# Perspectives & Recommendations on Safe AI **Development in Sensitive Healthcare Data**

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Portal







These recommendations were developed as part of a DARE UK funded initiative to set up an AI Risk Evaluation Group to bring together members of the public, researchers and data providers to understand perspectives of AI development / release from Trusted Research Environments (TREs), and the unique challenges posed by complex multi-modal data. The main goals of this group were to understand:



What are the public most worried about with the use of their data for training AI models



How do researchers feel implementing privacy-preserving techniques in their research



How can we build a framework to allow the safe development and release of AI models trained on complex data



, What are the unique challenges that neuroimaging and genomics present in AI disclosure control



What is the actual risk of a person being identified if their data were released from an AI model



What is the risk appetite of data providers and do they agree with our recommendations



How can we help researchers implement these privacypreserving techniques in their research



Data

Portal

How can we help data providers quantify risk and assess these models for safe release













#### INTRODUCTION

## Contributors

#### **Co-Chairs**



**Prof Simon Thompson** 

Simon is Chief Technology Officer at SeRP and Health Professor of Informatics at Swansea University.



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Lewis is the Neuroimaging Research Officer at DPUK leads work on and responsible AI research in neuroscience.



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# **Results from the Public Workshop**

Do you have any concerns about AI?

Built in negative bias

Impact on vulnerable people

Social Bias

Leave people out

Bias

AI being used to discriminate

How will my identify be protected if data is leaked

# Identification

Higher risk of identification If you have a rare condition

Manipulations of decisions at group level

**Reduced trust** 

Trust **Public Trust** 

Data privacy

Other

Lack of public involvement in development stage

Become too reliable

Over reliance

Reduced specialised training

Regulation

Regulation

# **Over Reliance**

Result in less capable specialists

Owned by big corporations

Lack of Regulations

Needs to be regulated

Speed of development vs regulation



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# **Results from the Public Workshop**

Do you have any concerns with the use of your health data?

# How easily can my data be used to identify?

Will my data be anonymous?

# Identifiability

Need restrictions on what data is

Clarity on why the data is being

used

How are the results going to be

fed back to participants

Cant de identify at population level

How could a data leak affect me?

Once initial consent is given, no updates are given after. What happens if things change.

No control of data

Who can access the data

# No Control

What if my data is incorrect

Cant choose whats shared and whats not

Study consent might have been given before AI was a concern

shared and what its used for The Unknown

### Need to have trust in people sharing with

Not knowing how their data is being used

# Selling Data

Corporations making huge profits

from data

Concerns of selling data

Using data to manipulate elections

Other

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Ethical concerns

# **Concerns of AI Models**

Attacks & Vulnerabilities

#### **Inversion Attack**

Where an attacker is able to reconstruct the original training data that was used in the model

#### Membership Inference Attack

The attacker trains an attack model to predict whether a particular data point was part of the training dataset

#### Attribute Inference Attack

An attacker is able to infer unknown attributes from an individual that they might already know

#### Explainablity

Methods which allow users to understand and interpret predictions made by AI

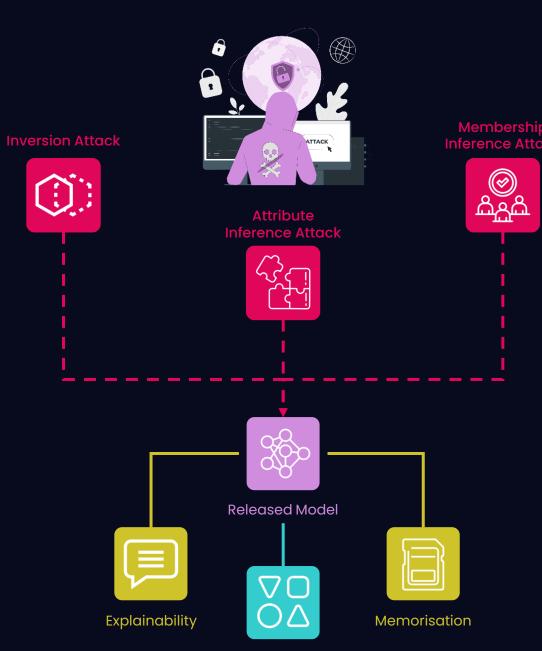
#### **Data Memorisation**

Where an AI model is unable to generalise well on unseen data and instead overfits on the training data

#### **Instance-Based Models**

Uses the dataset as the model to compare unseen data to the data points in the dataset





Instance Based

# Privacy-Preserving Techniques

### **Protecting Patient Data**

#### **Homomorphic Encryption**

Using encrypted data to train AI models.

