Service Level Agreement
Basic Service: Consent
Version 2.0

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eHealth platform
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Service Level Agreement

Basic Service: Consent

Between

Service provider   **Service customer**

   eHealth Platform   User Community
   Quai de Willebroeck, 38
   1000 BRUSSELS

To the attention of: the user community

Author:	Service Management
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1. Document management

1.1 Document history

Version	Date	Author	Description of changes / remarks
2016.01	July, 2016	eHealth Service Management	First version
2018.01	February, 2018	eHealth Service Management	Modification KPI
1.1	06/08/2018	eHealth Service Management	Corrections
1.2	04/04/2019	eHealth Service Management	Modification KPI
1.3	24/06/2022	eHealth Platform	Review of the document
2.0	19/09/2022	eHealth Service Management	Add REST KPI

1.2 Document references

Version	Title	Version	Date	Author
2	Master Service Agreement	2022.1	12/04/2022	

1.3 Purpose of the document

The objective of this document is to define the Service Level Agreement for the set of services included in the *Basic Service Consent* proposed by the eHealth-platform. It defines the minimum level of service offered on the eHealth-platform, and provides eHealth's own understanding of service level offering, its measurement methods and its objectives in the end.

1.4 Features

The Consent Basic Service of the eHealth platform allows the handling of the patient's agreement to exchange his own medical data through authorised professionals and health care institutions.

This service is linked to the Metahub Service (see corresponding SLA for more information).

Consent Base Service is composed of two parts:

a)   Consent Web Service SOAP (WS)

When a "**patient consent**" is active at the eHealth national level then a patient agrees to take part in the digital information exchange of his own medical data. This WS connects to the same database as the Metahub WS to manage and consult consents.

Only authorised types of professionals (doctor, nurse, dentist, midwife and physiotherapist) or professional organisations (pharmacy, hospital, health insurance organization, authorized organization in behalf of a HIO, group of nurses) may access the Consent WS SOAP.

The WS must propose operations making it possible to manage the status of an informed patient consent. Here is the list of management operations :

- *PutPatientConsent : Allows an end-user to declare an informed patient consent. One the consent is successfully declared, it is considered an 'active' consent.*
- *RevokePatientConsent : Allows an end-user to declare the revocation of an informed patient consent. Once the consent is revoked, it is considered an 'inactive' consent.*
- *GetPatientConsent : Allows an end-user to check the existence of an informed patient consent (and to get the information about this consent – 'active' or 'inactive').*
- *GetPatientConsentStatus : Similar to the GetPatientConsent method with the patient consent status specified in the response. (this consent can be 'active', 'revoked' or the patient is 'deceased').*

b)   Consent Web Service REST (WS)

When a "**patient consent**" is active at the eHealth national level then a patient agrees to take part in the digital information exchange of his own medical data. This WS connects to the same database as the Metahub WS to manage and consult consents.

Only patients (citizen, parent, mandatary) may access the Consent WS REST through WA MyHealth and MyHealthViewer.

The WS must propose operations making it possible to manage the status of an informed patient consent. Here is the list of management operations :

- *POST/consents/{patientSsin} : Allows an end-user to declare an informed patient consent. One the consent is successfully declared, it is considered an 'active' consent.*
- *DELETE/consents/{patientSsin} : Allows an end-user to declare the revocation of an informed patient consent. Once the consent is revoked, it is considered an 'inactive' consent.*
- *GET/consents/{patientSsin} : Allows an end-user to check the existence of an informed patient consent (and to get the information about this consent – 'active' or 'inactive').*
- *GET/histories/ {patientSsin} : Allows an end-user to consult the informed consent history of a patient.*
- *GET/health : Allows an end-user to check the monitoring status of the service consent*

1.5   Validity of the agreement

This document is valid as long as the *Basic Service Consent* is part of the eHealth-platform offering services.

Once a year, the levels of service proposed, will be reviewed and confirmed for the next year.

1.6   Service and maintenance window

1.6.1   Service window

The period during which the eHealth services are offered to the client applications, is defined in terms of days and hours. Standard working days are all days of the year, except during the biannual maintenance periods.

The following table summarises the eHealth service window.

Service Window								
		Day of the week (closing days of Service Provider = Sunday)						
		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Day period	00:00 – 07:00							
	07:00 – 08:00							
	08:00 – 16:30							
	16:30 – 19:00							

	19:00 – 20:00							
	20:00 – 24:00							

Legend	
■	Timeslots where the Service must be available according to the SLA and where corrective actions will be taken to resolve detected Incidents.
■	Timeslots where the Service will be available provided there are no blocking Incidents. If these incidents do appear, no corrective action will be taken.
■	Timeslots where unavailability can occur.

