# Dataset Specification Management Process Report 2024/2025

Chief Data & Analytics Office, Technology and Transformation

# Document Control

| Document Information | |
|---|---|
| Purpose: | The purpose of this document is to give an overview of the proceeding of the DSMP in 2024/2025 |
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## Document Control

### Revision History

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| V0.1 Draft | Yvonne Coughlan/Theresa Barry | 18th February 2025 | Initial Draft |
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### Review & Approval

| Name | Version Signed off | Sign off Date |
|---|---|---|
| Theresa Barry | 1.0 | 10th December 2025 |

# Introduction

The Digital Health Framework for Ireland (2024-2030) seeks to revolutionise healthcare by leveraging data and digital technology to enhance access, affordability, patient safety, and productivity. It prioritises patient empowerment through access to health data, the promotion of self-care, and the facilitation of accurate diagnoses. Healthcare professionals will benefit from digital tools, such as electronic health records (EHRs), to deliver more coordinated care. The framework underscores the importance of efficiency, cost control, and digital literacy among staff, while investing in infrastructure and emerging technologies. It also ensures digital inclusion for vulnerable groups and maintains ongoing engagement with stakeholders to shape the future of digital health in Ireland. Digital Health is crucial for supporting universal healthcare by addressing population health needs, creating integrated care models, and ensuring the safety, quality, and sustainability of health services.

The Digital Health Vision for Ireland (2024-2030) highlights the pivotal role of quality data in transforming healthcare. Key points include:

- **Comprehensive Patient Information:** Real-time access to accurate and complete patient data will enhance care coordination and patient safety across various healthcare settings.
- **Data-Driven Decision-Making:** Utilising population-wide health data and analytics will improve service management, leading to better health outcomes and more efficient resource use.
- **Trust and Transparency:** Ensuring data privacy and clear consent processes is essential for building trust, with strict adherence to data protection laws.
- **Innovation:** Quality data will drive innovations, such as AI and automation, to streamline care delivery and reduce administrative burdens, supporting both improved patient care and economic growth.

Ultimately, quality data is foundational to delivering safer, more integrated, and efficient health services.

One of the six principles of the Digital for Care framework is ‘Digitally Enabled and Connected Care’, which emphasises the importance of standardising data and ensuring interoperability to create a connected healthcare system. This includes:

- **Standardised Data:** The creation of a digital health record for everyone requires standardised data across systems to ensure that patient information is consistent, accurate, and accessible across all healthcare settings.
- **Interoperability:** Effective data sharing and integration necessitate that clinical systems can communicate with one another. This will allow healthcare professionals to access real-time, comprehensive patient data, improving care coordination and patient safety.

The framework stresses that investment in EHRs and other clinical information systems must be underpinned by clear data standards and interoperability to ensure these systems are connected and can function seamlessly together. Standardising data and ensuring interoperability are crucial for delivering a digitally connected health service, enabling better patient management and more efficient, high-quality care.

The framework establishes a mandatory requirement for adopting nationally recognised standards for data, interoperability, and clinical terminology, such as HL7, FHIR, and SNOMED. These standards are essential for enabling the effective sharing, use, and reuse of health data. The implementation of these standards will be guided by the Health Information Bill and the European Health Data Space (EHDS).

The Health Service Executive (HSE) will oversee compliance with these legislative requirements and will also set any additional necessary guidelines.

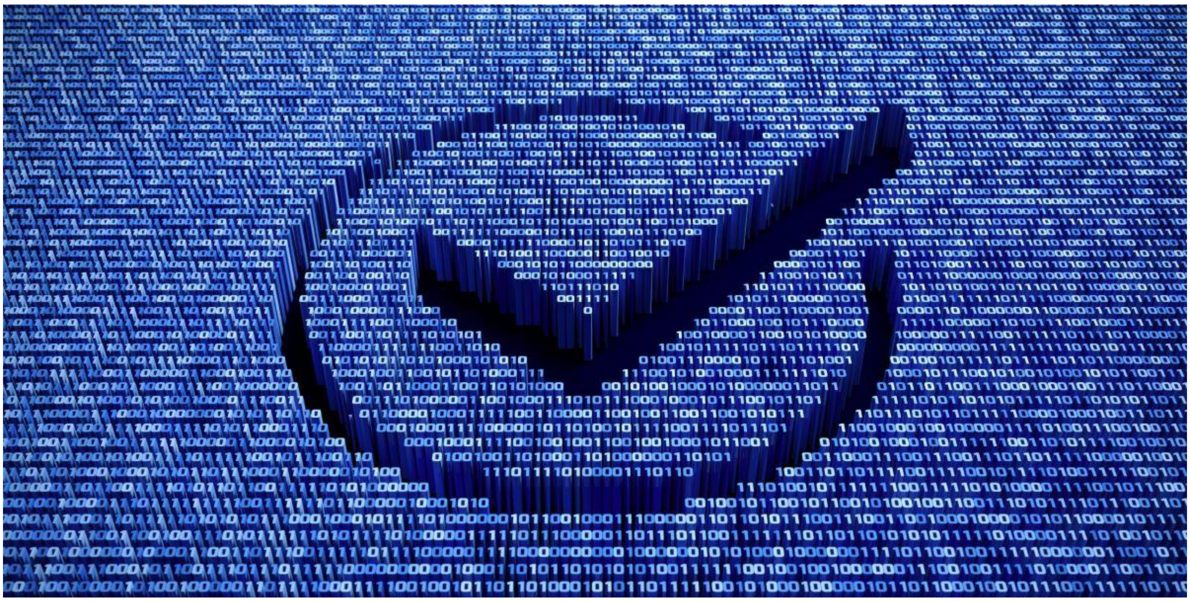
The principle of Data, Standards, and Interoperability underscores the importance of standards in creating a connected healthcare system. Key points include:

- **Data Standards:** Clinical and non-clinical data must be reliable, consistent, and reusable, all underpinned by clear standards to ensure effective data sharing and integration across healthcare systems.
- **Interoperability:** Standards are essential for enabling seamless data flow between different systems, ensuring that patient information can follow them across various care settings, such as acute, community, and private healthcare providers.
- **Access to Health Records:** Standards enable patients to access their own digital health records, ensuring a consistent and secure experience across different healthcare providers.
- **System Integration:** Standardised data models and interoperability standards are required to integrate various health and social care services, making data sharing efficient and effective.

In summary, standards are critical for enabling seamless data exchange, improving care coordination, and ensuring that healthcare systems work together efficiently to provide high-quality patient care.

There has never been a more important time to bring your dataset to the DSMP to ensure your project complies with all standards regarding data.

# Brief Overview of the DSMP for New Requestors



## Background

Prior to 2019, data was held in different systems and formats, very often in free text with no standards. This lack of standardisation significantly prevented data sharing and interoperability across the organisation. In 2019, the SNOMED Governance Board, chaired by HIQA decided to try and address this, and developed the Dataset Specification Management Process (DSMP). This was based loosely on a model developed by the NHS to standardise and manage datasets, coming through a defined process whilst having all key decision makers involved in data management in the organisation involved in the process. This proposal was submitted to the Senior Management Team of the Office of the Chief Information Officer and was approved. The DSMP was established to enable dataset owners to network and learn from those involved in the primary and secondary use of data, providing input and advice as they prepare to standardise their dataset for interoperability and data sharing, and ultimately to ensure their dataset is in a state of readiness for EHRs.

A DSMP was established and Terms of Reference agreed. This process was designed by the Business Architect (Enterprise Architecture), approved and signed off by the SNOMED Governance Board to fulfil that requirement.

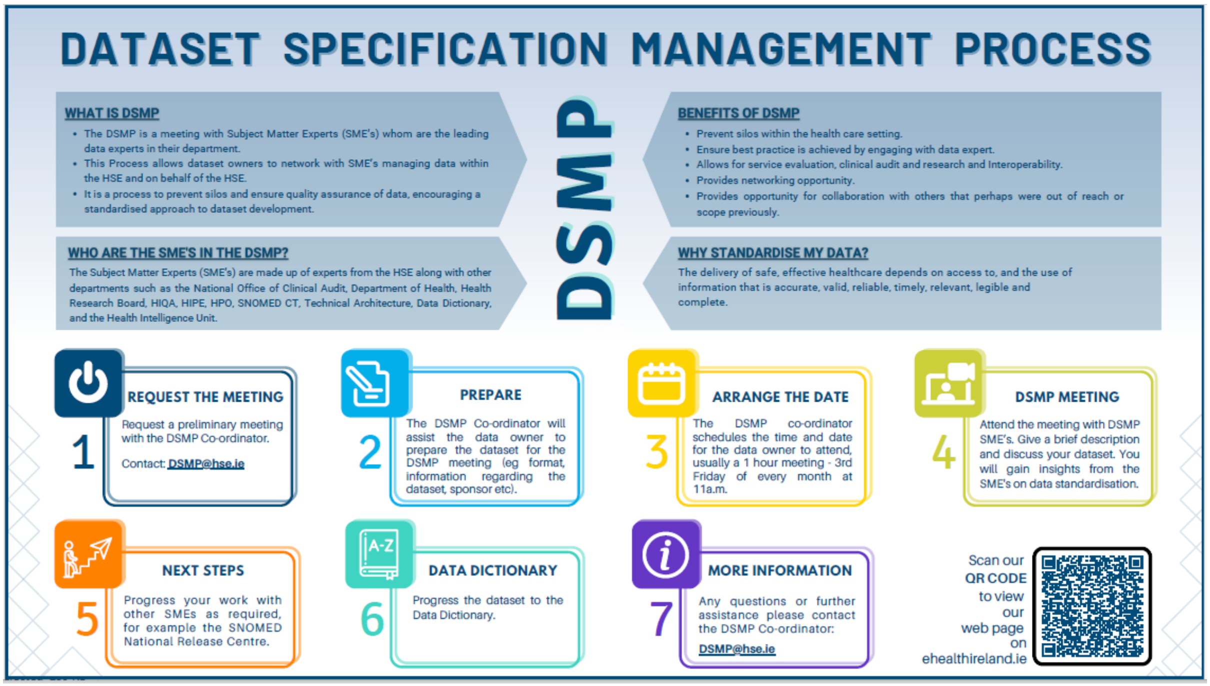
The DSMP brings Subject Matter Experts (SMEs) from core areas, within and external to the HSE, together to ensure a consistent approach to dataset specification management. SMEs were identified by process mapping the role of all stakeholders and their role in managing datasets.