#### Synthetic Data

Data artificially created from real-world data which is statistically similar.

#### **Differential Privacy**

Statistical noise is added to the data which still describes the patterns of the group while protecting information about specific information.

#### Secure Web Hosting

Hosting the AI model on a secure web service with authorisation and limits on number of queries.

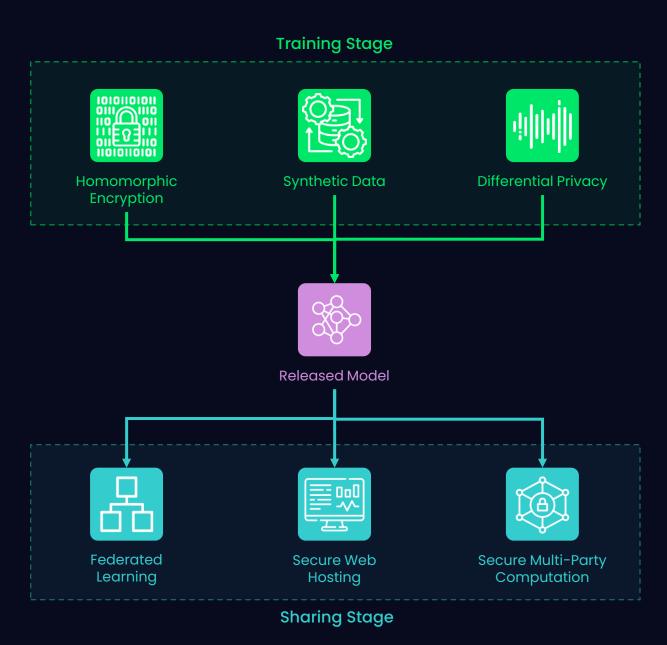
#### **Federated Learning**

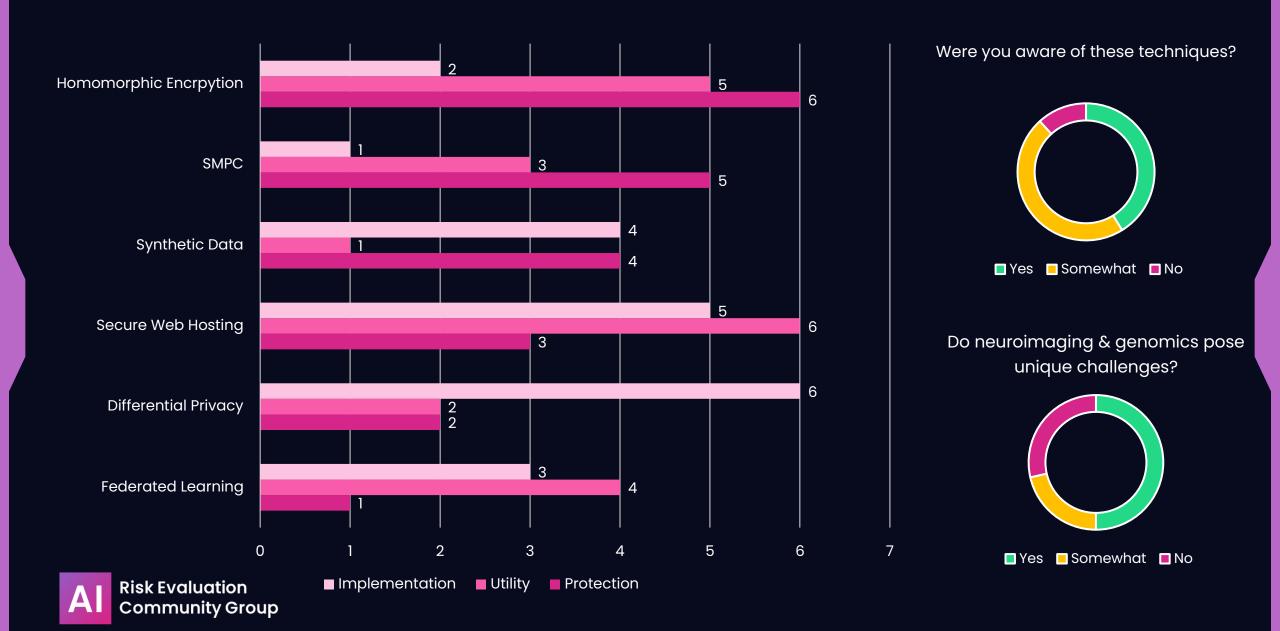
A distributed, decentralised approach to training Al models where local data doesn't need to be shared.