1.6.2 Support window

Support Window								
		Day of the week (Closing days of Service Provider = Sunday)						
		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Day period	00:00 – 07:00							
	07:00 – 08:00							
	08:00 – 16:30							
	16:30 – 19:00							
	19:00 – 20:00							
	20:00 – 24:00							

Legend	
■	Timeslots for which the eHealth Call Center is available for the End-Users with a second line support for Infrastructure (HW, OS, Middleware and DB)
■	Timeslots for which the eHealth Call Center is available for the End-Users with a second line support, including Application Support
■	Timeslots for which the eHealth Call Center is unavailable for the End-Users. The End-User will have the possibility to record a voice message that will be treated on the next Workday.

1.6.3 Maintenance windows & planned interventions

The eHealth platform will strive for limiting as much as possible the impact and duration of the planned interventions. Today, the eHealth platform is committed to make efforts so planned unavailability's do not exceed one to a few hours per year.
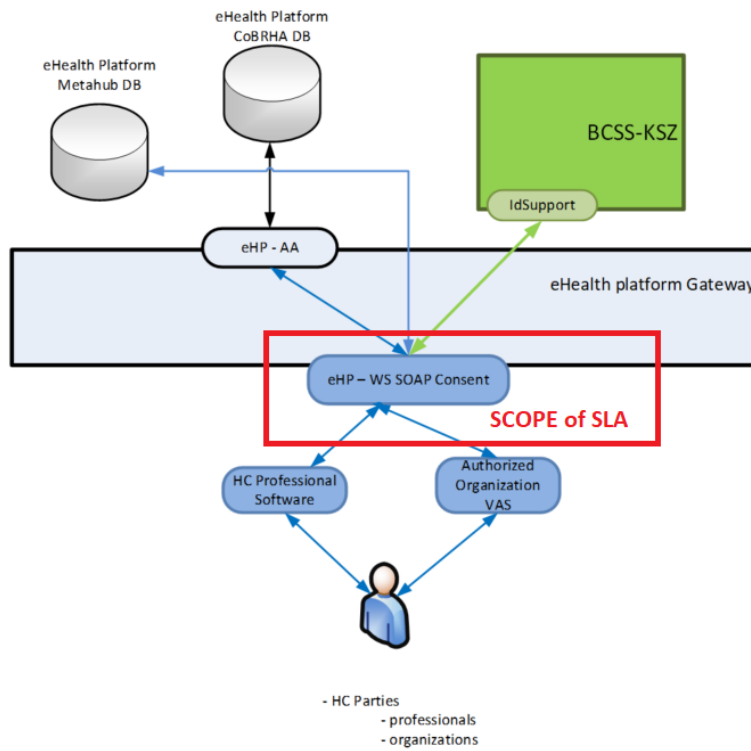
1.6.4 Unplanned interventions

Under exceptional circumstances, unplanned interventions may be necessary in order to restore the service.
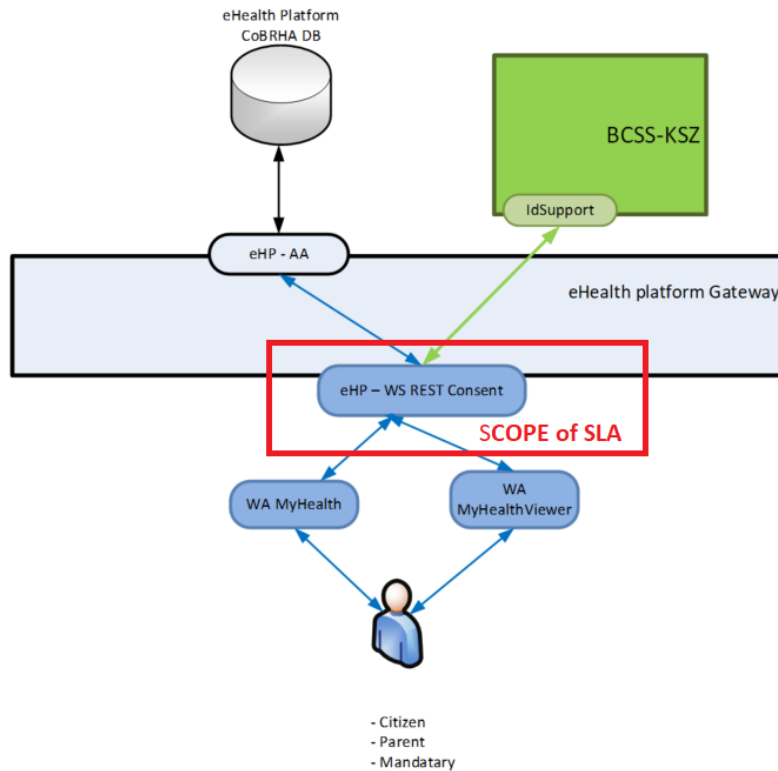
2. Service scope

