



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Protocol for the analysis of a public consultation survey to inform the work of the Public Health Reform Expert Advisory Group (PHREAG) – individual responses

06 September 2023

Safer Better Care

About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is an independent statutory authority 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.

HIQA's mandate to date extends across a wide range of public, private and voluntary sector services. 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 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 health services and children's social services, and investigating as necessary serious concerns about the health and welfare of people who use these 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 services, in conjunction with the Department of Health and the HSE.

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1 Purpose and aim

At the request of the Department of Health, the Health Information and Quality Authority's (HIQA) will undertake a descriptive analysis of a public consultation survey aimed at informing the work of the Public Health Reform Expert Advisory Group (Public Health Reform EAG). Within the current project, the Public Health Reform EAG is interested in gaining insight from individuals working within Public Health domains, around their experience of the Public Health response to the COVID-19 pandemic in Ireland. Furthermore, the Public Health Reform EAG wishes to identify how the delivery of the twelve Essential Public Health Functions (EPHF) can be improved in the years ahead. The purpose of this protocol is to outline the process by which the health technology assessment (HTA) directorate in HIQA, will conduct the descriptive analysis.

2 Process outline

An online survey (Appendix A), designed and distributed by the Department of Health, will be used to collect data from individuals working within Public Health domains, from 2 March 2022 up to 23 March 2022. Following survey closure, the Department of Health will provide HIQA with all collected data.

Three distinct steps in the process have then been identified. These are listed below and described in more detail in sections 2.1 to 2.3:

1. Analyse and describe survey results
2. Summarise the findings
3. Quality assurance of report.

The project scope is limited to a descriptive and thematic analysis of the public consultation survey data, aimed at guiding the work of the Public Health Reform EAG. Statistical investigation of the data will not be undertaken. The survey consists of three sections:

- Section 1 – Survey respondent characteristics. Within Section 1 there are five questions which are multiple choice or “tick all that apply”.
- Section 2 – Essential Public Health Functions (EPHF). This section contains one question in which survey respondents highlight (through “tick all that apply”) which EPHF(s) they undertake in their current position.
- Section 3 - Strategic challenges for the delivery of EPHFs into the future. This section contains five questions which are Likert scale, “tick all that apply” or open-ended.

2.1 Analyse and describe survey results

Survey results will be checked for clarity and missing data (non-responders). Submissions from respondents who have not provided information (answered a minimum of one question) within Section 3 of the survey will be excluded.

Survey respondent characteristics will be presented graphically, using pie charts, bar chart, and column charts, created within Excel 2013, where appropriate. Descriptive statistics will be used, where appropriate.

Thematic analysis

Thematic analysis will be undertaken, using NVivo software, to identify reoccurring themes within the open-ended survey questions (three identified within Section 3 of the survey). The Braun & Clarke⁽¹⁾ six-step guide for thematic analysis will be followed:

1. Familiarisation: Three researchers will familiarise themselves with the survey results, through reading and re-reading of the data collected.
2. Coding: The researchers will independently derive initial codes, using mixed deductive and inductive coding,⁽¹⁾ where the survey questions will aid in the identification of relevant information, and the researchers will be open to the identification of additional codes within the data. These initial codes will be discussed. Codes will be finalised to create a codebook which will subsequently facilitate data coding.
3. Theme development: All researchers will generate initial themes.
4. Theme review: All themes will be reviewed, modified and developed to ensure they are accurate.
5. Theme refinement: All themes will be refined to derive the finalised set of themes and identify subthemes and categories (where required).
6. Write up: Data write-up will be undertaken, and representative survey respondent quotes will be selected to elicit the findings.

2.2 Summarise the findings

A descriptive report will be prepared by HIQA, in which the data will be described and interpreted narratively. Limitations of the data will also be described. The report will be sent to the Public Health Reform EAG in advance of a presentation of the key findings to the group at their meeting on 25 April 2022.

2.3 Quality assurance of report

The extraction and analysis of all data, thematic analysis and graphical displays will be verified by a minimum of two researchers. The content of the report will be quality assured by the Senior Management Team of HIQA's HTA directorate in accordance with HIQA's HTA quality assurance framework.

References

1 Braun V, Clarke V. Using thematic analysis in psychology. *Qualitative research in psychology*. 2006;3(2):77-101.

Appendix 1.

Survey to inform the work of the Public Health Reform Expert Advisory Group

Survey for individuals working in public health

Introduction

You are invited, as an individual working in public health in Ireland, to complete this short survey to inform the work of the Public Health Reform Expert Advisory Group (PHREAG).

