



THE ROYAL VICTORIA EYE AND EAR HOSPITAL DVBLIN

Request for Quotation # RVEEH-004-26

**Self-Service Kiosk Terminals,
Kiosk OS Integration, and
Associated Software Licensing**

Responses to Vendor Questions

29 July 2026

Date of Publication

7 August 2026, 16:00:00h GMT

Deadline for Questions

26 August 2026, 13:30:00h GMT

Deadline for Submissions

NOTE: Interested Vendors are reminded to review Parts 1—5 of the RFQ and to submit their Responses in accordance with Sections 3.1—3.3 therein.

1. Amendments to RFI

In accordance with SECTION 1.7 of the subject RFQ, please find below the following amendment:

4.1.2.3: Compliant to GDPR & other applicable Data Protection Laws

The solution must comply with applicable Data Protection Laws, including the GDPR, and must operate according to the principles of data protection by design.

The solution must:

- a) identify all personal data processed by the solution;
- b) identify all locations in which RVEEH data will be stored, processed, backed up or remotely accessed;
- c) disclose all proposed subprocessors;
- d) describe applicable retention and deletion arrangements;
- e) ensure that only information necessary to complete the patient check-in transaction is displayed or retained;
- f) enter into an appropriate Data Processing Agreement where required; and
- g) **not transfer RVEEH personal data outside the EU.**

All text highlighted in **RED** represents the change from the original RFQ.

2. Responses to Respondent Questions

In accordance with SECTION 1.6 of the subject RFQ, please find below RVEEH responses to Vendor questions:

Q1. Is the HL7/iPMS integration experience requirement (4.1.2.2) strictly mandatory, or can equivalent experience in analogous regulated identity-matching environments (e.g. aviation, transport) qualify? [...].

R1. Section 4.1.2 details iPMS integration experience as a Mandatory Technical, Functional, & Service Requirement.

Q2. Would RVEEH accept a prime contractor + named subcontractor model where the subcontractor holds the required HSE/HL7 experience?

R2. Yes— RVEEH will accept a Prime Contractor/Named Subcontractor delivery model for the purposes of Section 4.1.2.2, provided that the named Subcontractor possesses the required relevant hospital integration experience and will actually perform or materially participate in the patient-system integration services for which that experience is relied upon. The Respondent must clearly identify the Subcontractor, its relevant experience, its proposed responsibilities, and the integration solution/deployment relied upon within its Response. The Respondent as the Prime Contractor will remain fully responsible to RVEEH for the complete solution and all obligations performed by its Subcontractor(s).

Q3. Can RVEEH clarify the precise HL7 version/messaging standard and whether APIs/FHIR would be accepted as an alternative?

R3. The iPMS application currently incorporates HL7 v2.4. Section 4.1.2.2 permits APIs, or another interface method expressly approved by RVEEH.

Whereas an API / FHIR approach has not been implemented on iPMS to date, Respondents may propose such an integration provided the Respondent demonstrably supports all required bi-directional functions specified at Section 4.1.2.2 and is acceptable to RVEEH ICT.

The final interface specification, including applicable messages, APIs, data mappings, and technical configuration will constitute the Respondent's technical design and integration plan as part of their submission.

Q4. Is there flexibility on the go-live date of 31 December 2026 given the project's dependencies on RVEEH ICT resources?

R4. No—RVEEH must provide reporting to external Government of Ireland agencies regarding the implementation of the kiosk solution on or before 31 December 2026.

Q5. Can RVEEH confirm whether the €750,000 estimated value applies to the full 12-year term or the initial 3-year term, for TCO-pricing purposes?

R5. Confirmed—the €750,000 as estimated contemplates the twelve (12) year total Agreement Term + Option Year periods.

The TCO for the three (3) year *initial Term* shall be used for the evaluation of Respondent submissions.

Q6. Will RVEEH provide more detail on existing iPMS/patient administration system vendor and available integration documentation/test environment access ahead of submission?

R6. The RFQ specifies the functional and interoperability outcomes required rather than prescribing a proprietary integration architecture. Respondents should identify within their Response their proposed integration method, assumptions, dependencies and test-environment requirements. Detailed interface documentation, technical configuration and test-environment arrangements will be established with the Successful Respondent during implementation and will be subject to RVEEH ICT and applicable third-party security/access requirements.

The Successful Respondent awarded a Contract resulting from this RFQ may receive a copy of the 'DEDALUS iPM HL7 INTEGRATION SPECIFICATION'. The Specification is classified by the Supplier as STRICTLY CONFIDENTIAL and cannot be openly distributed as part of this Tender.

No pre-submission access to a live or test patient-system environment is contemplated.

Q7. What are RVEEH's expectations on data hosting location—is UK-based hosting acceptable, or must all data remain within Ireland/EEA?

R7. UK-based hosting is excluded by the RFQ. SECTION 1—AMENDMENTS TO RFI above confirms the requirement.

Q8. Can RVEEH clarify the minimum acceptable SLA response/resolution times and any penalty/credit regime tied to the 99.5pc availability target?

R8. Respondents are referred to SCHEDULE B—ANNEX D—SERVICE LEVELS, particularly SECTIONS 2, 3, 5 and 16, which specify the applicable availability, incident response/restoration and service-level breach requirements. The RFQ does not prescribe a separate automatic service-credit calculation tied to the 99.5% availability target. Service-level failures will be managed in accordance with ANNEX D—SECTION 16 and the remedies available under the AGREEMENT.

Q9. Is there scope to negotiate the pricing-model criteria (4.1.3.1) around fixed pricing terms if extension periods are triggered late or with short notice?

R9. Section 4.1.3.1 permits Respondents to propose different pricing approaches for the Initial Term and Option Periods, with a resulting score determined in accordance with the published criterion. Respondents should therefore submit the pricing model to which they are willing to commit and be evaluated.

Respondents are also referred to SCHEDULE B—GOODS AND SERVICE AGREEMENT, which confirms that any Option Period is subject to mutual written agreement and does not take effect automatically or unilaterally.

Q10. Are reference site visits or discussions with existing HSE customers of shortlisted Respondents part of the evaluation process?

R10. RVEEH may contact Respondent references and/or relevant third parties for the purposes of verification and clarification in accordance with SECTIONS 4.5 and 4.6 of the RFQ.

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