

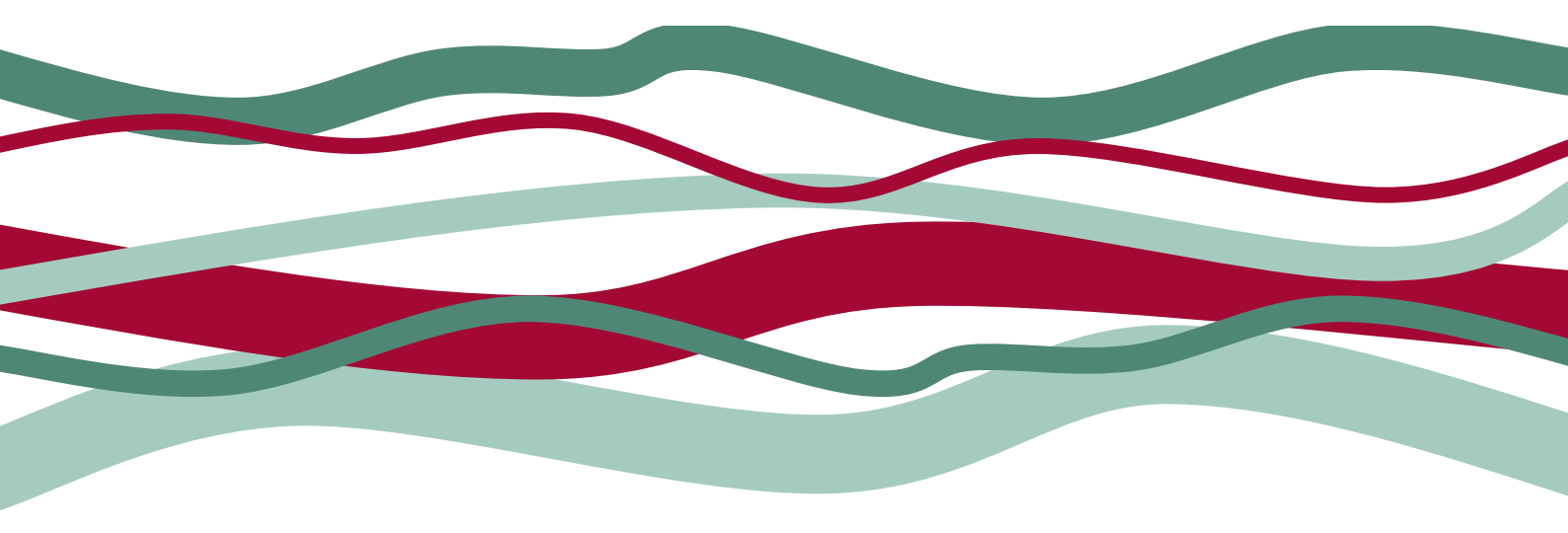


Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

KEY PERFORMANCE INDICATOR GUIDELINES 2012

Based on National Service Plan 2012

Version: 3rd December 2012



VERSION HISTORY

This is the second year the HSE has published guidelines for each Key Performance Indicator (KPI) in the National Service Plan, the information in this document outlines the most up to date information relating to KPIs in the National Service 2012. While every effort has been made to produce a comprehensive set of metadata for each KPI updates will be part of the process as systems are put in place to collect data for a range of services across the organisation. With this in mind, this document will be updated from time to time as appropriate.

The National Service Planning process for 2013 has commenced and through this process there is an opportunity to revisit KPIs and further enhance definitions and other data inputs.

The table below outlines the changes that have been made to Key Performance Indicators (PIs) and the associated version of this data dictionary.

Published Version	Completed by	Date	Date modified & change made	Date updated version is published
Version 1	Care Groups and National Leads in consultation with DOH	23.11.12	None	

ACKNOWLEDGEMENT

Corporate Planning and Performance wish to thank most sincerely all who have contributed to this document, contributions were made by staff across the HSE through governance groups led by care groups and national leads, non Statutory Agencies and line divisions in the Department of Health.

Your time, consultation and attention to detail has contributed greatly to this document. Through this process a greater understanding of Key Performance Indicators and their role in measuring performance in our service has been achieved.

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Introduction

All health care systems depend upon and run on good information. Good information is essential to drive improvements in safety, efficiency, quality, effectiveness and sustainability, as well as to evaluate the performance of the health system. In line with the health reform agenda the Department of Health's Statement of Strategy identifies the development and refinement of a system of performance evaluation as a key requirement to assist the Minister and the Department in assessing the performance of the health system. The development of this performance evaluation capability forms part of the wider objective of enhancing the use and analysis of information.

This document provides summary information which includes a set of guidelines for key performance indicators outlined in the Health Service Executives 2012 National Service Plan. These guidelines cover areas such as definition, rationale, reporting frequency, and data source.

This fulfils a recommendation from the Joint Performance Information Group (JPIG) which was established to create a joint HSE/Department of Health and Children structure to formalise the framework, definition and utilisation of performance information for the benefit of both organisations.

The 2012 KPI Guidelines underpin data quality, accessibility, records management and as a guide to inform users of data.

Performance Indicators

Performance indicators (PI's) are measurable indicators that demonstrate progress towards a specified target. They enable decision makers to assess progress towards the achievement of an outcome, objective or goal within an agreed timeframe.

Key Performance Indicators (KPIs)

- Set out in the HSE's 3 Year Corporate Plan
- Used to evaluate progress towards the organisation's vision and long-term goals
- Translated into achievable actions each year in the NSP and measured in the Performance Report (PR)
- Set out each year in the HSE's National Service Plan
- Chosen to demonstrate that meaningful steps are being taken to achieve named targets.

Measuring performance through PIs allows us to track progress against agreed measures and targets. They also provide learning as to good practice which can form the basis for improvement initiatives.

Performance against PIs is reported as appropriate at various levels within the organisation. They are used by managers to monitor, analyse and report on performance. They are an aid to decision making and inform the planning process which should reflect the action required to drive performance to the desired level, as described in the KPIs.

Levels of Planning and Performance Reporting

Planning takes place at several levels within the HSE and takes into account internal and external guidance provided through, for example, the Department of Health Statement of Strategy, National Policy Documents, economic forecasts and clinical and quality priorities.

There are different tiers of planning, from multi-annual corporate planning to annual service planning at a national, regional and service level.

Performance measurement and performance reporting mirror the different levels of planning and provide an oversight for managers of actual performance measured against planned performance. While the Corporate Plan report provides information on trends over time at a strategic level.

Promoting and Protecting Health

Promoting and Protecting Health - Immunisations

1.	KPI title	Percentage of children 12 months of age who have received three doses of vaccine against diphtheria (D ₃), pertussis (P ₃), tetanus (T ₃) <i>Haemophilus influenza</i> type b (Hib ₃), polio (Polio ₃), hepatitis B (HepB ₃) (6 in 1 vaccine).
2.	Description	Total number and percentage of children on the HSE Area databases at 12 months of age who have received three doses of vaccine against diphtheria (D ₃), pertussis (P ₃), tetanus (T ₃) <i>Haemophilus influenza</i> type b (Hib ₃), polio (Polio ₃), hepatitis B (HepB ₃) (6 in 1 vaccine).
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: This data is reported quarterly in arrears
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: <u>Quarterly results also reported within CompStat Framework monthly</u>
7.	KPI Calculation	The figure is produced by dividing the number children at 12 months of age who are recorded on the HSE Area database as having received three doses of vaccine for each vaccine type diphtheria (D ₃), pertussis (P ₃), tetanus (T ₃) <i>Haemophilus influenza</i> type b (Hib ₃), polio (Polio ₃) and hepatitis B (HepB ₃), by the total number of children at 12 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO had 368 children at 12 months of age, 290 children aged 12 months of age received three doses of vaccine against polio (Polio ₃), 290/368x100) Calculation: <u>No. of children aged 12 months who rec 3 doses of Polio Vaccine (290)</u> Number of children aged 12 months of age (368)x100 = 79%
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC)
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection.
13.	Web link to data	CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat Monthly Performance Supplementary Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/A-Z/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Reported quarterly in arrears by the HPSC
Named contact for further information		Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300
Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

1.	KPI title	Percentage of children at 12 months of age who have received two doses of the Puenomccocal Conjugate Vaccine (PCV ₂).
2.	Description	Total number and percentage of children on the HSE Area databases at 12 months of age who have received two doses of the Puenomccocal Conjugate Vaccine (PCV ₂).
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported quarterly in arrears.</u>
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7.	KPI Calculation	The figure is produced by dividing the number children at 12 months of age who are recorded on the HSE Area database as having received two doses of vaccine against Puenomccocal Conjugate (PCV ₂) by the total number of children at 12 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO area had 368 children at 12 months of age, 290 children aged 12 months of age received two doses of vaccine against Puenomccocal Conjugate (PCV ₂), 290/368x100) Calculation: <u>No. of children aged 12 months who rec 2 doses of Puenomccocal Conjugate (PCV₂) (290)</u> Number of children aged 12 months of age (368)x100 = 79%
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9.	Data Sources Data Completeness Data Quality Issues	Sourced from Health Protection Surveillance Centre (HPSC) Via Regional Vaccination System/ Public Health Departments
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection.
13.	Web link to data	CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat Monthly Performance Supplementary Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
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Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

