



World Class Standards

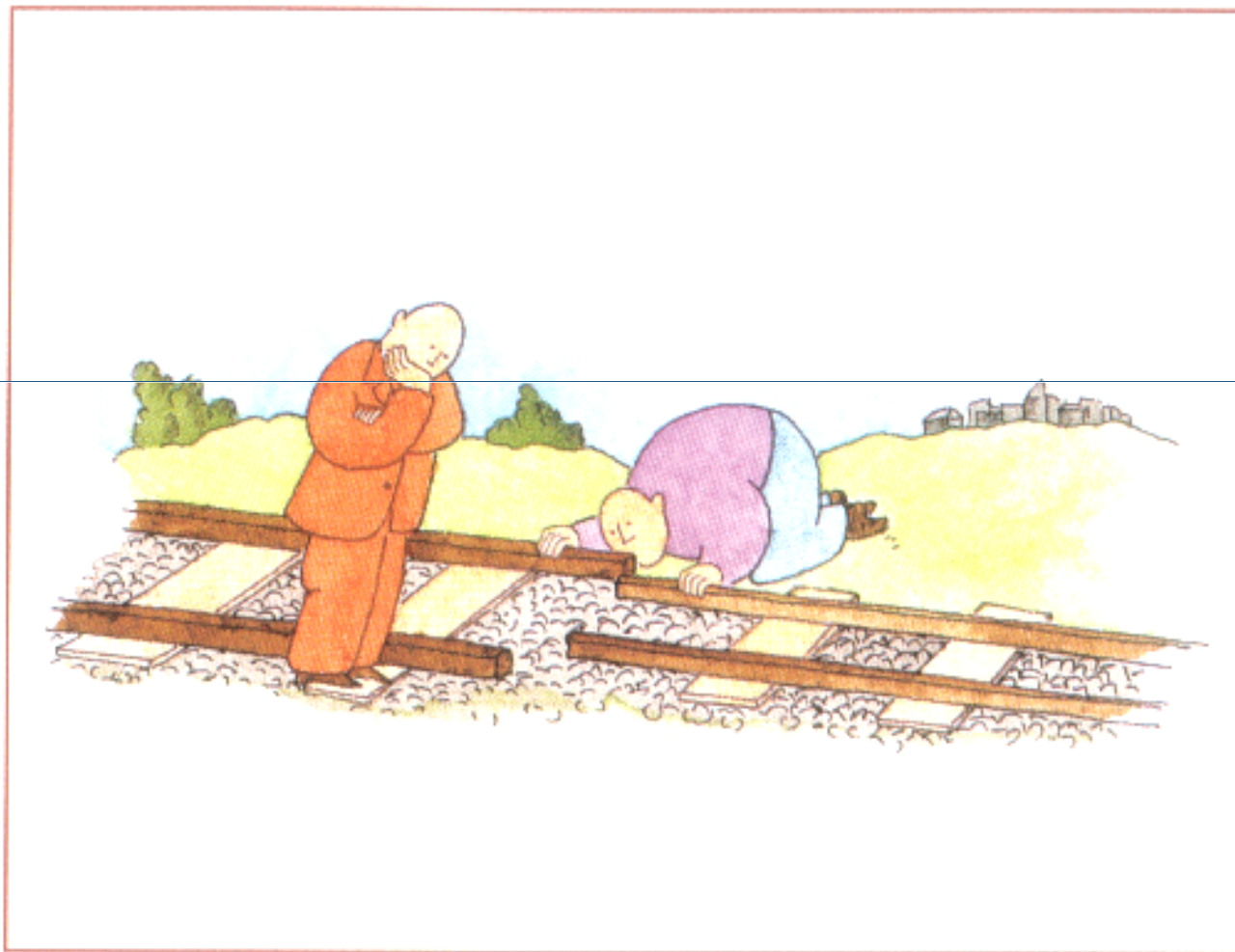
Personalized eHealth systems

Standardization work at ETSI

pHealth 2009 - The 6th international workshop on Wearable Micro and Nanosystems for Personalised Health in Oslo, Norway, 24-26 June 2009.