This process and group were developed to provide a forum and process to enable stakeholders who have a role in the management and analysis of data, to:

- Champion their data requirements,
- Contribute to an enterprise view of data
- Give feedback and advice to dataset owners
- Manage dataset specifications to provide foundational information governance.

The aims of the DSMP are:

- Delivery of a standardised uniform process that facilitates new and existing dataset specification
- A quality assurance process for new and existing dataset specifications
- The opportunity for early input from downstream functions to enhance service planning, analytics and reporting
- A reduction in re-work and costs due to errors and omissions in dataset specifications.



# DATASET SPECIFICATION MANAGEMENT PROCESS

DSMP

**WHAT IS DSMP**

- The DSMP is a meeting with Subject Matter Experts (SME's) whom are the leading data experts in their department.
- This Process allows dataset owners to network with SME's managing data within the HSE and on behalf of the HSE.
- It is a process to prevent silos and ensure quality assurance of data, encouraging a standardised approach to dataset development.

**WHO ARE THE SME'S IN THE DSMP?**

The Subject Matter Experts (SME's) are made up of experts from the HSE along with other departments such as the National Office of Clinical Audit, Department of Health, Health Research Board, HIQA, HIPE, HPO, SNOMED CT, Technical Architecture, Data Dictionary, and the Health Intelligence Unit.

**BENEFITS OF DSMP**

- Prevent silos within the health care setting.
- Ensure best practice is achieved by engaging with data expert.
- Allows for service evaluation, clinical audit and research and Interoperability.
- Provides networking opportunity.
- Provides opportunity for collaboration with others that perhaps were out of reach or scope previously.

**WHY STANDARDISE MY DATA?**

The delivery of safe, effective healthcare depends on access to, and the use of information that is accurate, valid, reliable, timely, relevant, legible and complete.

1 **REQUEST THE MEETING**

Request a preliminary meeting with the DSMP Co-ordinator.

Contact: DSMP@hse.ie

2 **PREPARE**

The DSMP Co-ordinator will assist the data owner to prepare the dataset for the DSMP meeting (eg format, information regarding the dataset, sponsor etc).

3 **ARRANGE THE DATE**

The DSMP co-ordinator schedules the time and date for the data owner to attend, usually a 1 hour meeting - 3rd Friday of every month at 11a.m.

4 **DSMP MEETING**

Attend the meeting with DSMP SME's. Give a brief description and discuss your dataset. You will gain insights from the SME's on data standardisation.

5 **NEXT STEPS**

Progress your work with other SMEs as required, for example the SNOMED National Release Centre.

6 **DATA DICTIONARY**

Progress the dataset to the Data Dictionary.

7 **MORE INFORMATION**

Any questions or further assistance please contact the DSMP Co-ordinator:

DSMP@hse.ie

Scan our **QR CODE** to view our web page on ehealthireland.ie

There are currently 14 SMEs in the DSMP with 3 new members in 2021 however this may expand in the future also. These SMEs were chosen as they are the leading experts in the HSE and National Offices for data management and expert knowledge on dataset requirements and standard**s.**

# DSMP Members

- Business Information Unit Acute
- Health Research Board
- Healthcare Pricing Office
- Integrated Information Service
- Hospital in-Patient Enquiry (HIPE)
- Business Information Unit
- Primary Care Reimbursement Service
- Health Information Quality Authority (HIQA)
- National Release Centre for SNOMED CT
- Department of Health
- National Office of Clinical Audit
- Integrated Information Service
- Data Protection Office
- MyHealth@EU
- Data Dictionary
- Health Identifiers Service
- GS1- Global System of Standards
- Access to Information
- Business Information Unit Community
- Chief Data & Analytics Office (Governance)

The group meets monthly and the DSMP co-ordinator under the auspices of the SNOMED Governance Board and the National Release Centre for SNOMED, schedules and plans the meetings.

## Ongoing input post initial DSMP meeting

Each dataset requestor has an initial meeting with the DSMP and from this meeting the SME would then decide who would be best to help with the dataset. Depending on the size of the dataset the amount of input from the SMEs varied from a couple of meetings to more than this. Not only is it beneficial to have an SME from a particular department on board but this can open pathways to other areas of expertise to help. For example, one Dataset requestor was offered an opportunity to make a connection with the National Health and Social Care Professions Office regarding the capture of their activity. Perhaps this would not have come about without networking within the DSMP which can help with preventing any silos that unfortunately can occur within the health system.