Promoting and Protecting Health - Immunisations

1.	KPI title	Percentage of children at 12 months of age who have received two doses of the Meningococcal group C vaccine (MenC ₂).
2.	Description	Total number and percentage of children on the HSE Area databases at 12 months of age who have received two doses of the Meningococcal group C vaccine (MenC ₂)
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported quarterly in arrears.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number children at 12 months of age who are recorded on the HSE Area database as having received two doses of vaccine against Meningococcal group C (MenC ₂) by the total number of children at 12 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO area had 368 children at 12 months of age, 290 children aged 12 months of age received two doses of vaccine against Meningococcal group C (MenC ₂), 290/368x100) <u>No. of children aged 12 months who received 2 doses of Meningococcal group C (MenC₂), (290)</u> Number of children aged 12 months of age (368)x100 = 79%
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Health Protection Surveillance Centre (HPSC) Via Regional Vaccination System/ Public Health Departments
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection.
13.	Web link to data	http://www.hse.ie/eng/staff/CompStat Monthly Performance Supplementary Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
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Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

1.	KPI title	Percentage of children 24 months of age who have received three doses of vaccine against diphtheria (D ₃), pertussis (P ₃), tetanus (T ₃) <i>Haemophilus influenzae</i> type b (Hib ₃), polio (Polio ₃), hepatitis B (HepB ₃) (6 in 1 vaccine).
2.	Description	Total number and percentage of children on the HSE Area databases at 24 months of age who have received three doses of vaccine against diphtheria (D ₃), pertussis (P ₃), tetanus (T ₃) <i>Haemophilus influenzae</i> type b (Hib ₃), polio (Polio ₃), hepatitis B (HepB ₃) (6 in 1 vaccine).
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported quarterly in arrears</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: <u>Quarterly results also reported within CompStat Framework monthly</u>
7.	KPI Calculation	The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having received three doses of vaccine for each vaccine type diphtheria (D ₃), pertussis (P ₃), tetanus (T ₃) <i>Haemophilus influenzae</i> type b (Hib ₃), polio (Polio ₃) and hepatitis B (HepB ₃), by the total number of children at 24 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO had 368 children at 24 months of age, 290 children aged 24 months of age received three doses of vaccine against polio (Polio ₃), 290/368x100) Calculation: <u>No. of children aged 24 months who rec 3 doses of Polio Vaccine (290)</u> Number of children aged 24 months of age (368)x100 = 79%
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC)
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection.

13.	Web link to data	CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat Monthly Performance Supplementary Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
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	Metric Sign off	Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

1.	KPI title	Percentage of children at 24 months of age who have received three doses of the Meningococcal C vaccine (MenC ₃) between 12 months and 24 months of age.
2.	Description	Total number and percentage of children on the HSE Area databases at 24 months of age who have received three doses of the Meningococcal C vaccine (MenC ₃).
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details
6.	KPI Reporting Frequency	The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having received three doses of vaccine against Meningococcal group C (MenC ₃) by the total number of children at 24 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO area had 368 children at 24 months of age, 290 children aged 24 months of age received three doses of vaccine against Meningococcal group C (MenC ₃), 290/368x100) $\frac{\text{No. of children aged 24 months who rec 3 doses of Meningococcal group C (MenC}_3\text{), (290)}}{\text{Number of children aged 24 months of age (368)} \times 100 = 79\%$
7.	KPI Calculation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
8.	Reporting Aggregation	Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC)
9.	Data Sources Data Completeness Data Quality Issues	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection.
13.	Web link to data	Health Protection Surveillance Centre http://www.hse.ie/eng/staff/CompStat Monthly Performance Supplementary Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
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Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

1.	KPI title	Percentage of children at 24 months of age who have received one dose of Haemophilus influenzae type B (Hib) vaccine
2.	Description	Total number and percentage of children on the HSE Area databases at 24 months of age who have received one dose of Haemophilus influenzae type B (Hib) vaccine
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details
6.	KPI Reporting Frequency	The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having one dose of Haemophilus influenzae type B (Hib) vaccine by the total number of children at 24 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO area had 368 children at 24 months of age, 290 children aged 24 months of age received one dose of vaccine against Haemophilus influenzae type B (Hib), $290/368 \times 100$) <u>No. of children aged 24 months who rec 1 dose of Haemophilus influenzae type B (Hib), (290)</u> Number of children aged 24 months of age (368) $\times 100 = 79\%$
7.	KPI Calculation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
8.	Reporting Aggregation	Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC)
9.	Data Sources Data Completeness Data Quality Issues	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection.
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1.	KPI title	Percentage of children at 24 months of age who have received three doses of the Puenomccocal Conjugate Vaccine (PCV ₃).
2.	Description	Total number and percentage of children on the HSE Area databases at 24 months of age who have received two doses of the Puenomccocal Conjugate Vaccine (PCV ₃).
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported quarterly in arrears.</u>
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7.	KPI Calculation	The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having received two doses of vaccine against Puenomccocal Conjugate (PCV ₂) by the total number of children at 24 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO area had 368 children at 24 months of age, 290 children aged 24 months of age received two doses of vaccine against Puenomccocal Conjugate (PCV ₃), 290/368x100) Calculation: <u>No. of children aged 24 months who rec 3 doses of Puenomccocal Conjugate (PCV₃) (290)</u> Number of children aged 24 months of age (368)x100 = 79%
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Health Protection Surveillance Centre (HPSC) Via Regional Vaccination System/ Public Health Departments
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection.
13.	Web link to data	CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat Monthly Performance Supplementary Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/A-Z/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> Compstat <input checked="" type="checkbox"/> Other – give details: Reported quarterly in arrears by the HPSC
Named contact for further information		Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300
Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

1.	KPI title	Percentage of children at 24 months of age who have received the Measles, Mumps and Rubella (MMR) vaccine.
2.	Description	Total number and percentage of children on the HSE Area databases at 24 months of age who have received the Measles, Mumps and Rubella Vaccine (MMR).
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported quarterly in arrears.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Quarterly results are also reported within CompStat Framework monthly.
7.	KPI Calculation	The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having received the vaccine against Measles, Mumps and Rubella Vaccine (MMR) by the total number of children at 24 months of age on the HSE Area database. (e.g. in Q2, 2010 LHO area had 368 children at 24 months of age, 290 children aged 24 months of age received the MMR vaccine $290/368 \times 100\%$) $\frac{\text{No. of children aged 24 months who received the MMR Vaccine (290)}}{\text{Number of children aged 24 months of age (368)} \times 100\% = 79\%$
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC)
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection.
13.	Web link to data	http://www.hse.ie/eng/staff/CompStat Monthly Performance Supplementary Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hpsc.ie/hpsc/A-Z/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics CompStat Community Services Dashboards
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Currently only reported quarterly in arrears by the HPSC
Named contact for further information		Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300
Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

Promoting and Protecting Health - Immunisations

1.	KPI title	Percentage of children aged 4 to 5 years who have received 1 dose 4-in-1 vaccine (Diphtheria; tetanus; Polio; Pertussis)
2.	Description	Total number and percentage of children on the HSE Area databases at 5 years of age who have received one dose of 4-in-1 vaccine (Diphtheria; tetanus; Polio; Pertussis)
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported annually in Q4.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number children at 4 to 5 years of age who are recorded on the HSE Area database as having received the 4 in 1 vaccine by the total number of children at 4 to 5 years of age on the HSE Area database. (e.g. in Q2, 2010 LHO area had 368 children at 4 to 5 years of age, 290 children aged 4 to 5 years of age received the 4-in-1 vaccine 290/368x100%) <u>No. of children aged 4 to 5 years of age who received the 4-in-1 vaccine (290)</u> Number of children aged 4 to 5 years of age (368)x100% = 79%
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Health Protection Surveillance Centre (HPSC) Via Regional Vaccination System/ Public Health Departments
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No - this target is from the HIQA Health Technology Assessment
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Dr. Helena Murray, HSE National Immunisation Office Tel: 01 867 6108
Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

1.	KPI title	Percentage of children aged 4 to 5 years who have received one dose Measles, Mumps, Rubella (MMR) vaccine
2.	Description	Total number and percentage of children on the HSE Area databases at 5 years of age who have received one dose Measles, Mumps, Rubella (MMR) vaccine
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported annually in Q4.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number children at 4 to 5 years of age who are recorded on the HSE Area database as having received the vaccine against Measles, Mumps and Rubella Vaccine (MMR) by the total number of children at 4 to 5 years of age on the HSE Area database. (e.g. in Q2, 2010 LHO area had 368 children at 4 to 5 years of age, 290 children aged 4 to 5 years of age received the MMR vaccine $290/368 \times 100\%$) $\frac{\text{No. of children aged 4 to 5 years of age who received the MMR Vaccine (290)}}{\text{Number of children aged 4 to 5 years of age (368)} \times 100\% = 79\%$
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Health Protection Surveillance Centre (HPSC) Via Regional Vaccination System/ Public Health Departments
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No - this target is from the HIQA Health Technology Assessment
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Dr. Helena Murray, HSE National Immunisation Office Tel: 01 867 6108
Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

