





# Opening Remarks

**Speaker:**



**Theresa Barry**  
Data & Clinical Terminology  
Architecture Lead, HSE



# Agenda for Playback Webinar










Session duration: 1 hr, 2-3 PM on 27<sup>th</sup> March 2025



Short session



Webinar

	Session		Duration		Speakers
	Hear from CDAO		10 mins		Tom Laffan
	Summary of Data Conference		10 mins		Theresa Barry
	European Health Data Space (EHDS) Regulation - Update		7 mins		Muiris O'Connor
	IHI and PPSN		7 mins		Darren Waters
	SNOMED and Clinical Terminologies		8 mins		Yvonne Coughlan
	Future Sessions		10 mins		Theresa Barry



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# Hear from CDAO

**Speaker:**



**Tom Laffan**  
Chief Data and Analytics Officer  
(CDAO) , HSE



# Chief Data and Analytics Office

## *Role of the recently established Chief Data and Analytics Office*

- The Chief Data and Analytics Office will aim to ensure the delivery of high-quality health data that can drive value for all the people who need to use and access data within the health system. Furthermore, it will ensure that the right tools and insights are available to all services and staff to maximise data for the benefit of patients, staff and services.
- The office is currently comprised a number of data related functions which includes the Integrated Information Systems, Health Identifiers, Health Data Standards and Artificial Intelligence and Automation COE. The integration of these functions will enable a more coordinated approach to data-driven decision-making and programme delivery, improving the efficiency and impact of our health service.



# Data Strategy & Operating Model – Workstream Overview



- 01 Develop Data Strategy**

Analyse the current state data landscape. **Identify and prioritise service use-cases from stakeholder interviews** and HSE strategy documents. The prioritised data use cases will then be translated into data capabilities. These will be used to design the key data structures to deliver these capabilities.
- 02 Data Management and Analytics Operating Model**

Develop capabilities, roles, and processes to ensure effective data management and analytics are aligned with HSE objectives. This work will outline updates needed to the organisational model and operational processes for data management and data quality. REOs will play a key role in the Operating Model design.
- 03 Immediate Priorities**

Identify and prioritise “no regret” activities that can begin development immediately
- 04 Legislation Review**

Review and assess impacts of current / planned legislation
- 05 Stakeholder Management**

Identification of stakeholders and development of Communications Plan



# Data Strategy & Operating Model - Progress Update



Workstream	Update	Next Steps
<b>Stakeholder Management</b>	<ul style="list-style-type: none"><li>Stakeholders identified and engagement meetings scheduled</li><li>Stakeholder meetings in progress (approach outlined on slide below)</li></ul>	<ul style="list-style-type: none"><li>Continue stakeholder engagement throughout March and into April 2025</li><li>Review outcome of engagement</li></ul>
<b>Data Strategy</b>	<ul style="list-style-type: none"><li>Review of relevant documentation to support stakeholder engagement and to feed into data strategy in progress (NSP, WLAP, Digital for Health 2030, Digital Health Implementation Roadmap 2030, Programme for Government, etc)</li></ul>	<ul style="list-style-type: none"><li>Draft strategy based on HSE strategic objectives, identified data limitations and constraints</li></ul>
<b>Data and Analytics Operating Model</b>	<ul style="list-style-type: none"><li>'As is' mapping in progress</li><li>Assessment of sample operating models in progress</li></ul>	<ul style="list-style-type: none"><li>Develop high level operating model design</li></ul>
<b>Legislation Review</b>	<ul style="list-style-type: none"><li>Review of key legislation in progress (Health Information Bill, European Health Data Space Legislation, EU AI Act, NIS 2, HIQA National Standards, EU Open Data Act, EU Data Governance Act, PPSN – Social Welfare Consolidation Act, National Archive Legislation)</li></ul>	<ul style="list-style-type: none"><li>Assess impact of current/planned legislation on data strategy and data management plan</li></ul>

# Data Strategy Link to DCAM

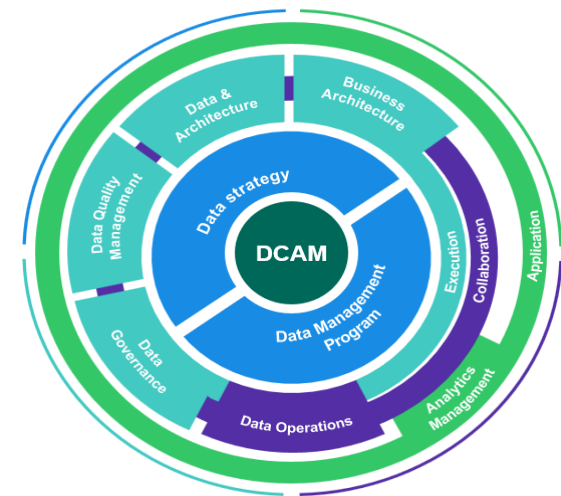


## Data Management Capability Assessment Model (DCAM):

- Recognising the critical nature of data in our organisation, the CTTO office undertook a Data Management Capability Assessment in 2024 utilising an international standard model - The Data Management Capability Assessment Model (DCAM).
- DCAM defines the scope of capabilities required to design, establish, enable, and sustain a mature data management discipline. It addresses the strategies, organisational structures, technology, and operational best practices needed to drive data management successfully.
- The HSE DCAM assessment indicated a low level of data management maturity in the HSE. The components of DCAM are illustrated in the diagram below.

