



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Half Year Report against the HSE National Service Plan June 2011

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Quality & Safety

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Quality, Safety and Risk Management Framework	Quality, Safety and Risk Management Framework:		
<i>Building on existing work on quality and risk standards</i>	<ul style="list-style-type: none"> Quality, Safety and Risk Management Framework further implemented (taking into consideration the <i>National Standards for Safer Better Healthcare</i>). 	Q1	The HSE response to support implementation of HIQA National Standards currently being progressed. This includes the development of a Quality Management System (QMS). Three subgroups have been identified to inform the design and functionality of specific modules of the system focusing on incident management, risk management and standards -which will facilitate self assessment against the national standards. The specification for the QMS will be finalised in Q3 following testing.
	<ul style="list-style-type: none"> Implementation ongoing. 	Ongoing	As above
Clear Accountability Arrangements	Strengthen accountability arrangements:		
	National guidance on clear accountability arrangements implemented.	Q4	Following review of the plans for implementation it was decided to incorporate a framework for clinical governance (including accountability) within the roll out of the national clinical programmes and clinical directorates framed by the Safer Better Health Care Standards (HIQA, 2011). A national lead for clinical governance development and a project manager have been appointed. A national steering group and working group has been established
	<ul style="list-style-type: none"> HSE Code of Governance review completed, submitted to Board and Minister for Health and Children for approval. 	Q2	The Code of Governance Review completed, revised code approved by HSE Board on 14th July 2011. Submitted to Minister for Health for approval.
	<ul style="list-style-type: none"> Implementation commenced. 	Q2	Awaiting final approval to go to next phase.
Person Centred Care	Increase service user input into planning and delivery of services:		
<i>Service User Involvement</i>	Strengthening of service user input in planning and delivery of services through implementation of key actions from <i>Strategy for Service User Involvement</i> .	Ongoing	Report on the ISQSH national inpatient survey launched on 24th June 2011. Patient Safety Champions steering group established
<i>Complaints [Your Service Your Say]</i>	Appropriate management of complaints and reviews.	Ongoing	10 new review officers identified. Training delivered to review officers in February 2011. Discussion ongoing regarding the appointment of 10 lead complaints officers in each region.

Quality & Safety

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
<i>Advocacy</i>	National Advocacy Programme for older people in residential and community settings.	Q4	Third Age appointed to take over the National Advocacy Alliance Programme. Hand over to take place in September 2011.
Effective Care	Strengthen our healthcare audit:		
<i>Assurance and Monitoring</i>	Health Audit Level II Plan agreed and implemented.	Q4	Q1 audits finalising and Q2 audits commenced and in progress.
	<ul style="list-style-type: none"> Implementation of continuous quality improvement (CQI) programme enabled (which will include all HSE and National Standards). 	Ongoing	Work is underway in developing a Quality Management System to facilitate reporting on incidents, risk management and self assessment against standards and development of quality improvement plans to address areas of concern highlighted in reporting process. A monitoring function has been established in QPS which will enable a focus on provision of evidence of performance and compliance within the HSE with national/international regulations, standards, and QPS codes of practice, and analysis of information. There analysis that this commenced will be used to ensure that learning from incidents, reports, audits, CIS, etc. is captured, analysed and disseminated throughout the organisation.
	<ul style="list-style-type: none"> Supporting guidance for monitoring and review system, including clinical and surgical audit, drafted and specified, following consultation. 	Q4	Work is underway, including a national consultation exercise, in developing Version 1 of national clinical audit guidelines, and the national clinical audit support function.
	Comply with HIQA report recommendations:		
<i>Documentation</i>	<ul style="list-style-type: none"> Implementation of recommendations of internal and external reports monitored. 	Q4	Implementation group to oversee HIQA recommendations from reports on Mallow and Ennis hospitals set up.
	Clinical effectiveness:		
<i>Clinical Effectiveness</i>	<ul style="list-style-type: none"> National Clinical Effectiveness Committee supported to ensure national guidelines and audit are implemented across the HSE. 	Ongoing	NCEC working group established with QPSD nominee supporting the work. The role of the working group (WG) commenced in developing support documents and tools to guide the work of both the Committee and guideline developers. The WG will assess submitted clinical guidelines against specified quality assurance criteria. Pending the publication of Irish quality assurance criteria, the criteria used will be the AGREE-II tool. The WG will submit a summary report outlining its assessment of clinical guidelines to the Committee, but does not make the final endorsement decision

Quality & Safety			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
<i>Health Technology Assessment</i>	Health Technology Assessment:		
	<ul style="list-style-type: none"> Health Technology Assessment capacity developed through working with HIQA. 	Q4	Ongoing at this time.
<i>Healthcare Records Management Programme</i>	<ul style="list-style-type: none"> Healthcare Records Management Code of Practice, general healthcare record and e-learning programme reviewed and adapted for non-acute services. 	Q4	<p>The Code of Practice for Healthcare Records Management has been reviewed following a national consultation exercise and updated to HSE Standards & Recommended Practices for Healthcare Records Management V3.0. This document is to be submitted for approval by National Director. The HSE general healthcare record for acute hospitals has been updated as a result of feedback received. The E-learning programme for healthcare records management will be reviewed when V3.0 has been approved.</p> <p>Link people sought from the health care areas to enable the roll-out of the Healthcare Records Programme to non-acute services. When link people have been identified a current state analysis will be undertaken to determine what policies, procedures, protocols and/or guidelines are in place in relation to healthcare records management in Community Services. A working group will be formed to progress this work Q3/Q4</p>
	<ul style="list-style-type: none"> Version 1.0 of National Nursing Healthcare Record, acute services, specified following consultation. 	Q4	Not commenced
	<ul style="list-style-type: none"> National standard maternity record in use in all centres. 	Q4	Version 1.0 template for the National Maternity Healthcare Record (NMHCR) has been worked up. All maternity units have received training in the use of the new record. Discussions underway with National Clinical Care Programme Lead for Obs/Gynae re finalisation of record content.
	<ul style="list-style-type: none"> National ED dataset in use in all centres. 	Q4	Discussions had with Emergency Medicine Clinical Care Programme (EMCCP) lead in April to discuss ED dataset. ED document will be amended Q3/Q4 to reflect agreed pathway of care.
	<ul style="list-style-type: none"> National HSE Consent Policy drafted and specified following consultation. 	Q4	The first meeting of National Consent Advisory Group took place in June, terms of reference agreed. A scoping exercise with Care Groups ANDs is planned for July - August 2011 with feedback to National Advisory Group meeting in Sept 2011 to facilitate commencement of development of national consent documentation

Quality & Safety			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Safe Care	Enhance our management of serious incidents and complaints:		
<i>Serious Incident Management</i>	Serious Incident Management training programme delivered to key staff.	Q3	Pilot training in HSE draft investigation procedure was delivered to 14 staff and 11 service users in March. Training in conducting look back reviews was delivered by the serious incident management to 72 senior managers and clinicians in May.
<i>Medication Safety</i>	Standardisation of hospital drug prescription and administration records (DPAR project).	Q3	National Advisory Group established. Medication prescription and administration charts have been collected from all acute hospitals in the country and a systematic analysis of their content and design completed. A series of four workshops was held to consult process stakeholders from the hospitals including nurses, pharmacists and doctors, as well as risk managers and quality personnel. 125 staff participated in these workshops. The output from these workshops is to be evaluated during Q3 with a view to informing decisions by the National Advisory Group on the structure of the new standardised Medication and Prescription and Administration Record (MPAR).
	Improve preparedness for major emergencies:		
<i>Preparedness for major emergencies</i>	<ul style="list-style-type: none"> Major emergency responses planned, maintained and tested. 	Q4	Training and exercise programmes continue within the HSE and with partner agencies
	<ul style="list-style-type: none"> Public crowd procedure established. 	Q1	HSE Guidance on Crowd Events will shortly be reviewed by the National Steering Group
Research and Development	<ul style="list-style-type: none"> Database of research activity established. 	Q2	Ongoing at this time.
	<ul style="list-style-type: none"> Metrics for research performance in place. 	Q4	Currently under development.
	<ul style="list-style-type: none"> Health Innovation Centre established through partnership with enterprise agencies and industry. 	Q2	Currently under discussion with DoHC and enterprise agencies.
Environmental Health Services	Enforcement of statutory function continued in relation to food safety, tobacco control, preschool services, cosmetic products, drinking water and fluoridation, international health, poison and pest control.	Ongoing	Figures are based on Q1 data. Q2 data not available currently. Detail of progress achieved on individual areas is outlined below.

Quality & Safety

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Tobacco Control	No of sales to minors and test purchase carried out	For reporting in 2011	Two Test purchases carried out in two regions Qtr 1 – 61 inspections, 59 of which were compliant. Target achieved in Qtr 1.
Tobacco Control	Integration of the Office of Tobacco Control into the HSE	Qtr 1	Office of Tobacco Control dissolved and HSE responsible for its statutory functions since January 2011.
Food Safety	% of the total number of high risk food premises which receive one full programmed inspection	New PI for 2011 100%	Annual target number of high risk premises 23,441, (point in time). Quarterly target no. of premises 5,860. Actual no. of high risk premises inspected Qtr1 5,574. – 23% of annual target achieved in Q1. Due to fluctuations in premises numbers 100% target is still achievable.
Food Safety	Service Contract with FSAI – agree service contract for 2011 – 2015	Q1 - Q4	Service contract negotiations have commenced and 1st draft of contract is complete.
Import Control	% of total number of food consignments imported which are subject to additional conditional controls that receive the additional official controls required by legislation	New PI for 2011 100%	49 consignments received in Qtr 1 of which 49 received the required additional controls– 100% of target achieved.
International Health Regulations	All designated ports and airports to receive an inspection to audit compliance with the International Health Regulations 2005	New PI for 2011 100%	3 of 7 audits completed. The remainder of audits are planned for Qtr 3 and Qtr 4.
Cosmetics and Food Product Safety	% achievement with the cosmetic plan	New PI for 2011 100%	100% of Qtr 1 target achieved.
Cosmetics and Food Product Safety	% achievement with the food sampling plan	New PI for 2011 100%	100% of Qtr 1 target achieved.
Pre-Schools Services	Full day care services - annual inspection of pre-schools services	100% of full day care services to receive an annual inspection	Full day care prioritised. Performance Indicator as per Children & Families.
Drinking Water-Fluoridation monitoring	Sampling to be carried out with all significant or serious outcomes followed up in accordance with COP Guidance Note 1		Currently 232 water schemes receiving fluoridation of which 642 samples were taken Qtr 1 2011. 92% achievement with target number of samples
Bio monitoring Project - Democophes	HSE taking part in EU wide pilot study to determine levels of key environmental pollutants in the Irish population.	Q1 - Q4	National Monitoring Unit established Qtr 1. Critical steps identified. Sampling to take place Qtr 3.
Pest Control	Programme of mosquito monitoring to be implemented in line with EU recommendations	Q1 - Q4	Sites for surveillance identified. Surveillance to commence in Qtr 3.

