



ONC Privacy & Security Update: Data Provenance (DPROV) S&I Initiative

NCVHS Committee Meeting September 22, 2014

Julie Anne Chua, PMP, CAP, CISSP Information Security Specialist Office of the Chief Privacy Officer (OCPO)



Outline



- Definition of Provenance
- Issues and Challenges
- Initiative Goals, Intended Outcomes, and Approach
- Initiative Progress To-Date





The term "provenance" refers to attributes about the origin/source of health information at the time it is first created and tracks the uses and alterations of the health information over its lifecycle.

Data Provenance Issues we are trying to address (1 of 2)



Without knowing the provenance of data:

- Healthcare providers may not rely on, or use, information received
- The nation may not achieve the benefits of interoperability and health information exchange

^{*} These address the HIE three-part aim: better care, affordable care, and healthy people and communities

Data Provenance Issues (continued)



Why do we need data provenance standards?

- Health care providers need confidence in the authenticity and integrity of health data they review, access, or receive
- The ever expanding role of individuals to contribute data toward their health and care through the use of health IT
- Trends are moving away from documents and toward "atomizing" data

Data Provenance Challenge



Challenges

No authoritative specification, standard, or model for provenance within HIT

Variability in how HIEs, EHRs, and PHRs currently capture, retain, and display provenance





 Specific health interoperability initiatives guide the design and development of a fully integrated and connected health information system.



- An S&I Initiative focuses on a single challenge with a set of value-creating goals and outcomes, and the development of content, technical specifications and reusable tools and services.
- Call for Participation: The overall success of the S&I Framework is dependent upon volunteer experts from the healthcare industry

Data Provenance S&I Initiative Goals



- Improve the visibility of the source of, and alterations to, health information
- Improve the confidence healthcare stakeholders have in the authenticity, reliability, and trustworthiness of shared data
- Establish a standardized way for capturing, retaining, and exchanging the provenance of health information

Data Provenance Initiative Intended Outcomes



To achieve these goals, the community will create:

- Technical specifications to standardize data provenance:
 - At creation (i.e., point of origin);
 - When it is exchanged; and
 - When data is integrated across multiple health information systems
- Guidance for handling data provenance in content standards, including the level to which provenance should be applied
- A minimum set of provenance data elements and vocabulary

Data Provenance Initiative Approach: Phase 1



For Phase 1, we will tackle the following challenges:

- (1) When healthcare data is first created, what is the provenance information that should be **created and persisted**?
- (2) Can a receiving system **understand and trust** that provenance information?
- (3) Do we need to know who touched it along the way?
- (4) When the receiving system **combines** this information with data received from a third party, how do we **persist** the provenance from **multiple sources**?
- (5) When multi-sourced data is assembled and sent to another system, how do we **convey the provenance of the multiple data sources** as well as for the system doing the assembly?
 - Is this considered new data?
 - What if the assembling system "cherry picks" from multiple sources, or adds some new health information of its own?

Data Provenance S&I Initiative Progress



Phase	Planned Activities
Pre-Discovery	Development of Initiative Synopsis
	Development of Initiative Charter
	Definition of Goals & Initiative Outcomes
Discovery	 Creation/Validation of Use Cases, User Stories & Functional Requirements
	 Identification of interoperability gaps, barriers, obstacles and costs
	Review of Candidate Standards
Implementation	Creation of aligned specification
	 Documentation of relevant specifications and reference implementations
	such as guides, design documents, etc.
	 Development of testing tools and reference implementation tools
Pilot	Validation of aligned specifications, testing tools, and reference
	implementation tools
	Revision of documentation and tools
Evaluation	Measurement of initiative success against goals and outcomes
	 Identification of best practices and lessons learned from pilots for wider
	scale deployment
	 Identification of hard and soft policy tools that could be considered for
	wider scale deployments

11

Data Provenance S&I Initiative Progress To-Date



- Initiative Launch April 2014
- Achieved Consensus on Charter June 2014
- Working on Use Cases
 - End-to-End Review Comment Period ended on 9/18/14
- Supported the Data Provenance project in HL7:
 - HL7 Implementation Guide for CDA® Release 2: Data Provenance, Release 1 – September 2014 Ballot
- Worked with other HL7 workgroups on vocabulary harmonization

Data Provenance Participation and Wiki



- The ONC Data Provenance Initiative is open for anyone to join.
- We use Wiki pages to facilitate discussion.
 - Information on how to join the Community can be found on the Data Provenance Sign Up Wiki: http://wiki.siframework.org/Data+Provenance+Join+the+Initiative
 - Information on the Project Charter, Use Case, materials, meeting updates, and announcements can be found on the main initiative wiki page: http://wiki.siframework.org/Data+Provenance+Initiative
- In order to ensure the success of our initiative and the subsequent pilot(s), we encourage broad and diverse participation from the community.
- Join us at all-hands community meetings Every Thursday, from 2:30pm –
 3:30pm ET



BACK UP SLIDES





Pre-step: Creation of the data and associated provenance information

Data Source A (e.g. Medical Device, Lab, PHR, EHR, etc.)

(1) When healthcare data is first created, what is the provenance information that should be created and persisted?