The DCAM report defines the scope of capabilities required by the HSE for a mature data management discipline. The Data Strategy and Data Management Plan will build on this.

### DCAM Components:



By working with the key stakeholders, we will capture and prioritise the specific data-related service use cases and issues that require remediation. This will drive the sequence we build our DCAM data management capabilities. We will focus on the areas that have a prompt impact for the HSE.

In the DCAM model, each component includes **capabilities** that are required for data management. Addressing the identified data limitations of the service use cases will require development and enhancement of these capabilities

For example, under the Data Quality component, the capabilities below will be developed in a way that addresses the specific issues that are raised by the use cases identified through stakeholder engagement.

1. Establish a Data Quality Management (DQM) function within the Office of the CDAO.
2. Design and implement sustainable business-as-usual processes and tools for DQM.
3. Execute DQM processes against business-critical data.
4. Establish DQ metrics and reporting routines.
5. Processes must include profiling, grading, measurement, defect management, root cause fix and remediation.
6. Ensure that the DQM governance is integrated into overall Data Governance (DG).



**Thank You**



# Summary of Data Conference

**Speaker:**



**Theresa Barry**  
Data & Clinical Terminology  
Architecture Lead, HSE



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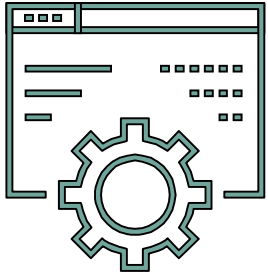


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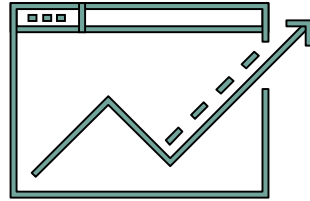
# Theme for the Conference

**Overarching Theme:** Utilising power of new technologies, digital, data, and data standards to transform how health & social care services are delivered for our population



## **Engagement on Key Data and Digital Health Topics:**

Providing in-depth insights on topics like clinical terminologies, data messaging standards, legislations, digital initiatives



## **Defining the art of the possible for data standards**

and relevance from clinical, patient and regional perspective



**Identifying** key concerns, challenges and support needed to achieve Digital and Data Standards



**Aligning** on the vision through insights, next steps and DCAM roadmap

Before Coffee: 9:30 -10:40

After Coffee:11:10 – 12:40

After Lunch:13:40 -16:00



# Inputs from the Audience



Key themes flagged through the day by attendees

## Awareness of Strategies & Legislation

80% of respondents know about the Digital for Care Roadmap

82% know about the Health Information Bill and respondents also feel this will have a significant positive impact on their work

89% know about the Know about the Digital for Care: A Digital Health Framework for Ireland 2024 -2030?

## What is your understanding of the impact of this legislation will have on your work?

- Collective responsibility & collaboration
- Demonstrate capability to deliver
- Safety and quality standardisation

## Challenges in working with Data Standards?

- 77% has worked with data standards before.
- Variation in approach
- Understanding
- Siloed data & lack of systems
- Supports

## Supports needed?

- Training & Education
- Governance
- Leadership
- Clinical engagement

## Data Management Maturity Assessment Capabilities required for your area ?

1. Data Management Strategy
2. Data Governance
3. Data Quality Management

## Priorities for developing a data strategy?

- Patient Pathways
- Standardisation
- Strategy and implementation should be aligned

## Most interesting about the session?

- Alignment & collaboration between the Department & HSE – policy & implementation coming together
- Panel discussions
- Importance of standards to support interoperability and remove data silos
- Update on the initiatives





# Inputs from the Audience



Key themes flagged through the day by attendees

## Awareness about current Data Standards?

- 93% know about SNOMED
- 60% know about FHIR
- 57% know about GS1
- 33% know about OpenEHR

## Areas of interest in SNOMED?

- 75% said Development of Clinical Datasets
- 62% said Education & Awareness

## Info on data standards?

- 86% find information from Internet/Search Engines
- 42% know about DSMP

## Priorities for HSE data dictionary?

- Increase accessibility
- Enforce usage
- Standardised terminology

## Opportunities of implementing AI with data standards within your team?

- Audit and Quality improvement
- Medical guideline adherence
- An enabler to clinician and staff