Quality & Safety

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Reconfiguration	Reconfiguration of the Environmental Health service to be carried out to address risks in Environmental Health service and reflect HSE priorities of quality and equity of service delivery	National Environmental Health resources and service delivery model to be implemented by end 2011 based on service priorities	1st draft of model design has been completed, further consideration of design by end of 2011. Implementation will be targeted for 2012.
ICT- Environmental Health Information System	Implementation of the Environmental Health Information System	Operational EHIS in all areas by the end of 2011	Procurement process complete. Implementation to commence Q3. System will not be operational until 2012

Primary Care Services in the Community

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Primary Care Teams (PCTs) and Health and Social Care Networks (HSCNs)	Development of PCTs and HSCNs by:		
<i>Progress the establishment of PCTs and HSCNs</i>	Increased access to primary care services through 527 PCTs by:	Q4	383 Teams are in operation at end of June 2011 with a target in NSP for end of June of 431 (90% of overall target). We have highlighted to the National Director and RDOs specific areas requiring action in relation to end of year target attainment.
	<ul style="list-style-type: none"> Continued realignment of existing staff to new and existing teams 		3741 staff reconfigured to PCTs at end of May 2011. Communication issues on a monthly basis to each RDO on progress. An analysis was undertaken in relation to staff vacancies among nursing and therapy grades in PCTs and this has been highlighted to the National Director and DOH&C.
	<ul style="list-style-type: none"> Clinical leadership developed, and Clinical governance and service management implemented for teams in operation 		Clinical leadership for PCTs is included in the model proposed to address clinical governance and service management in PCTs. This model has been endorsed by HSE Management and is now undergoing a consultation process with relevant stakeholders.
	Enhanced service integration through the development of 134 HSCNs achieved:	Q4	134 Networks have been mapped and alignment of services within those Networks is ongoing. However the formal structure for management and governance of Networks is in consultation with relevant stakeholders (as above)
	<ul style="list-style-type: none"> Specialist and care group services aligned 		The framework for alignment has been issued to all Care Groups. It is planned to have a workshop to agree the formal alignment of these services to PCTs and Networks.
	<ul style="list-style-type: none"> General principles of referral and shared care arrangements implemented with secondary care, care group and specialist services. 		The National Primary Care Programme is currently working with various national projects and programmes in the development of principles of referral, shared care arrangements and care pathways, e.g. National OPD Framework and Policy, Quality Clinical Care Directorate (QCCD) Chronic Disease Programme, Roll out of Care Pathways and Shared Care arrangements for Audiology. The governance and management model for PCTs will support shared care and specialist service arrangements between care groups.

Primary Care Services in the Community

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	Evidence based research on PCTs progressed with Departments of General Practice in 3 rd Level Universities and the Health Research Board.	Q3	The first programme of research has commenced in Mallow Primary Care Centre. The focus of this research involves measuring the impact of the PCT based approach to health service delivery. Three specific pieces of research are underway as follows: (i) reducing unplanned hospital admissions and hospital bed days in the over 70 age group; (ii) compliance study and improving compliance through the use of text message reminders; (iii) Breaking the trend: Family Intervention Programme and Diabetes Type 2 and Impaired Glucose Tolerance
	Electronic referrals systems from primary care to acute sector developed.	Q4	The initial pilot of electronic GP referrals has been agreed in HSE South (Cork & Kerry) and Tallaght. The use of the HIQA generic referral form forms the basis of the generic referral process. A detailed project plan has been compiled to support the roll out to pilot sites identified with a view to national roll out. In addition, 4 PCTs have been identified to pilot the referral of information between PCT members through Healthlinks.
Chronic Disease Management	Improved disease management in primary and ambulatory care settings:		
<i>Cross directorate planning in delivering integrated chronic disease programmes</i>	Commencement of plans for the management of chronic disease in primary care supported by guidelines with a focus on:		
	<ul style="list-style-type: none"> ▪ Stroke 	Ongoing	<p>The models to support the delivery of chronic disease management in Primary Care have been drafted by the Clinical Care Programme and are being reviewed by the relevant professionals in terms of delivery for stroke, heart failure and peripheral vascular disease. There are a number of Chronic Disease Management Programmes (CDM) in place around the country with approximately 34 Primary Care Teams implementing Diabetes Structure Care.</p> <p>Model of Care in progress.</p> <p>Model of Care in progress</p>
	<ul style="list-style-type: none"> ▪ Heart Failure 	Ongoing	
	<ul style="list-style-type: none"> ▪ Asthma 	Ongoing	
	<ul style="list-style-type: none"> ▪ Diabetes 	Ongoing	
	<ul style="list-style-type: none"> ▪ Chronic Obstructive Pulmonary Disease (COPD) 	Ongoing	
	<ul style="list-style-type: none"> ▪ Dermatology / Rheumatology 	Ongoing	
	<ul style="list-style-type: none"> ▪ Care of the Elderly. 	Ongoing	

Primary Care Services in the Community			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Enhancement of Primary Care Services	<ul style="list-style-type: none"> Planning for delivery of IV therapy services in community settings undertaken. 	Q4	<p>Work ongoing on the development of policies in relation to the delivery of IV therapy services. Currently there are 6 CITs in place nationally. The populations covered are mostly based on hospital catchment areas: These are;</p> <p>Dublin North (catchment area of the Mater, Beaumont and Connolly Hospitals). Dublin South (catchment area of Tallaght, St James and St Vincent's Hospitals). Cork (catchment area of Cork University Hospital, Mercy Hospital, South Infirmary, St Finbars, Bon Secours and Orthopaedic Hospital). Limerick (20 mile radius of Limerick City incorporating catchment areas of Mid Western Regional, St Johns, Croom, Rehab Unit, Milford Hospice, St James & Barrington's Hospital). Clare (Entire County) (new) North Tipperary (North Tipperary/East Limerick) (new).</p>
Promoting Health	Implementation of the <i>Health Promotion Strategic Framework</i> commenced and associated actions regarding national health promotion policy in the key settings.	Q1	Working groups have been established.
	Enhanced services for targeted groups by implementing the following programmes through PCTs:		
	<ul style="list-style-type: none"> Falls prevention 	Q3	A National Falls Prevention Working Group was convened in April 2011. Terms of Reference have been agreed and draft guidelines are nearing completion.
	<ul style="list-style-type: none"> Team based approaches to mental health, including the consultation liaison model as described in Vision for Change 	Q3	Third cohort of PCT representatives has completed the team based approaches to mental health in Primary Care. A review of the programme will be held on July 11th. Following on from this, amendments will be made to the programme and it will also inform further training requirements for Mental Health in Primary Care.
	<ul style="list-style-type: none"> Smoking cessation 	Q3	The pilot projects within the PCT settings continue apace with the evaluation commencing in Q3.
<ul style="list-style-type: none"> Breast feeding 	Q3	The post of National Breastfeeding Co-ordinator has been filled since May 2011. A Baby Friendly Hospital Initiative is in the process of being developed. Pilot areas are being identified.	

Primary Care Services in the Community

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	Specific priority measures from Framework for Tobacco Control implemented (with a particular focus on acute campuses in 2011).	Q4	Evaluation on National Smokers Quitline nearing completion. National Tobacco Control Office appointed as project management office. Leads identified for all priority action areas. Roll-out of tobacco-free campus initiative, all designated cancer centres are required to introduce a tobacco-free campus policy by year end - Six workshops run regionally in February/March. Suite of tools to support local implementation being developed. Two briefing sessions planned in Sept for management in acute and primary care sites. In DML, there is no positive progress at St. James's Hospital, the designated cancer centre. Project lead has not been identified, and project group has not been established. Framework Implementation Group has requested National Cancer Control Programme (NCCP) to raise the matter with hospital management and clinicians.
			QUIT campaign – During Q1-Q2, the Social Marketing Working Group for Tobacco planned and developed the “1 in 2” campaign, which was launched mid-June. The campaign includes radio and outdoor advertising, online and social media elements (www.quit.ie ; www.facebook.com/HSEquit), posters in hospitals and primary care centres, engagement with key stakeholders, national and regional public relations activity. Phase two will be launched on 29th August. Tobacco Control Stakeholder Network established in April and Terms of Reference agreed. Membership includes 14 key external organisations. First meeting held in April. Two further meeting scheduled in Q3-Q4. Register of specialist cessation providers and trainers in brief intervention in smoking cessation completed in Q1.
Delivering integrated cancer programmes	Initiatives for implementation in a primary care setting developed with the National Cancer Control Programme including:		
	<ul style="list-style-type: none"> Cancer prevention information developed for the public on the NCCP web 	Q3	Cancer prevention information prepared, proofed and ready for website. Awaiting redevelopment of website prior to upload.
	<ul style="list-style-type: none"> Training for practice nurses in cancer prevention and care rolled out 	Q3	Programme has been delivered to practice nurses and public health nurses working in the community in Cork, Waterford and Galway. Course evaluation underway. Plans to deliver programme in Dublin in October. Options for e-learning module being explored.

Primary Care Services in the Community			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> Community nurse education programme further developed and evaluated 	Q3	Community nurse education pilot delivered in Letterkenny and course evaluation underway. Plan in place for prospective evaluation with respect to the patient experience.
	<ul style="list-style-type: none"> Follow-up care programmes developed in the community for patients who have had cancer 	Q3	No further progress with follow up care programmes. Report on follow up of breast cancer not adopted by Irish College of General Practitioners (ICGP) Focus in immediate term will be on patient information on their follow up needs.
	<ul style="list-style-type: none"> Information / training sessions for General Practitioners (GPs) delivered through Irish College of General Practitioners (ICGP) and Continuing Medical Education (CME) tutor groups around the country, and 	Q3	GP information sessions delivered via Continuing Medical Education (CME) sessions and hospital study days on breast, lung, prostate and skin cancer and electronic referral. Option of e-learning being explored.
	<ul style="list-style-type: none"> Electronic referral cancer systems developed within the GP software packages. 	Q3	Electronic referral systems in place and operational for breast, lung and prostate cancer. Forms will be working in all accredited software packages by end of July. Any future cancer referral forms will use a generic electronic form with embedded browser.
Audiology Services	Implementation of Audiology Report recommendations		The National Audiology Review Report was published in April 2011. Work has commenced on many of the recommendations within the report including the following: Briefing sessions in each HSE Area Appointment of National and Regional Leads and a Project Manager Further roll out of Newborn Hearing Screening to all HSE maternity hospitals in the South Establishment of a National Bone Anchored Hearing Aids (BAHA) Programme Revised procurement framework for hearing aids and accessories Framework for the sponsorship of students to undertake the MSc in Audiology Linking with the Cochlear Implant Programme, Child Health Development Directorate and ICT directorate Workforce Planning project initiated Formal information sharing meeting with IMPACT Waiting list initiative commenced in each Region Meetings have commenced with the Departments of Social Protection and Education and Skills on cross-sectoral work.
	Audiology services enhanced through the implementation of Phase 1 of Audiology Review recommendations (upon adoption of report).	Q4	
	Newborn hearing screening further rolled out in line with national model.	Q3	Roll out of Newborn Hearing Screening in line with national model commenced in April 2011 in Cork University Maternity Hospital with plans in place for roll out to all Maternity Hospitals in HSE South by the end of 2011.

Primary Care Services in the Community			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Prescribing	Improved prescribing through:		
	Working with GPs to deliver more cost effective prescribing choices.	Q3	PCRS have developed a Prescribing Analysis Tool focusing on prescribing efficiencies. Work is ongoing on the refinement of the tool.
Out Of Hours	Implementation of recommendations from GP Co-Op Review:		
	Streamlining of services through implementation of recommendations of GP Co-Op Review.	Ongoing	A working group comprising representatives from the HSE and the Irish Medical Organisation (IMO) is advancing the implementation of the recommendations.
Oral Health Policy	<ul style="list-style-type: none"> Independent Strategic Review of the Delivery and Management of HSE Dental Services implemented in partnership with Regions. 	Ongoing	Consultation re reconfiguration of Dental Services management structures, under Croke Park, is on going. Expressions of Interest have been completed and agreed.
	<ul style="list-style-type: none"> Planning for the implementation of the DoHC's Oral Health Policy (when published) commenced in conjunction with the Regions. 	Q1	The National Recovery Plan 2011-2014 includes a commitment to a review of dental services and supports provided through the healthcare and social protection systems. Essentially this requires that the Department take a broader policy approach than that envisaged in the draft Oral Health Policy and work with the Department of Social Protection and the HSE to develop a new policy framework. In the short term, the intention is that revised objectives and performance indicators for the Public Dental Service and the DTSS would be agreed with the HSE
Immunisation	HPV delivered to cohort of young women as specified in policy.	Q4	Work is ongoing and there is an uptake of 80% to date for this programme.

