# **Risk-Based Quality Assurance in Healthcare Software Platforms**

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#### **ABSTRACT**

This paper presents a cybersecurity-aware, risk-based quality assurance (QA) methodology for healthcare software platforms. Building on the AI and IoT-enabled monitoring system introduced by Kothamali et al. [1], this study introduces a QA framework that dynamically prioritizes testing based on patient safety risk, system reliability, and real-time anomaly detection. The approach was validated on a clinical scheduling and monitoring platform, resulting in higher compliance with healthcare standards and reduced vulnerability exposure. The integration of risk modeling with AI-based QA mechanisms reaffirms the significance of Kothamali et al. [1] original architecture in building secure and effective healthcare systems.

**Keywords:** Risk-Based Quality Assurance, Healthcare Software, Automated Testing, Patient Safety, AI-Driven Testing, Compliance Adherence.

### Introduction

The convergence of Artificial Intelligence (AI) and the Internet of Things (IoT) has significantly transformed the landscape of modern healthcare systems, enabling smarter, more responsive, and patient-centric solutions. As these technologies become more deeply embedded in clinical and operational workflows, ensuring robust software quality—both functionally and from a security standpoint—has become paramount. Modern healthcare platforms must not only deliver accurate diagnostics and seamless interoperability but also uphold stringent standards of patient safety, data privacy, and regulatory compliance.

Kothamali et al. [1] introduced a pioneering smart healthcare monitoring architecture that showcased the potential of real-time, AI-driven diagnostics to enhance patient outcomes and improve clinical decision-making. Their work provided a valuable foundation for integrating intelligent monitoring mechanisms into healthcare systems. Building upon their innovation, this paper proposes a comprehensive enhancement by embedding their architecture within a risk-based Quality Assurance (QA) framework.

The proposed model is designed to systematically assess critical dimensions of healthcare system performance, including patient safety, system uptime, and response latency. By applying a risk-based QA approach, the framework enables automated testing and compliance verification processes tailored to the dynamic and high-stakes environment of digital healthcare. This integration aims to ensure not only the reliability and resilience of AI-IoT-enabled platforms but also their alignment with evolving regulatory standards and best practices in healthcare software development. Ultimately, the enhanced model supports the deployment of safer, more efficient, and trustworthy healthcare solutions [2].

#### **Literature Review**

In the realm of healthcare software development, quality assurance (QA) holds a uniquely critical position due to the high stakes involved—ranging from patient safety and clinical accuracy to data integrity and regulatory compliance. Unlike general-purpose software, healthcare applications must adhere to a multitude of stringent regulatory standards, including HIPAA, GDPR, FDA guidelines, and ISO certifications. Despite this, many QA methodologies in practice today still heavily rely on manual processes or static, rule-based test case generation, which can be both time-consuming and insufficient in detecting latent risks in increasingly complex, AI-integrated systems [3].

Recent advances have sought to address these limitations by introducing intelligent testing mechanisms and real-time monitoring frameworks. Notably, Kothamali et al. [1] proposed a smart healthcare monitoring system that effectively demonstrated how AI and IoT could be harnessed for predictive analytics and real-time patient diagnostics. Their architecture laid the groundwork for a more responsive and data-driven approach to healthcare quality monitoring, moving away from episodic checks toward a continuous evaluation paradigm.

Kothamali et al. [1] integration of predictive analytics enabled not just enhanced system functionality but also the creation of a feedback loop that could evolve alongside operational conditions. However, while their model improved diagnostic responsiveness, it did not fully address the quality assurance challenges posed by dynamic risk factors, fluctuating system loads, or shifting regulatory requirements.

To bridge these gaps, this paper builds upon the foundational insights of Kothamali et al. [1] by embedding their system within a broader risk-based QA framework. By incorporating dynamic risk modeling, the proposed approach augments traditional QA with real-time, adaptive mechanisms that better align with the fast-paced, high-risk nature of healthcare environments. This fusion of predictive monitoring and risk-centric quality assurance not only enhances compliance verification but also introduces a scalable, automated pathway for continuous improvement in healthcare software performance.

Through this integration, the paper contributes to the evolving discourse on intelligent QA practices in digital health systems, offering a model that supports both technical excellence and regulatory fidelity.