## Challenges

- Trust
- Awareness
- Data Quality

## Effective strategies for improving Data Quality?

- Data quality training
- Data validation
- Ensuring education & understanding

## HIQA's role in data standardisation?

- 78% are aware about the role

## Steps to prepare for secondary use of data under EHDS?

- Data Quality
- Training & education
- Data regulations

## Session Feedback

- 100% found the conference useful

## Future sessions on data?

- 83% said Development of Data Strategy
- 67% said Webinars
- 58% said Training

## Support required?

- Governance
- Database tools
- Dedicated clinical digital staff



# Inputs from Audience – Key Callouts

## Feedback

**100% attendees found conference useful** and requested for periodic events



Most attendees found **alignment & collaboration between the Department & HSE most interesting**– policy & implementation coming together

## Support Required

**Need for Training and Awareness sessions on Data Standards.**



Key Priorities  
**Data Management Strategy**  
**Data Governance**  
**Data Quality Management**



# Social Media Engagement

## Feedback and Insights from Conference

“Fantastic to be part of this event for @openEHR with the HSE in Ireland”

“Love this, a great reflection of the discussion. Interoperability by design needs to be front and centre of all digital health solutions.”

“Looking forward to attending”

“Brilliant event today. Well done to the HSE Technology and Transformation team”

“What a day of insightful conversations at the Digital for Care Conference! It’s inspiring to see the collective focus on improving healthcare through data standards, interoperability, and digital transformation”



## Linkedin Engagement

- Total Impressions: **40,000+**
- Total Engagement: **8,000+**



## X Engagement

- Total Impressions: **19,735+**
- Total Engagement: **1,350+**



**Thank You**



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Department of Health

# European Health Data Space (EHDS) Regulation - Update

**Speaker:**



Assistant Secretary Muiris O'Connor  
R&D and Health Analytics Division  
Department of Health  
27 March 2025

# EHDS Regulation

## The EHDS Regulation will:

- empower individuals with better access to their personal electronic health data
- enable health professionals to have access to relevant health data for the delivery of healthcare across the EU (**primary use of data**)
- facilitate access to health data for research, innovation, policy-making, and regulatory activities (**secondary use of data**).

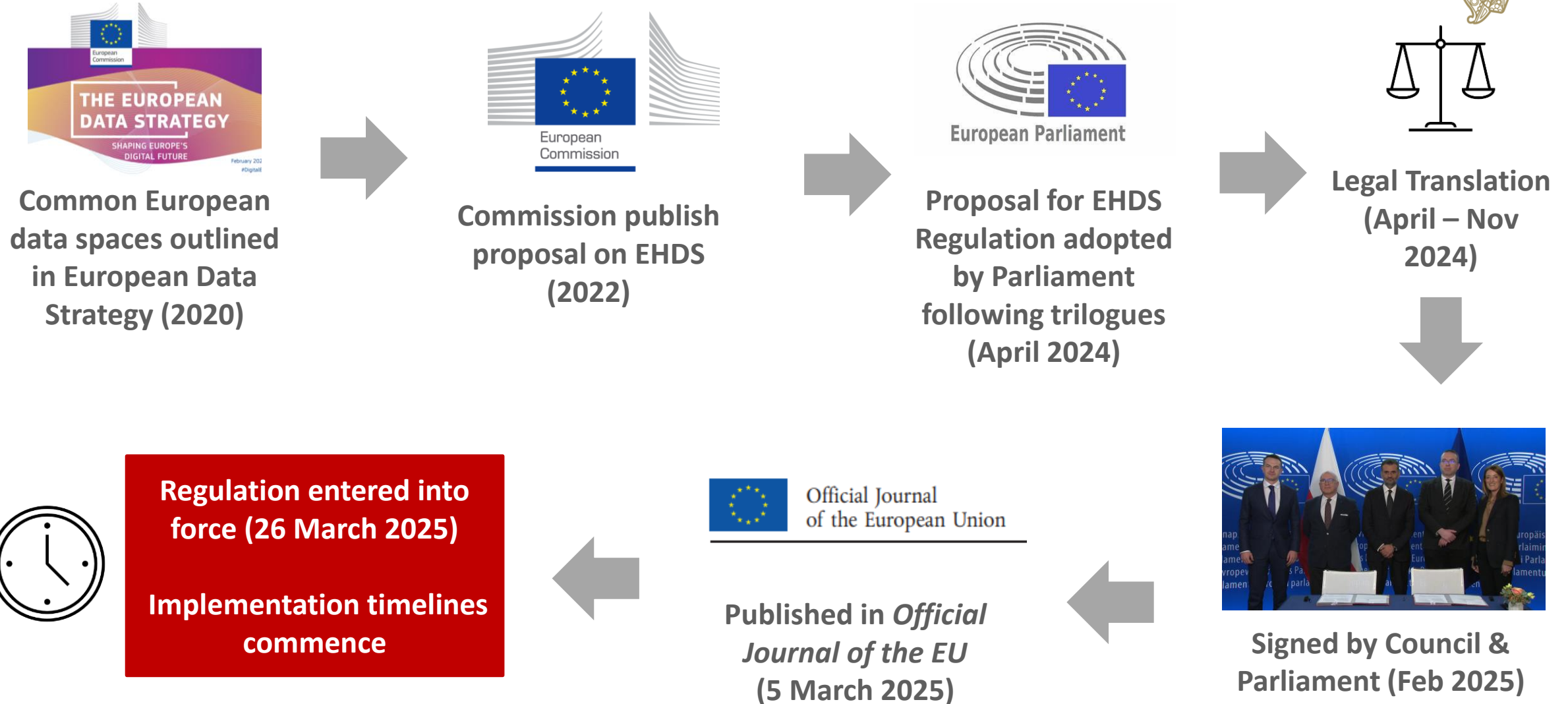
## This will be achieved by:

Providing a common  
governance framework  
& harmonised  
infrastructure

Facilitating the use of  
EU standardised and  
interoperable EHRs

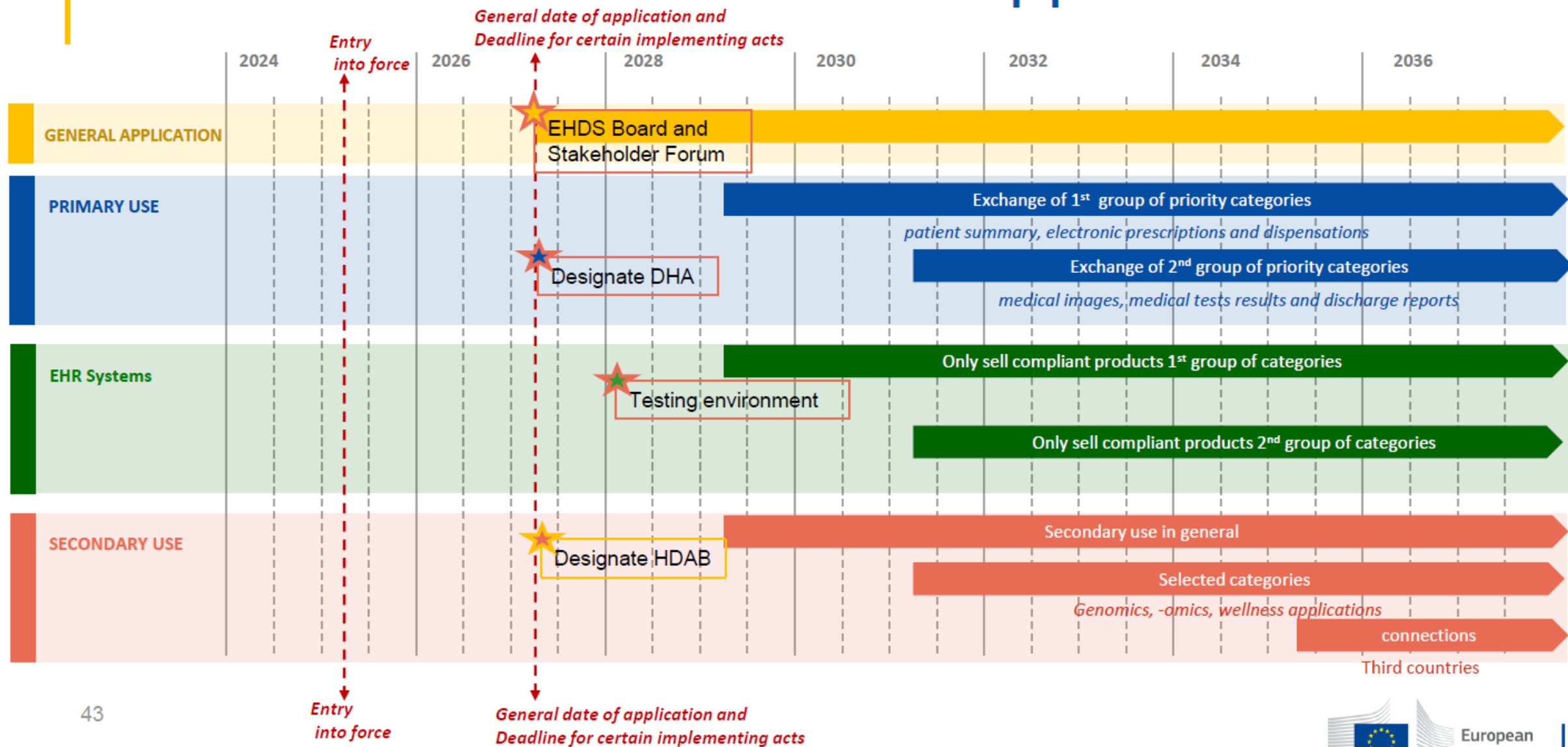
Establishing  
fundamental patient  
rights for personal  
electronic health data