Promoting and Protecting Health - Immunisations

1.	KPI title	Percentage of children aged 11 to 14 years who have received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine
2.	Description	Total number and percentage of children on the HSE Area databases at 11 to 14 years of age who have received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine
3.	Rationale	Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported annually in Q4.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number children at 11 to 14 years of age who are recorded on the HSE Area database as having received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine by the total number of children at 11 to 14 years of age on the HSE Area database. (e.g. in Q2, 2010 LHO area had 368 children at 11 to 14 years of age, 290 children aged 11 to 14 years of age received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine 290/368x100%) <u>No. of children aged 11 to 14 years of age who received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine (290)</u> Number of children aged 11 to 14 years of age (368)x100% = 79%
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Health Protection Surveillance Centre (HPSC) Via Regional Vaccination System/ Public Health Departments
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No - this target is from the HIQA Health Technology Assessment
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Compstat <input type="checkbox"/> Other – give details:
Named contact for further information		Dr. Helena Murray, HSE National Immunisation Office Tel: 01 867 6108
Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

1.	KPI title	HPV – number and percentage of first year girls to have received the third dose of HPV vaccine by August 2012.
2.	Description	HPV – estimated number and percentage of girls in first year of second level schools (and those aged 12 or 13 years that are in special schools or home schooled) to have completed a three dose HPV vaccine course in the academic year 2011/2012.
3.	Rationale	Immunisation is a proven, safe and effective public health measure. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 80%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported annually in Q4.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	$\frac{\text{No. of first year girls to have received third dose of HPV vaccine}}{\text{Total number of first year girls}} \times 100 =$
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other
9.	Data Sources Data Completeness Data Quality Issues	Sourced from HSE Areas via National Immunisation Office
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No - this target is from the HIQA Health Technology Assessment
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
	Named contact for further information	Dr. Helena Murray, HSE National Immunisation Office Tel: 01 867 6108
	Metric Sign off	Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

1.	KPI title	HPV – number and percentage of Sixth year girls to have received the third dose of HPV vaccine by August 2012.
2.	Description	HPV – estimated number and percentage of girls in Sixth year of second level schools (and those that are in special schools or home schooled) to have completed a three dose HPV vaccine course in the academic year 2011/2012.
3.	Rationale	Immunisation is a proven, safe and effective public health measure. Designed to monitor immunisation uptake rate against the target.
4.	Target	NSP 2012 Target – 80%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported annually in Q4.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<u>No. of first year girls to have received third dose of HPV vaccine</u> Total number of first year girls x 100 =
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other
9.	Data Sources Data Completeness Data Quality Issues	Sourced from HSE Areas via National Immunisation Office
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No - this target is from the HIQA Health Technology Assessment
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
	Named contact for further information	Dr. Helena Murray, HSE National Immunisation Office Tel: 01 867 6108
	Metric Sign off	Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332

Promoting and Protecting Health – National Bloodspot Screening

1.	KPI title	Number of Newborns who have had Newborn Bloodspot Screening (NBS).
2.	Description	Total number and percentage of newborn infants who are offered and have a newborn bloodspot screening sample taken within seven days of birth.
3.	Rationale	To provide evidence that newborn infants eligible are offered and have had newborn bloodspot screening between 72 -120hrs after birth; ii) all babies born outside this jurisdiction and reside in the jurisdiction have NBS within 72 -120hrs after birth; iii) births not eligible. i.e. RIP before 72hrs; Moved out of LHO before 72 hrs; op-out; other.
4.	Target	NSP 2012 expected activity/target – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: collected quarterly in arrears.
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: quarterly in arrears.
7.	KPI Calculation	Metric calculation based on number of births and number of infants who have NBS.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	LHO's / ISA's – Regional Leads for Child Health National Newborn Bloodspot Screening Laboratory Implementation of New ICT solution for the National Newborn Bloodspot Screening Laboratory in 2012 will enhance the quality and quantity of data available.
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	Similar to other countries, e.g. Northern Ireland, England, Scotland, Wales and throughout Europe who screen newborns for similar conditions.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
	Named contact for further information	Mary Godfrey, Project Manager NNBS John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
	Metric Sign off	Dr Kevin Kelleher, AND, Health Protection and Child Health Ms Laverne McGuinness, Director, ISD HSE

Promoting and Protecting Health - Child Health/Developmental

1.	KPI title	Percentage of New Born Babies visited by a Public Health Nurse (PHN) within 48 hours of hospital discharge.
2.	Description	This measure is designed to measure the total number and percentage of new born babies visited by a Public Health Nurse (PHN) within 48 hours of hospital discharge.
3.	Rationale	This underpins the PHN role in supporting mother and baby and health promotion. In particular a timely PHN visit supports breastfeeding and screens for, and responds to, post natal depression. Both of these are core elements of post-natal support.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: <u>Quarterly data is also reported within CompStat Framework monthly.</u>
.	KPI Calculation	<p>The figure is produced by dividing the number of new born babies visited by a PHN within 48hrs of their first discharge from hospital by the total number of newborn babies discharged from hospital following their birth during the reporting period (i.e. LHO area have 369 babies discharged, 288 received a PHN Visit within 48hrs therefore $288/369 \times 100\%$)</p> <p>Calculation: $\frac{\text{Number of newborn babies visited by a PHN within 48hrs (288)}}{\text{Number of Newborn babies discharged (369)} \times 100\% = 78\%$</p>
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	LHO (PHNs) returned via HSE Area Business Managers
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	<p>Community health services to mothers and babies are not standard or comparable across countries. Most other countries have a separate dedicated service that provides maternal and child health services alone and are thus able to achieve much more intensive visits and medical checks for babies, young children and their mothers/families.</p> <p>WHO/UNICEF advocate timely, appropriate and accessible community health service support for new mothers and babies.</p>
13.	Web link to data	CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Definition of new born baby: “baby who has never been discharged before, except those babies remaining in the care of Midwifery Services following early hospital discharge (e.g. Domino and Early Transfer Home Schemes) and home births.”
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager Non Acute BIU, Tel 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Sheila O'Malley, Chief Nursing Officer, Department of Health, Tel: 01 635 4366

Promoting and Protecting Health - Child Health/Developmental

1.	KPI title	Percentage of children reaching 10 months within the reporting period who have had their child development health screening on time before reaching 10 months of age.
2.	Description	The percentage uptake of 7-9 months developmental screening by 10 months. Completed by Public Health Nurses or Area Medical Officers.
3.	Rationale	Developmental screening is a procedure designed to identify children who should receive more intensive assessment or diagnosis, for potential developmental delays or physical defects (e.g. Strabismus; undescended testes). It can allow for earlier detection of delays and improve child health and well-being outcomes for identified children. This metric is designed to measure the % of children reaching 10 months within the reporting period who have had their Child Development Health Screening on time before reaching 10 months of age.
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported in arrears</u> . Data is obtained Monthly in arrears for CompStat and is to be reported Quarterly for PI's against the NSP.
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: <u>Currently only reported within CompStat Framework monthly</u> .
7.	KPI Calculation	A baby born between 1 st and 31 st December 2008 will turn 10 months of age between 1 st and 30 th November 2009, babies born between 1 st and 30 th June 2008 will turn 10 months of age between 1 st and 30 th April 2009, etc. Of those babies how many received their Child Development Health Screening on time before reaching 10 months of age. (e.g. LHO has 108 babies reaching 10 months of age in the reporting period, 89 of which have received screening then the percentage is calculated as follows $89/108 \times 100\%$). Calculation: $\frac{\text{Number of babies receiving developmental screening by 10mths (89)}}{\text{No. of babies reaching 10 months in reporting period (108)} \times 100\% = 82\%$
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	LHO (PHNs) returned via HSE Area Business Managers to Business Intelligence Unit, CPCP
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	PHN's conduct developmental health screening as recommended by the Child Health Screening & Surveillance Programme (CHSS)
13.	Web link to data	CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat http://www.hse.ie/eng/services/Publications/corporate/performance/HSE_Monthly_Performance_Reports_.html

Promoting and Protecting Health - Child Health/Developmental

14.	Additional Information	This metric was the output of a number of facilitated sessions held with DPHNs, Performance Management and Business Managers nationally. The purpose of the sessions was to develop and agree on definitions to be applied to this metric to ensure parity of data returned nationally. This metric was first reported on in October 2008.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager Non Acute BIU, Tel 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Dr. Kevin Kelleher, AND, Health Protection, Tel: 061 483347 Sheila O'Malley, Chief Nursing Officer, Department of Health, Tel: 01 635 4366

Promoting and Protecting Health – Tobacco Control

1.	KPI title	Number of sales to minors test purchases carried out
2.	Description	Test purchases of cigarettes with volunteer minors are carried out in retail premises to assess compliance with tobacco control legislation.
3.	Rationale	It is an offense for retailers to sell tobacco products to persons under 18. The HSE Environmental Health Service enforces this provision of the Public Health (Tobacco) Acts 2002 – 2004. This metric reports on the activity associated with this provision of the legislation which is also a key priority for the tobacco inspection programme agreed with the Office of Tobacco Control for 2011. The metric measures the level of compliance with the target.
4.	Target	NSP 2012 Target - 216
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The data is extracted from the National Tobacco Control Database and will also be part of reporting on the EH business plan for 2012. It is a count of the number of inspections which indicates where programmes have taken place.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	National Tobacco Control Database
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	The Office of Tobacco Control functions have been transferred to the HSE following its dissolution on the 1 st January 2011.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input checked="" type="checkbox"/> Other – give details: National Tobacco Control Database
Named Link Person		Mary Keane, RCEHO South, Tel: 087 8177134, Email: mary.keane1@hse.ie
Metric Sign off		Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie John Keegan, Principal Officer, Department of Health, Tel: 01 635 4030