Francoise Petersen
APICA/ETSI Human Factors, eHealth
Francoise.Petersen@apica.com

Why standards?



What is an eHealth system?

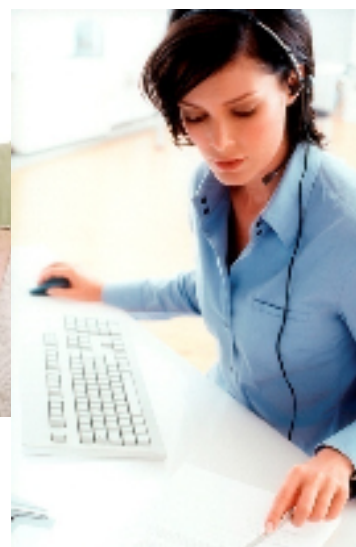
- ❑ eHealth systems include tools for
 - health authorities and professionals,
 - patients
 - formal and informal carers
- ❑ including the process of curative or preventative care, contributing thereby to the person's well-being.

eHealth system users can be very diverse



- ❑ Including such widely differing categories such as people with disabilities and very old or young people

Situations where eHealth services need to be delivered can be equally diverse



- Not just in locations within the healthcare system
- Not just at home
- Not just at work
- But wherever the client may be - at home or abroad

What can be personalized?

- ❑ **Standardizing personalization and the user experience of e-Health systems related to:**
 - **the degree of user control**
 - **user perception related parameters e.g. volume, colour**
 - **user input methods e.g. tactile, voice, keyboard/mouse, switches, eye-tracking**
- ❑ **Fine-grained control of the sharing of sensitive information**

Privacy settings should change if others are present!



The benefits of personalization

- ❑ A better user experience - in a range of situations
- ❑ Users can themselves tailor each system to their preferences
- ❑ Less user confusion, less risk of improper user handling, fewer errors
- ❑ Re-use of information and personalization parameters across e-Health systems

In summary:
Easier adoption of e-Health systems
More control of security/privacy issues

ETSI work on personalization and user profiles

- ❑ **EG 202 325 published 2005**
 - **Concept and guidelines**

- ❑ **ETSI Human Factors, Specialist Task Force – STF342**
 - **ETSI Standard (ES) on standardized information and preferences**
 - **ETSI Technical Specification (TS) on architectural framework**

- ❑ **ETSI Human Factors and eHealth, STF352**
 - **ETSI Standard (ES) on standardized information and preferences in the eHealth domain**

**Co-financed by the EC/EFTA in response to the
EC's ICT Standardisation Work Programme**

What can be in a user profile?

- personal information
 - extracts from the eHealth Record
 - preferences and depending on time, activity, role, location
-
- context information
 - rules
 - automatically activate a situation dependent profile that allows the eHealth services to be adapted to suit the current situation
 - specific security related obligations and preferences related to the above