#### Secure Multi-Party Computation

Allows multiple parties to jointly compute a function on encrypted data.







#### Sequence data more identifiable

Genetic data more risky

Genomics have greater impact and potential repercussions

#### Neuroimaging surprisingly non predictive compared with genetics

If you are trying to find out more information about someone than a brain scan less likely than genomics

#### There is more AI in this space

Dangerous to assume one type of data is safer than another

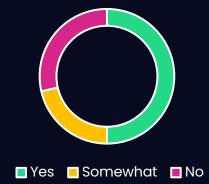
Like fingerprinting – if have access to family data then can look at matching for genomics

Genome sequencing harder to

implement privacy techniques

Depends if using raw or derived

#### Do neuroimaging & genomics pose unique challenges?





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# **Concerns of AI Models**

Data Types



Whole Genome



Data

5 -

Wearable

Data

Linked Derived Genomic





Non-Defaced Structural Scans

4



5

EEG/MEG

Questionnaire Data



Functional Imaging





Retinal Scans

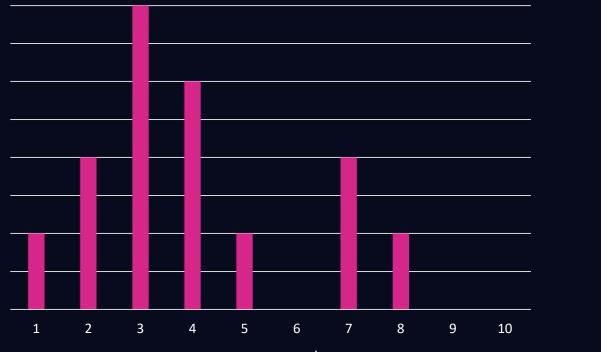


Defaced Structural Scans



# Implementing Privacy-Preserving Techniques

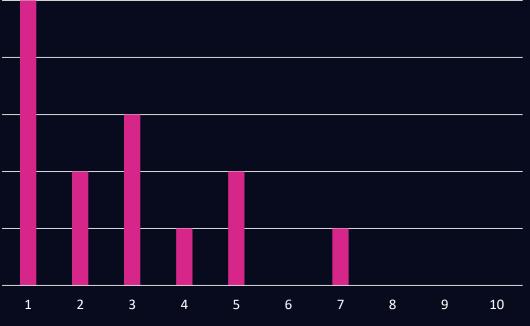
Barriers



Do researchers have the expertise/knowledge to implement

(1 = not at all, 10 = completely)





Are there enough resources and training available?

(1 = not at all, 10 = completely)

# Implementing Privacy-Preserving Techniques

Barriers

Lack of experience

Out of date resources which don't keep up with speed of development

> Don't have expertise to judge level of noise acceptable

Not common practice

Should it be on the TRE to provide safe data

Do researchers have the expertise to implement these techniques?

Need to be an expert in the field

Need to outsource

Would need guidance on best techniques to implement

Need to have a shift in perspective

Not a mature space yet and not widely adopted

Worry about increasing time working on project

Need to have training

Need to educate researchers



Risk Evaluation Community Group If it is not a requirement then less likely to do so, need to have incentive from funders

Guidelines would be useful

Privacy has to be preserved so the accuracy is what it is. Might push for more robust models

If accuracy is so low then it is pointless, need a balance

If data leaked is not disclosive then why take this hit, so depends on the data

Robust models should be able to handle some noise in the data anyway

How do you feel about having to trade off accuracy for privacy?

Do we just need to accept it? Need to find the right techniques which don't affect accuracy that much

Need to find the right balance between privacy and utility.