## New Subject Matter Experts 2024 – GS1 Ireland

GS1 Ireland is the authorised body for GS1 standards in Ireland, providing unique identifiers like barcodes and GTINs to enhance supply chain efficiency, safety, and visibility across sectors such as retail, healthcare, and construction. It also offers training and advisory services to support businesses in implementing these standards effectively.

# Datasets reviewed in the DSMP in 2024/2025

## Motor Neuron Disease/Amyotrophic Lateral Sclerosis dataset

Precision ALS: A European data set for patients with ALS. This data set is captured in a bespoke patient data platform. Data collected by specially trained collectors based at each site using existing data (i.e. medical record) and patient interview. The Project lead is Prof Orla Hardiman. Outcomes from the DSMP meeting advise given regarding using less free text, alerts for new ALS patients to monitor new cases and work with SNOMED CT on standardising the dataset. Currently working on completing reference with the National Release Centre for SNOMED CT.

## CAHMS

Maskey Local Implementation groups have been standardising practices across all the Cork Kerry CAMHS teams and now recognise the need to standardise the data flows and it’s been accepted that SNOMED CT can support this work. This work is necessary to primarily improve the CAMHS KPI data quality by providing trusted standardised information about the CAMHS services across the region.

Standard forms (with the SNOMED CT datasets) will be developed, implemented and used across all CAMHS teams to capture information regarding referral management, MDT Operations and service delivery. Thereafter, collated data will be used to inform audits, KPI, representation from TD’s, and PQ’s. Yet to complete reference set with SNOMED CT.

## Acute Floor Information System

Although the Acute Floor Information System (AFIS) has presented to the DSMP in 2024, it will be redeployed in acute settings but not in a national project. The available datasets for AFIS are diagnosis, past medical history and allergies. Nursing interventions will be published in April 2025.

The AFIS team contacted the SNOMED release team to progress Irish data sets for publication within the system. Outcomes from the DSMP meeting advise given regarding standardising the dataset with SNOMED CT, avoid free text where possible, more advise given on different aspects of the data and the team were happy to take on board. The team progressed on to work with SNOMED CT and currently have 5 reference sets completed.

Links to available reference sets:

AFIS Allergies reference set, AFIS Diagnosis Reference set, AFIS Presenting Complaint

## Shared Care Record

The National Shared Care Record (NSCR) aims to create a secure, integrated platform that improves clinical decision-making and patient care across Ireland's healthcare system. It will allow clinicians, patients, and carers to access key health information, improving coordination, patient engagement, and outcomes. The system will support safer clinical decisions, continuity of care, and patient involvement in healthcare choices.

The NSCR will be rolled out in phases, starting with data integration, a platform for aggregated patient data, and a model for patient access. Eventually, it will be deployed nationwide, benefiting clinicians and empowering patients to take control of their health records.

This initiative will contribute to the HSE's digital maturity journey and optimise past investments in siloed health record systems.

Two datasets forming part of Health App Beta 1. Cohort is approximately 50 Maternity Patients at CUMH. The datasets brough to the DSMP were the HSE Hospital Appointments and the MN-CMS Medications Data.

Currently future planning further interventions with a SNOMED-CT relevance.

## National Sepsis Dataset

National Sepsis Outcome Report describes the burden of sepsis on our patients and the healthcare system. Understanding the pattern of sepsis incidence in Ireland is essential to inform the programme about the characteristics of individuals who are at increased risk both of developing sepsis and of dying from sepsis. Presently we know 40-60 % of sepsis / septic shock is under documented. This allows us to have heightened vigilance for sepsis amongst these individuals. All datasets have limitations and are dependent on methodologies used to identify and extract data. Currently the data captured in this dataset is dependent on the documentation in the patients' medical notes and its' subsequent coding. The NST would like to SNOMED our search criteria to identify patients with infection, organ dysfunction, sepsis and septic shock. We hope the new data set will increase the identification of patients within our search criteria.

Completed first phase of Dataset for Paediatric dataset. Currently working with the NRC for SNOMED CT on sepsis in the Maternity setting for publication in October 2025.

Link to reference set:

National Sepsis Programme Refset Ireland

## Euroheart

The EuroHeart ACS/PCI data standards have been developed by the European Society of Cardiology for use in quality registries and research. Following a pilot implementation of EuroHeart ACS/PCI in the HSE Southwest, the intention is to roll out the standards and platform nationally. Completed reference set for Euroheart in October 2024 same published in the browser. Currenlty working with Euroheart on their second phase for Euroheart project. For publication in October 2025.

Link to reference set:

Euroheart reference set

## Home Care Support Management System

The Service User data set is the beginning of a standard model for data collection nationally for home support.

The application scheme is an example of the home support application form that will be made available online. It will include all mandatory fields and validation necessary for each individual field. The format is designed using JSON Schema to enable consistency and interoperability. This project is no longer in progress.