2.1 eHealth service

2.1.1   General

The main components included in this SLA are:

- eHealth Consent WS SOAP (used by HC professionals and other authorized organisations on behalf of the patient, after access rights checks):
    - Informed Patient Consent management (Get/Put/Revoke)
- eHealth Consent WS REST (used by patients):
    - Informed Patient Consent management (POST/GET/DELETE)

2.1.2   Abbreviations

AA	Attribute Authority
CBSS	Crossroads Bank for Social Security
CIN (NIC)	Collège Intermutualiste National
CoBRHA	Common Base Registry for Healthcare Actors
GMD	Global Medical Dossier
HC	Health Care
NIHII	National Institute for Health and Invalidity Insurance (INAMI / RIZIV)
SAMM	Source Authentique Migrée Mirrorée
SSIN	Social Security Identification Number
STS	Secure Token Service
UAM	User and Access Management

2.2 Business criticality

The business criticality of Consent service is **Gold** as it supports mandatory business processes processed synchronously and within some legal periods.

2.3 Interdependencies

N/A

3. List of service levels

Service	KPI	SL ID	Condition	Measure based on	Limit	Service Window	Objective Committed	Objective Target
Consent	**Consent WS (SOAP)**							
	Availability Consent ws (SOAP)		Test script passes	Fictitious request		Mo – Su 0:00 – 24:00	99,5%	99,9%
	Performance Consent ws (SOAP) – GET operations (Getpatientconsent & Getpatientconsentstatus)		Response time < 2 sec	Real transactions		Mo – Su 0:00 – 24:00	98,0%	99,0%
	Performance Consent ws (SOAP) – Other operations (Putpatientconsent, Revokepatientconsent & Setpatientconsent)		Response time < 2 sec	Real transactions	Depends on CBSS through IDSupport WS	Mo – Su 0:00 – 24:00	N/A	99,0%
	Consent WS (REST)							
	Availability Consent ws (REST)		Test script passes	Fictitious request		Mo – Su 0:00 – 24:00	99,5%	99,9%
	Performance Consent ws (REST) – GetConsentHistory		Response time < 1 sec	Real transactions		Mo – Su 0:00 – 24:00	98,0%	99,0%
	Performance Consent ws (REST) – GetPatientConsent		Response time < 1 sec	Real transactions		Mo – Su 0:00 – 24:00	98,0%	99,0%
	Performance Consent ws (REST) – PutPatientConsent		Response time < 1 sec	Real transactions	Depends on CBSS through IDSupport WS	Mo – Su 0:00 – 24:00	N/A	99,0%
	Performance Consent ws (REST) – RevokePatientConsent		Response time < 1 sec	Real transactions	Depends on CBSS through IDSupport WS	Mo – Su 0:00 – 24:00	N/A	99,0%

Table 1: List of key performance indicators (KPI) per service

3.1 Detailed service level per service

3.1.1 Availability Consent Web Service SOAP

Objectives	
Definition	• The eHealth WS Consent is considered to be available when it is reachable via the BUS and when the DBs are up and running (get request and evaluation of the response - keep Alive Test) • Planned interventions executed within the Maintenance Window are not recorded as unavailable time.
Measuring method	• The availability of the different functionalities is measured by executing the test scripts every 5 minutes. When the script is executed with as result a Status "OK", the test "passed". • When the script is executed with an other result, the test "failed" • Measuring is always done on test scenarios
Calculation	$$Availability = \frac{\sum Passed\ Tests\ x\ 100}{\sum Total\ Tests}\%$$ • Total Tests = Total number of tests launched within corrected timeframe • Passed Tests = Total number of tests that resulted in a status "OK" within the same timeframe • Corrections are applicable on tests that are not taken into account because they were caused: o by a Validated Authentic Source or partner application out of scope of this SLA o by a failing monitoring tool
Reporting and evaluation period	• The availability is calculated and reported monthly. Corrective interventions are initiated when appropriate. • The formal evaluation however is done on a yearly basis.

