

ISO 12967-1:2020 (E)

Health informatics — Service architecture (HISA) — Part 1: Enterprise viewpoint

Contents

	Foreword
	Introduction
1	Scope
2	Normative references
3	Terms and definitions
3.1	Healthcare
3.2	System concepts
3.3	Concepts relating to organization
3.4	Community concepts
3.5	Behaviour concepts
3.6	Policy concepts
3.7	Accountability, responsibility and time concepts
3.8	Information management
4	Symbols and abbreviations
5	Methodology for the specification of the architecture
5.1	General
5.2	Viewpoints for the specification of the architecture
5.3	The HISA specification procedure
5.3.1	The strategic paradigm
5.3.2	Specification of the enterprise viewpoint
5.3.3	Specification of the information viewpoint
5.3.4	Specification of the computational viewpoint
5.4	Iterative specification
5.5	Viewpoints specification languages, notations and levels of abstraction
6	HISA overview
6.1	General requirement
6.2	Enterprise viewpoint
6.3	Information viewpoint
6.4	Computational viewpoint
7	Methodology for extensions
8	Conformance criteria
8.1	General
8.2	Conformance of specification documents to the HISA methodology
8.3	Conformance of middleware products to the HISA architectural requirements
9	The HISA Enterprise viewpoint
9.1	Overview
9.1.1	General
9.1.2	The regional, inter-enterprise perspective
9.1.3	The medical/clinical perspective
9.1.4	The operational/clinical and organizational process model perspective
9.1.4.1	Modelling of healthcare
9.1.4.2	Healthcare process
9.1.4.2.1	General

- 9.1.4.2.2 Notation rules for processes
- 9.1.4.2.3 Care of an individual subject of care
- 9.1.4.2.4 Assessment of the demand for care
- 9.1.4.2.5 Realize healthcare commitment
- 9.1.5 The information services and their complexity
- 9.2 The fundamental workflows and groups of users' activities to be supported by the middleware
- 9.3 General information requirements for all users' activities
 - 9.3.1 General
 - 9.3.2 Common attributes
 - 9.3.3 Extensibility
 - 9.3.4 Versioning
 - 9.3.5 Auditing
 - 9.3.6 Handling of life cycle
- 9.4 Subject of care workflow
 - 9.4.1 Textual description of requirements
 - 9.4.2 Use-case examples
 - 9.4.2.1 Initiate mandated period of care
 - 9.4.2.2 Examples of functions from ISO/HL7 10781 supporting the use case
 - 9.4.2.3 End period of care (diagram only)
 - 9.4.2.4 Examples of functions from ISO/HL7 10781 supporting the use case
- 9.5 Healthcare information workflow
 - 9.5.1 Textual specification of requirements
 - 9.5.2 Use-case examples
 - 9.5.2.1 Diagnostic considerations and their documentation
 - 9.5.2.2 Examples of functions from ISO/HL7 10781 supporting the use case
 - 9.5.2.3 The evaluation/comparison of healthcare goals and results, regarding the treatment of the patient
- 9.6 Healthcare activity management workflow
 - 9.6.1 Textual description of requirements
 - 9.6.2 Use-case examples
 - 9.6.3 Examples of functions from ISO/HL7 10781 supporting the use case
- 9.7 Resources management activities
- 9.8 Management activities for users and authorizations
- 9.9 Classifications, coding and dictionaries management activities
 - 9.9.1 General description of requirements
 - 9.9.2 Examples of functions from ISO/HL7 10781 providing support

Annex A (informative) Highlights of ODP

Annex B (informative) Rationale for the federative structure of the health informatics service architecture

Annex C (informative) Cross-Domain Interoperability

Page count: 66