

Irish Standard I.S. EN ISO 21091:2013

Health informatics - Directory services for healthcare providers, subjects of care and other entities (ISO 21091:2013)

© CEN 2013

No copying without NSAI permission except as permitted by copyright law.

Incorporating amendments	/corrigenda/National Anne	exes issued since public	cation:	
The National Standards Author documents:	rity of Ireland (NSAI) produ	ces the following cate	gories of formal	
I.S. xxx: Irish Standard - subject to public consultation.	national specification base	ed on the consensus of	an expert panel and	
S.R. xxx: Standard Recompanel and subject to public con	mendation - recommendat sultation.	ion based on the cons	ensus of an expert	
SWiFT xxx: A rapidly develo participants of an NSAI worksh	ped recommendatory docu op.	ment based on the cor	nsensus of the	
This document replaces:				
This document is based on EN ISO 21091:2013	: Published: 12 March, 2013			
This document was publis under the authority of the and comes into effect on: 12 March, 2013			ICS number: 35.240.80	
NSAI 1 Swift Square, Northwood, Santry Dublin 9	T +353 1 807 3800 F +353 1 807 3838 E standards@nsai.ie W NSAI.ie	Sales: T +353 1 857 6730 F +353 1 857 6729 W standards.ie		
Údarás um Chaighdeáin Náisiúnta na hÉireann				

EUROPEAN STANDARD NORME EUROPÉENNE

EUROPÄISCHE NORM

EN ISO 21091

February 2013

ICS 35.240.80

English Version

Health informatics - Directory services for healthcare providers, subjects of care and other entities (ISO 21091:2013)

Informatique de santé - Services d'annuaires pour les fournisseurs de soins de santé, les sujets de soins et autres entités (ISO 21091:2013)

Medizinische Informatik - Verzeichnisdienste für Anbieter, zu Behandelnde und andere Entitäten im Gesundheitswesen (ISO 21091:2013)

This European Standard was approved by CEN on 2 February 2013.

CEN members are bound to comply with the CEN/CENELEC Internal Regulations which stipulate the conditions for giving this European Standard the status of a national standard without any alteration. Up-to-date lists and bibliographical references concerning such national standards may be obtained on application to the CEN-CENELEC Management Centre or to any CEN member.

This European Standard exists in three official versions (English, French, German). A version in any other language made by translation under the responsibility of a CEN member into its own language and notified to the CEN-CENELEC Management Centre has the same status as the official versions.

CEN members are the national standards bodies of Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and United Kingdom.



EUROPEAN COMMITTEE FOR STANDARDIZATION COMITÉ EUROPÉEN DE NORMALISATION EUROPÄISCHES KOMITEE FÜR NORMUNG

Management Centre: Avenue Marnix 17, B-1000 Brussels

EN ISO 21091:2013 (E)

Contents	Page
Foreword	3

EN ISO 21091:2013 (E)

Foreword

This document (EN ISO 21091:2013) has been prepared by Technical Committee ISO/TC 215 "Health informatics" in collaboration with Technical Committee CEN/TC 251 "Health informatics" the secretariat of which is held by NEN.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by August 2013, and conflicting national standards shall be withdrawn at the latest by August 2013.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN [and/or CENELEC] shall not be held responsible for identifying any or all such patent rights.

According to the CEN-CENELEC Internal Regulations, the national standards organizations of the following countries are bound to implement this European Standard: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

Endorsement notice

The text of ISO 21091:2013 has been approved by CEN as EN ISO 21091:2013 without any modification.

This is a free page sample. Access the full version online.

I.S. EN ISO 21091:2013

This page is intentionally left BLANK.

This is a free page sample. Access the full version online.

I.S. EN ISO 21091:2013 INTERNATIONAL STANDARD

ISO 21091

First edition 2013-02-15

Health informatics — Directory services for healthcare providers, subjects of care and other entities

Informatique de santé — Services d'annuaires pour les fournisseurs de soins de santé, les sujets de soins et autres entités



ISO 21091:2013(E)



COPYRIGHT PROTECTED DOCUMENT

© ISO 2013

All rights reserved. Unless otherwise specified, no part of this publication may be reproduced or utilized otherwise in any form or by any means, electronic or mechanical, including photocopying, or posting on the internet or an intranet, without prior written permission. Permission can be requested from either ISO at the address below or ISO's member body in the country of the requester.