Acute Services and Pre-Hospital Emergency Care			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Medicine	Implementation plan for AMP finalised and implementation commenced with an initial focus on:		
<i>Acute Medicine Programme (AMP)</i>	<ul style="list-style-type: none"> Acute Medical Units (AMUs) functioning in 12 sites 		
	Functioning in 6 sites by Q2	Q2	AMP Implementation initiated in 6 sites.
	Functioning in additional 6 sites by Q4	Q4	AMP Implementation initiated in 12 sites
Critical Care Programme	<ul style="list-style-type: none"> Audit process for critical care 	Q3	Procurement process ongoing for audit services
Emergency Care	<ul style="list-style-type: none"> Emergency Medicine Programme introduced. 	Q3	A M Report through first round of consultation and feedback next round with wider group will commence 16th July
	<ul style="list-style-type: none"> Completion of Patient Experience Time (PET) data set as follows: 		
<i>Emergency Medicine Programme</i>	21 hospitals Q1	Q1	17 hospitals reporting
	22 hospitals Q2	Q2	18 hospitals reporting - data is currently being validated and two way feedback between sites and BIU instigated to ensure the comprehensiveness of the data. This validation process is ongoing.
	23 hospitals Q3	Q3	23 hospitals reporting
	33 hospitals Q4	Q4	33 hospitals reporting
Surgical Care <i>Elective Surgery Programme</i>	<ul style="list-style-type: none"> Rates of day surgery increased 	Q4	Targets agreed with Surgical specialities.
	<ul style="list-style-type: none"> Length of patient stay shortened for selected common elective inpatient surgical procedures. 	Q4	Targets agreed with Surgical specialities.
	<ul style="list-style-type: none"> Standardised care pathway guidelines developed. 	Q4	Draft Models of care completed and ready for publication
	<ul style="list-style-type: none"> Audit programme introduced to monitor outcomes of process and to audit surgical mortality. 	Q4	Due Diligence and operational planning in progress. On track to commence scale up in Q4

Acute Services and Pre-Hospital Emergency Care			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Outpatient Programme			
<i>Outpatient data</i>	Reformed data set adopted and reported in hospitals with 75% of OPD footfall nationally, including reformed referral management.	Q4	Q 2 Referral numbers reported by 15 hospitals as follows: DML – 6 out of 13 hospitals; DNE 4 out of 9; South 3 out of 11 and West 2 out of 11.
	<ul style="list-style-type: none"> System and process modifications implemented. 	Q4	Q1 Implementation commenced
	<ul style="list-style-type: none"> Reporting commenced. 	Q1	Q1 Reporting commenced Feb 2011
	<ul style="list-style-type: none"> Standardised adherence to Reformed Data Set monitored and maintained. 	Q4	Q2 Quality Assurance process began
<i>OPD service improvement</i>	To improve access to services, 15 hospitals with longest waiting times identified and policies implemented on:		
	<ul style="list-style-type: none"> Waiting list validation 	Q4	Validation Policy developed and piloted by selected GPs with a view to roll out policy to all hospitals by Q4.
	<ul style="list-style-type: none"> DNA 	Q4	Draft DNA Policy developed and gone for consultation. Policy to be issued to all hospitals by Q4.
	<ul style="list-style-type: none"> Improving new to return ratios. 	Q4	Draft policy developed and gone for consultation Policy to be issued to all hospitals by Q4.
<i>Epilepsy</i>	Regional Epilepsy Centres defined.	Q1	6 regional centres & resource requirements identified
<i>Dermatology</i>	Increase of 30% in new dermatology outpatient attendances over 12 months Jan-Dec 2011 based on reformed data set.	Q4	9 consultant posts approved & advertised to date, 6 appointments made.
<i>Neurology</i>	Increase of 30% in new neurology outpatient attendances over 12 months Jan-Dec 2011 based on reformed data set.	Q4	9 consultant posts approved, 3 appointments made.
<i>Rheumatology and Orthopaedic</i>	12 musculo-skeletal physiotherapy led clinics in place.	Q2	14 Pilot clinics in place

Acute Services and Pre-Hospital Emergency Care

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Chronic Disease Interventions			
<i>Stroke</i>	Stroke Units meeting defined criteria in 9 new sites.	Q4	Guidance Pack issued. Await return of local implementation plans. Recruitment process initiated 2 sites with new stroke units
<i>Acute Coronary Syndrome</i>	<ul style="list-style-type: none"> Protocol for management of acute STEMI agreed. 	Q1	Protocol developed and under consultation with stakeholders
	<ul style="list-style-type: none"> Primary PCI centres identified and 4 centres functioning. 	Q3	4 24/7 Primary PCI centres identified Model of care for Primary PCI in draft format Plans for delivery underway
<i>Heart Failure</i>	Structured Heart Failure Programmes available in 12 acute hospitals.	Q4	Guidance Pack issued. Await return of local implementation plans. Recruitment process initiated
<i>Diabetes</i>	<ul style="list-style-type: none"> Retinopathy Screening Programme initiated with IT systems in place. 	Ongoing	1. Diabetic Retinopathy Executive Management Team set up with NCSS. 2. Quality Assurance Committee set up.
	<ul style="list-style-type: none"> National foot care programme introduced. 	Ongoing	12 implementation sites have their implementation plans signed off by National Diabetes Programme and RDO's and are ready for full implementation.
<i>COPD</i>	Structured programmes operational in 12 acute hospitals.	Q3	Guidance Pack issued. Await return of local implementation plans. Recruitment process initiated
<i>Asthma</i>	Asthma Education Programmes initiated.	Q2	Online Education Programme in test environment. Train the trainer sessions scheduled for rolled out summer 2011. HCP programme scheduled for Autumn 2011 roll out.
Ambulance Services	Response times improved for life threatening emergencies:		
	<ul style="list-style-type: none"> Performance data collected to maximum extent possible to inform setting of performance targets for remaining 4 clinically appropriate response time standards to 112 (999) emergency calls in line with HIQA recommendations. 	Q4	Performance Data is being collected and a review meeting is scheduled for July with HIQA and DoHC to discuss setting of performance targets
	<ul style="list-style-type: none"> Existing resources refocused from non urgent patient transport services to improving response times to life threatening 999 emergency calls, in line with HIQA targets. 	Q4	While much discussion has occurred, there has been no progress on this matter as no alternative resources have been provided to service non urgent patient transport

Acute Services and Pre-Hospital Emergency Care

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> National Command and Control project delivered (enabled through ICT/Estates/HR): 	Q3	A Project Board has been established and 9 Work streams are currently underway. Building procurement is being finalised and discussions with staff under the auspices of the PSA are continuing
	-Digital Radio system rolled out	Q3	Role out underway in Kerry only to date
	- CAD in place	Q3	A tender specification has been completed and the procurement process has commenced
	-National Integrated Command and Control (ICCS)	Q3	Conjoint work with An Garda Siochana ongoing with ICCS currently under construction
	-Automatic Vehicle Location System	Q3	CMOD has approved procurement of a solution
	-National mapping solution	Q3	Transfer of ICT Capital to Fair Deal has placed this deliverable in doubt
	- Mobile data solution	Q3	Transfer of ICT Capital to Fair Deal has placed this deliverable in doubt
	-Satellite navigation solution	Q3	Transfer of ICT Capital to Fair Deal has placed this deliverable in doubt
	-HR/Staffing engagement	Q3	Discussions with staff unions are ongoing however no agreement reached at this stage
	-Procurement and fit out of building.	Q3	NAMA have just this week accepted the HSE's offer enabling fit out to now commence
	<ul style="list-style-type: none"> Medical Director appointed. 	Q1	No progress on securing a WTE/funding however interim arrangements now in place with a Consultant temporarily seconded to role
	<ul style="list-style-type: none"> Ambulance management structures reconfigured to address new priorities and staffing gaps. 	Q2	Significant progress in redesigning structures and filling of positions is now underway subject to recruitment timescales
Other service development areas			
<i>Reconfiguration of our acute hospital system</i>	Progression of our reconfiguration programme in line with agreed plans taking into account issues of accessibility, clinical standards and quality of care.	Ongoing	Acute hospital reconfiguration is being progressed through the Regional Directors of operations and the Clinical Care programmes

Acute Services and Pre-Hospital Emergency Care

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
<i>Obstetrics and Gynaecology</i>	Early Pregnancy Assessment Units operating in compliance with national guidelines.	Q2	EPAUs are now operating in 18 of the 19 maternity units. The final unit is to be established in July 2011. Guidelines and recommendations have been communicated to all units. A high spec ultrasound machine has been purchased for all maternity units. Four members of staff from each unit are required to attend ultrasound training in 2011.
<i>Paediatric services</i>	<ul style="list-style-type: none"> ▪ Paediatric Clinical Programme established with a clinical lead appointed, to drive implementation of National Integrated Paediatric Model of Care to include orthopaedics, general paediatric surgery regionally. 	Q1	Paediatric Lead has been appointed and a neonatal deputy lead has been appointed and establishment of the programme is underway.
	<ul style="list-style-type: none"> ▪ Oversight continued on work of National Paediatric Development Board team in development of new National Paediatric Hospital including design brief, costings, assessment and validation of proposals in relation to size and model of new hospital. 	Ongoing	The Service Improvement Group continue to provide oversight of the capacity planning, project milestones and validation of proposals. The independent review of the project to build the new children's hospital is currently underway.
	<ul style="list-style-type: none"> ▪ Hospital network management group (comprising Regional Director of Operations, Clinical Director and CEOs of three hospitals) to ensure integration of Dublin paediatric service provision through operational service improvements: 	Q4	ISA Manager now working with paed groups also with lead responsibility for Child Care in the Region. Working towards a conjoint approach both across the three hospitals and with wider community
	Ensuring services are working as one unit across the three sites and maximising resource utilisation and synergies		Bre Burear in place across sites. ED support from one hospital to another. Cross hospital Dept of Surgery in place.
	Aligning business and corporate processes		Project under way on business processes
	Aligning and preparing services for move to the new hospital.		Part of the remit of the Hospital Network Management Group

Acute Services and Pre-Hospital Emergency Care

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> ▪ National retrieval service for neonates and paediatrics developed. 	Q3	Recruitment of the Retrieval Coordinator post underway. Paediatric intensivist posts to lead in the development of the service are in the process of recruitment
<i>Cystic Fibrosis</i>	<ul style="list-style-type: none"> ▪ Critical care additional capacity opened in Our Lady's Children's Hospital. 	Q3	4 additional beds to be opened on a phased basis with first bed opened in August. Recruitment and training of nurses underway.
	<ul style="list-style-type: none"> ▪ Governance structure for National Newborn Bloodspot Screening Programme established. 	Q1	Governance structure for National Newborn Bloodspot Screening programme established on 7th April 2011. Regional groups in the 4 HSE areas being established currently.
	<ul style="list-style-type: none"> ▪ Newborn screening for cystic fibrosis commenced and integrated into the National Newborn Bloodspot Screening Programme. 	Q2	Newborn Screening for Cystic Fibrosis as part of the National Newborn Bloodspot Screening Programme is scheduled to commence on 1st July 2011
<i>Renal services</i>	<ul style="list-style-type: none"> ▪ Maintain / increase number of renal transplants performed by National Renal Transplant Programme [target to exceed 175 procedures]. 	Q4	Funding has been allocated to sustain the continued activity of the National Renal Transplant unit and the expansion of the donor programme.
	<ul style="list-style-type: none"> ▪ Home haemodialysis programme implemented nationally [target: 30 patients by year end]. 	Q4	An additional 4 Home Haemodialysis Patients have finished training with the aim of having 30 patients in total on HHD by year end. HHD Tender awarded and implemented January 2011.
	<ul style="list-style-type: none"> ▪ Increased local haemodialysis capacity to cater for an additional 90-135 patients [achieved by continued development of Satellite Renal Dialysis Units and Parent Renal Dialysis Units]. 	Q4	The expansion of haemodialysis nationally is underway with the HSE Tender in progress for 2 Satellite Dialysis Units in Dublin North East and 2 in Dublin South.
	<ul style="list-style-type: none"> ▪ Reduced / eliminated need for patients to travel for dialysis treatment between 12 midnight and 6am. 	Q4	This process is ongoing with the aim to eliminate patient travel for dialysis treatment between 12 midnight and 6am.
<i>Management of NCHD posts within integrated clinical networks</i>	Restructured filling of training and non-training posts as they arise to ensure rotation between a regional centre / major teaching hospital and local hospitals in a network (in line with regional service delivery and reconfiguration requirements of each	Q3	on going