# Background





# EHDS – Overall timeline for application



# Implementation of the EHDS Regulation

## Legislative Landscape

The Health  
Information Bill (2024)

A Statutory Instrument  
on the EHDS (2025)

Expansion of health  
information legislation  
(2026)

## Primary Health Data Landscape

Digital for Care: A  
Digital Health  
Framework for  
Ireland, 2024-2030

HSE Digital Roadmap

National Engagement  
on Digital Health &  
Social Care

MyHealth@EU & the  
eHealth Network

## Secondary Health Data Landscape

HealthData@IE Direct  
Grant

EU Community of  
Practice

TEHDAS2

Quantum Joint Action



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Department of Health

# Governance & Infrastructure

## Digital Health Authority

- To monitor and support the implementation of **health data for primary use**
- To serve as the National Contact Point for **MyHealth@EU**, which enables cross-border exchange of data for primary use.

## Health Data Access Body

- To provide guidance and support access to **health data for secondary use**
- To serve as the National Contact Point for **HealthData@EU**, which enables cross-border exchange of data for secondary use.

## Market Surveillance Authority

- To monitor **compliance of EHR systems** with EHDS Regulation.

# Health Information Bill

(published 19  
July 2024)

**Foundational legislation:** a key enabler of *Digital for Care: A Digital Health Framework for Ireland 2024-2030* and support for EHDS national implementation.

