:10m 00s | 0 |
| Authenticate User Scen | Scenario 2 | 1 | 0h:00m 00s | 0 | |
| | | Scenario 1 | 1 | 0h:22m 55s | 0 |
| | | | | | |
| Legend | | | | | |
| All values are rela | tive to the highest value | | | | |
| Latest run | Previous run | | | | |
| 100% | 100% | | | | |
| >87.5% | >87.5% | | | | |
| >75% | >75% | | | | |
| >62.5% | >62.5% | | | | |
| >50% | >50% | | | | |
| <=50% or smalles | st •<=50% or smallest • | | | | |

Figure 10: Bottlenecks in the process simulation

Bottleneck Chart:



7. Conclusion

Studies suggest that (Amjad et al., 2023), AI in healthcare is crucial for enabling doctors to make real-time, data-driven decisions, thereby improving patient experiences and health outcomes. The report on integrating AIACare's technologies in AWCare's healthcare services for the elderly describes an exhaustive change in their current system. By incorporating advanced AI technology tools such as real-time subtitling, text-to-speech services, and visual aids, the As-Is process model aims to address specific challenges faced by seniors, such as hearing loss, speech difficulties, and visual impairments. The report pinpoints potential integration issues, including real-time data handling, scalability, and security, proposing solutions for each. Overall, the redesigned process promises to significantly improve the healthcare experience for elderly users by leveraging AI to meet their unique needs efficiently.

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