Acute Services and Pre-Hospital Emergency Care

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
<i>Consultant Work practices</i>	<ul style="list-style-type: none"> Implementation of Consultant Contract progressed with further development of clinical directors and clinical led service development through accelerated and expanded work on clinical care programmes and their integration with regional hospital reconfigurations 	Q3	On going
	<ul style="list-style-type: none"> Full benefits of extended working days realised with parallel implementation of Croke Park agreement 	Q2	On going
	<ul style="list-style-type: none"> Full compliance with public/private mix provisions 	Q2	Further enabling work done to facilitate ongoing monitoring and measurement of public private practice at hospital level
	<ul style="list-style-type: none"> Complete contract audit rolled out from initial 2010 sites to all hospitals sites 	Q3	On going
<i>National Integrated Management Information System</i>	Implementation of system completed in designated areas.	Q3	Project still on target for completion by Q1 2013. Slight delay in initial go-lives. First site went live on 21st June 2011 in Sligo General Hospital. It is anticipated that 9 sites will be live by end Q4 (2011).
<i>Value for Money and Policy Review</i>	VFM Review recommendations of economic cost and charges associated with private and semi-private treatment services in public hospitals implemented, following adoption by Government.	Q3	Signed off last year
<i>Funding of selected elective orthopaedic procedures in public hospitals</i>	<ul style="list-style-type: none"> Preparation commenced to fund selected hospitals on a prospective cost per procedure basis for certain orthopaedic procedures 	Q1	Planning for implementation of Prospective Funding for selected orthopaedic procedures (4 DRGs) in 7 hospitals completed.
	<ul style="list-style-type: none"> Funding commenced on amended basis 	Q2	Implementation go live date planned for 1st July 2011

National Cancer Control Programme (NCCP)

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Lung Cancer Services	Rapid Access Clinics for lung cancers in remaining specialist centres in Galway and Limerick established.	Q1	Rapid Access Lung Clinic opened in Limerick and Galway. Lung surgery carried out in 4 regional centres James's, Mater, Cork and Galway,
Urology Cancer Services	Rapid Access Clinics for prostate cancers in remaining specialised centres in Cork, Waterford and Limerick established.	Q2	Rapid access Prostate Clinic opened in Limerick Awaiting appointment of consultant urologist for CUH/Waterford Sept. 2011
	Prostate cancer surgery consolidated in 5 centres - Cork, Beaumont, Mater, Galway and 1 in DML.	Q4	<ul style="list-style-type: none"> • Decision taken to maintain prostate surgery in 6 centres Cork, Galway, Beaumont, Mater, James's and Vincent's • Discussions ongoing re AMNCH transfer to Vincent's and James • Planning in progress to transfer into CUH
Pancreatic Surgery	National centre for pancreatic surgery established in St. Vincent's with satellite unit in Cork University Hospital. Multi-disciplinary teams (MDTs) established in both centres and care pathways monitored.	Q1	<ul style="list-style-type: none"> • St. Vincent's established as National centre • Planning of surgery transfer from Mercy to CUH in process • MDTs established • Care pathways being monitored
Rectal cancer services	Rectal cancer surgery transferred into 8 cancer centres (CUH, Waterford, Galway, Limerick, St. James's, Vincent's).	Q4	
	Transfer rectal surgery into Beaumont and Mater.	Q1	Rectal cancer surgery transferred into Beaumont and Mater
Upper Gastrointestinal (GI) cancers	Upper GI cancers transferred into regional centres.	Q4	GI cancer to transfer from Connolly to Beaumont
Skin cancer services	Dermatology post in North West established in Sligo.	Q1	QCCD processing post Post – Post approved and advertised
Theatre/ICU/ Support	Additional theatre, ICU and support staff provided to enable cancer surgical throughput in designated centres.	Q1	<ul style="list-style-type: none"> • 28 wtes to be provided within existing regional employment ceiling • Primary notifications issued
Medical Oncology	Initiate measures to support optimal management of cancer drugs:		
	Two pharmacists approved to advise on drug utilization costs and pharmacy ICT with the aim of developing mechanisms for the management of the cancer drug budget.	Q4	Discussions ongoing re development of mechanisms to enable oversight of cancer drug expenditure

National Cancer Control Programme (NCCP)			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Radiation Oncology (Phase 1)	New radiation oncology units (Phase 1) in Beaumont and St. James will be operational whilst planning for Phase 2 continues:		
	Units at St James and Beaumont fully functional and planning for Phase 2 commenced.	Ongoing	• Beaumont and James's new units operational
Radiation Oncology (Phase 2)	<ul style="list-style-type: none"> Funding mechanism agreed and approved. 	Q4	Approval of funding mechanism awaited from DOHC
	<ul style="list-style-type: none"> Plan commenced for the cessation of radiation oncology services in St Luke's in 2015. 	Q4	
	<ul style="list-style-type: none"> Enabling works programme commenced. 	Q4	
	<ul style="list-style-type: none"> Plan continued to develop radiation oncology services with the creation of a national network of radiotherapy facilities on 6 sites of the 8 by end of 2014. 	Q4	
	<ul style="list-style-type: none"> Development of tender documentation continued. 	Q4	
	<ul style="list-style-type: none"> National system of clinical governance established on all sites. 	Q4	
Quality Assurance through establishment of formal national quality clinical governance arrangements for common cancers	<ul style="list-style-type: none"> A cohesive national specialist clinical network for the purposes of clinical audit, sharing of good practice and problem solving for common cancers established. 	Q2	• National Symptomatic Breast leads Group established and meeting regularly
	<ul style="list-style-type: none"> Expert groups established to advise on best evidence based practice for common cancers. 	Q2	• Expert Tumor Groups established for Breast, Lung, Prostate, GI and Gynaecological Cancers.
	<ul style="list-style-type: none"> Appropriate parameters defined to devise and monitor quality domains across lung and prostate. 	Q2	
Gynaecology	Planning commenced for consolidation of surgery for gynaecological cancers into cancer centres.	Q2	Discussions commenced

National Cancer Control Programme (NCCP)			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
National Screening Service	National cancer screening work programme:		
	20 candidate Advanced Nurse Practitioners (ANPs) appointed in colonoscopy with a view to 15 graduations in 2013.	Q2	<ul style="list-style-type: none"> Hospitals selected for roll out of colonoscopy services Primary notifications issued 5 candidate Advanced Nurse Practitioners per region to be recruited
Community Oncology Programme	2011 community oncology programme work programme:		
	<ul style="list-style-type: none"> Existing partnership with ICGP built upon 	Q4	<ul style="list-style-type: none"> Community Oncology staff engaging regularly with GPs, attending GP study days etc.
	<ul style="list-style-type: none"> Proportion of electronic GP referrals increased 	Q4	<ul style="list-style-type: none"> Proportion of electronic GP referrals for breast lung and prostate increasing steadily
	<ul style="list-style-type: none"> Community nurse training programme for medical oncology patients delivered, and 	Q4	<ul style="list-style-type: none"> Community oncology nurse training programme launched in Letterkenny Reference manual for nurses distributed
	<ul style="list-style-type: none"> Brief interventions with smoking cessations with primary care teams developed. 	Q4	<ul style="list-style-type: none"> ongoing
Transfer of National Cancer Registry (NCR)	NCR transferred and integrated into the NCCP.	Q3	NCR transfer deferred until 2012 (DoH)

Community (Demand Led) Schemes

Key Result Area	Deliverable 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Modernisation of Community Schemes	<ul style="list-style-type: none"> Centralisation of Medical Cards. 	Q2	Work continued on the centralisation through Q1 and Q2. The final phase went live on 1st July 2011, with the central office now dealing with all Medical Card applications and reviews nationally.
<i>Centralisation of medical cards</i>	<ul style="list-style-type: none"> Efficiencies delivered through centralisation of Medical Cards and Schemes. 	Ongoing	Centralisation of Medical Cards is now complete. This is a key strategic change project in the health service and its success underpins the delivery of cost saving targets this year and for the next number of years.
	<ul style="list-style-type: none"> Medical Card backlog addressed, if arises. 	Q3	The backlogs have been quantified and with centralisation now complete local areas are concentrating their efforts to deal with any remaining backlogs as a priority.
	<ul style="list-style-type: none"> Database of applications established (including cards issued and refused). 	Q3	The central office maintains a current database of all applications made through the central office, along with the status of each application/review. All areas are now centralised.
<i>Licensed drugs / medicines</i>	<ul style="list-style-type: none"> Clinical focus applied to all licensed drugs / medicines reimbursed for appropriateness. 	Q3	Consultation re development of this initiative is ongoing.
	<ul style="list-style-type: none"> Rationalisation of all licensed drugs/medicines reimbursed based on need. 	Q4	Consultation re development of this initiative is ongoing.
	<ul style="list-style-type: none"> Continuing the review of all non drug items reimbursed under the Schemes for their appropriateness. 	Q4	A work programme is in the process of being developed.
<i>Probity</i>	<ul style="list-style-type: none"> Work Programme for Pharmacy and Dental established and commenced. 	Q2	Consultation re development of Dental Services Inspectorate, under Croke Park, is on going. Expressions of Interest have been completed and agreed.

Children and Families

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Delivery of Statutory Services	Children in Care and Aftercare:		
	<ul style="list-style-type: none"> Each child in care has a care plan and an allocated social worker. 	Q2	Processes are in place to ensure that National Service Plan Targets are met. At the end of June 2011 there were 6175 children in care and 93.4% of all children in care had an allocated Social Worker this is in comparison to June 2010 where there were 5899 children in Care with 87.5% with an allocated Social Worker
	<ul style="list-style-type: none"> Dedicated Children in Care Teams established in each area, in accordance with the strategic review of the delivery and management of children and family services implementation. 	Q4	Children and Family Services are in consultation with IMPACT trade union.
	<ul style="list-style-type: none"> Audit of compliance of standardised alternative care planning template commissioned and completed. 	Q4	Implementation of Standard Business Processes is ongoing.
	<ul style="list-style-type: none"> Compliance with <i>Section 45 of Child Care Act 1991</i> and 2010 policy directive from Minister for Children and Youth Affairs, in relation to Aftercare services. 	Q1	Section 45 of the Child Care Act 1991 places a statutory duty on the HSE to form a view on each young person leaving care as to whether there is a 'need for assistance' and, if it forms such a view, to provide services in accordance with that section and subject to resources. The Minister for Children and Youth Affairs, in June 2010, directed the HSE to formulate and put in place appropriate administrative policies, procedures and guidance for implementing this duty. The HSE advises that it currently provides for after care services where these are identified in Statutory Care Plans. The National Service Plan for 2011 includes additional funding and staffing to support the enhancement of services for young people leaving care. The HSE has signed off the National Aftercare Policy 2010 which includes the policy directive from Minister for Children and Youth Affairs. An Implementation Group has been established.

