

Summary page:
TEHDAS2 public consultation on Draft guideline on linkage of health datasets

This consultation has 4 pages and 22 questions. The first and the second pages are common to all TEHDAS2 public consultations and cover demography of the responder and overall quality of the document. Pages 3 and 4 consist of questions specific to this document.

Demography

1. Country *

Belgium

2. Type of responder *

Other
Professional representative organisation

3. Are you responding behalf of several organisations? *

If yes: On behalf of how many organisations?

No

4. Sector *

Other
Medical doctors

5. Organisation size *

Micro (1–9 employees)

6. Professional role / function

Secretary General

Quality

7. Is the document easy to understand? *

2

8. How well does the document address the key issues related to its subject matter? *

4

9. How feasible do you find the guidelines or technical specifications to implement, as outlined in the document? *

3

10. Generic feedback

Do you have any suggestions for improving the document? Are there any additional topics or areas that should be covered? Max. 5000 characters.

Ad 7) 2 – the document is quite technical and not always easy to understand or relevant for doctors or lawyers.

The following questions are specific for TEHDAS2 Draft guideline on linkage of health datasets

11. What are you representing, according to the definition of the EHDS Regulation? *

Data holder
Data user

Why, when, and by whom are data linked?

12. On a scale of 1–5, how clear is section 4.1?

(1 = unclear, 2 = rather unclear, 3 = neutral, 4 = rather clear, 5 = very clear)

1	2	3	4	5
○	○	○	○	◉

13. Do you have comments for section 4.1 that have not yet been addressed in the generic feedback? The comments can address potential improvements, missing aspects or inconsistencies.

Max. 5000 characters.

N/A

What data are being linked?

14. On a scale of 1–5, how clear is section 4.2?

(1 = unclear, 2 = rather unclear, 3 = neutral, 4 = rather clear, 5 = very clear)

1	2	3	4	5
○	○	○	○	○

15. Do you have comments for section 4.2 that have not yet been addressed in the generic feedback? The comments can address potential improvements, missing aspects or inconsistencies.

Max. 5000 characters.

On page 14, data are being divided into “1) individual-/ patient-level data and 2) non-individual- / aggregate-level data”. Is this distinction the same as the difference between personal vs non-personal data? Or is this a different distinction?

How is data linked?

16. On a scale of 1–5, how clear is section 4.3?

(1 = unclear, 2 = rather unclear, 3 = neutral, 4 = rather clear, 5 = very clear)

1	2	3	4	5
○	○	○	◉	○

17. Do you have comments for section 4.3 that have not yet been addressed in the generic feedback? The comments can address potential improvements, missing aspects or inconsistencies.

Max. 5000 characters.

No answers

How is quality and accuracy of linked datasets ensured?

18. On a scale of 1–5, how clear is section 4.4?

(1 = unclear, 2 = rather unclear, 3 = neutral, 4 = rather clear, 5 = very clear)

1	2	3	4	5
○	○	◉	○	○

19. Do you have comments for section 4.4 that have not yet been addressed in the generic feedback? The comments can address potential improvements, missing aspects or inconsistencies.

Max. 5000 characters.

No answers

Role based access to linkage processes

20. On a scale of 1–5, how clear is section 5?

(1 = unclear, 2 = rather unclear, 3 = neutral, 4 = rather clear, 5 = very clear)

1	2	3	4	5
○	○	◉	○	○

21. Do you have comments for section 5 that have not yet been addressed in the generic feedback? The comments can address potential improvements, missing aspects or inconsistencies.

Max. 5000 characters.

No answers

22. Do you think there are other topics or questions in the context of data linkage in the EHDS ecosystem for secondary use of health data that should be added or clarified?

Max. 5000 characters.

No answers