There is no point having a private model with no utility



# **Assessing AI Models**

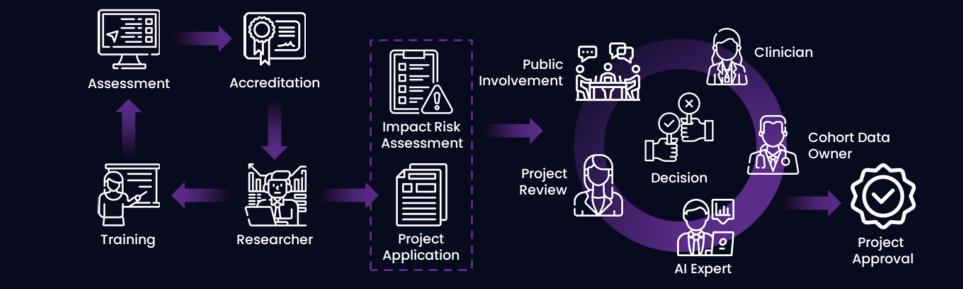
Data Provider Perspectives

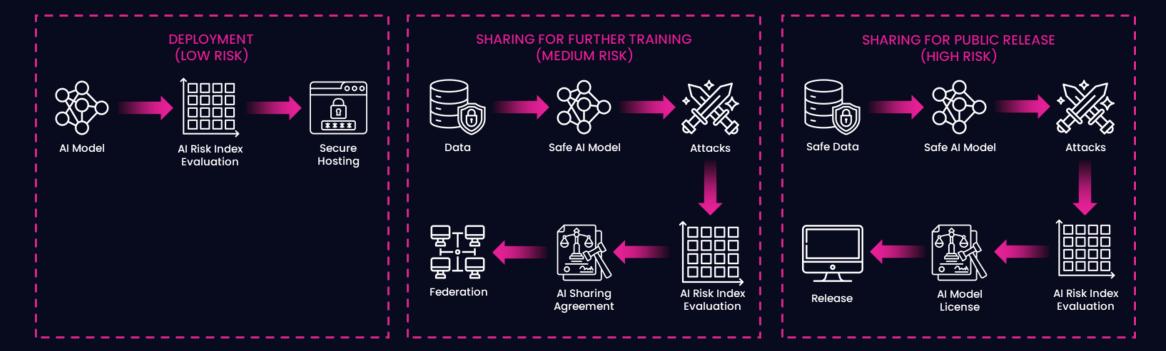


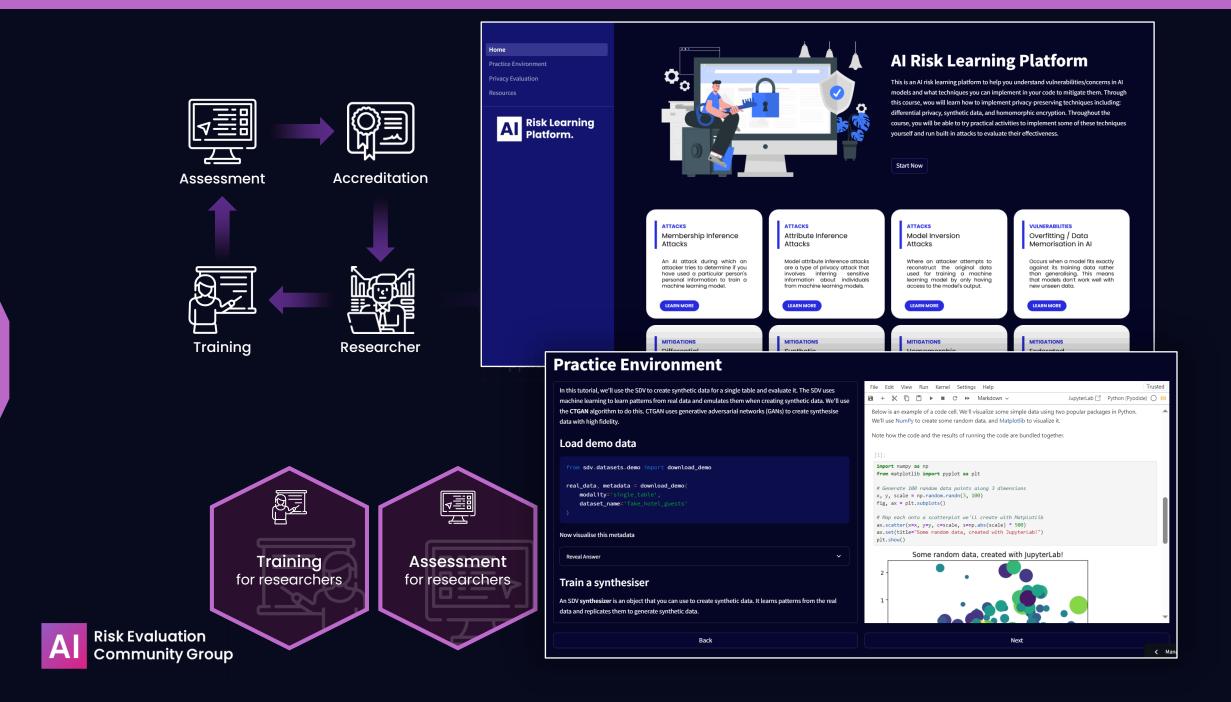
# Recommendations

# How to Allow the Safe Development & Release of Al











**Precision** training for data science in **research** 

# **Protecting Patient Privacy in Al**



#### PRE-PROJECT STAGE

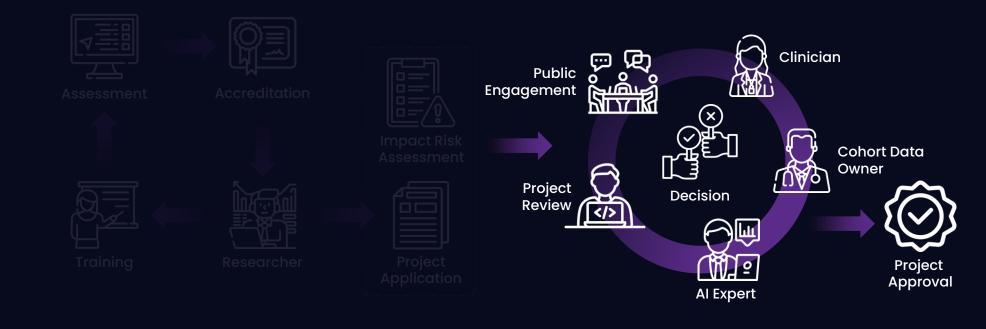
	Project Summary and Background						
Describe the purpose of your AI project:							
What do you intend to do with your Al model? Tick all that apply.	Bring in a pre-trained model to validate on TRE data Bring in a pre-trained model to fine-tune on TRE data Develop a new AI model trained on TRE data and other data Develop a new AI model trained on TRE data and other data	What type of model do	Public Public				
How does this model benefit the public? How do you see it being used?		you intend on using? Tick all that apply.	Neural Network     Instance-Based Model (e.g. SVM / KNN)     Decision Tree Based Model     Generative Model				
What data will you use to train your Al model? Tick all that apply.	Data for Training and Developing your Al Model         Questionnaire / Assessment data         Structural Non-Defaced Neuroimaging data         Structural Defaced Neuroimaging data         Non Structural Neuroimaging data         Imaging Derived Phenotypes		Linear / Logistic Regression     Unsupervised Learning Model     Ensemble Model     Other      If other selected, please specify:				