Children and Families

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> National Policy on Aftercare implemented. 	Q4	A National Policy on Aftercare has issued. An implementation group, whose membership comprises key stakeholders, has been established to implement this policy. The group have commenced their work on implementing the Policy.
	Special Care:		
	<ul style="list-style-type: none"> Capacity review of Special Care and High Support Services concluded. 	Q2	The HSE has commissioned external consultants to undertake a review of the capacity for Alternative Care. This research project commenced in March 2011 and was due to report by end June 2011, however, it is currently delayed due to the large amount of data required, which is still being collected. The review will provide essential information to enable the planning of services for children in need of Care. An Interim report on Special Care and High Support Services is being finalised.
	<ul style="list-style-type: none"> Development programme to increase capacity continued to be progressed. 	Q4	The Capital Development Programme is continuing and a design team is currently being procured.
	<ul style="list-style-type: none"> Placements of children in special care facilitated as required. 	Q4	Placement of children in special care as required is ongoing
	Youth Homelessness:		
	<ul style="list-style-type: none"> Care needs of children under 18 years who are homeless met by the HSE services. 	Q4	The HSE will put in place a national out-of-hours crisis intervention social work service, built into the existing HSE out-of-hours service. This will be piloted initially in two areas of the country. This action is provided for in the National Service Plan, 2011. Two pilot projects are being progressed, one in Donegal and the other in Cork. The pilot site in Donegal became operational on 04.04.2011. The pilot site in Cork will commence operations on 2nd August 2011. The outcome of these two pilot projects, along with information from operation of the Emergency Place of Safety Service, will inform a decision on a wider rollout of this service. These pilots will be evaluated in 2011.

Children and Families

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> In accordance with Ryan Implementation Plan, review undertaken of practice in relation to <i>Part 2, Section 5 of the Child Care Act</i> where homeless children can be placed in accommodation and not received into the care of the HSE. 	Q4	This review has been completed
Child Protection and Implementing the Revised Children First Guidelines:			
	<ul style="list-style-type: none"> Compliance with provisions of <i>Child Care Act, 1991</i> and <i>Children First National Guidelines</i>. 	Ongoing	Children First has been rewritten and relaunched. A practice guide is being developed for staff and is due for publication in September 2011
	<ul style="list-style-type: none"> Cross-Sectoral Implementation Plan developed with supplementary HSE implementation plans across all four regions. 	Q3	Children First has been rewritten and relaunched. A practice guide is being developed for staff and is due for publication in September 2011
	<ul style="list-style-type: none"> Dedicated national and regional units to implement and monitor compliance with <i>Children First</i>. 	Q2	The Revised Children First guidance is being finalised for publication by the Department of Children and Youth Affairs. It will be launched by Minister Fitzgerald on July 15th 2011. The HSE will publish a Child Protection and Welfare Practice Handbook in 2011 to support consistent practice and be a companion document to Children First. In September 2011 there will be 4 regional briefings in relation to Children First, The Child protection and Welfare Practice Handbook and the future changes in Children and Families Services. A series of workshops in 32 health areas will take place in September/October 2011 to ensure that all social workers and allied professionals are fully briefed on their roles and responsibilities. The HSE and the DCYA are in current discussions with other partners in relation to wide ranging implementation and compliance.

Children and Families

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> National audit of child protection policies, practices and procedures in Catholic Church Dioceses completed and report submitted to Minister. 	Q2	<p>The audit report on Catholic Church dioceses is in the final stages of completion.</p> <p>The HSE has been conducting a cross-referencing exercise in relation to the information of the allegations provided by dioceses with records held by An Garda Síochána and the HSE. The Garda cross-referencing has been completed and the results have been collated into the draft report. The HSE cross-referencing of allegations has not yet been completed; results in respect of 4 remaining dioceses are expected to be received from the assigned Child Care Managers by the 15th July.</p> <p>In relation to the report, the draft report is being reviewed by a statistician to verify the data contained therein. This is expected to be completed following finalisation of the HSE cross-referencing data.</p>
			<p>The draft report will then be issued to legal counsel for review (expected to take 10 days). On completion of the legal review and any amendments, diocesan extracts from the draft report will issue to each bishop on the 8th August. Bishops will be requested to return their comments within 2 weeks. The responses will be considered by the HSE and amendments of the draft report may be contained.</p> <p>Subject to the current timelines the report is expected to be ready for presentation to the Minister in mid to late September.</p>
	<ul style="list-style-type: none"> National audit of child protection policies, practices and procedures in Religious Orders completed and report submitted to Minister. 	Q4	<p>Subject to the current timelines the report is expected to be ready for presentation to the Minister in mid to late September.</p>
	Adoption:		
	<ul style="list-style-type: none"> Arrangements are in place to ensure the full implementation of the provisions of <i>Adoption Act, 2010</i> as it relates to the HSE. 	Ongoing	<p>A National Specialist for Adoption has been appointed and meetings have been arranged with The Adoption Authority</p>

Children and Families

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
<p>Implementing strategies to support service delivery</p> <p><i>Task Force on Children and Families</i></p>	Implementing the Task Force Report :		
	Further development of the National Child Care Information System:		
	Standardised business processes implemented [through NCCIS] in the remaining 22 LHOs for referral, initial assessment and further assessment processes.	Q2	Roll-out of Referral & Assessment processes has been completed in the first 20 LHO's The roll-out in the remaining 12 LHOs' will be completed by the end of July 2011
	<ul style="list-style-type: none"> Child Protection, Child Welfare and Children in Care, Family Welfare Conferences processes commenced. 	Q3	The implementation of the Standard Business Processes is due to complete July 2011.
	<ul style="list-style-type: none"> Project to go to tendering process once agreed by the peer review group. 	Q2	The Project is at Peer Review RFT stage. The review is currently focused on completing the review of the EOI document to allow the stage 1 of the procurement to progress ahead of the review of ITT documents.
	<ul style="list-style-type: none"> National Child Care Information System (NCCIS) tendering evaluation and selection. 	Q4	The Project is at Peer Review RFT stage. The review is currently focused on completing the review of the EOI document to allow the stage 1 of the procurement to progress ahead of the review of ITT documents.
	Children's Services Committees:		
	<ul style="list-style-type: none"> A further 8 Children Services Committees in place. 	Q4	At present 4 Children's Services Committees (CSC's) are in place and 10 are being established / committed to. In 2007, 4 CSC's were established in Dublin City, South County Dublin, Limerick City and Donegal. The OMCYA and the HSE invited applications from all HSE Local Health Managers in 2008 and six new sites (Kerry, Fingal, Kildare, Longford/Westmeath, Carlow and Louth) are commencing establishment of a CSC within their area. This is being informed by the learning from the initial 4 sites. In February 2011, applications were received by the OMCYA from 4 additional sites (Wicklow, Waterford, South Tipperary and Sligo/Leitrim). There is a target of having 20+ CSCs in place by the end of 2012 with full implementation by 2016.

Children and Families			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	Differential response model:		
	<ul style="list-style-type: none"> Model piloted in Dublin North East and preliminary evaluation completed. 	Q2	The HSE is implementing the Differential Response Model (RDM) in Dublin North. The Project Goal is "To provide a documented new model/approach to practice in child welfare and protection which emphasizes community and family strengths, which is capable of being understood and applied across the country and which addresses national policy". Dublin North is working in partnership with the Daughters of Charity Child and Family Service who have committed to a process of re-configuration of their existing services and staff to meet some of the assessment and intervention requirements under DRM. The pilot is being evaluated by NUI Galway (Child and Family Research Centre).
<i>Implementation of PA Consulting Report - Strategic Review of the Delivery and Management of Children and Family Services</i>	<ul style="list-style-type: none"> Implementation of PA Consulting Report on restructuring of children and family services commenced and including completion of initial testing in selected regions and expansion of rollout beyond these areas. 	Q4	HSE Children and Family Services is in discussion with IMPACT Trade union with regard to restructuring Children and Family Services.
	<ul style="list-style-type: none"> In line with the recommendation of the Ryan Implementation Plan review undertaken of working hours of HSE social work staff and those of funded agencies. Changes to working patterns / flexible working introduced where appropriate. 	Q4	All new staff have flexible working hours as part of their contract and discussions with IMPACT trade union is ongoing regarding other changes
Report of the Commission to Inquire into Child Abuse (Ryan Report), 2009	Implementing the actions of the Commission to Inquire into Child Abuse:		
	<ul style="list-style-type: none"> Research on social work staff retention issues commissioned and completed. 	Q3	This research has been commissioned and completed and is due for publication in Q3.
	<ul style="list-style-type: none"> Maintain full 2010 complement of social work and related staff subject to the moratorium exemption and funding and output from research on social work staff retention issues. 	Q4	The 2010 complement of staff is being maintained. This action is ongoing.
	<ul style="list-style-type: none"> Additional 60 Social Workers appointed. 	Q3	The recruitment process for the recruitment of these 60 social workers is in progress

Children and Families			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> Mandatory year of limited caseload, supervision and support for newly qualified social workers in place. 	Q1	<p>The Induction of Social Workers: A Policy and Guidelines for Children and Families Social Services (HSE, 2010) provides guidance on the management of caseloads by recommending limited caseloads, supervision and support for the newly qualified social worker. The Induction Policy was signed off for implementation in December 2010 and is due to be reviewed and evaluated before the end of Q4, 2011</p> <p>Following the evaluation of the Induction of Social Workers: A Policy and Guidelines for Children and Families Social Services (HSE, 2010) and the feedback on the implementation of the guidance on the management of caseloads it is proposed that a project is set up to establish a caseload management system and appropriate rotations in the field of CFS for the newly qualified social worker.</p> <p>A standardised training programme in supervision has been developed. An implementation plan for this training is in the process of being developed. The HSE policy Staff Supervision Policy (2009) will be reviewed as part of this process.</p>
	<ul style="list-style-type: none"> Rotation of social workers across children in care, child protection and child welfare teams implemented where appropriate. 	Q4	<p>This is currently being examined in the context of the Children and Family Services change programme</p>
	<ul style="list-style-type: none"> Multidisciplinary team for children in care and detention established 	Q2	<p>A multidisciplinary Working Group representing the HSE and the Irish Youth Justice Service was established in 2010 to develop a service proposal for this Deliverable. The Group reported in October 2010.</p> <p>The proposal recommends developing a four-pronged model comprising:</p> <ol style="list-style-type: none"> 1. A national assessment and intervention service for children at risk. 2. On-site therapeutic services for high support and special care units. 3. On-site therapeutic services for the children detention schools. 4. A parallel development of a forensic child and adolescent mental health service (CAMHS) for children and young people with significant mental health needs requiring more specialist input.