## SLT project

Speech and Language Therapy have been standardising practices across all the Cork Kerry teams and now recognise the need to standardise the data flows and it's been accepted that SNOMED CT can support this work. This work is necessary to primarily improve the KPI data quality by providing trusted standardised information about the SLT services across the region. The Cork and Kerry SLT project progressed with SNOMED CT to develop a reference set which was published in October 2024.Completed SLT reference set published in October 2024.

Link to reference set:

SLT Reference Set

## NOCA - National Paediatric Mortality Register

Minimum core dataset for all deaths in children and young people nationally. To include name, address and dob of deceased, sex, ethnicity, place and cause of death, birthweight, gestation and hospital of birth when <29days, position and location at time of death for sudden unexplained deaths in children <5yrs.

Have started National Paediatric Mortality Register to link with already published National Death Register. Ongoing work with National Paediatric dataset from the SNOMED CT perspective. Future plan to add to National death register and publish by end of 2025 or start of 2026.

## ePrescribing

The project is still in pre-procurement and at the requirements discovery phase. The data set has been drafted and reviewed with key stakeholders (e.g. patients, prescribers and pharmacists) in 2023. However, it still needs to go through the stakeholder groups again as part of the To-Be process review during Q2 2024. We would like to discuss our draft data set with SMEs and run it through the DSMP process for guidance on some specific areas around terminology (e.g. expected data values and input types) around data collection.

Data quality key to ensure interoperability between the NePS core and connecting systems. Connecting prescribing and dispensing systems will be required to make changes to ensure the highest possible quality data is shared between the connecting systems.

The drafted ePrescription and eDispensation data set which has been developed through several review cycles with stakeholders also considers – Prescription Legislation for Ireland HIQA Health Information and Standards National Standard on Information Requirements for National Community-Based ePrescribing.

Currently have not progressed with SNOMED CT. Planned for future.

## Endoscopy Dataset

Solus is the new Endoscopy Reporting System (ERS) was procured in 2023 by the HSE and is currently in the design phase of the project. It is intended to implement this solution in up to 40 hospitals nationally, replacing the existing solutions (Unisoft, EndoRAAD and ADAM).

The ERS records endoscopy procedures in the following specialities:

1. Gastroenterology (Gastro and Colonoscopy procedures)
2. Thoracic (Bronchoscopy and Endo-Bronchial Ultrasound (EBUS) procedures)
3. Urology (Cystoscopy procedures)

We are looking to define a SNOMED dataset for all diagnostic and therapeutic endoscopy procedures, along with sedatives and reversal agents used by endoscopists during the procedures. It is also hoped that we can record pre-procedure medicines (e.g. anti-coagulants), along with medicines associated with (post procedure) nationally agreed regimens (e.g. for treatment of a gastric ulcer). This coding would support the messaging of these procedures to upstream and/or downstream systems, along with supporting the costing of endoscopy care/procedures by the HealthCare Pricing Office (HPO).

The medicines would be coded at a generic drug level (Virtual Therapeutic Moiety).

The project progressed work with the NRC for SNOMED CT and published their reference set in April 2025.

## Individual Health Identifier Dataset

The Data Set will define standards for Patient Identity Management essential for accurately matching patients to their Individual Health Identity (IHI) number. It will inform the development of a National HSE Policy to establish and ensure compliance with patient identity standards within the HSE Data Dictionary.

The Data Set will serve as a baseline requirement for new system procurements involving patient identity data fields and support a national training and education programme aimed at improving the accuracy and completeness of patient data during registration.

## OMNSD - Nurse Specialist Register

The OMNSD Nurse Specialist Register is a national interim database managed by the Office of Nursing and Midwifery Services Director (ONMSD) to track Clinical Nurse Specialists (CNS) and Clinical Midwife Specialists (CMS) across Ireland. Its purpose is to ensure that all post holders meet nationally agreed eligibility criteria, support recruitment and retention, and provide strategic workforce planning insights. The dataset contains detailed demographic, professional, and organizational information, including NMBI registration details, specialist post titles, qualifications, employment sector, whole-time equivalent (WTE) allocations, and verification fields. Data is collected through a peer-reviewed process involving Directors of Nursing/Midwifery and NMPDU officers, stored in Excel-based interim systems, and reported to inform workforce capacity, geographical distribution, and specialism types. Future plans include migrating to a structured, coded database aligned with SNOMED CT for interoperability and compliance.

## OCIMS

The OCIMS (Outbreak Case and Incident Management and Surveillance System) is a new national information system being developed to replace the 25-year-old CIDR surveillance system. Its purpose is to manage and monitor notifiable infectious diseases across Ireland, supporting public health teams with improved data integration and interoperability. OCIMS will ingest laboratory results through HL7 messaging, CSV files, and manual entry, and will include patient demographic and lab-related data. The project is being implemented in two phases: Phase 1 focuses on gastrointestinal diseases, STIs, hepatitis, and other gastro-related conditions, while Phase 2 will integrate remaining notifiable diseases and SMS-based public health communication. OCIMS also introduces opportunities for clinical terminology coding using standards like SNOMED CT and LOINC, ensuring compliance with GDPR and alignment with ISO standards for data quality and security.