	EEG/MEG     Protein Sequencing data     Genome Sequencing data     Genome Sequencing data     GWAS     Polygenic Risk Scores     Other Derived Genomic data     Gene Status     Retinal Imaging     Wearable Data     Linked NHS data	Deployment / Sharing of Model					
		What do you plan on doing with this model?	Publically release model     Transfer model to a different environment     Deploy the model     Keep model in portal for analysis purposes only				
		(This section does not apply if you have ticked: Keep model in portal for analysis purposes only)					
Please justify the use of data selected for your Al		How could this AI model be misused?					
model.	Al Model Vulnerabilities	What privacy-preserving techniques do you intend to implement?	Homomorphic Encryption at Inference     Homomorphic Encryption at Training     Local Differential Privacy				
Assess and document whether your model is likely to suffer from overfitting and how you will avoid this.		Tick all that apply.	Global Differential Privacy Synthetic Data Federated Learning None Other				
Will you implement explainability in your AI model? If so, describe the level of explainability and how this could potentially be exploited.			If other selected, please specify:				
ve explored.	Training for researchers	Who will be accessing this model? Will it be publically shared or held on university servers for example.					
-		What are the potential risks to the individuals if this model was attacked?					





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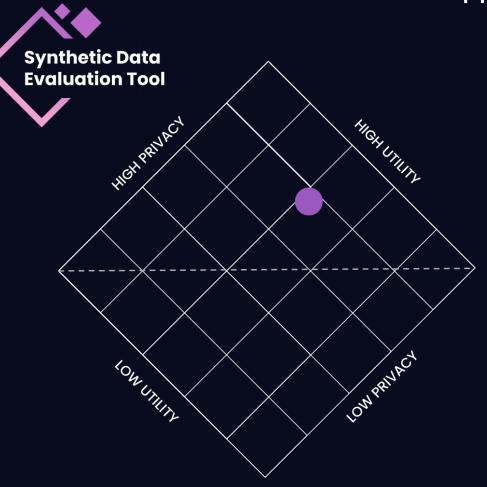
## PRE-PROJECT STAGE





