

All Ireland Health
Intelligence Conference
Health Intelligence in Ireland



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Outline

- Place of Health Intelligence in the HSE and health service reforms
- Work so far
- Current Challenges
- Future

Health Services Executive

- Transition to unified health delivery system represents biggest change management project in history of the state
 - Advantages – uniform interpretation of policy
 - Much stronger leverage to drive change, put into practice international evidence of best practice, recommendations from local studies, audits, transfer learning and models of good practice
 - Opportunity to apply resources strategically in line with best intelligence
- HSE has adopted a population health approach

Population Health Approach

A Population Health approach is one which promotes and protects the health of the whole population or sub - groups, with particular emphasis on reducing Health Inequalities

Population Health Approach

Using the best health intelligence for planning, evaluation and performance management

Elements of the population health approach		
A. Plans for health not just health services	B. Promotes equity as a strong value in the health system	C. Applies research evidence to improve health outcomes
D. Adopts a formal needs assessment approach and identifies the best balance of investment	E. Reorients the system from hospital to primary care and health promotion:	F. Provides services which are integrated within the health sector and with those of other sectors:
G. Works with other sectors to improve health	H. Employs mechanisms for public involvement	I. Demonstrates a good health and social return for investment in health:

Health Intelligence components



Strategic and service priorities

- Service- how people interface, outcomes, who gets what, quality
- Equity
- Projections
- Epidemiology
- Planning
- Internal working modes and linkages in directorate and outside directorate

Research issues

- Research strategy and METR
- How the public links with us - to virtual public health resources and information.
- operational research needed on structures and a mechanism to ensure research is actually used and incorporated into public health strategy and planning
- Need to support e.g. ethnographic studies examining choice, belief and practice and its integration into intelligence dissemination.

Approach to work

- Integration and collaboration
- If others can do it better or our working together gives added value - then we go that way-not territorial
- Service integration – people, siloes
- Working smarter!

Current work in HI

- Day to day service work
- Health Atlas Ireland
- Health Intelligence website
www.healthintelligence.ie
- HIPE
- Health dataset review
- Evidence based practice programme
AIM: to enable all health service personnel to make decisions and develop policies based on the best available evidence.

Current work in HI (cont)

- Evidence based practice programme
Teaching session
ebhc supports and linkages.
- CHAIN
Contact Help Advice and Information Network.
Now about to host all-Ireland CHAIN
- **All Ireland electronic Health Library**
(AIeHL) project.

Linkages -examples

- HRB
 - Resource allocation and demographic change projects

- iHIQA- Sharing information- working relationship:
 - iHIQA and CIS re Starsweb(risk database)
 - HTA- internal issues for HSE and linkages and boundaries with HIQA

- Department of Health and Children

- Cancer registry-
 - eurochip and other projects (information)

Linkages – examples (cont)

- IPH/INIsPHO – Collaborative projects:
 - Diabetes prevalence, AIEHL, HPI, etc
- Third level institutions- collaborative projects, research, new posts
- EPA
- International linkages – other health services, NGOs- learning and sharing

Health intelligence issues- all Ireland and global opportunities

- potential opportunities to create dynamic interactive relationships between north and south / European /worldwide
- to integrate and contextualise, expertise, skills and resources in a way that they could be shared at every level

Issues for all our work

- ❑ Unique identifier
- ❑ Linking of databases
- ❑ information governance
- ❑ Postcoding
- ❑ Balance between individual confidentiality and need to be able to track and analyse services, patterns of health and illness.
- ❑ What does public want us to know?
- ❑ What do they think /expect us to know?
- ❑ Ethics/research – biomed vs HSR- research supports for all

Future?

- ❑ Collaborative working- inside and outside HSE. consolidating existing collaborations and partnerships and making new ones
- ❑ Building on existing datasets- extending some more nationally?
- ❑ learning from others and sharing our learning
- ❑ Participating in and helping to drive transformation of HSE and health services in Ireland

Summary

- Population Health , HSE , reforms, national approach
- Description of work so far
- Plans for the future
- Acknowledgements- the team- fellow ANDs- national and international colleagues - Kevin Balanda and committee for conference