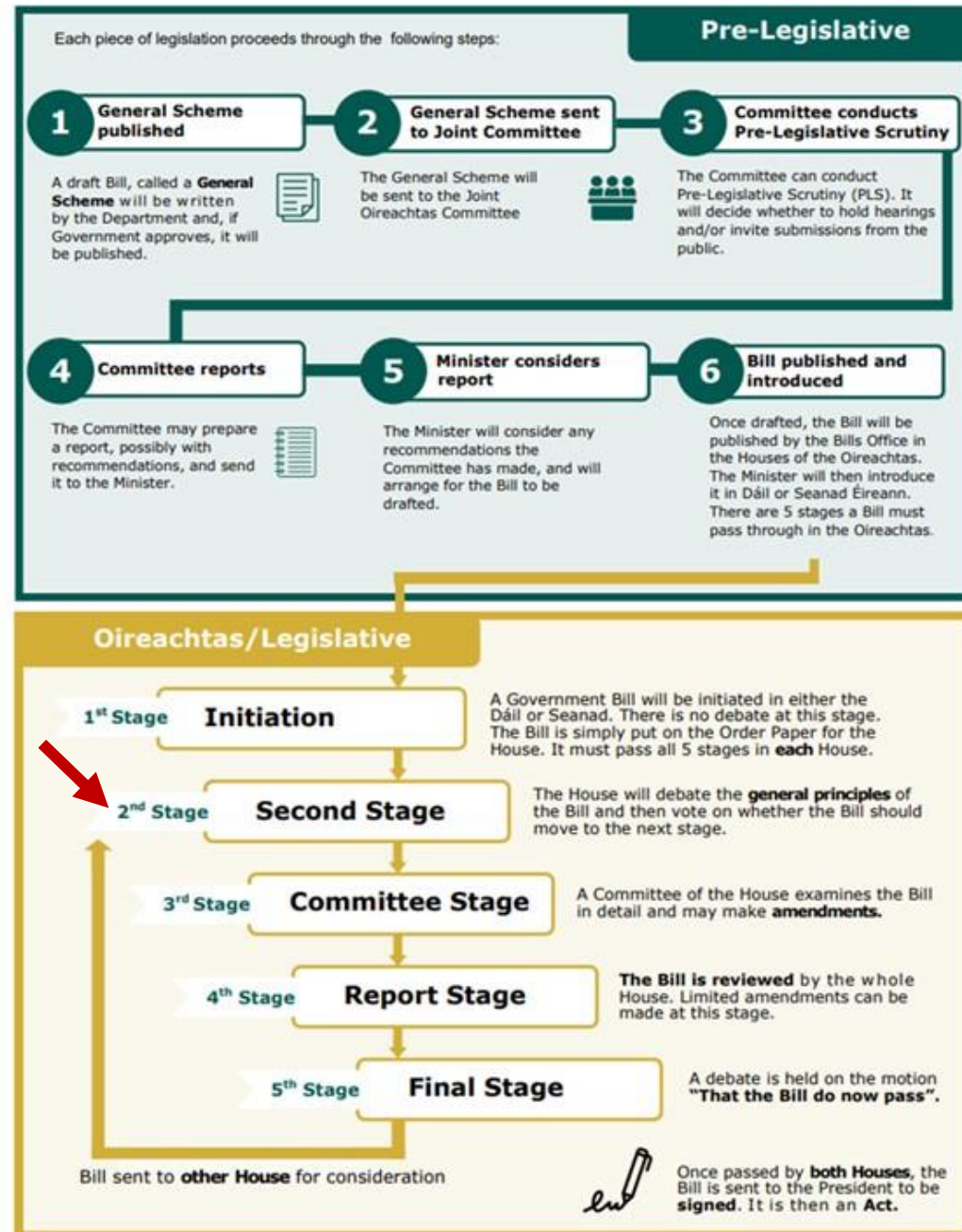
Part 1: Preliminary and General

Part 2: A '**duty to share**' health information for care and treatment, spanning public, private and voluntary settings.

Part 3: A legal framework for the development of **digital health records** in Ireland and **enhanced patient access** to their digital health records.

Part 4: **Enhanced provision of information to HSE for its secondary use.**

# Legislative process – awaiting Dáil Committee Stage





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Thank you



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# IHI & PPSN

**Speaker:**



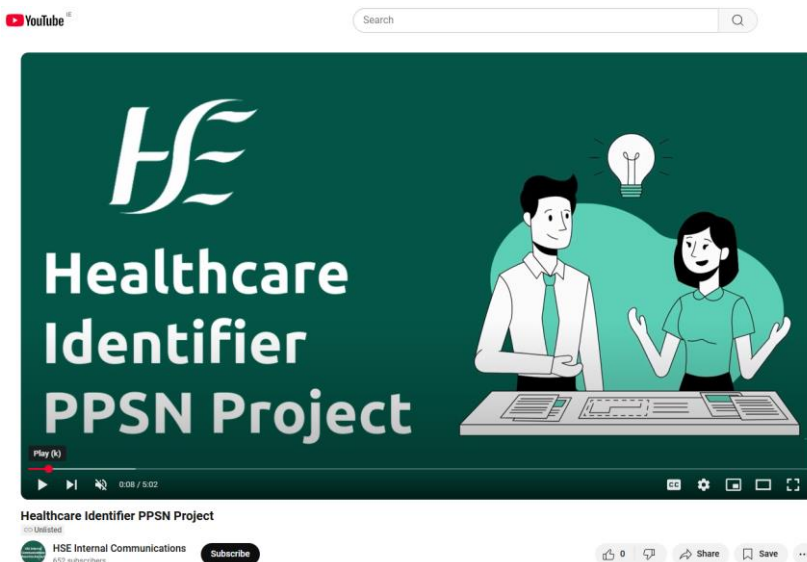
**Darren Waters**  
Senior Project Manager,  
HSE

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# Healthcare Identifier – PPSN Project

## Explainer Video



## All Staff Email

### Collection of PPS numbers from patients

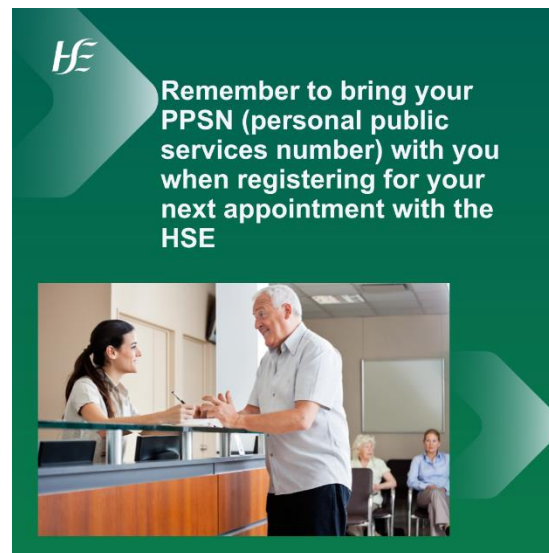
From Monday 3 March, all healthcare services can begin asking patients for their Personal Public Service Number (PPSN) when they register. This provides a reliable way to uniquely identify each person and helps us advance the goals set out in the Digital for Care 2030 framework.

The National Health Identity Services Identifiers Team (HIDS) are leading the PPSN project. Contact them at [PPSNID@hse.ie](mailto:PPSNID@hse.ie).

To support the rollout, Regional Executive Officers have nominated PPSN leads in each region. The HIDS team will work closely with the regional PPSN leads.

[Find more information about collecting PPSNs from patients](#)

## Social Media Posts



## Summary DPIA



## T&T Newsletter

### Embracing Identity Management - PPSN Collection Boosts Healthcare Efficiency and Patient Safety

By Lisa Farrelly,  
Health Identity Management Services.

