SELF-ASSESSMENT TOOL

National Standards for Information Management in Health and Social Care

Safer Better Care

About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is an independent statutory body established to promote safety and quality in the provision of health and social care services for the benefit of the health and welfare of the public.

Reporting to the Minister for Health and engaging with the Minister for Children, Equality, Disability, Integration and Youth, HIQA has responsibility for the following:

- **Setting standards for health and social care services** — Developing person-centred standards and guidance, based on evidence and international best practice, for health and social care services in Ireland.

- **Regulating social care services** — The Chief Inspector of Social Services within HIQA is responsible for registering and inspecting residential services for older people and people with a disability, and children's special care units.

- **Regulating health services** — Regulating medical exposure to ionising radiation.

- **Monitoring services** — Monitoring the safety and quality of permanent international protection accommodation service centres, health services and children's social services against the national standards. Where necessary, HIQA investigates serious concerns about the health and welfare of people who use health services and children's social services.

- **Health technology assessment** — Evaluating the clinical and cost effectiveness of health programmes, policies, medicines, medical equipment, diagnostic and surgical techniques, health promotion and protection activities, and providing advice to enable the best use of resources and the best outcomes for people who use our health service.

- **Health information** — Advising on the efficient and secure collection and sharing of health information, setting standards, evaluating information resources and publishing information on the delivery and performance of Ireland's health and social care services.

- **National Care Experience Programme** — Carrying out national service-user experience surveys across a range of health and social care services, with the Department of Health and the HSE.

Overview of the health information function of HIQA

Good information is the foundation of a high-quality health and social care service. As part of a person's journey through the health and social care system, information is collected and shared at different stages and used to inform their care. This is known as the primary use of information. High-quality data is also important for other purposes such as planning and managing services, policy-making, research and innovation. For example, information may be used to decide where to locate a new service or to understand how practice can be changed to improve a person's experience of care. This is known as the secondary use of information.

Whether used for primary or secondary purposes, it is essential that information is managed effectively and securely and used to its full potential to promote safer better care, improved outcomes and overall wellbeing for people using services. A human rights-based approach should be of central importance and seek to balance the rights of people with the broader societal value of using health and social care information. A strategic and coordinated approach that is aligned with information standards is also essential to ensure data is captured and managed in line with best practice. A well-embedded standards-based information environment will allow all stakeholders, including the general public, patients and service users, health and social care professionals and policy-makers, to make choices or decisions based on the best available information.

Digital health, which is the use of digital technologies to improve health, is critical to ensuring that information is available when and where it is required. An effective digital health infrastructure can support the secure, effective transfer of information by ensuring information is captured in the right format so that it can be shared easily and securely across services. The necessary information should be accessible by all health or social care professionals providing care and to the person it relates to. This will lead to more efficient and effective delivery of care and ensure people do not have to provide the same information on multiple occasions.

The Health Information and Quality Authority (HIQA) has responsibility for setting standards for all aspects of health information and monitoring compliance against those standards, as set out in Section 8(1) of the Health Act 2007.[1] Under the Act, HIQA is also charged with evaluating the quality of the information available on health and social care and making recommendations to the Minister and the Health Service Executive (HSE) in relation to improving the health information system. Through its health information function, HIQA also plays a key role in providing evidence to inform national health information policy and shape the health information landscape in Ireland. HIQA works to ensure that high-quality health and social care information is available to support the delivery, planning and monitoring of services which in turn ensures safer better care for all.

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1. Introduction

Data and information are generated in huge volumes everyday across the health and social care system. Although health and social care information is an extremely valuable resource, there are significant costs associated with its management in terms of how it is collected, used and shared. Therefore, it is imperative that organisations have appropriate structures, systems, policies and procedures in place which are aligned with evidence-based standards. This will ensure that information collected is of the highest quality and used to its full potential to promote safer better care, improved outcomes and overall wellbeing.

The aim of the *National Standards for Information Management in Health and Social Care* (referred to as national standards in this the document) is to contribute to safer better care by improving the management of health and social care information. They complement other health and social care standards that have been developed by HIQA.