1.	KPI title	Number of offices, per region, carrying out sales to minors test purchase activities
2.	Description	Test purchases of cigarettes with volunteer minors are carried out in retail premises to assess compliance with tobacco control legislation.
3.	Rationale	It is an offense for retailers to sell tobacco products to persons under 18. The HSE Environmental Health Service enforces this provision of the Public Health (Tobacco) Acts 2002 – 2004. This metric reports on the activity associated with this provision of the legislation which is also a key priority for the tobacco inspection programme agreed with the Office of Tobacco Control for 2011. The metric measures the level of compliance with the target
4.	Target	NSP 2012 Target – 2 per HSE Region
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The data is extracted from the National Tobacco Control Database and will also be part of reporting on the EH business plan for 2012. It is a count of the number of inspections which indicates where programmes have taken place. Total number of test purchases carried out per LHO in each region Target is 10 per two LHO per region
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	National Tobacco Control Database
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	The Office of Tobacco Control functions were transferred to the HSE following its dissolution on the 1 st January 2011.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input checked="" type="checkbox"/> Other – give details: National Tobacco Control Database
Named Link Person		Mary Keane, RCEHO South, Tel: 087 8177134, Email: mary.keane1@hse.ie
Metric Sign off		Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie John Keegan, Principal Officer, Department of Health, Tel: 01 635 4030

1.	KPI title	Number and percentage of HSE campuses with tobacco-free policy: I) Acute Hospitals ii) Admin campuses
2.	Description	HSEs Tobacco Control Framework (TCF) commits to introducing a tobacco free policy in all HSE campuses by 2015. The policy covers hospitals, admin sites, primary care sites and community sites. A phased roll-out of the policy is planned. All new primary care sites will have a tobacco free policy as standard. The policy will apply to all staff, patients/service users, visitors, contractors and other persons on the campus for any reason. Smoking will not be permitted in any part of the grounds, including entrances, car parks, roads, bus stops and other areas as stated in the Corporate Policy.
3.	Rationale	Smoking is the biggest single cause of preventable premature death, claiming some 5,500 deaths in Ireland every year. There is a growing recognition throughout the developed world that allowing smoking on healthcare campuses significantly undermines the health promotion message of healthcare organisations. The HSE's tobacco free campus policy will help change social norms around smoking. It will lead to better health outcomes for patients by treating tobacco addiction as a care issue. The policy has already been successfully introduced in four hospitals and a small number of admin sites. Progress is monitored bi-monthly by TCF Implementation Group.
4.	Target	NSP 2012 Targets: i) Acute Hospitals – 12 ii) Admin Campuses – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class
9.	Data Sources Data Completeness Data Quality Issues	National Tobacco Control Database using HSE property database. Information is gathered through health promoting hospitals networks via local Smoking Cessation Officers. This is the first year data will be gathered systemically.
10.	Tracer (Conditions) terms	Acute hospitals: All designated cancer centres Other acute hospitals with track record of tobacco management Admin campuses: All sites that are exclusively owned/managed by HSE. (Does not include buildings where there are other tenants).
11.	Minimum Data Set	Signage to indicate entering a tobacco free campus. Posters advertising services to help smokers to quit.
12.	International Comparison	Yes, ENSH European Network for Tobacco Free Healthcare Services http://www.ensh.eu/ensh/racine/
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	The Office of Tobacco Control functions were transferred to the HSE following its dissolution on the 1 st January 2011. All smokers are offered a range of supports to help them quit. These include local cessation clinics, Quitline 1850 201 203, www.quit.ie and www.facebook.com/HSEquit
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input checked="" type="checkbox"/> Other – give details: National Tobacco Control Database
Named contact for further information		Marie Killeen, National Tobacco Control Office, HSE, Tel: 045 880 400
Metric Sign off		Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie John Keegan, Principal Officer, Department of Health, Tel: 01 635 4030

1.	KPI title	Number of front line staff trained in brief intervention smoking cessation across primary care and acute campuses
2.	Description	A national training programme will be rolled out to deliver brief intervention (BI) smoking cessation training to frontline healthcare staff. Frontline staff refers to those delivering services to patients/service users. BI in smoking cessation involves providing opportunistic advice, discussion, negotiation or encouragement to quit smoking. It typically takes between 3 and 10 minutes. The training course is designed to develop skills in motivational interviewing for smoking cessation. Motivational Interviewing is an evidence based treatment approach for helping patients/service users move through the stages of change and find internal motivation for lifestyle behaviour change. The course is highly participative, facilitating practice of core skills. The programme is delivered by specialist trainers from health promotion/cessation.
3.	Rationale	HSE's Tobacco Control Framework (TCF) commits to training all frontline healthcare staff in brief intervention in smoking cessation so that treating tobacco use becomes a core part of their work. All healthcare staff have a responsibility to treat tobacco addiction as a care issue and to promote cessation by actively advising, encouraging and supporting smokers to quit. The Irish Society for Quality & Safety in Healthcare 2010 Survey reports only 21% of patients were offered support to quit. There is considerable evidence that interventions by health professionals assist smokers to quit. Specific training for personnel in tobacco cessation which develops both skills and knowledge is essential to deliver an evidenced based tobacco cessation service.
4.	Target	NSP 2012 target – Nationally 3,521 DML – 542 South - 813 DNE – 1,083 West – 1,083
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class
9.	Data Sources Data Completeness Data Quality Issues	National Tobacco Control Database using HR Management Information data. Information is gathered through local Health Promotion/Cessation Trainers. This is the first year national data will be gathered systemically.
10.	Tracer (Conditions) terms	Frontline healthcare staff providing frontline services to patients/service users in hospitals and community settings who haven't previously undertaken such a course.
11.	Minimum Data Set	Number of frontline healthcare staff who have been trained by Region. Professional breakdown of staff trained by Region. Number of courses delivered in each Region.
12.	International Comparison	Yes, WHO tobacco indicators
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	The Office of Tobacco Control functions have been transferred to the HSE following its dissolution on the 1 st January 2011.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input checked="" type="checkbox"/> Other – give details: National Tobacco Control Database
Named contact for further information		Marie Killeen, National Tobacco Control Office, HSE, Tel: 045 880 400
Metric Sign off		Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie John Keegan, Principal Officer, Department of Health, Tel: 01 635 4030

1.	KPI title	Percentage of category 1,2 food businesses receiving inspection target as per FSAI Guidance Note Number 1
2.	Description	FSAI Guidance Note Number 1 defines the risk categorisation of food establishments and sets the targets for their inspection frequency. Categories 1 and 2 are the highest risk categories.
3.	Rationale	The HSE carries out statutory food safety controls as part of its responsibilities under a Service Contract with the FSAI. The purpose of the metric is to assess achievement with the inspection target set in FSAI Guidance Note Number 1.
4.	Target	NSP 2012 Target: 100% compliance with the inspection target set in FSAI Guidance Note 1 for Categories 1 and 2.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator Number of defined inspections of Category 1 and 2 premises YTD Denominator: Total number of Category 1 and 2 premises (as counted at the end of each quarter). It is expressed as a percentage and is interpreted as YTD delivery on annual target Quarter 1 should be 25%, Quarter 2 should be 50 % of target, Quarter 3 should be 75% of target, Quarter 4 should be 100% of target achieved.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class
9.	Data Sources Data Completeness Data Quality Issues	Data is collected from the food control visit records which are inputted by EHOs at local PEHO office level. Data is complete with 100% coverage There will be three IT systems and manual recording of data during 2012 as the service migrates to the national Environmental Health Information System (EHIS). This may result in quality issues and issues regarding timeliness of data reporting.
10.	Tracer (Conditions) terms	All Category 1 and 2 food business establishments are included. Categories 3, 4, 5 and 6 are excluded.
11.	Minimum Data Set	Number of category 1 and 2 food business establishments inspected
12.	International Comparison	All EU countries would record similar data, however the risk categorisation is not the same, therefore numbers are not comparable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html Data is also reported in the FSAI Annual Report and is reported to the EU in the Multi Annual National Control Plan (MANCP). www.fsai.ie
14.	Additional Information	The risk categorisation used in 2011 is no longer in use. As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input checked="" type="checkbox"/> Other – give details: FSAI Service Contract Section 48 (8) Annual Report, MANCP
Named contact for further information		Mary Keane, RCEHO South, Tel: 087 8177134, Email: mary.keane1@hse.ie
Metric Sign off		Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie John Keegan, Principal Officer, Department of Health, Tel: 01 635 4030