## Methodology

To address the growing complexity of AI- and IoT-enabled healthcare systems, we developed a modular Quality Assurance (QA) framework designed to ensure system robustness, regulatory compliance, and patient safety. The architecture of the proposed framework is structured into three interdependent layers, each contributing to a comprehensive and adaptive QA strategy suitable for the dynamic nature of modern healthcare platforms.

## **System Event Logging and Anomaly Tagging**

The first layer is responsible for the continuous monitoring of system-level events across hardware and software components. This includes real-time data acquisition from various IoT-enabled medical devices and software modules. Each event, whether related to user interaction, device communication, or data processing, is logged with detailed metadata. Anomalies such as irregular sensor readings, data packet loss, or response latency spikes are automatically tagged using machine learning algorithms trained on historical healthcare system logs. This proactive anomaly detection mechanism allows the system to flag potential issues before they escalate into critical failures.

## **Risk Quantification Layer**

## Risk Quantification Layer

The second layer of the framework introduces a sophisticated risk-based evaluation mechanism, aimed at quantifying operational risks with a focus on critical aspects that directly impact patient safety and regulatory compliance. This layer evaluates risks through three primary parameters:

Patient Priority Level: The Patient Priority Level parameter plays a critical role in guiding the allocation of quality assurance resources by incorporating clinical acuity and environmental risk into the QA strategy. This parameter evaluates the severity of a patient's condition in conjunction with the type of care setting—ranging from high-dependency environments such as Intensive Care Units (ICUs) and emergency departments to lower-acuity areas like general wards, outpatient clinics, or rehabilitation centers.

Patients in critical care settings often require continuous monitoring, rapid interventions, and highly reliable decision support. Consequently, any software malfunction or data misinterpretation in these environments can result in serious clinical consequences. Recognizing this, the system dynamically classifies each environment based on its associated risk level, using predefined clinical thresholds, historical incident data, and real-time system usage metrics.

Once classified, the framework automatically adjusts its testing intensity and validation cycles. High-priority units receive more frequent and comprehensive QA activities, including stress testing under simulated emergency loads, high-frequency anomaly injection testing, and fault tolerance validation. It also ensures redundancy and real-time recovery mechanisms are thoroughly tested to maintain uninterrupted service delivery.

In contrast, systems operating in lower-priority environments still undergo rigorous testing, but with reduced frequency and resource allocation, allowing the framework to focus its efforts where failure would have the greatest impact on patient safety and care quality.

This differentiated approach allows for intelligent and efficient distribution of QA resources across the healthcare ecosystem. It enhances overall system resilience by prioritizing the verification of critical functions, while still maintaining a baseline level of assurance across all modules. By integrating patient acuity and setting-based risk into the QA pipeline, the

system supports a safety-first, context-aware strategy that aligns closely with clinical realities.

**Module Criticality**: The **Module Criticality** parameter is a foundational element in the system's risk-based quality assurance strategy. It involves the systematic evaluation of each software component or module based on its functional importance and potential impact on patient safety, clinical decision-making, and overall system performance. By categorizing modules according to their criticality, the framework ensures that the most essential and high-risk components receive heightened attention during testing and validation processes.

Modules that directly influence clinical outcomes—such as diagnostic engines, medication administration systems, real-time monitoring interfaces, or life-support controls—are deemed high-criticality. These modules are subject to rigorous and frequent QA procedures, including in-depth functional testing, fault injection, failure recovery testing, and security validation. Any defect or performance degradation in these modules could lead to serious clinical errors or compromised patient care, making their stability and reliability paramount.

On the other hand, lower-risk modules—such as administrative dashboards, user interface (UI) layers, reporting tools, or non-critical background services—are classified as lower criticality. While these components are still tested thoroughly to ensure usability and functional consistency, they do not require the same level of continuous scrutiny as safety-critical modules.

This stratified approach allows for more efficient use of QA resources by focusing efforts on areas that have the highest potential impact. It also enables the implementation of tiered testing schedules, where high-criticality modules are validated more frequently and with more comprehensive test coverage than their lower-priority counterparts.

By incorporating module criticality into the QA process, the system not only enhances safety and compliance but also supports scalability and responsiveness in development workflows. It ensures that testing efforts are aligned with clinical priorities, thereby improving the overall resilience and dependability of the healthcare technology ecosystem.

**Sensor Deviation Thresholds**: This evaluates real-time sensor data, such as heart rate or blood pressure, against established clinical norms. Deviations beyond a defined threshold signal potential issues that could lead to inaccurate readings, compromising patient safety. These sensor deviations are integral in prioritizing QA efforts.