The *National Standards for Information Management in Health and Social Care* **should be reviewed in advance of filling in this tool.**

1.1 Purpose of the self-assessment tool

This document was developed as part of a suite of resources to support the implementation of the national standards, to include:

- The Assessment Judgment Framework
- Guide to the Assessment Judgment Framework
- Self-assessment tool

	Assessment Judgment Framework	Guide to the Assessment Judgment Framework	Self-assessment tool
National Standards for Information Management in Health and Social Care	Sets out lines of enquiry to assist organisations and HIQA reviewers in assessing and making judgments on compliance with the standards.	Provides detailed guidance for organisations and HIQA reviewers about how compliance with the national standards will be assessed and how each standard can be met. Used alongside the Assessment Judgment Framework when assessing compliance.	Helps organisations determine the extent to which they comply with the standards and identify areas of good practice and where improvement is needed.

1.2   Directions for use

The SAT can be used to measure performance against standards, identify areas for improvement and inform the development of a quality improvement plan.

1. The self-assessment should be completed for each individual organisation or for a specific data collection or eHealth service, if more appropriate.

2. Please note that all questions should be answered when completing this tool. The numbering of questions in the SAT align to the features in the standards so please refer to the standards for further information, which will assist in the completion of the SAT. It is important to note, however, that the features detailed under each standard statement are not exhaustive and the organisation may meet the requirements of the standards in other ways. Please use comments/note sections to capture any additional details. The quality improvement plan can be used to identify recommended actions for change.

3. HIQA has also published the following additional resources, available on the HIQA website www.hiqa.ie, which provide further information on many of the topics covered in the self-assessment tool.

1.3   Structure of this document

The self-assessment tool is derived from the national standards. The document is structured as follows:

- **Section 1:** Self-assessment questions. These are divided into sections corresponding to each principle of the national standards. Under each standard, there is a list of questions and an additional space is provided for the organisation to include further information if they choose to do so.

- **Section 2:** Quality improvement plan for organisations. The plan will help organisations in summarising quality improvement actions, setting timelines and responsibilities for these actions.

Section 1: Self-assessment questions

Principle 1

A human rights-based approach
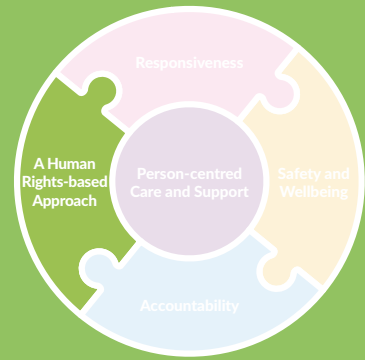
Principle 1: A Human Rights-Based Approach

Standard 1.1 Uphold people's rights relating to information

Feature	Standard 1.1 Uphold people's rights relating to information	YES	NO	Comments/Notes
1.1.1	**Has the organisation published information on people's rights in relation to the information it collects and the choices people have for the following:**			
	Right of access?	☐	☐	
	Right to be informed (transparency)?	☐	☐	
	Right to rectification?	☐	☐	
	Right to erasure?	☐	☐	
	Right to data portability?	☐	☐	
	Rights in relation to automated processing?	☐	☐	
	Right to object to processing?	☐	☐	
	Right to restriction?	☐	☐	
1.1.2	Has the organisation documented and communicated a clear process for obtaining informed consent for the use of health data and for changing consent preferences?	☐	☐	
1.1.3 (A)	Has the organisation ensured that all relevant policies are aligned with the legal frameworks and human rights treaties which establish data rights?	☐	☐	
1.1.3 (B)	Does the organisation have clearly documented staff roles and responsibilities to ensure that people's rights relating to data are upheld?	☐	☐	
1.1.4	Has the organisation taken an equitable approach to information management that considers the diverse needs of individuals, groups and communities?	☐	☐	

Standard 1.2 Protect privacy and confidentiality

Feature	Standard 1.2 Protect privacy and confidentiality	YES	NO	Comments/Notes
1.2.1	Has the organisation identified an individual who is responsible for data protection, such as a Data Protection Officer (DPO)?	☐	☐	
1.2.2	Has a privacy statement or notice been published for the organisation?	☐	☐	
1.2.3	Are Data Protection Impact Assessments (DPIAs) conducted to identify and mitigate any data protection-related risks arising from new and ongoing projects?	☐	☐	
1.2.4	Does the organisation have effective arrangements in place to ensure that the collection, use and sharing of personal information is justified, required, limited to what is necessary and that access to personal confidential data is on a strict need-to-know basis?	☐	☐	
1.2.5	**Has the organisation policies and procedures in place for the following:**			
	Privacy and confidentiality?	☐	☐	
	Data access and request, including requests regarding personal data?	☐	☐	
	Document and records management?	☐	☐	
	Data breach management[1]?	☐	☐	
	Data security? (see also Standard 3.3)	☐	☐	

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[1] **Data breach management:** A documented and implemented process for a suspected or actual personal data security breach to ensure all appropriate actions are taken to safeguard the data and the privacy of individuals and to prevent similar breaches in the future.