1.	KPI title	Number of cosmetic product inspections
2.	Description	This metric measure the number of inspections for assessment of compliance with the EU (Cosmetic Product) Regulations 2004 as amended.
3.	Rationale	The HSE is responsible for the enforcement of these Regulations. Inspections are required to ensure the safety of cosmetic products on the Irish market for use by consumers.
4.	Target	NSP 2012 Target – 750
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: Number of inspections YTD of businesses selling products to which the EU (Cosmetic Product) Regulations 2004 as amended apply It is a cumulative metric expressed as number of inspections.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Data is collected manually at PEHO office level. It is reported in the EHO activity return and collated regionally and nationally. The data is 100% complete
10.	Tracer (Conditions) terms	Cosmetic product producers, importers, distributors, retailers and service sector to which the the EU (Cosmetic Product) Regulations 2004 as amended apply
11.	Minimum Data Set	Number of inspections of Businesses which sell ? products to which the the EU (Cosmetic Product) Regulations 2004 as amended apply
12.	International Comparison	Irish Medicines Board report on activities to EU
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	During 2012 the Environmental Health Service will be migrating to a new Environmental Health Information System from the existing manually collected activity report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named Link Person		Mary Keane, RCEHO South, Tel: 087 8177134, Email: mary.keane1@hse.ie
Metric Sign off		Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie John Keegan, Principal Officer, Department of Health, Tel: 01 635 4030

1.	KPI title	All designated ports and airports to receive an inspection to audit compliance with the International Health Regulations 2005.
2.	Description	All designated ports and airports receive a full programmed inspection to audit compliance with the International Health Regulations 2005.
3.	Rationale	To assist in international disease control, the WHO under the International Health Regulations requires country to designate Ports and Airport that will meet its requirements. The eight Sea and Airports in Ireland which have been designated for the purposes of the International Health Regulations 2005 must comply with the core capacity requirements as per this legislation.
4.	Target	NSP 2012 Target: 8
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator : The number of designated Airports (3) and Seaports (5) which received an IHR audit. The data is expressed as a number of audits.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: PEHO office level.
9.	Data Sources Data Completeness Data Quality Issues	The data is recorded in the local PEHO activity report which is collated regionally and nationally each quarter. The data is complete for the specific offices to which the data applies and there are no quality issues.
10.	Tracer (Conditions) terms	Only the designated ports and airports in Ireland under the International Health Regulations are included
11.	Minimum Data Set	Audit numbers of 8 designated ports and airports.
12.	International Comparison	This metric is to assess compliance with a WHO legal requirement.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	During 2012 the Environmental Health Service will be migrating to a new Environmental Health Information System from the existing manually collected activity report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset
Named Link Person		Mary Keane, Regional Chief Environmental Health Officer - South, HSE, Tel: 059 9136582, mary.keane1@hse.ie
Metric Sign off		Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie Dora Hennessy, Principal Officer, Department of Health, Tel: 01 635 4332

1.	KPI title	No. of PCTs implementing a structured programme to address health inequalities (as outlined in the HSE Health Inequalities Framework and specified in this metric)
2.	Description	The definition of 'structured' should follow the structure of a Health Equity Audit as signposted under Section 15. In terms of Primary Care Teams, health inequalities will be determined as part of a Local Health Needs Assessment and programmes/initiatives will then be undertaken as set out in national guidance.
3.	Rationale	To capture the number of PCTs implementing a structured programme to address health inequalities.
4.	Target	10 nationally (South – 2; West – 3; DML – 2; DNE- 3) Source: HSE National Service Plan 2012 Source: PR Report and Primary Care Status Report
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	N/A Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	PCT - LHO – Region – National Programme Office - BIU Non- acute team Complete As above
10.	Tracer Conditions	As per Description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	As reported in the Performance Report
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Primary/
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details: PCT Status Report
Named contact for further information		Eddie Ward e-mail: eddie.ward@hse.ie tel: (043) 334-2031, Brian Neeson e-mail: brian.neeson@hse.ie tel: (061) 483257
Metric Sign off		Dr Kevin Kelliher, Health Protection, Integrated Services Directorate, 061 483347

1.	KPI title	No. of Hospitals implementing a structured programme to address health inequalities (as outlined in the HSE Health Inequalities Framework and specified in this metric)
2.	Description	The definition of 'structured' should follow the structure of a Health Equity Audit as signposted under Section 15. In terms of Hospitals, health inequalities will be determined as part of a Local Health Needs Assessment and programmes/initiatives will then be undertaken as set out in national guidance.
3.	Rationale	To capture the number of Hospitals implementing a structured programme to address health inequalities.
4.	Target	10 nationally (South – 2; West – 3; DML – 2; DNE- 3) Source: HSE National Service Plan 2012 Source: PR Report and Primary Care Status Report
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	PCT - LHO – Region – National Programme Office - BIU Non- acute team Complete As above
10.	Tracer Conditions	As per Description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	As reported in the Performance Report
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Primary/
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details: PCT Status Report
Named contact for further information		Eddie Ward e-mail: eddie.ward@hse.ie tel: (043) 334-2031, Brian Neeson e-mail: brian.neeson@hse.ie tel: (061) 483257
Metric Sign off		Dr Kevin Kelliher, Health Protection, Integrated Services Directorate, 061 483347

*Primary Care, Community
(Demand-Led) Schemes and other
Community Services*

Primary Care & other Community Services – Primary Care

1.	KPI title	Number of Primary Care Teams implementing structured GP Chronic Disease Management for Diabetes to incorporate the structured management of chronic diseases within this cohort of patients.
2.	Description	This refers to new Chronic Disease Management developed by Clinical Programmes and Strategy Directorate. A number of aspects from each Chronic Disease programme have been captured under this programme and has a number of activity measures identified which will need to be captured by the Team before payments will be made. 2012 will progress the implementation of an integrated Care Package for Diabetes.
3.	Rationale	To capture the roll out of Structured Integrated Diabetes Care
4.	Target	Dependent upon timing of commencement of programme
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	(New Metric)
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	PCT - LHO – Region – National Programme Office - BIU Non- acute team New Metric Manually collated at local levels through GP Practice
10.	Tracer Conditions	As per Description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/healthpromotion/Diabetes/Diabetes%20Information.html
14.	Additional Information	As will be reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager Non Acute BIU. Tel. 01 6352673. Email: john.mccusker@hse.ie Mairead Gleeson, Programme Manager, Email: Mairead.gleeson1@hse.ie
Metric Sign off		Brian Murphy, National Care Group Lead, Tel: 091 775908, Email: Brian.Murphy@hse.ie

Primary Care & other Community Services – Primary Care

1.	KPI title	No. of Health & Social Care Networks in operation
2.	Description	A Network will be considered in operation when the following have been met: 1. Alignment of PCTs & Network services into identified Health and Social Care Networks areas on a local basis. This involves identification of staffing, specialist teams, facilities and services that are provided within the HSCN Area. 2. Implementation of the national Management and Clinical Governance Structures for the Health area, when agreed. 3. Roll out of the nationally agreed guidelines/processes in terms of: - Referral Guidelines between PCTs and HSCN services; - Nominated link person for the PCT in respect of each of the specialist areas. - Care pathway and shared care arrangements for patients accessing network services
3.	Rationale	To capture the number of Health and Social Care Networks in place.
4.	Target	50 nationally (South – 14; West – 13; DML – 13; DNE- 10) NSP 2012 Target - 50
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	N/A Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	PCT - LHO – Region – National Programme Office - BIU Non- acute team Complete As above
10.	Tracer Conditions	As per Description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	As reported in the Performance Report
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Primary/ http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: <u>PCT Status Report</u>
Named contact for further information		John McCusker, Manager Non Acute BIU. Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Brian Murphy, National Care Group Lead, Tel: 091 775908, Email: Brian.Murphy@hse.ie

Primary Care & other Community Services – Primary Care

1.	KPI title	No. of Health & Social Care Networks in development
2.	Description	A Network will be considered in development when the following have been met: 1. Alignment of PCTs & Network services into identified Health and Social Care Networks areas on a local basis. This involves identification of staffing, specialist teams, facilities and services that are provided within the HSCN Area.
3.	Rationale	To capture the number of Health and Social Care Networks in Development.
4.	Target	79 nationally (South – 22; West – 19; DML – 22; DNE- 16) NSP 2012 Target - 50
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	N/A Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	PCT - LHO – Region – National Programme Office - BIU Non- acute team Complete As above
10.	Tracer Conditions	As per Description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	As reported in the Performance Report
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Primary/ http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: <u>PCT Status Report</u>
Named contact for further information		John McCusker, Manager Non Acute BIU. Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Brian Murphy, National Care Group Lead, Tel: 091 775908, Email: Brian.Murphy@hse.ie