## CHI Child and Young Adult Mental Health (CYPMH)

The CYPMH Data Standardisation Project focuses on creating a unified, clinically approved dataset and documentation standards for the Child & Young Person Mental Health Unit at the new Children's Hospital. This initiative ensures that Electronic Health Records support safe, effective, and integrated care by standardising over 60 existing paper-based forms and workflows into a digital format aligned with HIQA, Mental Health Commission, and international standards. The dataset will cover referral, admission, risk assessment, care planning, medication management, physical health, and legal documentation. Standardisation is critical for interoperability, regulatory compliance, patient safety, and enabling advanced functions such as analytics, reporting, costing, and quality monitoring. Ultimately, this project underpins a phased digital transformation, moving from foundational EHR requirements to enhanced workflows and full digital operations.

## Community Connect

The Community Connect Programme is a national initiative by the HSE to unify Ireland's community health services under a single, integrated digital platform. Its goal is to deliver person-centred care by streamlining service pathways, standardising practices, and providing real-time insights to frontline teams. Community Connect will integrate with major national systems such as the Shared Care Record, National EHR, MedLIS, and NIMIS, ensuring interoperability across the healthcare ecosystem. The solution scope includes referral and waitlist management, outpatient and inpatient scheduling, documentation, discharge processes, and advanced clinical functions like medication management, structured assessments, and SNOMED CT coding. This programme supports analytics, reporting, and compliance, aiming for phased regional adoption starting in 2026, with full national rollout by 2027.

## National Diabetes Register

The National Diabetes Registry is a national initiative to create a comprehensive, continuously updated database of all adults diagnosed with diabetes in Ireland. Its purpose is to track prevalence and incidence, improve care quality, inform policy, and support research. The NDR will link multiple existing health datasets in three phases:

- Phase 1: Integrate administrative data from HIPE, PCRS, and iPMS via the HSE IIS data lake.
- Phase 2: Add data from Diabetic RetinaScreen, GP chronic disease management returns and lab results (via Healthlink), CSO statistics, and MedLis.
- Phase 3: Incorporate diabetes-specific clinical management systems (e.g., Diamond, ProWellness) and/or electronic health records used in secondary care.

The registry will standardise data using national terminology services (e.g., SNOMED CT) and ensure interoperability, governance, and compliance. Ultimately, it will serve as a live, monthly updated resource for patient care, analytics, and strategic planning.

## Older Adults Health and Wellbeing Profile & Data Catalogue

The Older Adults Health and Wellbeing Profile & Data Catalogue is a national initiative designed to support data-driven decision-making for planning and improving health and wellbeing services for older people in Ireland. It provides a structured set of validated indicators and datasets relevant to adults aged 65+, enabling standardisation, quality assessment, and interoperability across health systems. The catalogue uses the Health DCAT-AP metadata standard to document datasets, assess feasibility, and model best practices in data governance. It underpins the creation of integrated healthcare area profiles, starting with Dublin and South Wicklow, and serves as a blueprint for all 19 IHAs. Ultimately, this resource will inform policy, resource allocation, advocacy, and research, ensuring that decisions are based on reliable, clinically relevant data.

## Children's Services

The Children’s Services dataset is a structured collection of clinical and administrative data used to support referrals, policies, and procedures within integrated children’s health services in Cork and Kerry. It contains approximately 153 data elements and is linked to the iPMS system. The dataset aims to standardise clinical terminology using SNOMED CT and ensure consistency for data dictionary development. It is primarily used for healthcare delivery, communication, and performance insights, with data recorded by clinicians and administrative staff in both manual and electronic formats.

## Physiotherapy Services

The Physiotherapy dataset comprises around 323 data elements and supports physiotherapy service delivery, including referral forms and clinical terminology standardisation. Located in Skibbereen, Co. Cork, and integrated with iPMS, this dataset is designed to adopt SNOMED CT standards for interoperability and accurate clinical documentation. It is used for healthcare delivery and service management, with data captured manually and electronically by healthcare providers and administrative teams.