Please insert any additional comments or notes in relation to Standards 1.1 and 1.2:

Principle 2

Safety and wellbeing

Responsiveness

A Human Rights-based Approach

Person-centred Care and Support

Safety and Wellbeing

Accountability

Principle 2: Safety and Wellbeing

Standard 2.1 Optimise the accessibility, use and value of information

Feature	Standard 2.1 Optimise the accessibility, use and value of information	YES	NO	Comments/Notes
2.1.1 (A)	Does the organisation have arrangements in place to enable individuals to access their own information?	☐	☐	
2.1.1 (B)	Does the organisation have arrangements in place to facilitate information sharing within and between services to support clinical decision-making?	☐	☐	
2.1.1 (C)	Does the organisation have arrangements in place to facilitate information sharing with other organisations/services to enhance patient safety including using internationally recognised quality indicators?	☐	☐	
2.1.1 (D)	Does the organisation have arrangements in place to facilitate information sharing for secondary uses (e.g. public health, policy-making, planning and management of services, quality improvement, and research)?	☐	☐	
2.1.2	**The organisation is promoting effective use of information in line with appropriate use of technology through the use of:**			
2.1.2 (A)	Digital health initiatives (e.g. patient portal, summary care record, electronic health record)	☐	☐	
2.1.2 (B)	Ireland's Open Data Portal	☐	☐	
2.1.2 (C)	Web-based tools for accessing and analysing data, and for business intelligence	☐	☐	
2.1.2 (D)	A secure processing environment to facilitate safe sharing and linkage, analysis and management of personal information	☐	☐	
2.1.2 (E)	Artificial intelligence (AI) and machine learning	☐	☐	

2.1.3 (A)	Does the organisation have a process for uniquely identifying individuals and providers to enhance safety and promote effective use of information?	☐	☐	
2.1.3 (B)	Does the organisation have plans in place to align with national policy in this area?	☐	☐	
2.1.4	Has the organisation established data sharing rules[2] and guidelines for different levels of data access or sharing?	☐	☐	
2.1.5	Is the organisation assessing and managing risks associated with information sharing using the 'Five Safes Framework', if relevant'?	☐	☐	
2.1.6	Does the organisation have business continuity, continuity of care and disaster recovery plans in place? (see also 3.3.5)	☐	☐	
2.1.7	Is the organisation routinely monitoring the accessibility, use and value of information to identify areas for improvements?	☐	☐	

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[2] Data sharing rules: should outline limitations on data access, identifying which stakeholders will have access to various levels of data, including de-identified or aggregated data. Including data required for individual care delivery, among public agencies, between government systems, private sector and with international stakeholders, if required.
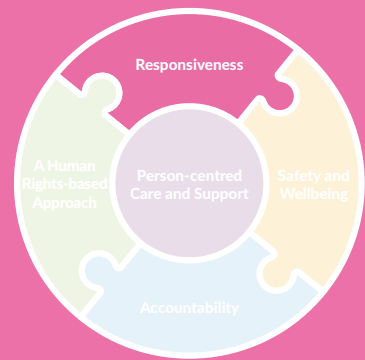
Standard 2.2 Undertake effective stakeholder engagement

Feature	Standard 2.2 Undertake effective stakeholder engagement	YES	NO	Comments/Notes
2.2.1	Does the organisation undertake regular stakeholder analysis to identify key stakeholders to inform a stakeholder engagement plan?	☐	☐	
2.2.2 – 2.2.5	**Does the organisation engage with key stakeholders to:**			
	Empower people to make informed decisions about their health data and information?	☐	☐	
	Develop and inform relevant information management policies and procedures?	☐	☐	
	Co-design and evaluate health information initiatives and systems?	☐	☐	
	Determine and design outputs, such as reports and quality indicators?	☐	☐	
2.2.6	Does the organisation have a forum, such as a learning community, to help inform and evolve practices regarding how routinely collected data can be used to continuously improve quality?	☐	☐	