Primary Care & other Community Services – Primary Care

1.	KPI title	Percentage of Operational Areas with community representation for Primary Care Team and Network development
2.	Description	<p>Percentage of the 17 Operational Areas (Integrated Service Areas) with community representation for Primary Care Team and Network development.</p> <p>In order for an ISA to be considered as having appropriate community representation for PCT and Network development it is deemed necessary to meet one of the following criteria;</p> <ol style="list-style-type: none"> a. Have one or more community representatives on the LIG; <li style="padding-left: 20px;">or b. Have one or more community representatives on at least 50% of Primary Care Teams (PCTs) in place within the ISA. <li style="padding-left: 20px;">or c. Have one or more community representatives on at least 50% of Health and Social Care Networks <p>Operational Area: An Operational Area will facilitate the integration of secondary care, primary care and continuing care services, with all personnel and settings providing integrated services for a shared population. The Operational Area will contain a hospital or a number of hospitals that provide for all of the secondary care acute hospital needs for that community.</p> <p>Primary Care Team: Primary Care Teams or PCTS are teams that delivery a range of primary care services that keep people well in their own communities. Teams can include, GPs, Nurses, Health Care Assistants, Home Helps, Physiotherapists, Occupational Therapists, SocialWorkers and Speech and Language Therapists. The Transformation Development Officer (TDO) supports the formation of these teams.</p> <p>Local Implementation Group: A Local Implementation Group is a local management structure for primary care teams in each local health office area.</p> <p>Health and Social Care Network: The Health & Social Care Networks (HSCN) will be comprised of a number of PCTs and will provide services for a population of 30,000 to 50,000. Specialist community based services and care groups will be organised at this level and will include Mental Health, Child Protection, Disability Intervention Teams etc.</p> <p>Community representatives: are individuals who are ‘representing’, ‘representative’, and/or ‘consultative’ of one or more populations or affinity groups. They can be stakeholders, opinion leaders, organisers and advocates. They serve as a platform and channel for information and voices of community, communicating ideas and concepts between community and health and social services and who hold people and processes accountable. These representatives can be involved with individual Local Implementation Groups, Primary Care Teams or Health and Social Care Networks etc.</p> <p><i>Note: A common concern when electing a community representative is guaranteeing ‘true representation’. It is important to note that guaranteeing ‘true representation’ can be an impossible task. Service user involvement is perhaps more about a way of thinking that is able to progress beyond personal experience and apply such knowledge to broader healthcare issues.</i></p>
3.	Rationale	<p>Rationale: The Joint Initiative formation evaluation identifies and recommends to the HSE methods and practices and processes for community participation in the development and ongoing work for Primary Care Teams.</p> <p>Purpose: To capture the number of Operational Areas with community representation for Primary Care Team and Network development.</p>

4.	Target	NSP 2012 Target – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	N/A Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	PCT - LHO – Region – National Programme Office - BIU Non- acute team <ul style="list-style-type: none"> The Transformation Development Officers (TDOs) will report data to the National Primary Care Service Office based on their PCTs, Health and Social Care Networks or LIGs. The National Primary Care Services Office will collate the data and decide if the ISA meets the criteria set for this PI. Complete Dependent on receipt of data as outlined in number 7 above
10.	Tracer Conditions	As per Description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	As reported in the Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Guidelines and resources available on the web link to data outlined above. The National Advocacy Unit provides practical guidance on service user involvement and community participation. For more information contact: <ul style="list-style-type: none"> June Bolger, National Lead Service User Involvement email: june.bolger2@hse.ie; tel: 0868069829) The HSE Regional Managers for Consumer Affairs will also provide guidance for Primary Care Specialists: <ul style="list-style-type: none"> Sinead Byrne, HSE South, Regional Manager, Consumer Affairs, Kilcreene Hospital, Kilkenny. (email: SineadJ.Byrne@hse.ie; tel: 056 7785598) Rosalie Smith Lynch, HSE Dublin North East, Regional Manager, Consumer Affairs, St. Felim's Hospital, Cavan. (email: rosalie.SmithLynch@hse.ie; tel: 049 4360462 or 046 9280511) Chris Rudland, HSE West, Regional Manager, Consumer Affairs, Merlin Park, Galway. (email: Chris.Rudland@hse.ie; tel: 091 775808) Deborah Keyes, HSE Dublin Mid Leinster, Regional Manager, Consumer Affairs, Central Business Park, Clonminch, Tullamore, Co. Offaly. (email: deborah.keyes@hse.ie; tel: 057 93 57876)
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: <u>PCT Status Report</u>
Named contact for further information		John McCusker, Manager Non Acute BIU. Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Brian Murphy, National Care Group Lead, Tel: 091 775908, Email: Brian.Murphy@hse.ie

Primary Care & other Community Services – GP Out of Hours

1.	KPI title	GP Out of Hours
2.	Description	The number of contacts, phone, triage, GP treatment centre home visit, other in the reporting period.
3.	Rationale	To track the level of activity and use information for planning purposes.
4.	Target	NSP 2012 Expected Activity/Target: 957, 126
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	N/A Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	GP Out of Hours Co-op – National Programme Office – BIU Non acute Complete
10.	Tracer Conditions	GP contacts including, phone, triage, GP treatment centre and home visits.
11.	Minimum Data Set	
12.	International Comparison	No.
13.	Web link to data	As reported in the Performance Report
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Primary/ http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: <u>PCT Status Report</u>
Named contact for further information		John McCusker, Manager Non Acute BIU. Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647103 Teresa Cody, Principal Officer, Department of Health, Tel: 01 635 4366

Primary Care, & other Community Services – Physiotherapy Referral

1.	KPI title	No. of patients for whom a primary care physiotherapy referral was received in the reporting month
2.	Description	Number of patients for whom a primary care physiotherapy referral was received in the reporting month.
3.	Rationale	To capture the No. of patients for whom a primary care physiotherapy referral was received in the reporting month.
4.	Target	169,006 nationally (South – 48,648; West – 47,391; DML – 41,995; DNE- 30,972) NSP 2012 Target – 169,006
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	LHO – Region – National Programme Office - BIU Non- acute team Complete As above
10.	Tracer Conditions	As per Description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Primary/
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: <u>PCT Status Report</u>
Named contact for further information		John McCusker, Manager Non Acute BIU. Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Brian Murphy, National Care Group Lead, Tel: 091 775908, Email: Brian.Murphy@hse.ie

1.	KPI title	Consumption of antibiotics in community settings (defined daily doses per 1,000 inhabitants per day)
2.	Description	Consumption of antibiotics in ambulatory (non-hospital) settings
3.	Rationale	Community antibiotic use is strongly linked to antimicrobial resistance, which is a major public health threat.
4.	Target	NSP 2012 target is 21. The overall plan is to reduce overall annual community antibiotic consumption to less than 18 DID (i.e. a 20% reduction from the 2007 rate of 22.4 DID)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	Monthly rate reported as defined daily doses (DDD) per 1,000 population per day (DID) Numerator data: Aggregate data on wholesale supply of systemic antimicrobials to community pharmacies, purchased from IMS Health Inc. (Accounts for at least 95% of community antibiotic sales. Prescription level data not available) Denominator data: CSO census data Other data: Updated ATC coding and DDD definitions from World Health Organisation (WHO) (Changes to ATC coding and DDD definitions from WHO can impact on interpretation of results).
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Since March 2007 the Health Protection Surveillance Centre (HPSC) has been co-ordinating the publication of data relating to antimicrobial consumption for acute public hospitals in Ireland. 100% complete
10.	Tracer Conditions	Rates of penicillin and macrolide resistance among invasive strains of <i>Streptococcus pneumoniae</i> (EARS-Net data, via HPSC)
11.	Minimum Data Set	Quarterly data supply from IMS Health
12.	International Comparison	Uses WHO-approved methodology. Part of Europe-wide standardised surveillance programme (European Surveillance of Antimicrobial Consumption (ESAC) network). National data from all participating European countries available for comparison.
13.	Web link to data	www.hpsc.ie
14.	Additional Information	See www.hpsc.ie for Report on Consumption of Antibiotics in Public Acute Hospitals in Ireland Data to First Half of 2011.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> HealthStat <input checked="" type="checkbox"/> Other – give details: ESAC Annual Report
Named contact for further information		Dr. Kevin Kelleher, AND, Health Protection, Tel: 061 483347
Metric Sign off		Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 01 635 4025

Community (Demand-Led) Schemes – Medical & GP Visit Cards

1.	KPI Title	Number of persons covered by GP Visit Cards
2.	Description	<p>This refers to the net number of GP Visit Cards, after new GP Visit Cards have been issued and other GPVC, as appropriate have been deleted from the Executive's database.</p> <p>Based on an extract from Card & Patient Tables as at 1st of each month, records are retrieved where the type card is a medical card, with subtype being Doctor Visit. The card expiry date must be null or greater than 1st of the month chosen and the card or some details on the card must be active.</p>
3.	Rationale	To capture the number of persons with a GPVC on a given date. General Practitioner Visit Cards allow eligible clients and their families in Ireland to visit their family doctor for free. Only the costs of visits to the family doctor are free; prescribed drugs must be paid for. Clients with GP Visit Card can also apply for a Drugs Payment Scheme Card. All GP claims are processed and paid by the Primary Care Reimbursement Service.
4.	Target	204,482
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/GP_Visit_Cards/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Medical & GP Visit Cards

1.	KPI Title	Number of persons covered by discretionary GP Visit Cards
2.	Description	<p>This refers to the net number of Discretionary GP Visit Cards, after new Discretionary Cards have been issued and other Discretionary Cards, as appropriate, have been deleted from the Executive's database.</p> <p>Based on an extract from Card & Patient Tables as at 1st of each month, records are retrieved where the type card is a medical card, with subtype being Doctor Visit. The patient Category is between '908' & '916'. The card expiry date must be null or greater than 1st of the month chosen and the card or some details on the card must be active.</p>
3.	Rationale	General Practitioner Visit Cards allow eligible clients and their families in Ireland to visit their family doctor for free. Only the costs of visits to the family doctor are free; prescribed drugs must be paid for. Clients with GP Visit Card can also apply for a Drugs Payment Scheme Card. All GP claims are processed and paid by the Primary Care Reimbursement Service.
4.	Target	20,000
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/GP_Visit_Cards/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Medical & GP Visit Cards