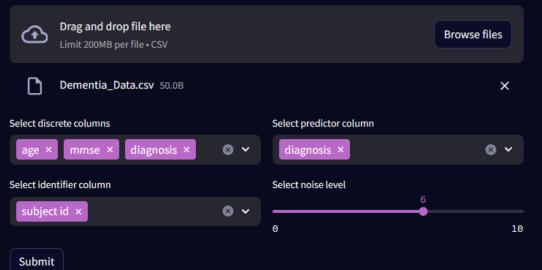
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## **PROJECT STAGE**



# **Synthetic Data Generation**

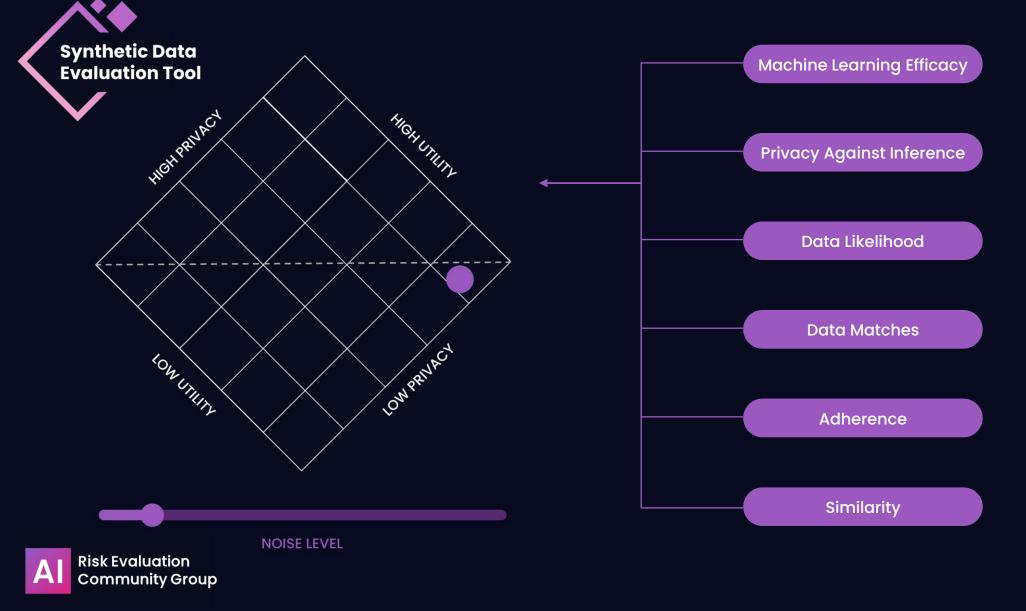
#### Upload a CSV Dataset





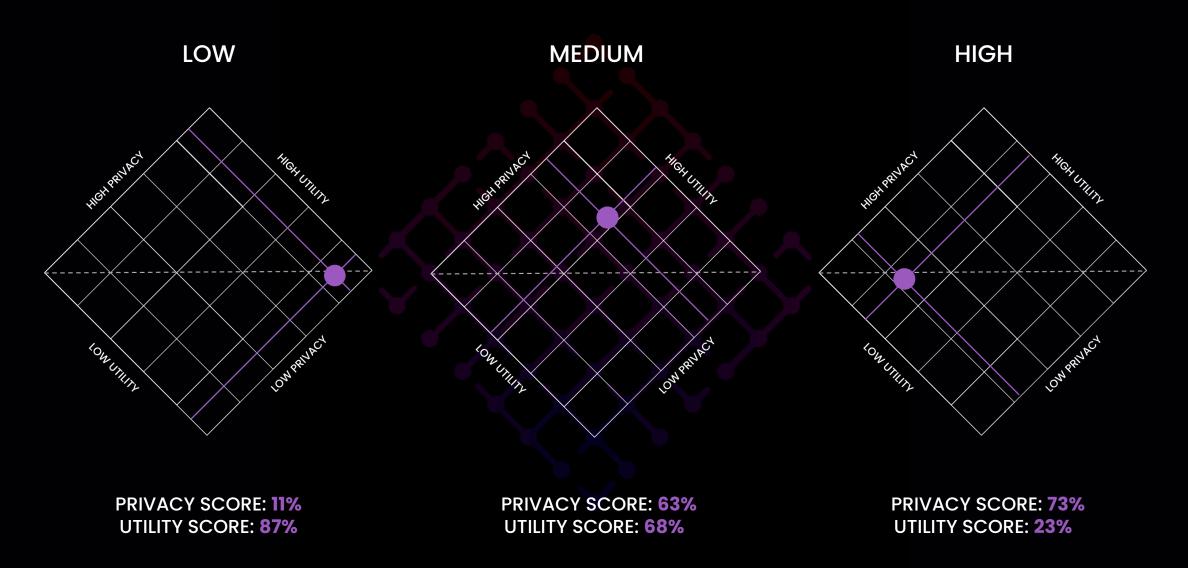
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## PROJECT STAGE