Please insert any additional comments or notes in relation to Standards 2.1 and 2.2:

Principle 3

Responsiveness

Responsiveness

A Human Rights-based Approach

Person-centred Care and Support

Safety and Wellbeing

Accountability

Principle 3: Responsiveness

Standard 3.1 Align with best practice regarding standards and agreed definitions

Feature	Standard 3.1 Align with best practice regarding standards and agreed definitions	YES	NO	Comments/Notes
3.1.1	Has the organisation identified an individual who is responsible for data standards and agreed definitions?	☐	☐	
3.1.2	**Has the organisation ensured that effective arrangements are in place to ensure compliance with the following types of standards:**			
	Information standards for clinical content?	☐	☐	
	Information standards for clinical terminologies and classifications?	☐	☐	
	Messaging standards for interoperability?	☐	☐	
	Data security standards?	☐	☐	
	Other relevant standards specific to organisations functions?	☐	☐	
3.1.3 (A)	Has the organisation developed and implemented a data dictionary?	☐	☐	
3.1.3 (B)	Is the data dictionary in line with national policy[3]?	☐	☐	

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[3] This should align with the HSE National Health and Social Care Data Dictionary, once available.

Standard 3.2 Enhance data quality

Feature	Standard 3.2 Enhance data quality	YES	NO	Comments/Notes
3.2.1	Has the organisation identified an individual who is responsible for data quality?	☐	☐	
3.2.2	**Does the organisation have a data quality framework, including the following components:**			
	Data quality strategy?	☐	☐	
	Data quality assessment tool?	☐	☐	
	Data quality reports?	☐	☐	
	Data quality improvement cycle?	☐	☐	
3.2.3 (A)	Are all data that flows in and out of the organisation comprehensively mapped?	☐	☐	
3.2.3 (B)	Is a comprehensive record of all data processing activities kept and regularly updated?	☐	☐	

Standard 3.3 Ensure data security

Feature	Standard 3.3 Ensure data security	YES	NO	Comments/Notes
3.3.1	Has the organisation identified an individual who is responsible for data security?	☐	☐	
3.3.2	Does the organisation have adequate physical and technical security structures in place?	☐	☐	
3.3.3	Has the organisation implemented role-based access controls for all systems?	☐	☐	
3.3.4	**Does the organisation have effective data security arrangements in place, including:**			
	Clearly documented roles and responsibilities of all staff regarding security?	☐	☐	
	Regular security risk assessments?	☐	☐	
	Schedule for external and internal security audits?	☐	☐	
	Proactive improvement of data security controls?	☐	☐	
	Regularly reporting results to senior management to provide assurance of data security arrangements?	☐	☐	
3.3.5	**Does the organisation have policies and procedures for investigating and responding to data security in the following areas:**			
	Acceptable use of ICT resources?	☐	☐	
	Data classification and handling?	☐	☐	
	Information transfer?	☐	☐	
	Network security including role-based access control?	☐	☐	
	Data storage, archival, retention and destruction?	☐	☐	
	Business continuity and disaster recovery plans? (see also 2.1.6)	☐	☐	
	Cloud computing? (if applicable)	☐	☐	

Standard 3.4 Develop staff capability and capacity for information management

Feature	Standard 3.4 Develop staff capability and capacity for information management	YES	NO	Comments/Notes
3.4.1	Does the organisation conduct an annual training needs analysis and deliver associated training plans to ensure staff are competent in the areas of information management?	☐	☐	
3.4.2	**Does the organisation provide training to staff in the following areas:**			
	Protecting and upholding data rights?	☐	☐	
	Data protection?	☐	☐	
	Appropriate use of data standards and agreed definitions?	☐	☐	
	Data quality?	☐	☐	
	Data security and cyber awareness?	☐	☐	
	Compliance with relevant legislation, codes of practice?	☐	☐	
3.4.3	Does the organisation provide ongoing professional development for staff with specialist information management roles?	☐	☐	
3.4.4	Does the organisation perform regular review of the effectiveness of information management training?	☐	☐	

Please insert any additional comments or notes in relation to Standards 3.1, 3.2, 3.3 and 3.4:

Principle 4

Accountability

Responsiveness

A Human Rights-based Approach

Person-centred Care and Support

Safety and Wellbeing

Accountability

Principle 4: Accountability

Standard 4.1 Develop strong organisational governance, leadership and management

Feature	Standard 4.1 Develop strong organisational governance, leadership and management	YES	NO	Comments/Notes
4.1.1 A	**Has the organisation developed effective governance and organisational structures, including the following:**			
	An oversight committee or board?	☐	☐	
	A management team, or equivalent?	☐	☐	
	Other governance groups, as appropriate, to fulfil relevant functions such as an information governance committee?	☐	☐	
4.1.1 B	Have terms of reference been developed for the following:			
	Oversight committee or board?	☐	☐	
	Management team, or equivalent?	☐	☐	
	Other governance groups?	☐	☐	
4.1.1 C	Are agendas and minutes recorded for the meetings for the following:			
	Oversight committee or board?	☐	☐	
	Management team, or equivalent?	☐	☐	
	Other governance groups?	☐	☐	
4.1.2	**Has the organisation ensured clear lines of accountability for all staff and outlined specific information management roles and responsibilities such as:**			
	An individual with overall accountability, responsibility and authority for information held by the organisation?	☐	☐	

	Clearly communicated and documented relevant responsibilities for information management in the job specifications for all staff, including those with specific roles?	☐	☐	
4.1.3	Where joint governance arrangements or joint data controllers are required, does the organisation clearly outline the roles and responsibilities of each organisation in the form of a memorandum of understanding or a statement of partnership?	☐	☐	
4.1.4	**Are agreements formalised between data providers, data processers and data recipients, where appropriate, through the following agreements:**			
	Service-level agreements?	☐	☐	
	Data processing agreements?	☐	☐	
	Data sharing agreements?	☐	☐	
4.1.5	Does the organisation have oversight of an updated record of processing activity? (see also 3.2.3)	☐	☐	
4.1.6 (A)	Does the organisation publish a statement of purpose in an accessible format?	☐	☐	
4.1.6 (B)	Is the statement of purpose reviewed regularly?	☐	☐	

Standard 4.2 Implement strategy for information management

Feature	Standard 4.2 Implement strategy for information management	YES	NO	Comments/Notes
4.2.1	Does the organisation have a strategic plan with objectives relating to information management?	☐	☐	
	Do the objectives relating to information management take into account the following factors:			
	Strategic plans and associated business plans for information management?	☐	☐	
	Current and future needs in relation technological and infrastructure requirements?	☐	☐	
	Optimising the accessibility, use and value of information through effective sharing and dissemination?	☐	☐	
	Effective engagement with key stakeholders, to inform developments regarding information management, including accessibility to information and system design and requirements?	☐	☐	
	Evolving data security requirements to identify and respond to new or potential security risks?	☐	☐	
	National and international strategies, standards, policies, guidance and recommendations relating to health information?	☐	☐	
4.2.2	Does the organisation undertake strategic workforce planning?	☐	☐	
4.2.3	Does the organisation ensure effective management of resources?	☐	☐	

Standard 4.3 Promote effective performance assurance and risk management

Feature	Standard 4.3 Promote effective performance assurance and risk management	YES	NO	Comments/Notes
4.3.1	Does the organisation publish an annual report?	☐	☐	
4.3.2	Does the organisation promote a culture of continuous quality improvement?	☐	☐	
4.3.3	**Does the organisation regularly review how it performs in relation to information management by:**			
	Developing and assessing progress against annual business plan?	☐	☐	
	Measuring and reporting on its performance using key performance indicators (KPIs)?	☐	☐	
	Undertaking a schedule of internal and external audits to assess compliance with relevant legislation and policies and procedures?	☐	☐	
	Ensuring robust risk management to assure that all information management related risks are assessed and managed appropriately, including regular review of the risk management policy and risk register?	☐	☐	
	Capturing positive and negative feedback for information management, including a formal complaints procedure?	☐	☐	

Standard 4.4 Ensure compliance with relevant legislation and codes of practice

Feature	Standard 4.4 Ensure compliance with relevant legislation and codes of practice	YES	NO	Comments/Notes
4.4.1	Has the organisation identified an individual who is responsible for assessing compliance with legislation and identifying future legislative requirements?	☐	☐	
4.4.2	**Does the organisation have arrangements in place to ensure compliance with relevant Irish and European legislation and codes of practice, including:**			
	Clear oversight and relevant documentation regarding compliance with relevant legislation?	☐	☐	
	Regularly reviewing risks related to current or forthcoming legislation, and implementing learnings?	☐	☐	

