

A hand is shown placing a wooden block with a plus sign on top of a stack of other wooden blocks. The stack consists of several blocks with various medical icons: a heart with an ECG line, a first aid kit, a stethoscope, a pill, and a syringe. The background is a soft, out-of-focus green.

IET Future Tech Panel response to
consultation paper on health facility
registry (HFR)

Ministry of Health and Family Welfare
Government of India

The Institution of Engineering and Technology

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IET Future Tech Panel response to the consultation paper on Health Facility Registry by Ministry of Health and Family Welfare, Government of India

At the outset, the IET would like to thank the Ministry of Health and Family Welfare (MoHFW) for its continuing efforts in strengthening the health system of the country. The recommendations in this document are a response to the call issued by MoHFW for their consultation paper on Health Facility Registry (HFR) published on June 22, 2021. This document lays out the opinions of the Healthcare Working Group of the IET Future Tech Panel. Since the call is to seek comments and consultation on the certain strategic and functional fundamentals of the HFR, it is only befitting that the interdisciplinary, neutral panel that we lead, reviews it from all standpoints and presents a comprehensive feedback.

IET Future Tech panel responses

Strategy

- The Health Facility Registry is an important step in making the data available on the facility but also increasing transparency and data democracy for the same.
- The Unique identifier for the facility should serve as the single source of truth about the facility. This should be integrated via application programming interface (API) to the Hospital Information System (HIS)/ Enterprise Resource Planning (ERP) of the facility so that there is real time update on the facilities available including and not limited to beds, specialties, diagnostic equipment, Labs, number of specialists, technology available both hardware and software etc.
- The unique number for the facility should be used for all transactions including insurance claims, government schemes like Pradhan Mantri Jan Arogya Yojana (PMJAY) for health coverage, primary health drives, cashless transactions etc
- Integration with assessments like National Accreditation Board for Hospitals & Healthcare Providers (NABH) to understand gaps in the facility and remediation if any that is required
- Setting up of a Center of Excellence (CoE) on sharing best practices of running a facility of this nature to promote overall growth and development of the facility and its operating standards.
- Integration and linking this to the Health Information Exchange and the India Health Stack ensuring data transparency and democracy

Process

- The process of keeping the registry updated for a particular facility would have to be set up by the facility or the legal entity owning the facility
- The correct information should be validated by the facility as per process and uploaded on a batch basis preferably with API integration
- Audit logs would have to be maintained by the facility to show the conveyance of a particular update and showing the approvals and authorisation by the respective personnel at these facilities
- The process to be integrated to the regular facility management process of the said facility to ensure that it is in line with the Standard Operating Procedures (SOPs) for the particular facility

People

- Setting up a governing body in the organisation to ensure regular updates to the HFR
- Setting up authentication and authorisation mechanisms to validate the data and ensure there is trust and transparency on both sides
- Appointment of a data steward to manage the flow of data and to ensure its sanctity and cyber security

Technology

- With API integration in batch processing the ability to update the data will be automated and this would remove the requirement of manual intervention
- In case manual intervention is required the update should be made possible only with named users authorised to make the changes. The user should be registered in the HFR as the authorised data steward for the facility
- In keeping with data localisation requirements the system would have to be hosted on a cloud instance in the country, while the use of hybrid cloud is preferred, we would recommend the usage of a private cloud instance with user based authorisation and access.
- Development of a HFR data lake to develop insights into the facilities in India
- Data Model to be standardised with a standard schema to pull in data
- Regular reporting to the government and other authorities on the state of the facility and help required if any
- Public dashboards that pull data out of the HFR database available to registered users over the internet, leveraging tools like embedded Power BI instilled with Row Level Security.
- Proactive Cyber Defence and privacy assessments to ensure that the data is adequately protected, regular Vulnerability Assessment and Penetration Testing (VAPT) and Security Testing to be integrated.
- Privacy by Design and Security by Design principles to be integrated as part of the development of the HFR

In conclusion the HFR is a step in the right direction. With the right inputs into the overall structure and workflow of the HFR, this can really enhance the transformation of the healthcare ecosystem in India.

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