The PHREAG is keen to hear from those working in public health in Ireland to:

- **gather lessons from your experience of the public health response to the COVID-19 pandemic** in Ireland and;
- **hear your ideas on how we can best improve the delivery of the essential public health functions in the years ahead.**

Information on how the data from this survey will be processed and used

Privacy Notice

[See the Department of Health's Privacy Policy.](#)

Any personal information which you volunteer to this consultation will be treated with the highest standards of security and confidentiality, strictly in accordance with the General Data Protection Regulation 2016/67 and the Data Protection Act 2018.

How data will be used

The Department of Health is collecting this data to inform the work of the Public Health Reform Expert Advisory Group. The Health Information and Quality Authority (HIQA) will analyse the responses and produce a report for the Public Health Reform Expert Advisory Group outlining the main themes and findings of the consultation.

By completing this survey, you are consenting to your data being processed by the Department of Health and HIQA. Your data will only be used in the context of the work of the Public Health Reform Expert Advisory Group and for no other purpose.

Freedom of Information

All surveys and comments submitted to the Department for this purpose are subject to release under the Freedom of Information (FOI) Act 2014 and the European Communities (Access to Information on the Environment) Regulations 2007- 2014. Personal, confidential or commercially sensitive information should not be included and it will be presumed that all information contained in your survey response is releasable under the Freedom of Information Act 2014.

What is the role of the Public Health Reform Expert Advisory Group?

The Public Health Reform Expert Advisory Group (PHREAG) is an independent expert group which has been established by the Minister for Health and the Minister of State for Public Health, Wellbeing and the National Drugs Strategy. Its mandate is to identify learnings from the public health response to the COVID-19 pandemic in Ireland with a view towards strengthening health protection generally and future pandemic preparedness specifically. The PHREAG will also identify lessons from international best practice regarding reform and strengthening of other core public health functions, traditionally described under four key pillars which encompass health protection, health improvement, health service improvement and health intelligence.

The World Health Organization has proposed the use of an essential public health function (EPHF) framework to support an integrated approach to sustainable public health systems strengthening. The PHREAG is using the twelve EPHFs to inform their deliberations and these map to the traditional four pillars of public health. The twelve functions are as follows:

1. Monitoring and evaluating population health status, health service utilisation and surveillance of risk factors and threats to health
2. Public health emergency management
3. Assuring effective public health governance, regulation, and legislation
4. Supporting efficient and effective health systems and multisectoral planning, financing, and management for population health
5. Protecting populations against health threats, including environment and occupational hazards, food safety, chemical and radiation hazards
6. Promoting prevention and early detection of diseases including non-communicable and communicable diseases
7. Promoting health and wellbeing and actions to address the wider determinants of health and inequity
8. Ensuring community engagement, participation and social mobilization for health and wellbeing
9. Ensuring adequate quantity and quality of public health workforce
10. Assuring quality of and access to health services
11. Advancing public health research
12. Ensuring equitable access to and rational use of essential medicines and other health technologies

Please see [this webpage](#) for additional information on the Public Health Reform Expert Advisory Group

Section 1: Some information about you

- **Do you work in public health in some capacity in Ireland?**
 - Yes/No

- **Where are you predominantly based in your current role?**
 - Drop down list of provinces, one option only
 - Connacht

- Leinster -Dublin
- Leinster - outside Dublin
- Munster
- Ulster

• **What organisation do you work for? Tick all that apply**

- Academic Institution
- Acute Hospital
- Institute of Public Health
- Community Health Organisation
- Department of Health
- Economic and Social Research Institute
- Faculty of Public Health Medicine of Ireland
- Food Safety Authority of Ireland
- Health and Safety Authority
- Health Information and Quality Authority
- Health Products Regulatory Authority
- Health Research Board
- HSE Health and Wellbeing Directorate
- HSE Health Intelligence Unit
- HSE Health Protection Surveillance Centre
- HSE Public Health Department
- Irish College of General Practitioners
- Irish Medical Council
- Irish Medical Organisation
- National Cancer Control Programme
- National Cancer Registry Ireland
- National Immunisation Advisory Committee
- National Screening Service
- National Social Inclusion Office
- National Virus Reference Laboratory
- Public Health Laboratory
- Safer Food (Food Safety Promotion Board)
- HSE Other, please specify _____
- Other, please specify _____

• **What is your principal role?**

- Academic
- Administrative
- Allied healthcare
- Management
- Medical
- Nursing
- Other (please specify below)
- Other clinical
- Scientific

- Surveillance
- Technical
- **How long have you been in your current role? Tick box below**
 - Less than 2 years
 - 2-5 years
 - 5 years+

