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HSE National Policy - Digital Services Standard			
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This policy has been developed to ensure that all digital services that we provide to our patients, public and staff are easy to understand, easy to use, easy to access and meet the required standards.
Description:
Digital for Care outlines a number of strategic initiatives to transform how we deliver digital health services. To ensure these are effective it is critical that we implement the Digital Services Standard to ensure the quality of the services we deliver online.

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1.0 Summary

The HSE's Digital Services Standard has been developed to ensure that all digital services that we provide to our patients, public and staff are easy to understand, easy to use, easy to access and meet the required standards.

The standard is being developed to:

- Ensure a high quality, standards-based approach to the provision of digital services to our patients and the public.
- Make it easier for the public, patients and staff to access our digital health services.
- Reduce the number of standalone apps and websites and digital services
- Improve security and ensure patient data is protected
- Remove duplication of effort.
- Deliver best value for patients.

2.0 Purpose

This document sets out the recommended interim review process whilst the future review process is in development. An interim review process is required due to the accelerated delivery of the HSE app and the significant number of apps and digital services that are being developed across the health service.

The future review process and review group membership will be finalised in Q1 2025.

3.0 Context

In 2017 the HSE commenced a programme of work to improve the digital experience of the health service by reducing the number of standalone web sites from over 85 to three core sites for the public and patients, stakeholders and Health Service staff.

Digital for Care outlines a number of strategic initiatives to transform how we deliver digital health services. To ensure these are effective it is critical that we implement the Digital Services Standard to ensure the quality of the services we deliver online.

We are already seeing a growing number of standalone apps, patient portals and digital services that are of varying quality and compliance with accessibility, GDPR and Official languages requirements. The proliferation of standalone digital services is placing significant overhead on our technical and clinical staff to develop and maintain multiple digital services and remediate issues when they arise. Non-compliance with existing

standards also leaves the HSE open to litigation, financial penalties and a negative impact on confidence in the health service.

Most importantly, the digital health service experience for our patients and the public is fragmented, inconsistent and in some cases poor quality.

3.1. The digital front door to the health service

The Digital Services Standard will not only ensure the quality of the individual services we provide, it will ensure they work, look and feel the same. People only need to learn how to use our services once and know where they need to go and what they need to do to access them. Where possible the services will be delivered through or aligned with the HSE's core digital channels using HSE Login where we need to securely identify people.

The HSE's core digital channels include;

- HSE App
- HSE.ie websites and portals
- HSE Live - customer support for digital services

They are an integrated suite of Health Service digital channels that support the HSE Regions and HSE Centre to engage with their patients, public, staff and stakeholders online, providing information, signposting and digital services. These channels ensure that all our patients can access the same high quality, accessible, safe and secure digital health services.

They are the digital front door to the health service and support the principles in Digital for Care, the Government Digital Health and Social Care Strategic Framework and HSE Implementation Plan.

The Digital Health Service Standard provides a range of options from full integration with the HSE's core digital channels to compliance and alignment with the Standard.

3.2. HSE core digital channels

HSE App

The HSE app is a new digital health service from the HSE. It will provide safe, secure access to personal health information, health, wellbeing, signposting and services information for patients and the public.

The app provides the following core functionality;

- Secure login using myGOVID
- Access to hospital appointments for specific cohorts of patients
- Digital Cards and schemes
- Self-declared and reimbursed medications
- Signposting and services

In 2025

- All hospital appointments
- Prescriptions
- Referrals and waiting times
- Get active support
- QUIT support

All new digital services will be reviewed for suitability for integration with the app.

HSE websites

To reduce the overhead for services and clinicians providing information to the public and patients, HSE provides a single content management system for the health service. This enables services to manage information in one place, comply with content guidelines, user experience and accessibility standards and deliver content through multiple digital channels. It also removes the technical overhead of managing multiple content management systems and websites.

There is an HSE.ie website for [each region](#), [HSE centre](#), [staff](#) and a [public site](#) providing health, wellbeing and services information.

HSE.ie Digital Services and Portals

An increasing number of digital services are now available directly on HSE.ie and also as connected services using the HSE Design System to deliver a seamless journey from HSE.ie to the portal or digital service.

Services information and access to care

Maintaining information about public health services in the HSE.ie service directory makes this information available on HSE.ie, HSE.ie Regional Sites and the HSE App and also accessible to approved third party applications.