Service Level Objectives	Functionality	Service Window	Service Level Objective	
			Committed	Target
	Availability Consent WS SOAP	Mo – Su 0:00 – 24:00	99,5%	99,9%

3.1.2 Performance Consent Web Service SOAP

Objectives	

Definition	• The performance of the eHealth Consent webservice SOAP refers to its response time. Response time meaning the time needed to execute a request. This request can be
	    ○ Get Patient Consent
	    ○ Put Patient Consent
	    ○ Revoke Patient Consent
	• Attention: The response time does not include:
	    ○ The time needed to deliver the information over the Internet
	    ○ The time needed to process the information at the End Users premises.

Measuring method	• This response time is measured on the Reverse Proxies. Both start time (request received) and stop time (answer sent to the End User) are measured and stored in a database. • Measuring is done on real transactions, and only on those having a "stop time" within the measuring period.
Calculation	• All response times are calculated: Stop time – Start time for every request. • The percentage that meets the target is calculated based on following formula: $$Performance = \frac{\sum Tests\ meeting\ the\ target\ x\ 100}{\sum Total\ Tests}\%$$
Reporting and evaluation period	• The performance is calculated and reported monthly. Corrective interventions are initiated when appropriate. • The formal evaluation however is done on a yearly basis.

Service Level Objectives	Functionality	Target	Service Level Objective	
			Committed	Target
	Performance Consent WS SOAP (all)	< 2 sec	98%	99,0%
	Performance Consent WS (SOAP) - PutPatientConsent	< 2 sec	N/A*	99,0%
	Performance Consent WS (SOAP) - RevokePatientConsent	< 2 sec	N/A*	99,0%
	Performance Consent WS (SOAP) - GetPatientConsent	< 2 sec	98%	99,0%
	Performance Consent WS (SOAP) - GetPatientConsentStatus	< 2 sec	98%	99,0%

*Due to external dependencies with CBSS

3.1.3   Availability Consent Web Service REST

Objectives	
Definition	• The eHealth WebService Consent (REST) is considered to be available when it is reachable via the BUS and when the DBs are up and running (get request and evaluation of the response - keep Alive Test (GET /consent/v2/health) • Planned interventions executed within the Maintenance Window are not recorded as unavailable time.
Measuring method	• The availability of the different functionalities is measured by executing the test scripts every 5 minutes. When the script is executed with as result a Status "OK", the test "passed". • When the script is executed with another result, the test "failed" • Measuring is always done on test scenarios
Calculation	$$Availability = \frac{\sum Passed\ Tests\ x\ 100}{\sum Total\ Tests}\%$$ o Total Tests = Total number of tests launched within corrected timeframe o Passed Tests = Total number of tests that resulted in a status "OK" within the same timeframe o Corrections are applicable on tests that are not taken into account because they were caused: ▪ by a Validated Authentic Source or partner application out of scope of this SLA ▪ by a failing monitoring tool
Reporting and evaluation period	• The availability is calculated and reported monthly. Corrective interventions are initiated when appropriate. • The formal evaluation however is done on a yearly basis.

Service Level Objectives	Functionality	Service Window	Service Level Objective	
			Committed	Target
	Availability Consent WS (REST)	Mo – Su 0:00 – 24:00	99,5%	99,9%

3.1.4   Performance Consent Web Service REST

Objectives	
Definition	• The performance of the eHealth Consent webservice (REST) refers to its response time. Response time meaning the time needed to execute a request. This request can be 　o Get Consent History 　o Get Patient Consent 　o Put Patient Consent 　o Revoke Patient Consent • Attention: The response time does not include: 　o The time needed to deliver the information over the Internet 　o The time needed to process the information at the End Users premises.
Measuring method	• This response time is measured on the Reverse Proxies. Both start time (request received) and stop time (answer sent to the End User) are measured and stored in a database. • Measuring is done on real transactions, and only on those having a "stop time" within the measuring period.
Calculation	• All response times are calculated: Stop time – Start time for every request. • The percentage that meets the target is calculated based on following formula: $$Performance = \frac{\sum Tests\ meeting\ the\ target\ x\ 100}{\sum Total\ Tests}\%$$
Reporting and evaluation period	• The performance is calculated and reported monthly. Corrective interventions are initiated when appropriate. • The formal evaluation however is done on a yearly basis.

Service Level Objectives	Functionality	Target	Service Level Objective	
			Committed	**Target**
	Performance Consent ws (REST) GetConsentHistory	≤ 1 sec	98,0%	99,0%
	Performance Consent ws (REST) GetPatientConsent	≤ 1 sec	98,0%	99,0%
	Performance Consent ws (REST) PutPatientConsent	≤ 1 sec	N/A*	99,0%
	Performance Consent ws (REST) RevokePatientConsent	≤ 1 sec	N/A*	99,0%

*Due to external dependencies with CBSS