An Open Architecture for Health Data Interoperability

Healthcare is a unique and complex sector that is **highly regulated**, is **risk averse**, and must consider a **diverse set of stakeholders.**

Health data is siloed and its exchange hamstrung by entrenched incumbent record systems that **lack interoperability.**

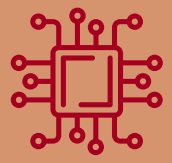
The European Health Data Space and the **Trusted Exchange Framework & Common Agreement** are two examples of initiatives working to enhance health data exchange.

Common misperceptions of open source, such as **a lack of technical & legal support and commercial inviability**, also exist in the digital health sector.

Open source digital health solutions can **increase health equity, de-risk innovation, and remove vendor lock-in.**

Open source solutions are gaining traction in Europe and developing countries, embracing efficiency and agility in regions that prioritize collaboration and cost savings.

Two examples of open source solutions are **DHIS2**, used for data management in over 100 countries, and **SORMAS**, used for outbreak monitoring in over 15 countries.



Artificial intelligence holds significant promise in healthcare, and its data needs may catalyze the development of more effective data exchange infrastructure.

A precompetitive digital health architecture would standardize the components of the system and allow for the development of applications that are portable, sustainable, and interoperable.

To build lifelong records, data must be **semantically standardized and patient centric**, separating the data from the applications and using a common data store.

Innovative and agile solutions can work around incumbent platforms, allowing for **bottom-up development** and an opening up of the digital health market.

A neutral foundation is necessary to create **a center of gravity for open source health solutions** to collaborate, learn, and standardize around a precompetitive layer.