1.	KPI Title	Number of persons covered by medical cards
2.	Description	Based on an extract from Card & Patient Tables as at 1st of each month, records are retrieved where the type card is a medical card, with type being medical card. The card expiry date must be null or greater than 1st of the month chosen and the card or some details on the card must be active.
3.	Rationale	Medical Cards allow people to access Family Doctor or GP services, community health services, dental services, hospital care and a range of other benefits free of charge. On the 1st of October the government introduced a charge of fifty cent per item dispensed by pharmacists under the Medical Card Scheme. Most people who get a Medical Card do so because their income is below a certain level. It is also possible to get a Medical Card if the costs of meeting your medical needs cause you undue financial hardship, or if you have entitlement under EU regulations. Drugs, medicines and appliances supplied under the Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement Service.
4.	Target	1,838,126
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web Link Data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/GP_Visit_Cards/
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Medical & GP Visit Cards

1.	KPI Title	Number of persons covered by discretionary medical cards
2.	Description	<p>This refers to the net number of Discretionary Medical Cards, after new discretionary cards have been issued and other discretionary cards, as appropriate, have been deleted from the Executive's database.</p> <p>Based on an extract from Card & Patient Tables as at 1st of each month, records are retrieved where the type card is a medical card, with type being medical card. The patient category is between '908' & '916'. The card expiry date must be null or greater than 1st of the month chosen and the card or some details on the card must be active.</p>
3.	Rationale	<p>Medical Cards allow people to access Family Doctor or GP services, community health services, dental services, hospital care and a range of other benefits free of charge. On the 1st of October the government introduced a charge of fifty cent per item dispensed by pharmacists under the Medical Card Scheme. Most people who get a Medical Card do so because their income is below a certain level. It is also possible to get a Medical Card if the costs of meeting your medical needs cause you undue financial hardship, or if you have entitlement under EU regulations. Drugs, medicines and appliances supplied under the Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement Service.</p>
4.	Target	85,000
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	Metric Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Date Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/Medical_Cards/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Long Term Illness

1.	KPI Title	Number of claims – Long Term Illness
2.	Description	Based on LTI database of paid claims and month/year specified, count all unique claim numbers (unique claim identifier) on the database for the particular month.
3.	Rationale	Clients with certain long-term illnesses or disabilities (Acute Leukaemia, Mental handicap, Cerebral Palsy, Mental Illness in a persons under 16, Cystic Fibrosis, Multiple Sclerosis, Diabetes Insipidus, Muscular Dystrophies, Diabetes Mellitus, Parkinsonism, Epilepsy, Phenylketonuria, Haemophilia, Spina Bifida, Hydrocephalus and conditions arising from the use of Thalidomide) may apply to join the Long Term Illness Scheme. Once approved by the HSE clients are supplied with a Long Term Illness book. This book allows the client to get drugs, medicines, and medical and surgical appliances directly related to the treatment of the illness, free of charge. It does not depend on a person's income or other circumstances and is separate from the Medical Card Scheme and the GP Visit Card Scheme. Clients with Medical Cards do not need to apply for a Long Term Illness book unless they become ineligible for a Medical Card at any stage and have one of the medical conditions listed above then they should apply to join the Long Term Illness scheme to cover the cost of their medication. All LTI claims are processed and paid by PCRS.
4.	Target	868,134
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	Metric Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/Long_Term_Illness/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Long Term Illness

1.	KPI Title	Number of items – Long Term Illness
2.	Description	Based on LTI database of paid claims and month/year specified, count all drug codes on the database for the particular month.
3.	Rationale	The number of items will facilitate monitoring of demand for prescription items by Long Term Illness Cardholders. The average ingredient cost will enable both the HSE and the Department to monitor the impact of initiatives to reduce the prices of medicines and non-drug items. Clients with certain long-term illnesses or disabilities (Acute Leukaemia, Mental handicap, Cerebral Palsy, Mental Illness in a persons under 16, Cystic Fibrosis, Multiple Sclerosis, Diabetes Insipidus, Muscular Dystrophies, Diabetes Mellitus, Parkinsonism, Epilepsy, Phenylketonuria, Haemophilia, Spina Bifida, Hydrocephalus and conditions arising from the use of Thalidomide) may apply to join the Long Term Illness Scheme. Once approved by the HSE clients are supplied with a Long Term Illness book. This book allows the client to get drugs, medicines, and medical and surgical appliances directly related to the treatment of the illness, free of charge. It does not depend on a person's income or other circumstances and is separate from the Medical Card Scheme and the GP Visit Card Scheme. Clients with Medical Cards do not need to apply for a Long Term Illness book unless they become ineligible for a Medical Card at any stage and have one of the medical conditions listed above then they should apply to join the Long Term Illness scheme to cover the cost of their medication. All LTI claims are processed and paid by PCRS.
4.	Target	3,222,601
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/Long_Term_Illness/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Drug Payment Scheme

1.	KPI Title	Number of claims – drug payment scheme
2.	Description	Based on DPS database of paid claims and month/year specified, count all unique claim numbers (unique claim identifier) on the database for the particular month.
3.	Rationale	Under the Drugs Payment Scheme, an individual or family in Ireland only has to pay €132 each month for approved prescribed drugs, medicines and certain appliances for use by that person or his or her family in that month. The amount is determined from time to time by the Minister for Health and Children. This scheme is aimed at those who don't have a Medical Card and normally have to pay the full cost of their medication. It also applies to those who have a GP Visit Card. Anyone ordinarily resident in Ireland can apply to join the scheme, regardless of family, financial circumstances or nationality. Eligible persons can avail of this Scheme by registering themselves and their dependants with their Local Health Office. Where people need to use two or more pharmacies in one month, they can claim back the amount paid over the threshold centrally from PCRS. Plans are being progressed to centralise the DPS registration process to PCRS with effect from April this year. All DPS claims will be processed and paid by PCRS.
4.	Target	3,384,895
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the Performance Report http://www.hse.ie/eng/services/Find_a_Service/entitlements/Drugs_Payment_Scheme/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Drug Payment Scheme

1.	KPI Title	Number of items – Drug payment scheme
2.	Description	Based on DPS database of paid claims and month/year specified, count all drug codes on the database for the particular month.
3.	Rationale	Under the Drugs Payment Scheme, an individual or family in Ireland only has to pay €132 each month for approved prescribed drugs, medicines and certain appliances for use by that person or his or her family in that month. The amount is determined from time to time by the Minister for Health and Children. This scheme is aimed at those who don't have a Medical Card and normally have to pay the full cost of their medication. It also applies to those who have a GP Visit Card. Anyone ordinarily resident in Ireland can apply to join the scheme, regardless of family, financial circumstances or nationality. Eligible persons can avail of this Scheme by registering themselves and their dependants with their Local Health Office. Where people need to use two or more pharmacies in one month, they can claim back the amount paid over the threshold centrally from PCRS. Plans are being progressed to centralise the DPS registration process to PCRS with effect from April this year. All DPS claims will be processed and paid by PCRS.
4.	Target	11,084,976
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the Performance Report http://www.hse.ie/eng/services/Find_a_Service/entitlements/Drugs_Payment_Scheme/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

1.	KPI Title	Number of prescriptions – GMS
2.	Description	Based on the GMS database of paid claims and month/year specified, count all unique claim numbers (unique claim identifier) on the database for the particular month.
3.	Rationale	Drugs, medicines and appliances supplied under the GMS Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement Service.
4.	Target	22,154,661
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the Performance Report http://www.hse.ie/eng/services/Find_a_Service/Mental_Health_Services/healthlines/GPs/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – GMS

1.	KRI Title	Number of items – GMS
2.	Description	Based on the GMS database of paid claims and month/year specified, count all claim numbers (unique claim identifier) on the database for the particular month. (For clarification: each item on a prescription has the same claim number associated with it).
3.	Rationale	Drugs, medicines and appliances supplied under the GMS Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement Service.
4.	Target	NSP 2012 expected activity: 61,589,957
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the Performance Report http://www.hse.ie/eng/services/Find_a_Service/Mental_Health_Services/healthlines/GPs/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – GMS

1.	KPI Title	Number of claims – special items of service GMS
2.	Description	Based on the Special Item of Service database of paid claims and month/year specified, count all unique claim numbers (unique claim identifier) on the database for the particular month.
3.	Rationale	Drugs, medicines and appliances supplied under the GMS Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement Service.
4.	Target	859,123
5.	KRI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KRI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KRI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the Performance Report http://www.hse.ie/eng/services/Find_a_Service/entitlements/Drugs_Payment_Scheme/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – GMS

1.	KPI Title	Number of claims – special type consultations
2.	Description	Based on the Special Type Consultations database of paid claims and month/year specified, where the STC type is EC resident, Emergency and Temporary resident, count all unique claim numbers (unique claim identifier) on the database for the particular month. Out of Hours, STC claims are reported separately.
3.	Rationale	Drugs, medicines and appliances supplied under the GMS Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement Service.
4.	Target	1,074,340
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the Performance Report http://www.hse.ie/eng/services/Find_a_Service/entitlements/Drugs_Payment_Scheme/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Hi-Tech