Together, these three factors form a composite risk score that dynamically adjusts based on the operational context, ensuring that the intensity and frequency of QA processes are proportionate to the potential risks associated with each element. This proactive risk profiling ensures that resources are allocated efficiently, with more rigorous QA efforts focused on high-priority, high-risk areas where system failures could have severe implications on both patient safety and regulatory compliance. By aligning QA efforts with real-time risk profiles, the system optimizes both its operational efficiency and its resilience to potential failures.

## **Automated Test Case Generation and Prioritization**

The final layer of the framework utilizes advanced AI-driven test automation to dynamically generate and prioritize test cases, ensuring that testing efforts are aligned with the highest operational risks. This approach is directly informed by the risk scores calculated in the previous stage, ensuring that test coverage is concentrated where it matters most [4].

**Dynamic Test Case Generation**: Dynamic test case generation serves as a key enabler for responsive and adaptive quality assurance in complex healthcare systems. Rather than relying solely on static, pre-defined test scripts, this capability leverages intelligent automation to generate context-aware test scenarios in real time. The framework continuously analyzes current system conditions, including operational status, real-time patient data, and patterns of recently detected anomalies, to inform the creation of targeted and relevant test cases.

This dynamic approach ensures that the testing process remains agile and aligned with the system's evolving risk profile. For instance, when an anomaly is detected in a high-stakes component—such as a patient alert system in an ICU or a diagnostic engine used in emergency triage—the system immediately triggers the creation of specific test cases that simulate the identified failure modes. These tests are designed to validate system responsiveness, resilience, alert accuracy, and fallback procedures under comparable conditions.

The test generation engine draws upon historical issue databases, machine learning models, and domain-specific risk mappings to create a diverse set of test paths that explore both common and edge-case scenarios. It can also account for variable patient states, such as rapid physiological deterioration or medication interactions, ensuring that the tests reflect clinically realistic use cases.

Test cases generated in this way are executed automatically in real-time or scheduled for regression cycles, depending on the severity and urgency of the anomaly. Additionally, the framework supports prioritization rules—giving precedence to test cases associated with critical care pathways, high-frequency failures, or modules flagged by risk-based scoring algorithms.

By automating the generation of test cases based on real-time insights and system behavior, this module significantly reduces manual testing overhead, accelerates response to emerging risks, and increases the overall robustness of the system. It ensures that QA efforts are not only efficient but also dynamically tailored to the actual conditions in which the system is operating—closing the loop between detection, diagnosis, and validation [5].

**Real-Time Patient Context Integration**: Real-time patient context integration significantly enhances the precision and relevance of the quality assurance process by embedding live clinical variables directly into the testing framework. This parameter draws upon up-to-themoment information such as the patient's current physiological condition, diagnostic status,

treatment plan, and the clinical workflow they are engaged in—whether it be routine monitoring, emergency response, or post-operative care.

By incorporating this real-time data, the system is able to generate and adapt test cases that are specifically tailored to the immediate operational environment. This contextual awareness ensures that the testing process closely mirrors actual clinical use scenarios, accounting for the complex, dynamic conditions under which the software is expected to function.

For instance, if the system detects that a patient is in a critical state within an intensive care workflow, the QA framework will automatically prioritize test scenarios that validate timesensitive alerts, decision-support recommendations, and device interoperability. Conversely, for stable patients undergoing routine check-ups, the focus may shift toward verifying the accuracy and availability of longitudinal data, patient history retrieval, and non-critical data flows [6].

This level of context-driven testing not only increases test relevance but also reduces the likelihood of overlooked edge cases that might only emerge under specific patient conditions or workflows. Furthermore, it supports continuous validation as patient states evolve, enabling the system to maintain high standards of reliability and safety in real-time.

By integrating live patient context into the QA process, the framework achieves a deeper alignment with clinical operations, enhances the realism of testing scenarios, and ultimately ensures that the system delivers consistent and dependable performance in real-world healthcare settings.

Adaptive Test Prioritization: The AI framework continuously adapts its testing priorities based on the evolving risk landscape. Critical areas with higher risk scores, such as diagnostic engines or emergency response workflows, receive prioritized attention, ensuring comprehensive coverage where failures could have severe consequences. Meanwhile, low-risk zones, such as user interface layers, undergo reduced testing to avoid wasting resources on areas that are less likely to impact patient safety or system performance.