Please insert any additional comments or notes in relation to Standards 4.1, 4.2, 4.3 and 4.4:

Section 2: Improvement plan for organisations

Table 1: Improvement Plan for Organisations

Standards and features	Recommended actions	Person responsible	Date to be completed	Status
1.1 Uphold people's rights relating to information				
1.1.1 Ensuring clarity on rights				
1.1.2 Clear informed consent process				
1.1.2 Aligning with legal frameworks and treaties				
1.1.4 Equitable approach to information management				
1.2 Protect privacy and confidentiality				
1.2.1 Information governance role/DPO				
1.2.2 Publishing privacy statement/notice				
1.2.3 Undertaking DPIAs				
1.2.4 Justified, required, limited to what is necessary and access need-to-know basis				
1.2.5 Privacy policies and procedures				
2.1 Optimise the accessibility, use and value of information				
2.1.1 Access to high-quality information				
2.1.2 Effective use of resources and infrastructure				
2.1.3 Unique identification of individuals and providers				
2.1.4 Data sharing rules and guidelines				

2.1.5 Use of 'Five Safes Framework'			
2.1.6 Business continuity and disaster recovery plans			
2.1.7 Assessing information accessibility, use and value			
2.2 Undertake effective stakeholder engagement			
2.2.1 Performing stakeholder analysis			
2.2.2 Understanding benefits and risk of sharing and empowering people to make informed decisions			
2.2.3 Informing information management practices			
2.2.4 Co-designing, developing and evaluating initiatives/systems			
2.2.5 Determining and designing outputs			
2.2.6 Establishing learning communities			
3.1 Align with national and international best practice regarding standards and agreed definitions			
3.1.1 Individual responsible for data standards and agreed definitions			
3.1.2 Arrangements to ensure compliance with data standards			
3.1.3 Use of a data Dictionary			
3.2 Enhance data quality			
3.2.1 Individual responsible for data quality			
3.2.2 Use of data quality framework			
3.2.3 Mapping data flows			

3.3 Ensure data security				
3.3.1 Individual responsible for data security				
3.3.2 Physical and technical security structures				
3.3.3 Role based access controls				
3.3.4 Effective arrangements for data security				
3.3.5 Data security policies and procedures				
3.4 Develop staff capability and capacity for information management				
3.4.1 Annual training needs analysis and training plans				
3.4.2 Effective training and education of staff				
3.4.3 Developing specialised information management skills				
3.4.4 Reviewing training plans				
4.1 Develop strong organisational governance, leadership and management				
4.1.1 Well-defined governance and organisational structures				
4.1.2 Clear lines of accountability for information management				
4.1.3 Joint governance arrangements				
4.1.4 Formalised agreements between data providers, data processers and data recipients				
4.1.5 Oversight of processing activity				
4.1.6 Publishing statement of purpose				

4.2 Implement strategy for information management				
4.2.1 Strategic plan for information management				
4.2.2 Strategic workforce planning				
4.2.3 Effective management of resources				
4.3 Promote effective performance assurance and risk management				
4.3.1 Publishing annual report				
4.3.2 Promoting continuous quality improvement				
4.3.3 Reviewing performance and risk management				
4.4 Ensure compliance with relevant legislation and codes of practice				
4.4.1 Individual responsible for assessing compliance with legislation				
4.4.2 Assessing compliance with legislation				

Additional Comments

Please insert any additional overall comments:

Additional Comments

References

1.   Health Act 2007. Available from: https://www.irishstatutebook.ie/eli/2007/act/23/enacted/en/html. Accessed on: 15/06/23.

2.   General Data Protection Regulation 2018. Available from: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:02016R0679-20160504. Accessed on: 15/06/23.

3.   Proposal for a regulation - The European Health Data Space 2022. Available from: https://health.ec.europa.eu/publications/proposal-regulation-european-health-data-space_en. Accessed on: 15/06/23.

4.   Health Information Bill - General Scheme 2023. Available from: https://www.gov.ie/en/publication/6f6a6-health-information-bill-2023/. Accessed on: 15/06/23.