Profile categories

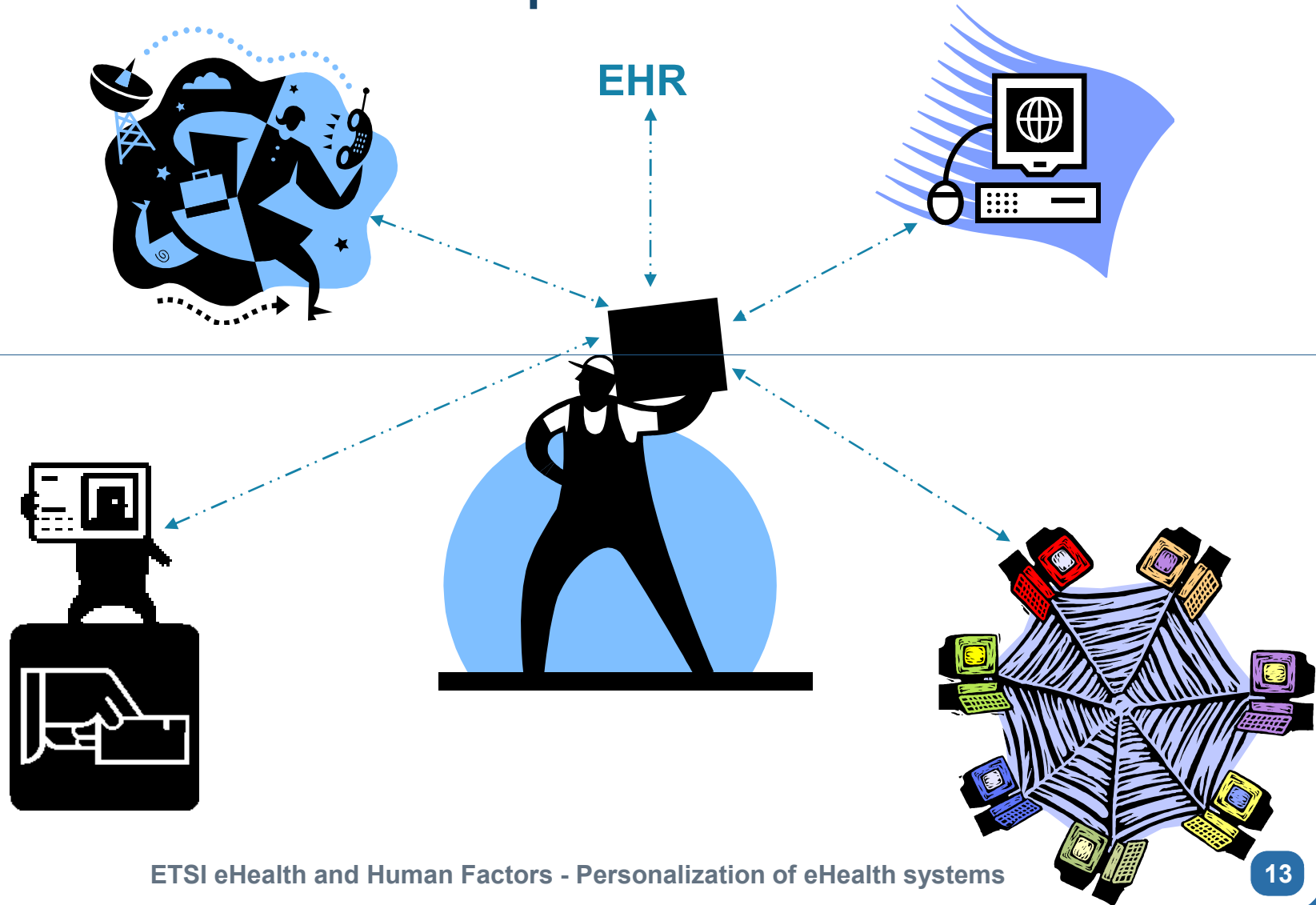
- Normal profile
- Situation profiles
 - e.g. “at the hospital”, “at home”, “at work”
 - automatically activated, or
 - manually activated
- Active profile



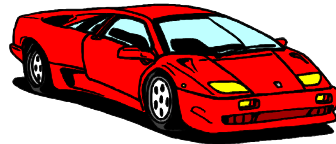
Strongly related to ETSI work on ID

- Current work on personalization emerged from previous ETSI work on a Universal Communications Identifier
- Also, ongoing ETSI work on Identity Management...

Where is the profile data located?