ISO copyright office Case postale 56 • CH-1211 Geneva 20 Tel. + 41 22 749 01 11 Fax + 41 22 749 09 47 E-mail copyright@iso.org Web www.iso.org

Published in Switzerland

ISO 21091:2013(E)

Coı	ntents	Page
Fore	eword	iv
Intro	oduction	v
1	Scope	1
2	Normative references	1
3	Terms and definitions	1
4	Symbols (and abbreviated terms)	5
5	Healthcare context 5.1 General 5.2 Healthcare persons 5.3 Multiple affiliations 5.4 Healthcare organizations 5.5 Hardware/software 5.6 Healthcare security services	
6	Directory security management framework	8
7	Interoperability 7.1 Requirements 7.2 Name space/tree structure	9
8	Healthcare schema 8.1 Healthcare persons 8.2 Organization identities 8.3 Roles, Job Function and Group	11 18
9	Distinguished Name 9.1 General 9.2 Relative Distinguished Name	28
Ann	ex A (informative) Healthcare directory scenarios	32
	ex B (informative) Referenced object classes	
	iography	

ISO 21091:2013(E)

Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

International Standards are drafted in accordance with the rules given in the ISO/IEC Directives, Part 2.

The main task of technical committees is to prepare International Standards. Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights.

ISO 21091 was prepared by Technical Committee ISO/TC 215, Health informatics.

This first edition cancels and replaces ISO/TS 21091:2005, which has been technically revised.

ISO 21091:2013(E)

Introduction

Health informatics directory services for healthcare providers, subjects of care and other entities are intended to support the communication and security requirements of healthcare professionals in the conduct of clinical and administrative functions. Healthcare requires extensive encipherment and access control requirements for the disclosure and transport of all confidential health information. In support of the healthcare public key infrastructure, healthcare will make available a registry of certificates including business and professional information necessary to conduct healthcare transactions. This information necessarily includes identification of individual roles within the healthcare system as can only be identified by the respective healthcare organizations. As such, the registration and management functions are to be extensible, and potentially distributed throughout the healthcare community. Support for these additional healthcare requirements for security is also to be offered through the directory service.

The directory is becoming an increasingly popular method of providing a means for single sign-on capabilities to support authentication. This goal has resulted in the inclusion of authentication and identity attributes to authenticate the identity of a healthcare person or entity.

The directory also supports the communication of additional attributes that can be used to support authorization decisions. This goal has driven directory schema extensions to include organization employee management information, healthcare-specific contact information, and healthcare identifiers. This International Standard addresses the healthcare-specific requirements of the directory, and defines, as appropriate, standard specifications for inclusion of this information in the healthcare directory.

Besides technical security measures that are discussed in other ISO standards, communication of healthcare data requires a reliable accountable "chain of trust." In order to maintain this chain of trust within a public key infrastructure, users (relying parties) need to be able to obtain current correct certificates and certificate status information through secure directory management.

The healthcare directory will support standard lightweight directory access protocol (LDAP) client searches, interface engines for message transformation, and service oriented architecture (SOA) implementations to enable the service in any environment. Specific implementation guidance, search criteria and support are outside the scope of this International Standard.

While specific security measures and access control specifications are out of scope of this International Standard, due to the sensitive nature of health related and privacy information that may be supported through the directory services, significant controls need to be enabled at branch, object classes, and attribute levels. Processes and procedures should be in place to ensure information integrity represented within the health directory, and responsibility for the content of the directory should be clearly allocated through policy and process. It is anticipated that appropriate access controls managing who can read, write or modify all items in the healthcare directory will be applied. This may be accomplished by assigning individuals within the directory to the HCOrganizationalRole and assigning appropriate privileges (e.g. read, modify, delete) to that role in directory management configuration.

This is a free page sample. Access the full version online.

I.S. EN ISO 21091:2013

ISO 21091:2013(E)

Health informatics — Directory services for healthcare providers, subjects of care and other entities

1 Scope

This International Standard defines minimal specifications for directory services for healthcare. It can be used to enable communications between organizations, devices, servers, application components, systems, technical actors, and devices.

This International Standard provides the common directory information and services needed to support the secure exchange of healthcare information over public networks where directory information and services are used for these purposes. It addresses the health directory from a community perspective in anticipation of supporting inter-enterprise, inter-jurisdiction, and international healthcare communications. While several options are supported by this International Standard, a given service will not need to include all of the options.

In addition to the support of security services, such as access control and confidentiality, this International Standard provides specification for other aspects of communication, such as addresses and protocols of communication entities.

This International Standard also supports directory services aiming to support identification of health professionals and organizations and the subjects of care.

2 Normative references

The following referenced documents are indispensable for the application of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO/HL7 27931:2009, Data Exchange Standards — Health Level Seven Version 2.5 — An application protocol for electronic data exchange in healthcare environments

3 Terms and definitions

For the purposes of this document, the following terms and definitions apply.

3.1

access control

means of ensuring that the resources of a data processing system can be accessed only by authorized entities in authorized ways

[ISO/IEC 2382-8]

3.2

attribute authority

AA

authority which assigns privileges by issuing attribute certificates

[X.509]



The is a new provider i arenade and chare publication at the limit below	This is a free preview.	Purchase the	entire publication	at the link below:
--	-------------------------	--------------	--------------------	--------------------

Product Page

- Dooking for additional Standards? Visit Intertek Inform Infostore
- Dearn about LexConnect, All Jurisdictions, Standards referenced in Australian legislation