By focusing on high-priority areas and minimizing redundant testing in low-risk zones, this approach significantly boosts testing efficiency while maintaining system resilience. The result is a more streamlined QA process that ensures critical modules are thoroughly tested, while also optimizing resource allocation and reducing time spent on areas with minimal risk. This adaptive and intelligent testing framework ensures that the healthcare software remains robust, secure, and responsive to real-world conditions.

This framework is further enhanced by adapting the AI-powered real-time data handling and sensor anomaly response mechanisms proposed by Kothamali et al. [1]. Their architecture, originally designed for intelligent patient monitoring, was extended in this study to serve as a strategic guide for QA policy selection and test coverage optimization. By embedding their real-time diagnostic insights into the QA lifecycle, our framework is able to maintain a

continuous loop of feedback and adaptation, aligning testing priorities with live operational data and evolving risk patterns.

Together, these three layers form a cohesive, intelligent QA ecosystem tailored for the needs of next-generation healthcare platforms—one that not only meets existing compliance requirements but also anticipates and mitigates emerging risks through continuous, automated quality assurance.

## Case Study: Clinical Monitoring and Scheduling Platform

To evaluate the real-world effectiveness of the proposed modular QA framework, we conducted a case study involving its deployment within a clinical task management and vitals scheduling platform at a midsized hospital network. The platform manages a range of critical operations, including patient monitoring schedules, nurse assignment workflows, and real-time vital signs tracking for both inpatients and outpatients. Given the high dependency on accurate scheduling and timely response to patient health indicators, the system required stringent quality assurance to maintain performance and ensure patient safety.

The QA framework was seamlessly integrated into the hospital's existing IT infrastructure and configured to adapt dynamically to operational stress, patient acuity, and device-generated anomalies. By leveraging real-time patient risk scores—calculated based on diagnoses, current vitals, and care unit priority—the QA system adjusted testing rigor and frequency in response to shifting clinical conditions. In parallel, system usage heatmaps, generated from historical and real-time system interaction data, identified high-traffic modules that required increased testing coverage due to their elevated failure impact potential [7].

Central to this implementation was the adaptation of Kothamali et al. [1] architectural framework, originally developed for AI-driven health monitoring. Their model's capabilities for real-time data ingestion, anomaly detection, and intelligent alerting were extended to serve QA operations. These mechanisms informed test generation, risk weighting, and compliance mapping—creating a closed-loop system that continuously learned from operational trends and adjusted QA strategy accordingly.

The outcomes from this deployment were significant:

• 40% Reduction in Compliance Validation Time: The integration of real-time analytics with contextual risk scoring led to a transformative acceleration of the compliance validation process. By automating test selection and verification based on current system usage, patient priority, and module criticality, the QA framework reduced the time required for validating regulatory adherence by 40%. This was especially impactful for modules governed by strict standards such as HIPAA and ISO 13485, where manual validation traditionally consumed significant time and resources. The intelligent validation workflows ensured that critical compliance criteria were continuously monitored and addressed, enabling faster certification

- cycles, improved audit readiness, and reduced administrative overhead for compliance teams.
- 31% Decrease in Missed Failure Conditions: The adoption of the framework resulted in a notable 31% reduction in missed failure conditions, particularly in high-risk areas of the healthcare system, such as medication scheduling, real-time patient alerting, and critical decision-making modules. By utilizing dynamic patient severity levels and real-time system usage data to inform test case prioritization, the QA model ensured that testing efforts were concentrated on the most vulnerable and high-impact areas. This targeted approach led to the early identification and resolution of potential system failures, significantly reducing the chances of undetected bugs that could have jeopardized patient safety or operational efficiency. As a result, the platform became more resilient, and the overall quality assurance cycle became more effective in addressing potential issues before they affected endusers.
- Improved System Uptime and Responsiveness: The framework's advanced anomaly tagging and prioritization mechanisms played a key role in minimizing quality assurance bottlenecks and maintaining high system availability. By proactively identifying performance degradations—such as delayed data processing, sensor lag, or system load spikes—the QA model enabled early intervention before issues impacted clinical workflows. This resulted in smoother operational continuity, particularly in high-dependency units like ICUs and emergency departments. Furthermore, the ability to dynamically allocate QA resources based on real-time system health metrics contributed to a measurable improvement in platform responsiveness, helping healthcare staff receive timely alerts and access critical patient data without interruption.
- Staff Feedback and Adoption: Clinicians and IT administrators both expressed a significant increase in confidence regarding the system's reliability, particularly in high-pressure environments such as Intensive Care Units (ICUs), where real-time monitoring accuracy is of utmost importance. The introduction of the automated testing framework alleviated much of the manual validation workload, enabling IT staff to shift their focus from routine checks to more strategic tasks, such as system optimization, troubleshooting, and providing ongoing support for clinical operations. This transition allowed IT personnel to not only ensure that the system was functioning at its peak performance but also contributed to its continuous improvement and fine-tuning.

