



Persistent Security, Privacy, and Governance for Healthcare Information

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The Fundamental Problem

- Medical information needs to be widely distributed
 - To the point of care, regardless of origin
 - To specialists consulting on a particular case
 - To researchers and public health authorities
 - To family caregivers
 - &c.
- Technology can make this happen
- This is not happening

Nature of the Problem

- Every interface between systems poses risk
 - Systems may not interoperate at all
 - Policies differ between systems
 - Laws and regulations
 - Corporate policies
 - Patient preferences
 - No assurance that policies will be respected
- Resulting behaviors
 - Data hoarding
 - Asking patients to sign away rights

Elements of the Solution: Persistent Governance

- Protect healthcare information at its source
- Persistently associate rules that govern access
 - Access granted to certain principals or roles
 - Rules under the control of the patient, ideally
 - Access can be audited
- Ensure uniform enforcement of those rules

Elements of the Solution: Consistent Trust Management

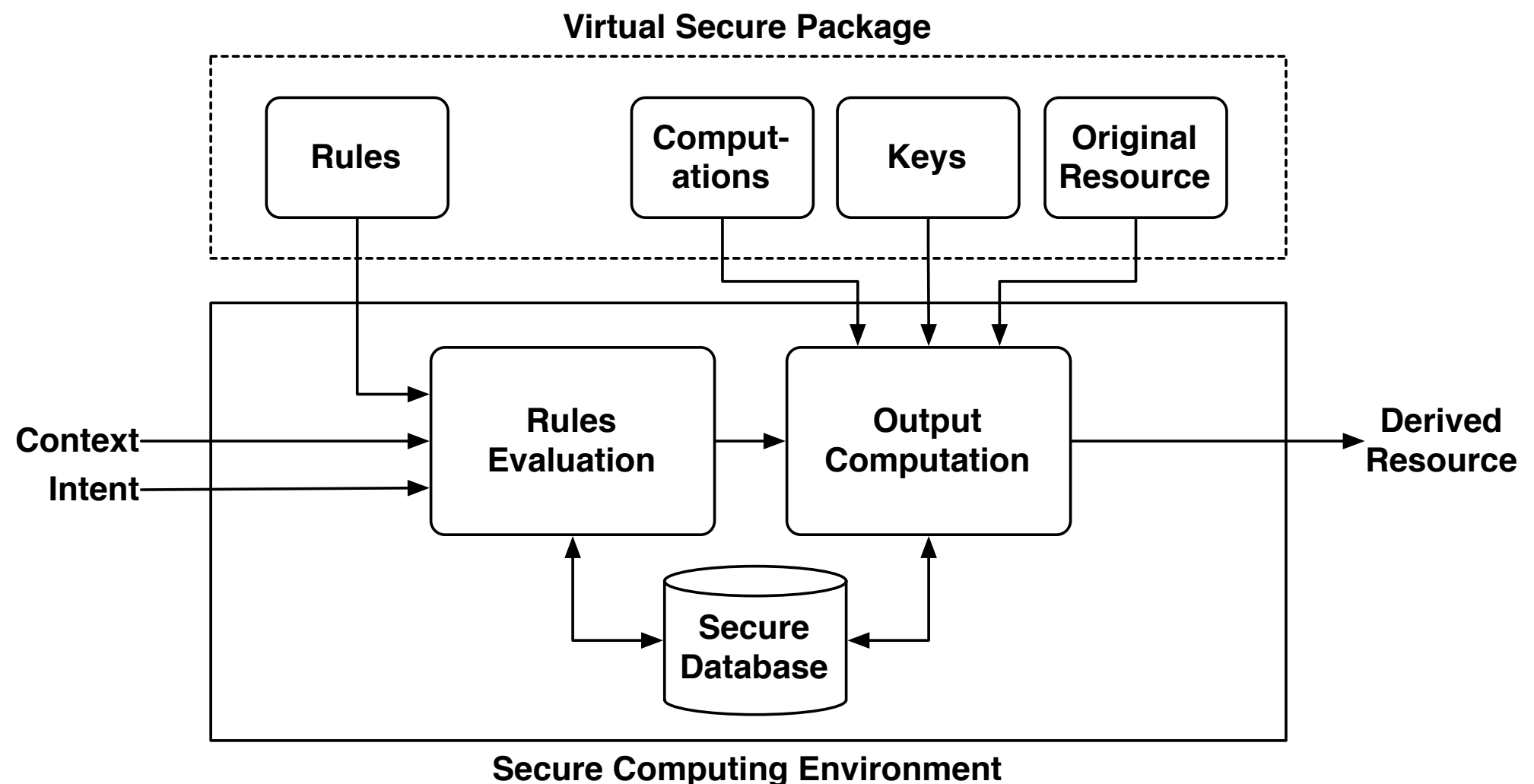
- Systems must be able to interoperate
- No prior interaction should be assumed
- Senders must be able to rely upon computations performed by a recipient
- Role for government?

Elements of the Solution: Derived Resources

- Meeting the conditions in a rule unlocks a resource
- Should the resource look the same to all?
 - You
 - Your doctor
 - The nurse
 - Your physical therapist
 - Your therapist therapist
 - Your children
 - An epidemiologist

Derived Resources

- A *derived resource* combines:
 - A resource
 - A set of rules
 - A set of computations to be performed upon the resource



In Conclusion

- Our goal is to get information moving
- Trusted distributed computing, policy management are essential ingredients
- New applications require new approaches

Questions