HSE.ie Service Directory information is clinically coded and geo coded so it can be

made available to patients based on personal health information and location.

Wellbeing and healthy living information

A range of in depth guides to wellbeing and healthy living written and reviewed by clinicians working in the Irish Health Service.

Health information

The Health A to Z is a repository of over 600 guides to conditions and medicines, written and reviewed by clinicians working in the Irish Health Service.

Content is approved by clinicians working in Ireland and the appropriate national clinical programmes.

Information is written in plain language in compliance with HSE standards

Information is covered by the HSE's content governance process.

HSELive

HSE's contact care service providing signposting, support and advice to the public. HSE Live also provides contact centre advice and support for HSE services to operate their own contact care services, providing access to omni-channel contact centre platform or dedicated teams of agents for a specific service. The platform is accessible anywhere in the country and includes case management, telephony, webchat, email and SMS and can be integrated with the HSE app.

HSE Live provides support for public facing digital services to ensure people who want to use our digital services. An important part of the HSE Digital Services Standard is ensuring that people get the support they need to use the digital service.

3.0 Guiding principles

Put users first

We will learn what our users need and deliver experiences that meet their needs. We are a part of our users' healthcare journey.

Be personal and relevant

Every engagement should be personal and relevant to the user and their context.

Deliver services with care

All our services must be created, governed and maintained to be accurate, consistent, and of the highest possible quality.

Consider the ecosystem

Every element of the ecosystem affects the entire ecosystem.

Be accessible to all

We will strive to create an ecosystem that is understood and used to the greatest extent possible by all people regardless of their age, ability or disability.

Reuse and improve

We will focus on continuous iterative improvement benefiting the whole footprint rather than building new stand-alone products.

Be data driven

All decisions must be evidence based - backed up by data and user research.

Address accessibility, privacy, security

We take our responsibilities in relation to accessibility, privacy and security seriously. We will meet, and aspire to exceed, mandatory standards.

Be collaborative

We will work across health to ensure business needs are met, and identify opportunities to collaborate - with other teams and divisions and wider public sector- for the good of our users.

Design for scale

We will build an infrastructure that can accommodate requirements across the health service.

Build for sustainability

We will deliver services based on a common design system to ensure we can leverage future technology and changing user behaviour.

4.0 Review process

In order to deliver the highest quality digital services to the public a review process is being developed to:

- support services to integrate, align and quality assure their digital services
- reduce wastage and duplication of effort
- maximise usage of existing channels and platforms

- inform the development of the Digital Services Standard to ensure it enables us to better meet the needs of the public and our patients, the public, health services, staff, stakeholders,

All existing public facing digital services will be reviewed and plans developed for integration or alignment with the HSE's core digital channels. This will include remediation plans to achieve compliance with the standard for services that cannot be integrated, as and when resources allow, and prioritisation of activity based on health service priorities.

New public, patient and staff facing digital services or proposals in development, web portals, apps and websites will be reviewed to assess the appropriate and achievable approach to integration and/or alignment with the appropriate core digital channel.

The final review process will be embedded as part of existing ICT governance in the development of new digital services. Compliance with the Standard will be included as part of the existing sanction process and will also be included in the requirements when tendering for any new services.

4.1. Interim process

The Standard and associated review process will be finalised in Q1 2025. The interim process below should commence with immediate effect. Compliance with the Standard is mandatory but where compliance would impede the timely delivery of an existing approved programme of work or significantly impact on costs, a plan to achieve compliance over time will be agreed.

1. All new proposals for public, patient and staff facing digital services, including Apps, websites, web-based services or portals must be reviewed by CIO, AND Communications and Digital Services and CCIO.
2. Existing digital services delivered through native, hybrid or progressive web apps, websites and portals will be reviewed against the new Standard and recommendations made on how compliance with the Standard can be achieved.

3. A programme of work will commence to integrate and align identified standalone mobile apps, websites and web based services for integration with the HSE App and HSE.ie regional and national public websites.