Children and Families			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
			<p>Recruitment of staff for the service has commenced with priority being given to the provision of psychological services at the Centres. 3 Senior Psychologists are currently being recruited through internal recruitment processes in the HSE and a competition for the recruitment of a Principal Psychologist is in process with the Public Appointments Service. The remaining posts will be recruited to the service in the coming months.</p> <p>5 posts were prioritised in 2010 and are in process of recruitment. The remaining 24.5 posts will be progressed in 2011 as per national service plan.</p> <p>The Implementation Committee has been established and is proceeding with implementation.</p>
	<ul style="list-style-type: none"> ▪ Enhanced services for young people leaving care in line in line with statutory commitments and aligned with implementation of the <i>Strategic Review of the Delivery and Management of Children and Family Services</i>. 	Q4	<p>Section 45 of the Child Care Act 1991 places a statutory duty on the HSE to form a view on each young person leaving care as to whether there is a 'need for assistance' and, if it forms such a view, to provide services in accordance with that section and subject to resources. The Minister for Children and Youth Affairs, in June 2010, directed the HSE to formulate and put in place appropriate administrative policies, procedures and guidance for implementing this duty.</p> <p>The HSE advises that it currently provides for after care services where these are identified in Statutory Care Plans. The National Service Plan for 2011 includes additional funding and staffing to support the enhancement of services for young people leaving care. The HSE has signed off the National Aftercare Policy 2010 which includes the policy directive from Minister for Children and Youth Affairs. An Implementation Group has been established.</p>

Children and Families

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> Provision of additional counselling services to victims of child abuse. 	Q1	<p>This action has been addressed in the HSE's National Service Plan for 2011 and funding of €2m has been provided for counselling services.</p> <p>The purchase of additional services has commenced. To date additional services have been purchased from 3 agencies and the remainder of the funding will be distributed nationally by the National Counselling Service.</p> <p>The Directors of the National Counselling Service (NCS) have prioritised the waiting list and have agreed an allocate process to ensure equitable access with priority being given to individuals with a history on institutional abuse. The NCS will contract counselling sessions to the value of €1.8 million through the two agency providers. This will allow for 933 individuals to access counselling in 2011</p>
	<ul style="list-style-type: none"> Analysis of addiction services for children nationwide based on best practice undertaken. 	Q4	Liaison with the regional drugs task force is underway with a view to establishing baseline services
	<ul style="list-style-type: none"> Scoping exercise on data collection regarding children from ethnic minority backgrounds to ensure that their cultural identity is respected and their needs met. 	Q2	In consultation with the HSE social inclusion unit a pilot project will commence in quarter 4 2011. Training of staff involved will be delivered in Q3
	<ul style="list-style-type: none"> Audit of resources (financial and staff) carried out across HSE and funded agencies in delivering the children and families programme. 	Q2	<p>An audit of all resources, both financial and staffing, will be conducted across non-statutory funded services in 2011. A Draft Questionnaire has been developed and is being consulted on. A Working Group will be convened to further this work in Q3.</p> <p>Design work has been completed in Q2. The Data will be gathered in Q3 and analysed in Q4.</p> <p>A Review of Capacity of Alternative Care Services commenced in April and includes an Audit of Children in Care.</p>

Children and Families

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> Practice placements supports for social work students enhanced. 	Q2	HSE CFS have commenced a project of Social Work Practice Placements. The deliverables of this project include: designing a framework to support social work practice placements in the HSE as part of CFS structure; implement social work practice placement standards; develop an implementation plan for the recommendations made re: social work practice placements in the UCD study on social work retention in the health services and establish a system for the management of annual supply of practice placements.
	<ul style="list-style-type: none"> Project plan for archiving records of all children in care completed. 	Q4	A project plan for archiving records of all children in care is to be completed by the HSE IN Q4, 2011. This action is provided for in the National Service Plan, 2011.
	<ul style="list-style-type: none"> Recommendations of the <i>2007 Report on Treatment Services for Persons who Have Exhibited Sexually Harmful Behaviour</i> implemented. 	Q2	This action is Included in the HSE National Service Plan, 2011. The necessary funding has been provided to progress implementation. Provision has been made for the allocation of 8 posts, 4 for adults and 4 for children. The recruitment of the 8 staff will commence Q3. The Steering Committee will convene in September 2011.
	<ul style="list-style-type: none"> Exit interviews conducted with children leaving or changing care placements. 	Q4	This action is provided for in the HSE National Service Plan, 2011 and is now due for completion in Q4, 2011. HSE Dublin North East in conjunction with EPIC, formerly the Irish Association of Young People in Care, have established an "End of Care Interviews" working group. The working group have devised a leaving care exit interview procedure for young people turning 18 years of age who are due to leave statutory care and have a minimum of 3 months care experience. This pilot project will be used to inform the national roll out of End of Care Interviews with young people when they are leaving care. The pilot will be carried out from June 2011 to July 2011. The outcome of the pilot will produce two reports :1. A report on the process of the exit interviews 2. A report on the outcome of the interviews and the learning to be gained. On-going

Children and Families

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> Planned implementation of key findings and recommendations of independent reviews / serious case reviews and other relevant reports / inquiries. This includes HIQA reports and HSE's national audit on foster care. 	Q3	The National Alternative Care Coordination Group is currently implementing key findings and recommendation of reviews and reports.
Out of Hours:			
	<ul style="list-style-type: none"> Pilot sites in South and West fully operational and evaluated. Expansion of services progressed in line with findings of evaluation. 	Q2	Discussions are underway with the Local Health Offices in this regard. Two pilot places were identified and have commenced in Q2 2011. The pilot site in Donegal became operational on 04.04.2011. The pilot site in Cork will commence operations in August 2011.
	<ul style="list-style-type: none"> 'Working with Children and Young People: A Quick Guide for Frontline Staff' and young peoples version of 'Your Service, Your Say' implemented. 	Q4	For implementation in Q4
Crisis Pregnancy Programme	Progressing the work of the Crisis Pregnancy Programme:		
<i>Addressing the issue of crisis pregnancy through education, advice, counselling, medical and contraception services</i>	Implementation of the recommendations in the national strategy continued, with further projects identified and implemented.	Ongoing	

Mental Health			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Enhancing Service Provision through Structural Changes	Completion of Executive Clinical Director (ECD) teams by:		
	<ul style="list-style-type: none"> Staff reconfigured to complete multidisciplinary ECD Management Teams. 	Q4	<ul style="list-style-type: none"> Negotiations with nursing staff associations in train. Meeting scheduled for end June to finalise areas of agreement and referral of remaining issues to Labour Relations Commission (LRC.) Clarification sought on review process following two-year appointment of Executive Clinical Directors (ECDs). HR to clarify Draft role description for Business Manager on Mental Health Services Management Team agreed by National Services Management Group (NSMG) Draft role description for Allied Health Professional on Mental Health Services Management Team in preparation Draft role description for Service User on Mental Health Services Management Team to be developed with National Services User Group (NSUE)
	<ul style="list-style-type: none"> Integrated clinical care pathways developed. 	Q4	<p>The National Clinical Director for Mental Health has identified the following National Programmes to be developed in 2011:-</p> <ul style="list-style-type: none"> Early Intervention and an enhanced range of evidence-based clinical interventions for those presenting with psychotic conditions. Early detection and intervention in Eating Disorders (in collaboration with Primary Care) Ensure engagement, consistency of response and adequate follow-up of those presenting with suicidal behaviours (in collaboration with primary care and community agencies) Maintain physical health and reduce mortality secondary to increased rates of physical illness in those with serious mental illness (in collaboration with primary care) Improve the rates of detection and treatment of delirium among susceptible persons receiving hospital care. Develop a Recovery office and programme within each mental health admission unit. <p>Programme's outline are in process of being completed and will be ready for presentation soon.</p>

Mental Health			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Changes in procedures and practices	ICT:		
	<ul style="list-style-type: none"> External review conducted on the performance and functioning of WISDOM. 	Q2	Completed Q1
	<ul style="list-style-type: none"> National ICT business requirements established. 	Q4	End of Proof of Concept process in train and report in final draft. On completion the process of identifying the draft national business requirements for an ICT Mental Health Information system (MHIS) for Mental Health will commence. End of project report for WISDOM completed. Same for sign off on July 1st. A second proof of concept using the St John of God MHIS will take place in the Super Catchment Area (SCA) Dublin South Wicklow. Project team & ICT Working group currently being established. The proof of concept will run for one year. In parallel to this process a national group is now being established to address the national business requirements for MHIS.
	Service user participation:		
	<ul style="list-style-type: none"> Increased participation in planning and delivering better mental health services with service users through existing partnership. 	Ongoing	Review of NSUE in train and expected to be completed by end Q3. <ul style="list-style-type: none"> Evaluation of Expert by Experience Project accepted and agreed that Project continue for another three years in partnership with Dublin City University (DCU). Co-operative Learning and Leadership Course – continues with a further cohort to graduate in September.
Care planning:			
Collaborative on care planning with Mental Health Commission (MHC) in 8 HSE pilot sites completed and evaluated.	Q3	With the formal collaborative project period now over, the evaluation project has undertaken its second and concluding phase including: <ul style="list-style-type: none"> Second phase e-survey Second phase site visits Summative interviews with national leaders Independent service user interviews Analysis of project-generated quantitative data Preparation of draft final report underway and will be completed by 5th July.	

Mental Health			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	Mental Health in Primary Care:		
	A third cohort of PCTs will participate in the Team Based Approaches to Mental Health in Primary Care Accredited Programme.	Q3	Third cohort of PCT representatives has completed the team based approaches to mental health in Primary Care. A review of the programme will be held on July 11th. Following on from this, amendments will be made to the programme and it will also inform further training requirements for Mental health in Primary Care.
Service reconfiguration	Reductions in inpatient beds:		
<i>Reconfiguring services from a model of care predicated on inpatient provision to a community based recovery model</i>	<ul style="list-style-type: none"> Further reduction of inpatient beds to 1,051 acute inpatient beds for adults apportioned by population served (including St Michael's in South Tipperary, St Senan's, Wexford and St Ita's North Dublin). 	Q4	<p>South 26 Acute beds in St Senan's have closed. Reconfiguration of mental health services continues in St Tipperary and acute beds capacity will transfer to Kilkenny at end of Q3.</p> <p>West 16 beds closed in St. Brigids Hospital with patients transferred to a new Community Nursing Unit (CNU.) Sligo/Leitrim acute inpatient unit has reduced its bed numbers by two. All other areas are advancing plans for acute bed reduction by Qr 4</p> <p>DNE Plans to centralise adult acute in-patient services in a refurbished 25-bed unit in Cavan General Hospital are ongoing. This will facilitate the closure of Ward 15 in St. Davnet's Hospital, Monaghan.</p> <p>DML DML has already achieved considerable reduction on reductions in Acute bed capacity</p>
	<ul style="list-style-type: none"> Inpatient capacity reconfigured from South Tipperary to Mid-West. 	Q2	Preliminary indicative wte resource has been suggested subject to final agreement with North Tipperary colleagues.
	Community Mental Health Teams (CMHTs):		
	<ul style="list-style-type: none"> CMHTs resourced from reconfiguration of inpatient capacity. 	Ongoing	<p>South As part of the reconfiguration of Mental Health Services in Carlow Kilkenny, South Tipperary (CKST) existing teams will be enhanced when inpatient beds are reduced this will be in Q3.</p> <p>West 7.5 wte were redeployed to advance CMHTs in Galway following the closure of long stay ward in St. Brigids Ballinasloe. No net gain to the service as a result of retirements and moratorium.</p> <p>DML Where feasible, CMHTs will be strengthened by reconfiguration of Resources from In Patient capacity</p>

Mental Health			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> CMHT capacity strengthened (through effective multidisciplinary team working, up-skilling etc). 	Ongoing	Learning programmes to support Community Mental Health Teams (CMHTS) in development.
	Discontinue direct management of medium and low support provision:		
	Discussions with external providers to manage low and medium support infrastructure concluded and direct management and staffing of low and medium support accommodation discontinued.	Q3	It is understood that the interdepartmental housing strategy for people with mental health and disabilities will be available shortly. Guidance for mental health services on approach to housing issue for service users currently in development with a view to roll out in Q4. Discussion with external partners will follow.
<i>Reinvestment of exchequer funding</i>	Funding returned from the Exchequer (from closure and sale of old psychiatric hospitals and other assets) reinvested in mental health infrastructure.	Ongoing	
Suicide Prevention and Stigma Reduction	Implement measures to reduce suicide rates:		
	<ul style="list-style-type: none"> All action areas in Reach Out progressed, maximising efficiencies and utilising available resources in both statutory and voluntary sectors. 	Q4	The National Office for Suicide Prevention (NOSP) has allocated additional €1 million allocated in 2011 to voluntary and statutory services. The funding is in the process of being allocated to 25 distinct programmes focused on skills based training, standardisation of helpline services, ameliorating the primary care response to suicidal behaviour and increasing the capacity of HSE services to respond to clients who self harm. In addition the funding is focused on groups who may be at increased risk of suicidal behaviour because of the economic downturn.
	<ul style="list-style-type: none"> National See Change Campaign supported. 	Q4	The NOSP continues to support the See Change campaign. Work in 2011 is focused on targeting specific occupations, workplace and sporting organisations.
	<ul style="list-style-type: none"> Number and range of training and awareness programmes developed. 	Q4	<ul style="list-style-type: none"> NOSP continues to implement ASIST & safe TALK inline with agreed targets for 2011. The NOSP has trained an additional 10 safe TALK trainers in Q2 All Island Evaluation of ASIST is complete and will be published online in Q3. The NOSP has begun the national roll out of the STOP suicide prevention training programme with the Irish Prison Service. Four programmes were delivered in Q1 and Q2. The NOSP has completed the development of a standardised half day awareness training programme for the whole population.