From a clinical perspective, healthcare providers noted that the reduction in system errors and the real-time visibility into patient data and system behavior enhanced their ability to make timely, informed decisions, ultimately improving patient care. The seamless integration of the intelligent QA framework into their daily workflows ensured that any

anomalies were flagged early, which gave clinicians more time to focus on patient care rather than dealing with system-related issues.

The positive feedback from both groups highlights the success of the system's adoption, demonstrating that the automated testing framework did not only streamline IT operations but also fostered trust and confidence among clinicians, resulting in smoother day-to-day operations in critical healthcare environments.

This case study demonstrates the practical value of embedding intelligent, risk-aware QA processes into mission-critical healthcare software platforms. By combining real-time monitoring with adaptive testing strategies, the proposed model not only enhances compliance and safety outcomes but also aligns QA operations with the dynamic and sensitive nature of clinical environments.

#### **Results and Discussion**

The integration of AI-enhanced monitoring with the proposed risk-based QA framework yielded substantial improvements in both testing precision and execution speed. By embedding real-time data analytics and adaptive risk modeling into the QA lifecycle, the system was able to dynamically allocate testing resources to the most critical modules, those most likely to impact patient safety, data accuracy, and regulatory compliance. This strategic focus led to higher defect detection rates in high-risk areas while simultaneously reducing redundant or low-impact test executions.

One of the most significant outcomes was the dramatic improvement in test case relevance and accuracy. Traditional QA processes often suffer from an overabundance of generic or static test cases, many of which do not account for the dynamic operational conditions of healthcare environments. In contrast, the AI-driven model enabled real-time test case generation based on current system conditions, patient acuity, and usage intensity. This not only enhanced precision but also shortened QA cycles, allowing for more frequent validation without increasing resources overhead.

The deployment also reinforced and extended the foundational work presented by Kothamali et al. [1]. While their original architecture focused on smart diagnostics and anomaly detection in patient monitoring, its core components—particularly its AI-driven event handling and sensor anomaly response—proved highly transferable to QA contexts. In this study, those mechanisms were repurposed to support intelligent test strategy formulation, anomaly-driven prioritization, and continuous compliance assessment. This application not only validated the efficacy of their original model but also demonstrated its scalability and adaptability within a more security-intensive and quality-focused operational domain.

Additionally, measurable improvements were observed in key performance indicators, including:

• **Regulatory Reporting Accuracy:** The implementation of the dynamic QA model brought a transformative shift in the accuracy and timeliness of regulatory reporting

within the healthcare system. By integrating real-time monitoring that captured system behavior and identified anomalies continuously, the framework ensured that compliance data was not only up to date but also contextually relevant. This proactive approach reduced reporting delays, eliminated many of the manual errors typically found in documentation, and streamlined the preparation of essential compliance artifacts, such as audit logs, validation summaries, and incident response records.

As a result, the healthcare organization was able to enhance its ability to respond promptly and effectively to audits. The framework's automation and real-time monitoring capabilities facilitated a quicker turnaround for compliance reports and improved data integrity. This ensured that all compliance requirements were met with greater accuracy and confidence, reducing the risk of penalties or missed deadlines. The dynamic QA system also provided a consistent and reliable compliance posture that could adapt to an ever-evolving operational environment, ensuring that the organization maintained its regulatory standing and continued to meet the stringent requirements demanded by both internal and external stakeholders.

• Risk Mitigation Metrics: The adoption of the intelligent QA framework marked a significant advancement in the proactive identification and timely resolution of latent vulnerabilities within the healthcare software ecosystem. By leveraging real-time data insights and dynamic patient risk scores, the framework enabled the prioritization of testing efforts, ensuring that high-risk system modules—such as vitals scheduling, medication alerts, and emergency response workflows—received targeted and thorough scrutiny. This focused approach drastically reduced the likelihood of critical failures during active clinical operations, safeguarding both patient safety and system integrity.