Sensors



- Sensors can be related to the person**
 - **What sensors are practical – e.g. anything worn might not be worn**
- Sensors can be related to the environment**
 - **What sensors are acceptable – e.g. video and privacy**
- Example: system to monitor activity in a home**
 - **Video is usually considered to be more invasive**
- Who can (not) access the data?**

Use of scenarios

- ❑ **MATCH project**
 - a collaboration among the Universities of Dundee, Edinburgh, Glasgow and Stirling (lead partner).
- ❑ **The project is exploring the role of technology in:**
 - maintaining the independence of those receiving social and health care at home
 - improving their quality of life
 - enhancing the care they receive at home
 - easing the burden on their carers.

<http://www.match-project.org.uk/main/main.html>

- ❑ **Others?**

Thank you! Information and communication

- ❑ **Web:** http://portal.etsi.org/stfs/STF_HomePages/STF352/STF352.asp
- ❑ **Email:** Francoise.Petersen@etsi.org



Do you want to:

- ❑ receive the newsletters from our STF (about once a month, or when relevant)?
- ❑ discuss personalization and user profiles with a wider group? If so welcome to use our mail list
STF352_CONSULTATION@LIST.ETSI.ORG
 - **Subscribe at:** http://list.etsi.org/STF352_CONSULTATION.html



World Class Standards

**More slides – just in case there is a
demand for it...**

What is ETSI?

- ❑ **ETSI, the European Telecommunication Standards Institute**
 - **active in all ICT areas**
 - **independent, non-profit, created in 1988**
 - **officially recognized and co-funded by the EU & EFTA**
 - **offering direct participation of all members**
 - **more than 15,000 publications → all available for free!**

Use of Scenarios - Example: Bert goes to the Bookies

□ Bert and his care issues

- 75 year old male living alone
- Route to bookies includes an underpass where dim light disorients him
- Concerned that the route is unsafe
- Concerned that because he has COPD (Chronic Obstructive Pulmonary Disease) and that he can't run from trouble in the underpass
- Smoker, and has been for 60 years

□ Those who care about Bert

- Jim, friend, living next door
- Alice, daughter, living an hour away
- Bert's doctor
- Bert's social worker

Privacy and profile related issues

- Bert
 - Navigation aid might help Bert to feel confident to go to Bookies
 - Self management strategy for giving up smoking and taking COPD drugs
- Jim, Bert's friend
 - Did Bert make it to the Bookies?
- Bert's social worker
 - Did Bert make it to the Bookies?
- Bert's doctor
 - Has Bert given up smoking?
 - Is he taking his medication?
- Alice, Bert's daughter
 - Has Bert given up smoking, if not he will be ineligible for medical care!

Other challenges

- ❑ **The client of an e-Health system may:**
 - **not be particularly computer literate**
 - **have a physical and/or mental impairment**
 - **mental impairment may compromise understanding of security implications**

- ❑ **Many of today's e-Health systems:**
 - **handle sensitive data that requires protective measures – a major privacy challenge**
 - **are tailored to a professional user**
 - **are difficult for a client to understand**
 - **are combined with other (e-Health) systems**
 - **may require special setup procedures**

Information sharing and privacy

- ❑ **Roles including:**
 - **client**
 - **carers – formal and informal**
 - **relatives**
- ❑ **As users become more aware of privacy issues, there is**
 - **an increasing need for user acceptance of personalized services**
 - **a demand for solutions allowing them to be in control of their profile content.**
- ❑ **If profile content is made available to the wrong people, then users will lose confidence.**
- ❑ **Too restricted access to profile content should be avoided,**
 - **as it may reduce the usability and the number of available services.**

Access to Electronic Health Record

- ❑ **General access safeguards**
 - “apart from the patient himself – only those healthcare professionals/ authorized personnel of healthcare institutions who presently are involved in the patient’s treatment may have access” (ref.)
- ❑ **Special access safeguards by involvement of the patient**
 - “If feasible and if possible” ... “the patient should be given the chance to prevent access to his EHR data if he so chooses”. (ref.)
- ❑ **Relevant also for the eHealth profile?**

Ref. see “Working Document on the processing of personal data relating to health” in electronic health records (EHR)”

Overview - Profile Agent components