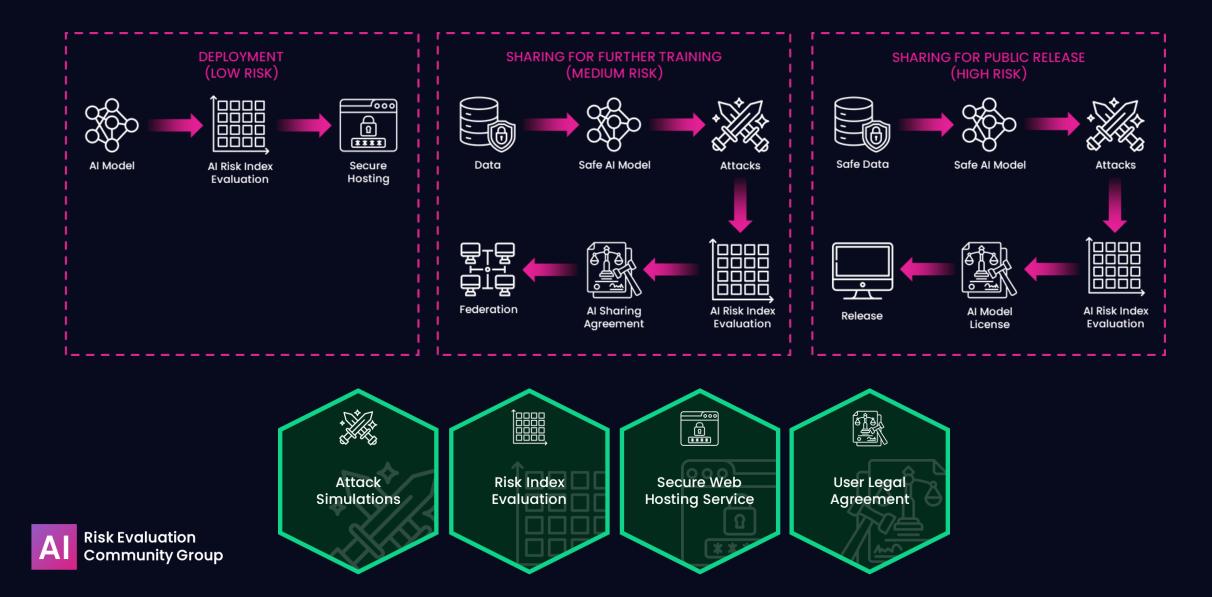
## SYNTHETIC DATA

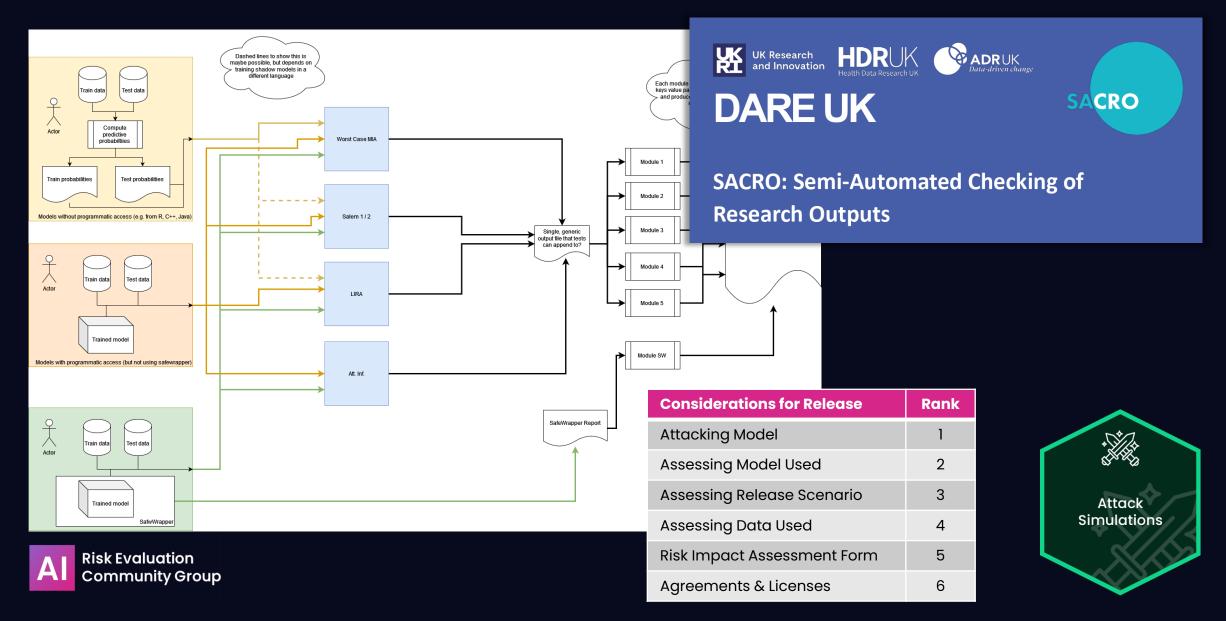








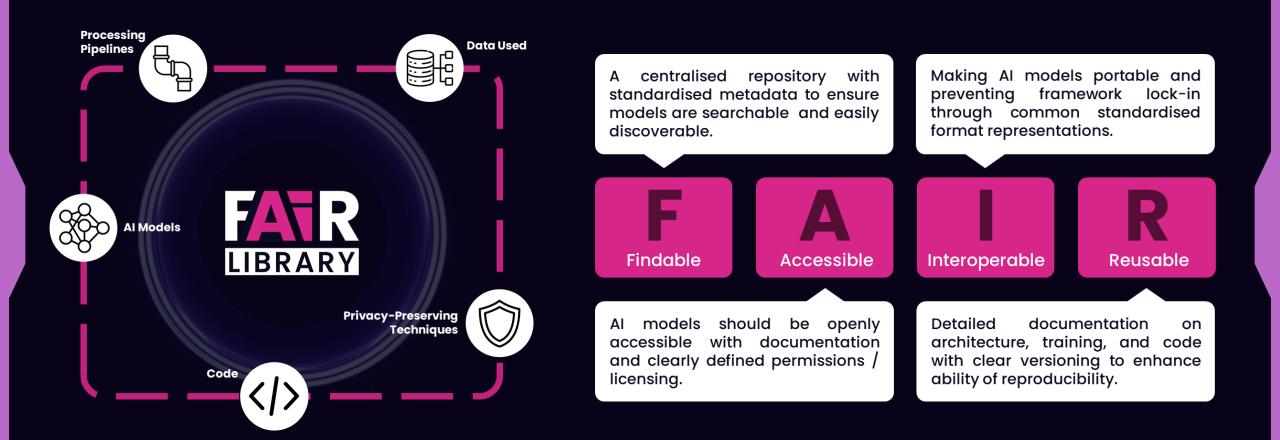




# Al Index

Release Scenario			Privacy-Preserving Techniques			Attacks						
		Public Release	Environment Transfer	Federated Learning	Secure Hosting	None	Synthetic Data	Differential Privacy	Homomorphic Encryption	Inversion	Attribute Inference	Membership Inference
Data Types	Whole Genome Sequencing	100	70	50	20	100	50	40	20	100	70	50
	Linked Data	90	63	45	18	90	45	36	18	90	63	45
	Derived Genomic Data	80	56	40	16	80	40	32	16	80	56	40
	Non-Defaced Structural Scans	70	49	35	14	70	35	28	14	70	49	35
	Questionnaires / Assessments	60	42	30	12	60	30	24	12	60	42	30
	Functional Scans	50	35	25	10	50	25	20	10	50	35	25
	Wearable Data	40	28	20	8	40	20	16	8	40	28	20
	Retinal Scans	30	21	15	6	30	15	12	6	30	21	15
	EEG/MEG	20	14	10	4	20	10	8	4	20	14	10
	Defaced Structural Scan	10	7	5	2	10	5	4	2	10	7	5
Al Model	Instance-Based Model	100	70	50	20	100	50	40	20	100	70	50
	Unsupervised Learning	50	35	25	10	50	25	20	10	50	35	25
	Natural Language Processing	40	28	20	8	40	20	16	8	40	28	20
	Decision Tree Based	30	21	15	6	30	15	12	6	30	21	15
	Neural Network	20	14	10	4	20	10	8	4	20	14	10
	Linear/Logistic Regression	10	7	5	2	10	5	4	2	10	7	5







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