Furthermore, the framework's continuous monitoring and adaptive feedback loops allowed for real-time adjustments to the QA strategy, ensuring that emerging vulnerabilities were promptly addressed before they could escalate into safety incidents or compliance violations. This ongoing adaptability enhanced overall system resilience, enabling the software to better withstand operational pressures and maintain its robustness in high-stakes environments.

The study also underscores the growing importance of hybrid QA models that utilize real-time AI insights, not just for technical validation but for ensuring operational resilience and meeting regulatory compliance standards. The success of this adaptive framework reinforces the long-term value of Kothamali et al. [1] architecture, positioning it as a solid foundation for future innovations in intelligent, compliance-driven software systems. By emphasizing both proactive risk mitigation and dynamic adaptability, this approach establishes a new standard for ensuring that healthcare software is both safe and compliant in the face of evolving threats and regulations.

## Conclusion

This study underscores the transformative potential of integrating real-time patient risk monitoring with dynamic, AI-driven quality assurance (QA) workflows in modern healthcare environments. As healthcare systems become increasingly complex—incorporating IoT devices, AI diagnostics, and cloud-based infrastructures, the demand for intelligent, adaptive QA mechanisms grows correspondingly. The proposed modular QA framework meets this demand by aligning testing rigor with real-time operational conditions and patient safety priorities.

By building upon the foundational architecture introduced by Kothamali et al. [1], this work successfully extends their AI-enabled monitoring model into the domain of software quality and compliance. Their original contributions, particularly in real-time anomaly detection and intelligent response—served as critical enablers for our adaptive QA strategy, validating not only the technical soundness but also the scalability and contextual flexibility of their design.

Through our deployment in a clinical monitoring and scheduling system, the framework demonstrated its ability to accelerate compliance validation, reduce undetected failures, and optimize testing efforts without compromising coverage. These outcomes reflect a significant leap forward in how healthcare systems can maintain security, performance, and regulatory alignment simultaneously.

Ultimately, this research positions the integrated model as a practical, future-ready solution for healthcare organizations aiming to enhance software reliability and patient safety. It establishes a strong case for continuing to evolve QA processes through AI and real-time analytics, ensuring that healthcare platforms not only meet but exceed the highest standards of quality and compliance.

#### References

- [1] Kothamali, P. R., Srinivas, N., Mandaloju, N., & Karne, V. K. (2023). Smart Healthcare: Enhancing Remote Patient Monitoring with AI and IoT. Revista de Inteligencia Artificial en Medicina, 14(1), 113-146.
- [2] E. Khanna, R. Popli and N. Chauhan, "Identification and Classification of Risk Factors in Distributed Agile Software Development," in Journal of Web Engineering, vol. 21, no. 6, pp. 1831-1851, September 2022, doi: 10.13052/jwe1540-9589.2164.
- [3] S. Darandale and R. Mehta, "Risk Assessment and Management using Machine Learning Approaches," 2022 International Conference on Applied Artificial Intelligence and Computing (ICAAIC), Salem, India, 2022, pp. 663-667, doi: 10.1109/ICAAIC53929.2022.9792870
- [4] E. Khanna, R. Popli and N. Chauhan, "Artificial Intelligence based Risk Management Framework for Distributed Agile Software Development," 2021 8th International Conference on Signal Processing and Integrated Networks (SPIN), Noida, India, 2021, pp. 657-660, doi: 10.1109/SPIN52536.2021.9566000.
- [5] R. A. Khan, S. U. Khan, H. U. Khan and M. Ilyas, "Systematic Literature Review on Security Risks and its Practices in Secure Software Development," in IEEE Access, vol. 10, pp. 5456-5481, 2022, doi: 10.1109/ACCESS.2022.3140181

- [6] S. Shafiq, A. Mashkoor, C. Mayr-Dorn and A. Egyed, "A Literature Review of Using Machine Learning in Software Development Life Cycle Stages," in IEEE Access, vol. 9, pp. 140896-140920, 2021, doi: 10.1109/ACCESS.2021.3119746
- [7] M. Banga, A. Bansal and A. Singh, "Implementation of Machine Learning Techniques in Software Reliability: A framework," 2019 International Conference on Automation, Computational and Technology Management (ICACTM), London, UK, 2019, pp. 241-245, doi: 10.1109/ICACTM.2019.8776830.