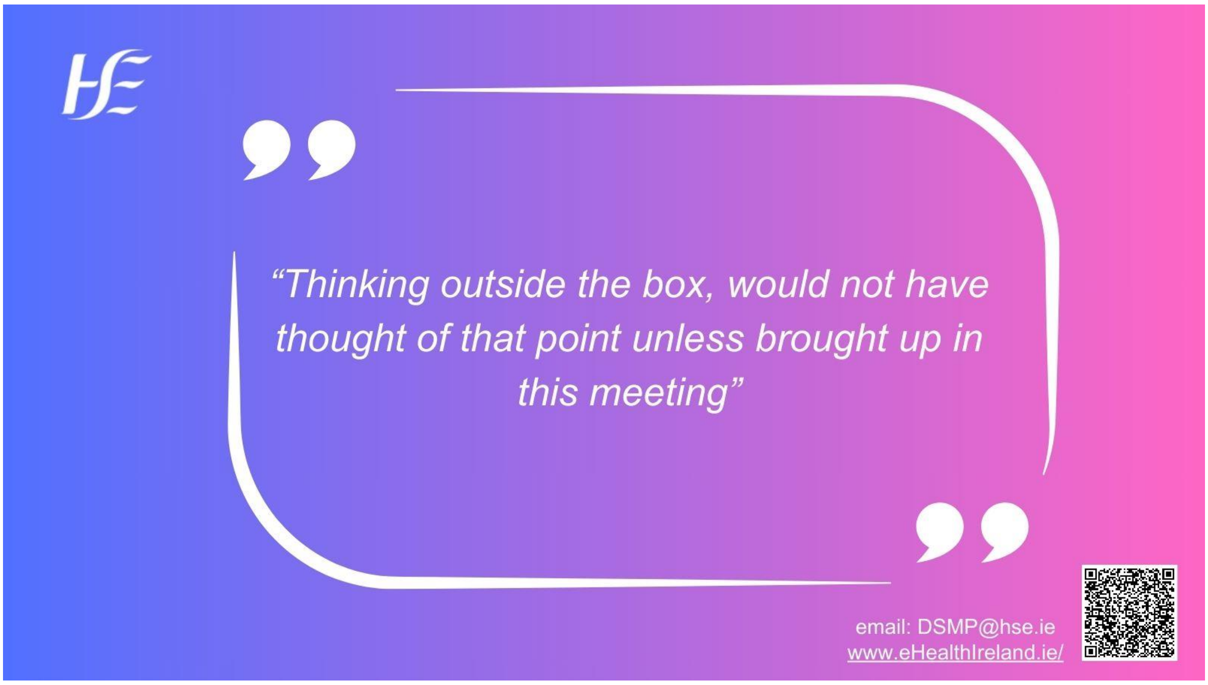
## Benefits of the DSMP to date:

- **Access to Leading Authorities:** Engage with top experts in data management from the HSE, DOH, HIQA, and other national bodies.
- **Reduction in Dataset Duplication:** Minimise redundant datasets through increased national awareness of data management, reducing organisational silos.
- **Defined Dataset Management Process:** Follow a clear and structured process for managing datasets.
- **Collaborative Network:** Build a network of authorities involved in data management within the HSE, working towards a common goal.

## Dataset Requester Feedback

*It was very beneficial in terms of validating some of the work we have already done as well as instructing us as to what other types of data we could / should consider storing on the system. The discussion at the meeting was an excellent exercise for the project team in terms of reflecting on the purpose of the system and that the data we are collecting was necessary and sufficient for that purpose.*

email: DSMP@hse.ie
www.eHealthIreland.ie/



*"Thinking outside the box, would not have thought of that point unless brought up in this meeting"*

email: DSMP@hse.ie
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Everyone was extremely helpful when we got them engaged on who we were and what we were trying to achieve. I think there was value in us doing this work as "Domain Experts" and value for data dictionary process also with the submission of a new dataset

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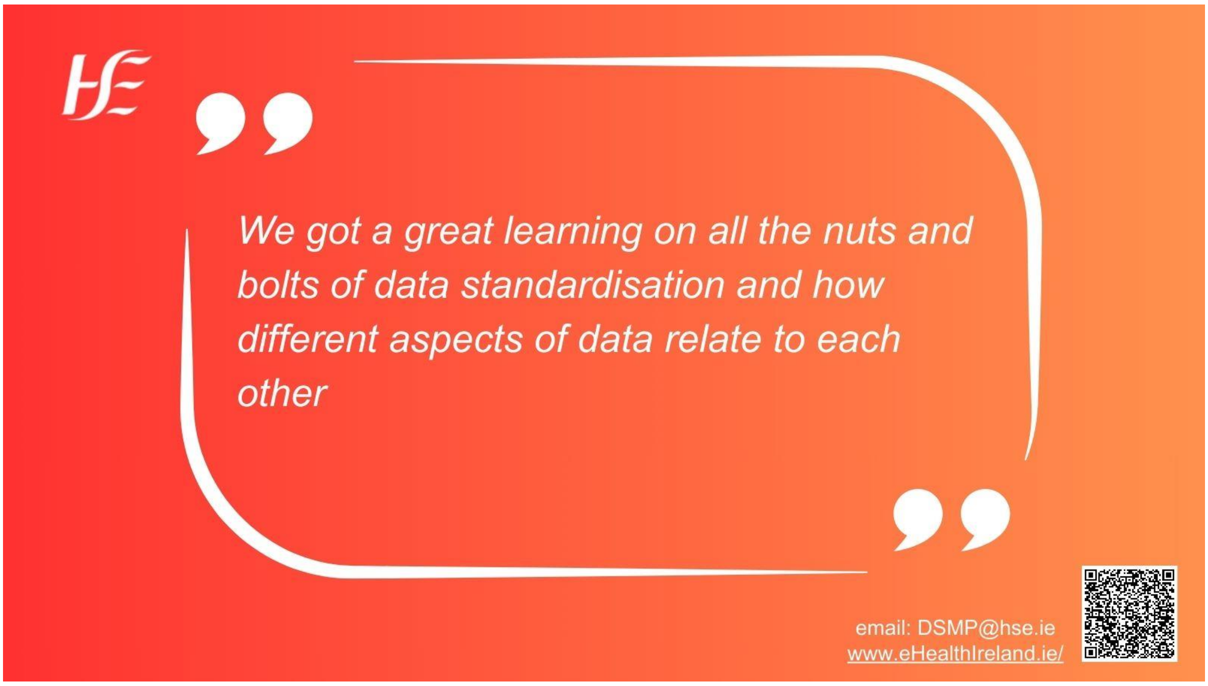

