



# VVT en kansen in Al

**Group:** Ehv-S-A-RB04, Semester 7, Advanced Software **Project name:** Automating AI workflows for healthcare institutions **Stakeholders:** Fontys ICT (Robin den Oudsten, Richard van der Veen)



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# **O1** Team and Stakeholders

Introduction of the team, stakeholders and the roles we took upon the team



# Team



Jakub Jelinek

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Nick Welles



Joery van Gerven



**Ariel Clarence** 

Kaan Gögcay



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Robin den Oudsten

Richard van der Veen



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# 02 Context and Purpose

Overview of the context, purpose, target audience, value, flow, and expected outcomes



# Context 1/2

#### ECD Data and Its Importance

Care homes rely on systems to record and analyze patient data (ECD) for health assessment. This data helps care-takers predict health threats and

improve patient well-being.





Manual processes require significant time, staff, and patient sessions.

Rising costs and demand necessitate automation to improve efficiency.



### The "VVT en de Kansen van Al" Initiative

Collaboration between Fontys ICT, Tilburg University, Mindlabs, healthcare institutions, and Province of Brabant.

Project launched in 2022 to innovate healthcare using Al

technology.

threats.

Fontys > FOR SOCIETY

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Al in Healthcare Al models trained on data from care homes (e.g., Groenhuysen and Mijzo) to predict patient health

Focus on using AI to assist care-takers in decisionmaking processes.



# Context 2/2

#### Data Access and Structure Challenges

Patient data is highly protected, making access complex.

Lack of a generic format for storing data across care homes leads to inconsistencies.

### ML7 FHIR

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#### Our Role in the Project

Securely obtain, process, and standardize data for use in Al models.

Deliver Al-generated insights back to care homes, ensuring authorized access for relevant staff.





# **Desired product**



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# Flow of our system usage





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# 03 Progress and Research

Overview of completed milestones and current status



# **Progress and Research**

### Research

Azure environment, FHIR vs HL7, Data Lake vs Data Warehouse -> Lakehouse, GDPR, Data Factory, openEHR, KIK-V, Coding language



#### Implementation

Custom FHIR running in DF pipeline, FHIR Service, Storage Solution <u>с</u>р



# **Progress and Research**

### Research

Azure environment, FHIR vs HL7, Data Lake vs Data Warehouse -> Lakehouse, GDPR, Data Factory, EntralD (Active Directory) vs OAuth?

### Research to be done

EntralD (Tenant and multiple organizations)

### Implementation

Custom FHIR running in DF pipeline, FHIR Service, OAuth?

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### Implementation to be

#### done

EntralD setup and configuration, Pipeline trigger, Upload data system



# 04 Advice and Reflection

Advice for next iterations



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# **Advice and Reflection**

1. Planning with Azure requires allocating more time than anticipated

2. Follow Microsoft documentation

3. Request access to Microsoft Azure Entra ID

4. Field research on "Distinction between care homes requirements" to evaluate whether to pick ADF Custom pipeline or General FHIR Service provided by Data Health Services

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