Mental Health

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
			<p>The NOSP in collaboration with HSE health promotion, the Office of the Minister for Children and Youth Affairs (OMCYA) and the Data Encryption Standard (DES) have completed a national draft framework for suicide prevention and mental health promotion in the post primary school setting. Final publication of the framework is awaiting approval from the HSE, DES and DOHC.</p> <ul style="list-style-type: none"> • Dialectical Behavioral Therapy (DBT) has been shown to be effective in reducing self harm behaviours among people with Borderline Personality Disorder (BPD). The NOSP is providing funding to six mental health teams to complete Dialectical Behavioral Therapy (DBT) training. Three teams have completed the training in Q2.
	<ul style="list-style-type: none"> ▪ Response to deliberate self harm presentations improved and standardised. 	Q4	<p>The NOSP is working in partnership with the HSE South hospital emergency departments and the NSRF to develop a standardised whole hospital approach to the treatment of self-harm. This model when completed may be applied nationally. The NOSP is working on the clinical care programme focused on responding to self harm.</p>
	<ul style="list-style-type: none"> ▪ Primary care capacity developed to respond to suicidal behaviour and consider new models of response considered. 	Q4	<p>Building on existing programmes of work, the NOSP is working in partnership with the Irish College of General Practitioners (ICGP) to implement an advanced suicide prevention skills programme for GP's and other primary care staff. This includes a needs assessment of GP's to ascertain the content and appropriate method of delivery of the course.</p> <p>The NOSP is in the process of allocating funding to four additional SCAN (Suicide Crisis Assessment Nurse) projects in each HSE area. An integrated evaluation of the two existing SCAN projects is ongoing in 2011</p>
	<ul style="list-style-type: none"> ▪ Helpline supports for those in emotional distress coordinated and widely publicised. 	Q4	<p>The NOSP has funded the Samaritans to establish and provide a converged Caller Contact System (CONNECT) to improve the experience of each call connecting with Samaritans and other partner Help lines while increasing the support options available to callers of suicide prevention Help lines. This project will commence in Q3.</p>

Mental Health			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Continuous Service Development through Statutory and Regulatory Measures	Implement measures to increase residential capacity:		
	<ul style="list-style-type: none"> Child and adolescent inpatient unit open to full capacity in Bessboro, Cork and Merlin Park, Galway. 	Q1	<p>Bessboro Cork When additional posts are in place including the second consultant the unit will move to full capacity. The recruitment of additional posts is well underway with expected start dates late July and early August. The recruitment of a temporary consultant has commenced pending the appointment of the second permanent consultant post.</p> <p>Merlin Park Galway The regional CAMHS inpatient unit at Merlin Par has increased its capacity to 12 beds. Additional staff recruitment is currently underway with full capacity (20 beds) expected by quarter 3</p>
Enhancing the Provision of Child and Adolescent Mental Health services	<ul style="list-style-type: none"> DNE: St Vincent's Fairview capital project completed. 	Q3	The tendering process has been completed. The project is awaiting final approval.
	<ul style="list-style-type: none"> DML: Development of 11 bed interim Child and Adolescent Inpatient Unit for St. Loman's, Palmerstown. 	Ongoing	Process underway to recruit necessary staff and re-furbish identified accommodation
	(See Capital Appendix)		
National Forensic Services	Compliance with the Criminal Law (Insanity) Act through:		
	<ul style="list-style-type: none"> DML: Provision of 10-12 bed high support hostel for people granted conditional discharge by the courts under Criminal Law (Insanity) Act. 	Q3	Discussions are on-going with relevant service providers to deliver additional accommodation
	<ul style="list-style-type: none"> DML: Provision of barricade / siege support to the Gardai in line with Barr recommendations. 	Q3	In place since January 2011.
	Progress the National Forensic Hospital (CMH), the four Intensive Care Rehabilitation Units (ICRUs), Child and Adolescent and Mental Health and Intellectual Disability Forensic Services through:		
	<ul style="list-style-type: none"> Agreement with DoF and DoHC to pursue a funding mechanism to build new forensic capacity. 	Q2	In Progress
	<ul style="list-style-type: none"> Sites for Intensive Care Rehabilitation Units identified. 	Q2	Suitable sites have not been identified.

Disability

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
VFM and Policy Review provision	Contribute to the completion of the DoHC VFM and Policy Review:		
	<ul style="list-style-type: none"> VFM review concluded and areas of efficiency highlighted. 	Q3	Initial data analysis commenced while final elements of data are being collected.
	Service provision for residential, day, respite, personal assistant and home support services:		
	<ul style="list-style-type: none"> VFM efficiency savings targeted to meet emergency needs in Residential, Day, Respite (including Personal Assistant and Home Support services). 	Q4	VFM efficiency savings yet to be finally identified.
	<ul style="list-style-type: none"> Undertake a study in conjunction with the NTPF in two pilot areas, Galway and Limerick, to assess the relative cost effectiveness of different approaches to the provision of respite care by both statutory and voluntary providers. 	Q4	Proposal to work with the National Treatment Purchase Fund not proceeding. Initial talks held with the Department of Health to agree a project design.
	Resource Allocation Model:		
	<ul style="list-style-type: none"> Implementation of Resource Allocation Model based on development of SLAs and Assessment of Need process commenced. 	Ongoing	Engagement with National Disability Authority on potential models commenced.
	<ul style="list-style-type: none"> Stakeholder engagement undertaken. 	Q4	The National Consultative Forum has met twice and has agreed membership and terms of reference for the Regional Fora.
	Interagency collaboration:		
	<ul style="list-style-type: none"> Implementation plan developed for interagency collaboration including new models of service provision in individual sectors, including respite care. 	Q1	A new service provision model for neurological agencies will be progressed as part of the National Neuro-Rehabilitation Strategy.
	<ul style="list-style-type: none"> Framework implemented and monitored. 	Q4	Discussion on framework not yet commenced.
<ul style="list-style-type: none"> Additional opportunities for collaboration identified. 	Q4	Additional opportunities for collaboration will be identified following the development of the framework.	

Disability			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Compliance with Legislation and Quality Standards	Disability Act 2005:		
	<ul style="list-style-type: none"> Part 2 of the <i>Disability Act 2005</i> implemented in accordance with High Court ruling. 	Q2	Legal advice sought on precise interpretation of High Court ruling. Expected imminently.
	<ul style="list-style-type: none"> Assessments and service statements provided within statutory timelines and in line with available resources. 	Ongoing	Regional action plans to achieve this end are monitored on a weekly basis. New IT module developed to monitor Service Statements.
	National Quality Standards (NQS):		
	Action plans developed to:		
	<ul style="list-style-type: none"> Progress implementation of critical elements of the NQS: Residential Standards for People with Disabilities on an administrative basis. 	Q2	Audit completed of quality standards being applied in residential services. Components of action plan under discussion with AND and Regional Specialists/Leads
	<ul style="list-style-type: none"> Address forthcoming statutory frameworks relating to residential and residential respite services for children with disabilities. 	Q4	Initial meeting with DoH and HIQA completed. Updating underway of 2009 Sch 3 dataset of people (incl children) in residential services.
Reconfiguration of Services	Children's disability therapy services:		
	<ul style="list-style-type: none"> Reconfiguration of existing therapy resources to geographic based teams progressed and monitored (0-18 Yrs). 	Q3	Regional Co-ordinating Groups, including local leads have been convened and have met. Service mapping and convening of local co-ordinating groups underway.
	Adult Residential Services:		
	<ul style="list-style-type: none"> Engagement with service providers and cross-sectoral agencies on reconfiguration objectives. 	Q2	Initial discussion held in National Consultative Forum. Report on Congregated Settings has been published.
	<ul style="list-style-type: none"> Development of outline implementation plan in line with VFM and Policy Review. 	Q4	National Disability Unit lead appointed. Report presented to the HSE Interim Board and published.
	Adult Day Services:		
	<ul style="list-style-type: none"> Engagement with service providers and cross-sectoral agencies on reconfiguration objectives. 	Q2	Initial discussion held in National Consultative Forum. Report on Day Services to be published imminently.

Disability			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> Development of outline implementation plan in line with VFM and Policy Review. 	Q4	National Disability Unit lead appointed. Report presented to the HSE Interim Board.
	Implementing the national Neuro-Rehabilitation Strategy:		
Neuro-Rehabilitation Strategy	<ul style="list-style-type: none"> Implementation plan developed, implementation structure established and national clinical lead appointed. 	Q1	Clinical lead for rehabilitation medicine has been appointed. The Working Group has had a final meeting and has approved the Strategy document.
Development of Information and Data System	Scoping exercise completed and research commenced for an integrated ICT system for disability services across the country.	Q4	Initial meeting with Department of Health yet to be held.