Following recent approval by the HSE Senior Leadership Team, Personal Public Service Numbers (PPSN) can now be collected across all Health and Social Care interactions. This represents a significant milestone in the HSE's ongoing commitment to enhancing the quality and efficiency of healthcare delivery through digital transformation. The collection and recording of PPS Numbers will play a pivotal role in accurately identifying individuals as well as matching Individual Health Identifiers (IHI) to patient records.

Role of HSE Health Identifiers Service (HIDS) in the PPSN Project

The HIDS team has led this initiative since February 2024, working to establish PPSN collection across all health and social care services. This complex initiative required extensive stakeholder engagement, including collaboration with governance and data protection experts, partnerships with technical providers, and close coordination with government bodies. The HIDS team has also actively collaborated with patient partners from advocacy groups such as IPPOSI, Sage, and Patients for Patient Safety Ireland, as well as directly with service users. In addition, representatives from marginalised communities—including Traveller Health, Roma Health, Homeless Health, and LGBTQI+ services—were

engaged to gather feedback, address concerns, and ensure accessibility and inclusivity in the rollout.

Public engagement has been central to shaping this initiative. Supported by HSE Communications, a rapid insight survey gathered feedback from the public, and website and social media content were tested with participants to ensure clarity and effectiveness. The response has been overwhelmingly positive, with many noting that PPSN collection is "needed in a modern world." Public feedback has also highlighted that this process is already familiar, with two-thirds of respondents having previously been asked for their PPSN in a healthcare setting.

Working with Regional Leads for Smooth Rollout

The HIDS team are working closely with nominated Regional PPSN Leads from each health region to ensure the smooth and effective rollout of PPS Number collection across all sites.

Update Your Communications!  
Health services have been advised to update their patient-facing communications to remind patients to bring their PPSN to their next appointment. Services are working towards incorporating the PPSN request into patient-facing communications such as appointment letters, text messages,



and follow-up emails. This ensures that patients are informed ahead of their appointments and can provide their PPS Number when they attend.

Next Steps

Moving forward, HIDS will continue to work with each region to aid in the successful implementation of this initiative. We're excited to see the positive impact PPSN collection will have on supporting the progression of digital transformation in the HSE and ultimately the benefits that this will bring for patient care.

Stay Connected on Social Media  
Look out for updates on the PPS Number rollout on HSE's social media platforms, including X, Facebook, LinkedIn, and more. Be sure to follow us for the latest news, and feel free to engage with our posts to help spread the word.

For more information, visit:  
[www.hse.ie/staffppsn](http://www.hse.ie/staffppsn)  
or scan the QR code



[www.hse.ie/staffppsn](http://www.hse.ie/staffppsn)