Section 2: Assessment of EPHFs in your role

- **Which of the following essential public health functions (EPHF) do you undertake in your current role? Tick all that apply**
 - Monitoring and evaluating population health status, health service utilisation and surveillance of risk factors and threats to health
 - Public health emergency management
 - Assuring effective public health governance, regulation, and legislation
 - Supporting efficient and effective health systems and multisectoral planning, financing, and management for population health
 - Protecting populations against health threats, including environment and occupational hazards, food safety, chemical and radiation hazards
 - Promoting prevention and early detection of diseases including non-communicable and communicable diseases
 - Promoting health and wellbeing and actions to address the wider determinants of health and inequity
 - Ensuring community engagement, participation and social mobilization for health and wellbeing
 - Ensuring adequate quantity and quality of public health workforce
 - Assuring quality of and access to health services
 - Advancing public health research
 - Ensuring equitable access to and rational use of essential medicines and other health technologies

Section 3: Strategic Challenges for the delivery of public health functions into the future

- **Only considering the individual EPHFs that you deliver as part of your current role, what were your views on the delivery of these EPHFs before the pandemic? **Note: only those EPHFs ticked above are visible****

1- Very Poor; 2- Poor; 3- Average; 4- Above Average; 5- Excellent

- Monitoring and evaluating populations health status, health service utilisation and surveillance of risk factors and threats to health Choose 1-5
- Public health emergency management Choose 1-5

- Assuring effective public health governance, regulation, and legislation Choose 1-5
 - Supporting efficient and effective health systems and multisectoral planning, financing, and management for population health Choose 1-5
 - Protecting populations against health threats, including environment and occupational hazards, food safety, chemical and radiation hazards Choose 1-5
 - Promoting prevention and early detection of diseases including non-communicable and communicable diseases Choose 1-5
 - Promoting health and wellbeing and actions to address the wider determinants of health and inequity Choose 1-5
 - Ensuring community engagement, participation and social mobilization for health and wellbeing Choose 1-5
 - Ensuring adequate quantity and quality of public health workforce Choose 1-5
 - Assuring quality of and access to health services Choose 1-5
 - Advancing public health research Choose 1-5
 - Ensuring equitable access to and rational use of essential medicines and other health technologies Choose 1-5
- **Only considering the individual EPHFs that you deliver as part of your current role, have your views on the delivery of these EPHFs changed in light of the COVID-19 pandemic experience? Consider whether delivery is... Note: only those EPHFs ticked above are visible**
 - 1 – Much worse; 2- Somewhat worse; 3- Stayed the same; 4- Somewhat better; 5- Much better
- Monitoring and evaluating populations health status, health service utilisation and surveillance of risk factors and threats to health Choose 1-5
 - Public health emergency management Choose 1-5
 - Assuring effective public health governance, regulation, and legislation Choose 1-5
 - Supporting efficient and effective health systems and multisectoral planning, financing, and management for population health Choose 1-5
 - Protecting populations against health threats, including environment and occupational hazards, food safety, chemical and radiation hazards Choose 1-5
 - Promoting prevention and early detection of diseases including non-communicable and communicable diseases Choose 1-5
 - Promoting health and wellbeing and actions to address the wider determinants of health and inequity Choose 1-5

- Ensuring community engagement, participation and social mobilization for health and wellbeing Choose 1-5
- Ensuring adequate quantity and quality of public health workforce Choose 1-5
- Assuring quality of and access to health services Choose 1-5
- Advancing public health research Choose 1-5
- Ensuring equitable access to and rational use of essential medicines and other health technologies Choose 1-5
- **What are the key lessons from the pandemic? (Please identify which EPHF(s) you are specifically referring to in your answer)**
 - Free text (1400 characters)
- **What should change to improve the delivery of the essential public health functions in which you work in the future?**

Tick all that apply

 - a. Improved communication within your organisation
 - b. Improved communication between organisations
 - c. Improved ICT (Information and communications technology)
 - d. Improved data and surveillance capabilities
 - e. Improved organisational structures
 - f. Improved governance structures
 - g. Strengthened legislative framework
 - h. Increased funding of public health functions
 - i. Increased integration of public health functions nationally and regionally
 - j. Increased integration of public health work into wider healthcare system functions
 - k. Improved clarity in your role in performing essential public health functions
 - l. Other (please specify)

Please expand on your responses to this below:

 - Free text (1400 characters)
- **Are there any barriers to achieving these changes? If so, what actions might help to overcome these barriers?** Free text (1400 characters)

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