Older Persons

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Community Services:	Provision of equitable community based services and home supports by:		
<i>Maintain a strong focus on the provision of equitable community based services and home supports</i>	Development of a model of care for maximising community provision of services for vulnerable older people to include:		ongoing
	<ul style="list-style-type: none"> Procurement process for Home Care Packages (HCPs) to be finalised, and implemented in all LHO areas. 	Q3	Large volume of applications received. Evaluations completed Q2. Validation process now taking place. The tenderers will be assessed on their ability to deliver a high quality service, through mandatory standards for the recruitment process, Garda vetting for staff, staff qualifications and training, staff supervision, monitoring and reviewing of services, with appropriate feedback mechanisms for families and clients. Site visits to interview applicants to follow
	<ul style="list-style-type: none"> National Quality Guidelines for Home Care Services developed and agreed with DoHC. 	Q4	Draft is still under consideration by the Task Group. The final draft will be signed off by the group and submitted to AND and DoHC for input.
	<ul style="list-style-type: none"> Home Help guidelines implemented 	Q2	A HSE Working Group has been established to undertake a range of work in relation to Home Help services and Home Care Packages to standardise the services provided across the country and drive improvements in the services in the interests of clients.
	<ul style="list-style-type: none"> HCP review implemented. 	Q3	
	<ul style="list-style-type: none"> National Single Assessment Tool (SAT) to determine access to a range of services for older persons, selected and rolled out nationally. 	Q4	Option Appraisal of available tools completed - Initial 'tool' selected - to be 'piloted' in 2 LHO areas in Q4 2011
	<ul style="list-style-type: none"> Geriatrician Led Community Outreach Teams targeted at vulnerable older people developed. 	Q4	Development dependent on compliance with recruitment moratorium
	<ul style="list-style-type: none"> Work with the DoHC on legislative proposals for Community Care. 	Ongoing	Initial meetings held with DoHC - to establish terms of reference etc - ongoing

Older Persons			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Residential Care:	Provision of high quality residential care for older persons who cannot be maintained at home by:		
<i>Provide high quality public residential care for older persons who cannot be maintained at home</i>	<ul style="list-style-type: none"> Continued implementation of the Nursing Home Support Scheme (NHSS). 	Ongoing	Ongoing. Nursing Home Support Scheme (NHSS). Applications are being processed within allocated resources
	<ul style="list-style-type: none"> Strive to optimise the provision of short and long term residential care in both public and private settings by the development of local plans for residential care, to meet local need. 	Ongoing	Ongoing. Discussions on-going with DoHC re future public provision of long term residential care - capital investment required to meet HIQA standards etc
	<ul style="list-style-type: none"> Maximise efficiencies in publicly provided residential care to ensure best value for money by reviewing staffing types and levels. 	Ongoing	A Skill Mix Project in conjunction with the Nursing and Midwifery Planning Delivery Unit (NMPDU) will commence in Q4 to address skill mix and efficiencies across the long term public units.
Falls prevention guidelines	Implementation commenced on the recommendations of the <i>Falls Prevention Strategy</i> in all appropriate older people services	Q4	Target Q4
Elder Abuse	Increase awareness of Elder Abuse:		
	<ul style="list-style-type: none"> Elder Abuse Awareness campaigns/Elder Abuse Awareness Day undertaken 	Q2	Completed , May 2011, as part of World Elder Abuse Awareness day
	<ul style="list-style-type: none"> Funding provided for the National Centre for the Protection of Older People (UCD) 	Q2	Funding released Q2
	<ul style="list-style-type: none"> Senior Case Workers for Elder Abuse employed in each Local Health Office 	Q2	All posts filled.
	<ul style="list-style-type: none"> Monthly and annual statistical returns published on reports of Elder Abuse received by the HSE. 	Q4	Ongoing.
	<ul style="list-style-type: none"> Elder Abuse awareness training provided for HSE and other care staff/organisations, Gardai, financial institutions and other appropriate organisations. 	Q4	Ongoing.

Palliative Care			
Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
Report of the National Advisory Committee on Palliative Care, 2001	Report of the National Advisory Committee:		
	Identified priorities progressed on a cost neutral basis.	Q4	Working group of Palliative Care Programme have met on a monthly basis to assist in process of developing mechanisms to progress priorities on a cost neutral basis. Revised solutions document due to be re-submitted to CSP in July '11.
<i>Access to specialist services</i>	<ul style="list-style-type: none"> Agreed referral criteria and assessment of need for specialist services developed. 	Q4	Referral criteria and method of assessment of need defined; national consultation process has been conducted and currently reviewing consultation responses with view to incorporating feedback into final documents. On target for completion by Q4.
	<ul style="list-style-type: none"> Service Level Agreements developed to reflect further efficiencies. 	Q4	This is ongoing to increase Service Level agreement (SLA) with the Voluntary Sector
<i>Treatment in location of choice where this can be achieved safely, effectively and efficiently</i>	<ul style="list-style-type: none"> Care pathways, governance arrangements and clinical guidelines developed to support treatment in location of choice. 	Q4	Palliative Care working group has met monthly as process of development of these work streams. Rapid discharge pathway; pain guidelines & communication guidelines and role delineation framework for palliative care all in process of development and on target for completion Q4.
Care at End of Life	Care at End of Life:		
	<ul style="list-style-type: none"> Care at end of life within both acute and long stay hospitals progressed through the implementation of projects through the <i>Dignity and Design</i> process. 	Q4	This is ongoing with the Irish Hospice Foundation working through the National standards and ongoing review with the 4 Regional Leads
Children's Palliative Care	Continued implementation of national policy on Children's Palliative Care:		
	<ul style="list-style-type: none"> Consultant and key nursing positions in post. 	Q3	Consultant in post and recruitment is progressing within existing resources
	<ul style="list-style-type: none"> Review of respite services for children with life limiting illnesses undertaken. 	Q3	Paediatric committee in place and 8 outreach CNS being recruited
Minimum Data Set	Minimum Data Set progressed through:		
	<ul style="list-style-type: none"> First phase of the pilot of MDS completed. 	Q2	Monthly data being collated
	<ul style="list-style-type: none"> Day care services and acute hospitals data piloted and collected. 	Q4	Data collected monthly
	<ul style="list-style-type: none"> Review process concluded for intermediate/palliative care support beds. 	Q4	Working Group of the Palliative Care programme examined this issue and concluded that regional needs assessment be conducted- agreement reached with ISD to submit this action to corporate plan for completion next year.

Social Inclusion

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
National Drugs Strategy and National Substance Misuse Strategy	<p>Tackle the health impacts of addiction and / or substance misuse through:</p> <ul style="list-style-type: none"> Recruitment of Clinical Directors of Addiction Services completed in each of the 4 regions. 	Q3	HSE South - Recruitment process is being progressed. Job Specification etc developed. HSE West - the RDOs office has still not released details of WTEs as per agreement which will allow the start of the recruitment process. This issue has been highlighted nationally.
	<ul style="list-style-type: none"> Implementation of Phase 1 of Interagency rehabilitation programmes in each of the 4 Regions. 	Q3	<p>The National Drug Rehabilitation Implementation Committee (NDRIC) has adopted a phased approach to selecting pilot sites. To this end three pilot sites (Blanchardstown, North Inner City Dublin and Dundalk were selected for the first stage) with a further seven sites selected for the 2nd stage (Dublin North East Local Drugs Task force.(LDTF), Ballyfermot LDTF, Canal Communities LDTF, Southern Regional & Cork LDTF, Mid-West Regional LDTF (Limerick), Dun Laoghaire Rathdown LDTF, South East Regional DTF (Kilkenny). An evaluation framework has been drafted for the National Drug Rehabilitation Implementation Committee and is currently being discussed with the ten pilot sites.</p> <p>To date, four of the pilot sites have been visited and the other six are due to be visited before the end of July. The evaluation team will seek as much as possible to get a random selection of clients, between 25 and 50 in each pilot site giving a total pilot population of between 200 and 400 individuals. The evaluation will not compare services or sites but will rather categorise service users on their position on the “wheel of change”.</p> <p>Key outcomes will include what is working well in relation to provision of rehabilitation services and what are the barriers. Perspectives from the clients will be very important and will be obtained through a series of focus groups and / or individual interviews. Perspectives of care deliverers will also be obtained. It is aimed to gather data from participating clients at two points in time in an attempt to map progression. Concepts such as care planning, case management, and inter agency referral patterns and work practices will be examined. The timescale for the evaluation is to complete a report by the end of 2012.</p>

Social Inclusion

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	Learning from reports implemented including Hepatitis C and Intravenous Drug Users and methadone protocol.	Q3	The timescale for the evaluation is to complete a report by the end of 2012.
	Pharmacy located harm reduction/needle exchange services implemented throughout the country in each of the 4 regions.	Q3	<p>Following on from the recommendations of the joint National Advisory Committee on Drugs / National Drugs Strategy Team report on needle exchange, the HSE has prioritised the provision of needle exchange services in areas outside Dublin where no services currently exist. The HSE and the Irish Pharmacy Union (IPU) have agreed a plan, supported by the Elton John AIDS Foundation, to roll out needle exchange services through Community Pharmacies in 65 new locations. The recruitment of the National Liaison Pharmacist post is completed and the person is now in post based in the Mid-West (Limerick).</p> <p>The Irish Centre for Continuing Pharmaceutical Education (ICCPE) training module for participating Pharmacists was completed at the end of 2010. It was successfully attended by pharmacists in six regional locations outside of Dublin across the country. An agreement has been reached with the Irish Pharmaceutical Union (IPU) regarding the fee per item. The next meeting of the HSE/ IPU Needle Exchange Steering Group is scheduled for 13th of July and it is envisaged that after this meeting the project will become operational and the initial pharmacies will be recruited.</p>
	<ul style="list-style-type: none"> Alcohol Public Education/Awareness Campaign developed and launched. 	Q2	Scope for awareness campaign completed. DoHC is to sign off on the National Substance Misuse Strategy prior to commencement of campaign
	<ul style="list-style-type: none"> Screening and brief interventions available in ED's and Primary Care Services (Phase 1). 	Q4	A Guiding Framework for Education and Training in Screening and Brief Intervention for Problem Alcohol Use in the Emergency Department & Acute Care Settings for Nurses and Midwives near completion. Work has commenced on the development of a training manual for trainers on Brief Intervention

Social Inclusion

Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
	<ul style="list-style-type: none"> National Addiction Training Framework in place for staff (Phase 1). 	Q3	Continued support is ongoing for the development of accredited addiction training. Dip in Drug and Alcohol studies to be rolled out in Sept 2011. The National Addiction Training Programme has completed outline planning for 2011 and will focus and deliver on the following areas: Develop manualised approach to NDRIC training needs (tier 1) to be piloted this autumn & Deliver Cognitive Behavioural Coping Skills training in conjunction with Leeds Uni & Sponsor and support the 2011 Irish Needle Exchange Forum National Drug Conference & Roll out of group work training & Roll out BI training. Education Officers in the Mid-West have developed their own training calendar with 9 training sessions covering a range of addiction related topics being offered across the region in May and June
National Homelessness Strategy	Implement actions arising from National Homelessness Strategy:		
	Protocols signposting referral pathways developed between specialist addiction/homeless/traveller services to Mental Health and Primary Care Services.	Q4	A referral pathways paper from Primary Care to Addiction and Mental Health Service's has been developed by a HSE expert group following a meeting with the Dept. of Health re: National Substance Misuse Strategy 29th March. It examined the preferred care pathways between primary services, and mental health and addiction/alcohol services. This paper has been forwarded to the lead senior management in each area (Addiction, Mental Health and Primary Care). Once agreed by the senior management it will be forwarded to the chair of the National Substance Misuse Strategy to help inform work in drafting the National Substance Misuse Strategy.
All-Ireland Traveller Health Study	Address the outputs from the All-Ireland Traveller Health Study, 2010:		
	Screening programmes targeting vulnerable groups devised and implemented.	Q4	Guidelines being developed as part of efforts of Health Screening Advisory Group led by a senior clinical from the HSE Health Protection Surveillance Centre
National Intercultural Health Strategy	Support staff in helping ethnic minorities access services:		
	<ul style="list-style-type: none"> Emergency Multilingual Aid toolkits for staff and Intercultural Health Guide implemented (Phase 3). 	Q3	Currently ongoing work
	<ul style="list-style-type: none"> Translation / Interpreting toolkit for staff in line with Patient Charter implemented (Phase1). 	Q2	Translation resource completed, currently in design/ print phase
	<ul style="list-style-type: none"> Use of Ethnic identifier field in health core data sets expanded. 	Q2	Discussion with counterparts in DoH; Briefing paper updated and circulated to relevant stakeholders; also progressed via HSE National Traveller Forum

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Key Result Area	Deliverable Output 2011	Target Completion	Progress Achieved Q1 - Q2 2011
LGBT Framework	Support Lesbian, Gay, Bisexual and Transgender (LGBT) communities:		
	Good practice guiding principles developed to support LGBT communities in equitable access and use of health services.	Q4	Ongoing work, driven via Governance Committee; documentation developed for ISD Management re implications of Civil Partnership Bill - with associated recommendations around facilitating same