4.2. Assessment and evaluation criteria

The review process will evaluate the service against the following criteria

- Verifiable User Need
- Value for patients, public and staff
- Alignment with existing standards, including
 - Compliance with clinical standards
 - Accessibility and inclusion
 - HSE design system and content design standards
 - Security, Data Protection and Privacy
 - Official Languages Act
- Alignment with Digital for Care principles and priorities
- Ability of individual health service to support people using the digital service.
- Assurance the provision of the service digitally does not exclude anyone from accessing health care.

4.3. Interim Digital Services Review Group

The interim review group is being established to assess existing app and services for integration into the HSE app. They will make recommendation to the MyHealth@ie steering group once the initial review has been completed

Interim review group membership:

- CIO
- AND Communications and Digital Services
- CCIO

The policy development group will finalise review group membership and process.

5.0 Scope

The list below gives examples of the types of digital service that are within scope. There may be additional types of patient, public, stakeholder or staff facing services that should comply with the Digital Services Standard.

5.1. Information and signposting services

These are services that do not require authentication, but may be based on location or a patient choosing to access this information. These services can be made available on HSE.ie, national or regional and can be accessed through the HSE app if appropriate.

5.2. Transactional services

Services requiring authentication and information to be submitted by patients. Examples of these services include forms for administrative purposes, pre-appointment checklists or questionnaires.

5.3. Behavioural support and wellbeing

Digital services that support people to improve their health and wellbeing through a combination of messaging, information, direct support from behavioural support specialists or clinicians and peer-to-peer support.

5.4. Self-care and care pathway supports

Digital services that support patients on specific care pathways or with specific conditions.

Typically they are based on basic information that is provided by the patient or information that is contained in a clinical system. Patients may need to be invited to use the service. Patients may be asked to check-in periodically to answer questions, or complete specific actions. It is not necessary for a clinician to review the information provided by the patient, but patients may be advised to contact their health care team in certain circumstances.

Where it is necessary for a clinical service to receive the information submitted by the patient, integration options can be reviewed with technical teams.

5.5. Access to health information and decision support

These services provide access to personal health information for authenticated users from existing clinical systems such as an EHR or appointment management system, or provide decision support based on patient health information*. They are likely to be provided by third party vendors who provide portal access. These could be embedded into the HSE app as a web service or use the HSE app log-in service and redirect to a third-party service which uses the HSE design system.

*These services may be classified as a medical device which have additional

compliance criteria.

5.6. Integration options with HSE Core Digital Channels

There are 6 different integration options with the HSE Core Digital Channels for approved digital services.

Level 0 - Alignment

An approved app, service or website applies the HSE Digital services standard to ensure it is delivering a quality, consistent digital health service experience for the public, patients and staff.

Level 1 - Content and signposting

Where an app or web site provides information and signposting based on minimal user information. It should be provided through the HSE content management system and service directory. This is suitable for a service directory or an information only application or website.

Level 2 - Content, signposting and messaging

Where an app requires personalised messaging based on personal health information accessed through the app or information submitted by the person using the app.

Level 3 - Embedded service

This is suitable for more complex apps and digital services provided by third party vendors or existing HSE systems.

It provides access to the:

- HSE Login service which uses myGovID and securely identifies the person using the app.
- Messaging functionality in the app.

Requirements: The application must use the HSE design system and provide a service as a web based application. Capability to send messages to an API and receive user inputs from the HSE App where necessary. Capability to transfer data securely between the web service and HSE App.

The third party vendor must;

- be contracted to provide services to the HSE or section 38 or 39 organisations.
- Have the IHI seeded into its core systems.
- Comply with required ICT security and quality standards.
- Comply with EU Accessibility Directive.
- Have the capability to provide services in multiple languages.

- Be able to apply the HSE design system to their application.

Possible use cases

Integration with existing web portals or services such as

- EHR web portals
- Complex administrative systems
- Software that is classified as a medical device
- Telehealth applications

Level 4 - API Integration

This is most suitable where a health service operates an administrative or patient management system that wants to receive data from people using the HSE app or provide information to the people using the HSE app such as direct communications from Clinicians or services, information about appointments or receive data submitted by users through the app to an administrative system.

Possible use cases

- Appointment management systems
- Patient Administration Systems
- Systems requiring access to HSE app for messaging or communication with patients.

Level 5 - Native integration

In certain circumstances a service should be made available natively within the app. This is likely where a service is

- relevant to a large proportion of the population
- is delivered in the same way across all services
- Native integration is the only suitable technical solution.