We got a great learning on all the nuts and bolts of data standardisation and how different aspects of data relate to each other

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## Future Plans

- Continue to engage with projects and ongoing National Services.
- Procurement of the Central Terminology Server and Data Dictionary are in progress. We expect that these will have a very positive effect on projects and suppliers to help engage with SNOMED CT.
- Continue to communicate the benefits and opportunities of engaging with the DSMP as early as possible.

## Contact

For any further information please contact:

John Crossan

**DSMP Coordinator**

**Chief Data & Analytics Office**

**dsmp@hse.ie**

# Appendix:

| **Name of Subject Matter Expert** | **Reason for being chosen for DSMP** |
|---|---|
| SNOMED CT | National Release Centre for SNOMED CT-Standardising Terminology for EHR Systems |
| NHSCDD-HSE National Health and Social Care Data Dictionary | Data Dictionaries for data are useful to describe the 'rules' which data in a particular system need to abide by. For any new projects or applications being introduced into the HSE, the HSE NHSCDD can help with the creation of the datasets, alignment of existing datasets and assist vendors through the development of evolving datasets specifications. |
| Information Governance (EA) | Information governance provide standards and guidelines on the handling of data and giving the tools to organisations need to achieve the standards required for information such as that contained in a healthcare record is handled legally, securely, efficiently and effectively in order to deliver the best possible care to people who use health and social care services. |
| Integrated Information Services (IIS) | The IIS is a centralised service that creates and maintains policies, standards and governance around the HSE's data. It is the main Data Analytics Service for the wider Health Service Executive. |
| Health Research Board (HRB) | The Health Research Board (HRB) is a State Agency under the Department of Health. It is responsible for supporting and funding health research, generating health information and promoting the use of evidence in policy and practice. The HRB's National Health Information Systems Unit manages four national health information systems on behalf of the Department of Health. These systems 1) produce data and information to assist the Department with policy and planning 2) enable the HSE to report on its service planning processes and 3) generate research that is relevant to both policy and practice. |
| Hospital In-Patient Enquiry (HIPE)- Healthcare Pricing Office (HPO) | HIPE Scheme is a health information system designed to collect demographic, clinical and administrative data on discharges from, and deaths in, acute public hospitals nationally. HPO is to oversee all functions associated with the operation of the HIPE database, including the development and support of the data collection and reporting software, training of coders, data quality, audit, data analysis and reporting, and responding to requests for information. |
| Business Information Unit (BIU) | The HSE's Business Information Unit (BIU) gathers and maintains a central repository of service data from all hospital and community based health services nationwide. Extensive amounts of data are collected, collated and checked within this Unit. This data, is used as part of the National Performance Oversight process and in other levels of performance management as part of the Performance Accountability Framework |
| HSE Primary Care Reimbursement Service (PCRS) | The PCRS compiles statistics and trend analyses which are provided to other areas within the HSE, the Government, customers, stakeholders and to members of the public. |
| Health Information and Quality Authority (HIQA) | HIQA Working in conjunction with a wide range of stakeholders, we aim to improve the quality and safety of health and social care services by setting national standards and publishing guidance. |
| Department of Health (DOH) | The Department of Health is responsible for the overall strategy and planning of National service plan and SlainteCare. |
| National Office of Clinical Audit (NOCA) | NOCA manages national clinical audits that aim to improve patient care and outcomes. NOCA's findings enable the healthcare system to act to improve care where standards are not followed. NOCA enables the Irish |

| | |
|---|---|
| | healthcare system to continually improve its standards of care via maintenance of a portfolio of prioritised national clinical audits, standardised against national and international criteria. Not only do NOCA enhance accessibility to validated data for persons who use, manage and deliver healthcare, our clinical audits help to improve patient outcomes, and create positive change locally and nationally. |
| eHealth | eHealth is responsible for supporting the strategic development of technical architecture, technology and operational capabilities in a standardised and aligned manner. |
| GS1 Ireland | GS1 Ireland is the authorised body for GS1 standards in Ireland, providing unique identifiers like barcodes and GTINs to enhance supply chain efficiency, safety, and visibility across sectors such as retail, healthcare, and construction. It also offers training and advisory services to support businesses in implementing these standards effectively. |