**Thank You**

**PPSNID@HSE.IE**





# SNOMED and Clinical Terminologies

**Speaker:**



**Yvonne Coughlan**  
Clinical Terminologist National  
Release Centre for SNOMED  
CT, HSE



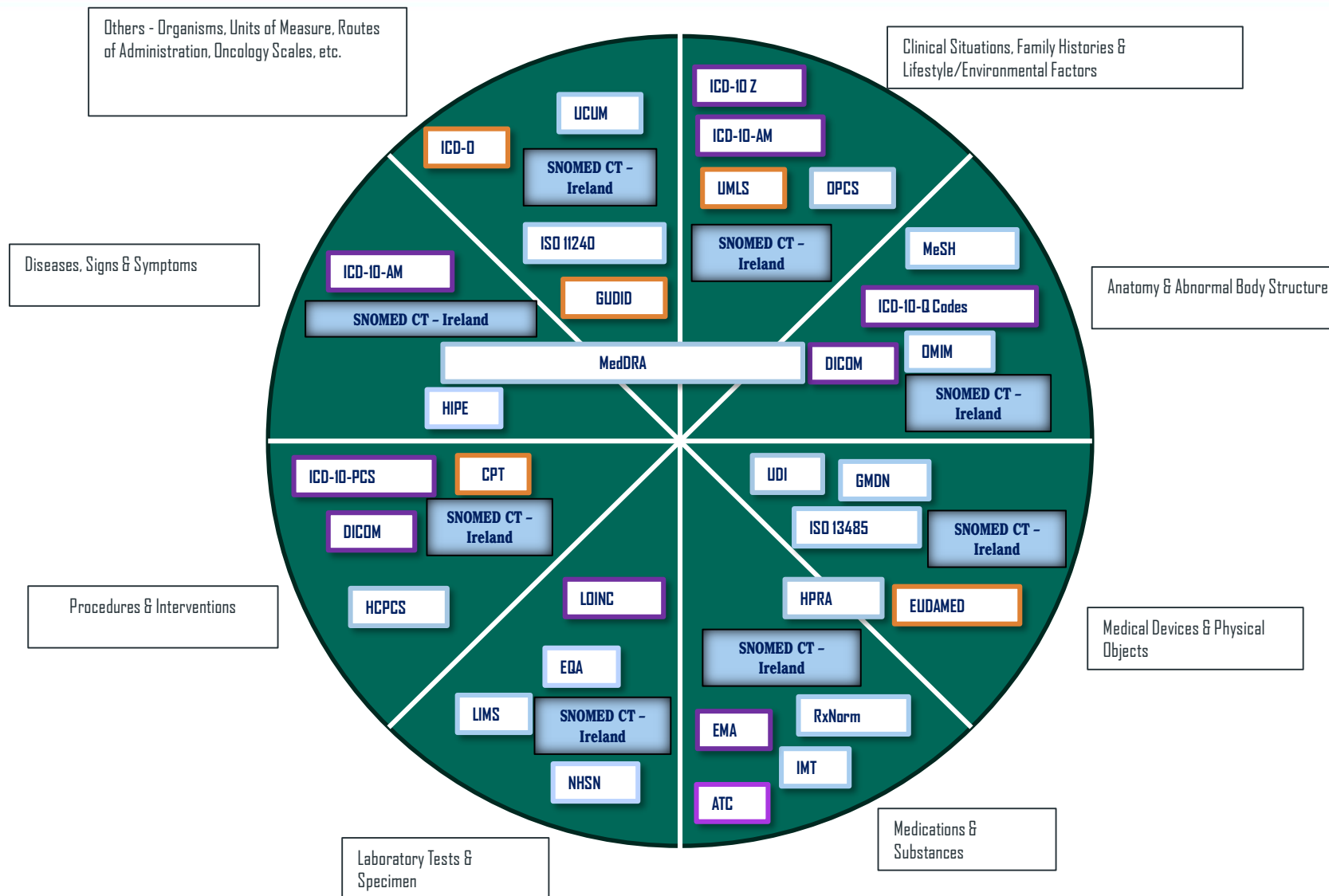
## Diseases, Signs & Symptoms

**MedDRA (Medical Dictionary for Regulatory Activities)** – Drug safety & adverse event tracking  
**HIPE (Hospital In-Patient Enquiry System)** – Disease tracking in Irish hospitals  
**ICD-10-AM** – Disease classification system in Ireland  
**SNOMED CT** - Systematized Nomenclature of Medicine – Clinical Terms

UCUM (Unified Code for Units of Measure) – Standardized measurement units  
 ICD-O (International Classification of Diseases for Oncology) – Cancer classification  
 ISO-11240 – Standards for medicinal product units of measure  
 GUIDID (Global Unique Device Identification Database) – Medical device classification  
 SNOMED CT - Systematized Nomenclature of Medicine – Clinical Terms  
 MedDRA (Medical Dictionary for Regulatory Activities) – Drug safety & adverse event tracking



# SNOMED CT – Ireland and other Clinical Terminologies







# SNOMED CT Recent Collaboration

## SNOMED CT x openEHR Collaboration

Why it matters  
Impact

### SNOMED International Collaborations with openEHR:

- **Member Benefits**: Enhances use of SNOMED CT in openEHR implementations
- **Key Implementation**:
  - Ireland: Shared care record architecture for secure patient data access
  - Jamaica: Vaccination and lab tests integration with SNOMED CT
  - Germany: Research community leveraging SNOMED CT for studies.

I am delighted for the SNOMED International and openEHR community to be working together. It is an opportunity for us to make our standards more complementary and simpler for health systems globally to implement together. The openEHR community very much looks forward to the benefits this partnership will add for healthcare systems.” - **openEHR CEO Rachel Dunscombe**

## SNOMED CT x LOINC Expansion : [Link](#)

March 2025  
Update  
Expansion

### **Expanded Content**: Over 35,000 new concepts, including:

- Quantitative lab tests
- Top 200 most ordered lab tests

### **Integration with LOINC**: Mapping existing concepts and creating new codes.

☰ Mass concentration of gabapentin in plasma or serum or whole blood at point in time (observable entity) ☆

SCTID: 154051010000104 LOINC code ID: 9738-6

154051010000104 | Mass concentration of gabapentin in plasma or serum or whole blood at point in time (observable entity) |

en Mass concentration of gabapentin in plasma or serum or whole blood at point in time (observable entity)

en Gabapentin [Mass/volume] in Serum, Plasma or Blood

en Gabapentin (S/P/Bld) [Mass/Vol]

en Gabapentin.MCnc.Pt.Ser/Plas/Bld.Qn

en Mass concentration of gabapentin in plasma or serum or whole blood at point in time



# Future Sessions

## Slido

**Speaker:**



**Theresa Barry**  
Data & Clinical Terminology  
Architecture Lead, HSE



**Thank You**