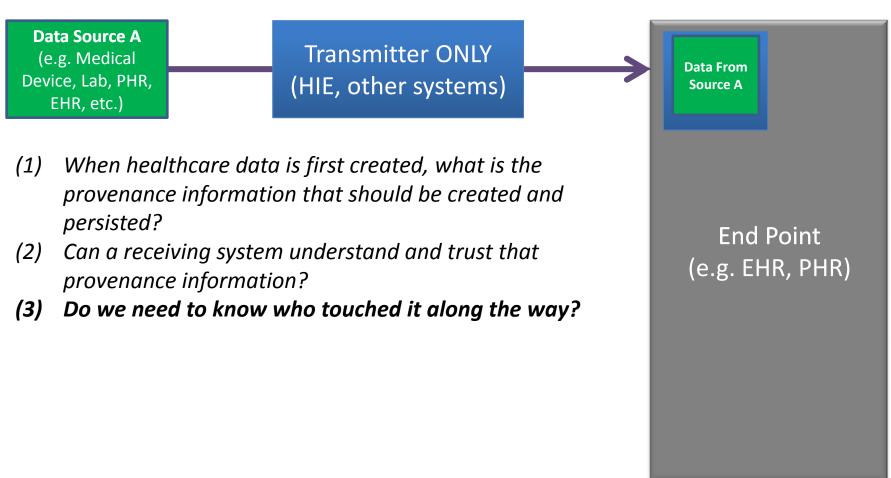


Pre-step: Creation of the data and associated provenance information

Data Source A (e.g. Medical **Data From** Device, Lab, PHR, Source A EHR, etc.) When healthcare data is first created, what is the (1) provenance information that should be created and persisted? **End Point** Can a receiving system understand and trust that (e.g. EHR, PHR) provenance information?

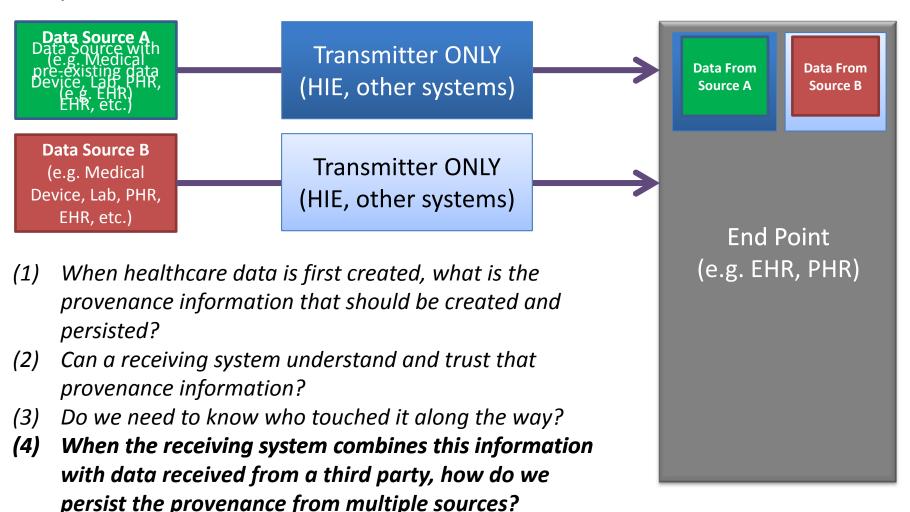






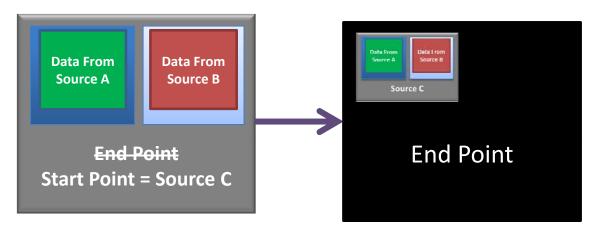










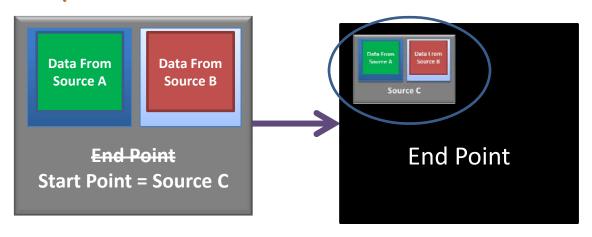


- (1) When healthcare data is first created, what is the provenance information that should be created and persisted?
- (2) Can a receiving system understand and trust that provenance information?
- (3) Do we need to know who touched it along the way?
- (4) When the receiving system combines this information with data received from a third party, how do we persist the provenance from multiple sources?
- (5) When multi-sourced data is assembled and sent to another system, how do we convey the provenance of the multiple data sources as well as for the system doing the assembly?





Pre-step: Creation of the data and associated provenance information

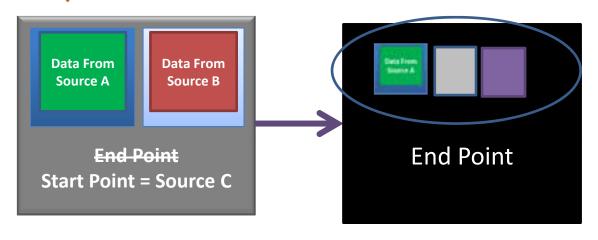


- Is this considered new data?

- (1) When healthcare data is first created, what is the provenance information that should be created and persisted?
- (2) Can a receiving system understand and trust that provenance information?
- (3) Do we need to know who touched it along the way?
- (4) When the receiving system combines this information with data received from a third party, how do we persist the provenance from multiple sources?
- (5) When multi-sourced data is assembled and sent to another system, how do we convey the provenance of the multiple data sources as well as for the system doing the assembly?







- Is this considered new data?
- What if the assembling system "cherry picks" from multiple sources, or adds some new health information of its own?
- (1) When healthcare data is first created, what is the provenance information that should be created and persisted?
- (2) Can a receiving system understand and trust that provenance information?
- (3) Do we need to know who touched it along the way?
- (4) When the receiving system combines this information with data received from a third party, how do we persist the provenance from multiple sources?
- (5) When multi-sourced data is assembled and sent to another system, how do we convey the provenance of the multiple data sources as well as for the system doing the assembly?