1.	KPI Title	Number of claims – Hi Tech Claims
2.	Description	Based on the High Tech database of paid claims and month/year specified, where the drug code relates to High Tech Medicines only, count all unique claim numbers (unique claim identifier) on the database for the particular month.
3.	Rationale	Arrangements are in place for the supply and dispensing of High Tech medicines through Community Pharmacies. Such medicines are generally only prescribed or initiated in hospital and would include items such as anti-rejection drugs for transplant patients or medicines used in conjunction with chemotherapy or growth hormones. These medicines are purchased by the HSE and supplied through Community Pharmacies for which Pharmacies are paid a patient care fee. The cost of the medicines and patient care fees are paid by the Primary Care Reimbursement Service.
4.	Target	430,305
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Mental_Health_Services/healthlines/GPs/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

1.	KPI Titles	Number of treatments (above the line) Number of treatments (below the line)
2.	Description	Above the line - Based on the ATL & Tooth Dental database of paid claims for the month/year specified, where the patients are medical card patients count all treatments on the database for the particular month/year Below the line - Based on the BTL Dental database of paid claims for the month/year specified, where the patients are medical card patients count all treatments on the database for the particular month/year.
3.	Rationale	This will allow us to monitor how many patients have availed of DTSS in a given month. Under the Dental Treatment Services Scheme GMS eligible adults have access to a range of treatments and clinical procedures comprised of routine treatments and full upper and lower dentures. Dentists may also prescribe a range of medicines to eligible persons. All DTSS claims are processed and paid by PCRS.
4.	Target	Above the line: 1,164,805 Below the line: 50,867
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Mental_Health_Services/healthlines/GPs/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – DTSS

1.	KRI Titles	Number of patients who have received treatment (above the line) Number of patients who have received treatment (below the line)
2.	Description	Above the line - Based on the ATL Dental database of paid claims for the month/year specified, where the patients are medical card holders count unique patient card details on the database for the particular month/year. Below the line – Based on the BTL Dental database of paid claims for the month/year specified, where the patients are medical card holders count unique patient card details on the database for the particular month/year.
3.	Rationale	This will allow us to monitor how many patients have availed of DTSS in a given month Under the Dental Treatment Services Scheme GMS eligible adults have access to a range of treatments and clinical procedures comprised of routine treatments and full upper and lower dentures. Dentists may also prescribe a range of medicines to eligible persons. All DTSS claims are processed and paid by PCRS.
4.	Target	To be reported 2012
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Mental_Health_Services/healthlines/GPs/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Community Ophthalmic Scheme

1.	KPI Title	Number of treatments: i) Adult ii) Children
2.	Description	Based on the Optical database of paid claims for the month/year specified, where the patients are medical card patients, count claim numbers (unique claim identified) on the database for the particular month. Adult – Based on the Optical database of paid claims for the month/year specified, where the patients are medical card patients and the patient indicator is 'A' (Adult), count claim numbers (unique claim identified) on the database for the particular month. Children - Based on the Optical database of paid claims for the month/year specified, where the patients are medical card patients and the patient indicator is 'C' (Child), count claim numbers (unique claim identified) on the database for the particular month.
3.	Rationale	Under the Health Service Executive Community Ophthalmic Services Scheme, adult medical card holders and their dependants are entitled, free of charge, to eye examinations and necessary spectacles/appliances. Claims by Optometrists/Ophthalmologists are paid by Primary Care Reimbursement Service. Claims for spectacles provided under the Children's Scheme are also paid by the Primary Care Reimbursement Service.
4.	Target	Adult: 677,007 Children: 62,572
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/Mental_Health_Services/healthlines/GPs/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – Medical Cards

1.	KPI Title	Percentage of Medical Cards process centrally which are issued within 15 working days of complete application.
2.	Description	This refers to the percentage of Medical Cards applications received by the HSE where Medical Cards are issued within 15 working days of receipt of a complete application in order to ascertain the efficiency of the application system.
3.	Rationale	To capture the percentage of Medical Cards issued within 15 working days of receipt by the HSE of a complete application.
4.	Target	15 Days
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	Data Lines	No. of complete applications received No. of Medical Cards issued within 15 days
	KPI Calculation	$\frac{\text{No. of medical cards issued within 15 days}}{\text{No. of complete applications received}} \times 100 =$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/Medical_Cards/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, PCRS, Tel: 01 864 7100

Community (Demand-Led) Schemes – Medical Cards

1.	KPI Title	Median time between date of complete application and issuing of Medical Card
2.	Description	<p>This refers to the mean time for the processing of complete Medical Card applications being received by the HSE and issuing of Medical Card.</p> <p>The median value is calculated by first ranking the individual length of stay values from lowest to highest and then choosing the middle value according to the ranks. In the case where there is an even number of cases the median is defined as being the average of the 2 middlemost values according to the ranks.</p>
3.	Rationale	To capture the mean time for the processing of complete medical card applications and issuing of medical card.
4.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
5.	Target	15 Days
6.	KRI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KRI Calculation	Count.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/Medical_Cards/
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Community (Demand-Led) Schemes – GP Visit Cards

1.	KPI Title	Percentage of GP Visit Cards process centrally which are issued within 15 working days of complete application
2.	Description	This refers to the percentage of GP Visit Card applications received by the HSE where Cards are issued within 15 working days of receipt of a complete application in order to ascertain the efficiency of the application system.
3.	Rationale	To capture the percentage of GP Visit Cards issued within 15 working days of receipt by the HSE of a complete application
4.	Target	Base line to be set 2012
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	Data Line	No. of complete applications received No. of GP Visit Cards issued within 15 days
	KPI Calculation	$\frac{\text{No. of GP Visit Cards issued within 15 days}}{\text{No. of complete applications received}} \times 100 =$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/Medical_Cards/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, PCRS, Tel: 01 864 7100

Community (Demand-Led) Schemes – GP Visit Cards

1.	KPI Title	Median time between date of complete application and issuing of GP Visit Card
2.	Description	This refers to the mean time for the processing of complete GPVC applications being received by the HSE and issuing of GPVC.
3.	Rationale	To capture the mean time for the processing of complete GPVC applications and the issuing of GPVC.
4.	Target	15Days
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: - Monthly if possible
7.	KPI Calculation	Count.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database
10.	Tracer (Conditions) Terms	Yes
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	http://www.hse.ie/eng/services/Find_a_Service/entitlements/GP_Visit_Cards/
15.	Metric is a reporting requirement in which reports	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Patrick Burke, Assistant National Director, PCRS, Tel: 01 8647115

Hospital Services

1.	KPI title	Percentage of all new medical patients attending the acute medical unit (AMU) who spend less than 6 hours from ED registration to AMU departure
2.	Description	Total medical assessment time (TMAT) is measured from the time of arrival of a medical patient in the ED to the time of medical assessment unit departure time. The measures are the percentage of all new medical patients attending the AMU * with who are admitted or discharged within 6 hours, and within 9 hours. The mean and upper and lower 95 th centiles should be presented.
3.	Rationale	<ul style="list-style-type: none"> a) A 6 hour target for patients to be assessed in AMU* is a performance indicator for the Acute Medicine Programme. b) TMAT includes both productive clinical times and delays. This indicator aims to reduce the delays and outcome without compromising quality of care. c) Long durations of stay in all types of Assessment Units are associated with poorer patient outcomes. d) A major objective of the Acute Medicine Programme is to increase the efficiency of patient assessment and to stream patients to the most appropriate destination for further care which is either admission to a short stay unit, specialist ward or discharged home with or without out patient review. e) This indicator sets an upper limit for the duration of Assessment Unit care. However a small minority of patients may require more than 6 hours due to the complexity of their presenting problems, this is why a 95% compliance target has been set.
4.	Target	NSP Target – 95% 95% of all AMU attendances to spend less than 6 hours, and all patients less than 9 hours in their patient journey from ED registration to AMU departure.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	Numerator – All new patients attending an AMU* who are admitted to a ward or discharged from the AMU in less than 6 hours from their arrival time in ED. (or arrival in AMU if they are directly referred to AMU and do not go via ED) Denominator – All new patients attending an AMU* A similar calculation for 9 hours. The figures to be expressed as a percentage within 6 hours, 9 hours with 95% confidence intervals.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	ED/AMU system
10.	Tracer Conditions	All patients referred to an AMU*.
11.	Minimum Data Set	Medical Assessment Unit Identifier/ID of hospital Patient Hospital Medical Record Number Unique Health Identifier (not yet available) Patient attendance – new and unscheduled returns Date and Time patient registered in ED Date and Time patient discharged from AMU (AMU departure time)

12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance-reports/2012-pr.html
14.	Additional Information	This template outlines the total AMU medical patient patient experience time, for the NSP. Additional templates for time points sub measures will be developed for AMP monitoring.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie Dr. Garry Courtney, Dr. Shane O Neill, Dr. Orlaith O Reilly
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

1.	KPI title	Medical patient average length of stay
2.	Description	<p>The mean length of stay for patients admitted to the following medical specialties; *</p> <p>0100 Cardiology 0300 Dermatology 0400 Endocrinology 0402 Diabetes Mellitus 0700 Gastro-Enterology 0800 Genito-Urinary Medicine 0900 Geriatric Medicine 1100 Haematology 1102 Transfusion Medicine 1300 Neurology 1600 Oncology 2300 Nephrology 2400 Respiratory Medicine 2500 Rheumatology 2700 Infectious Diseases 2702 Tropical Infectious Diseases 3000 Rehabilitation Medicine 3002 Spinal paralysis 5000 General Medicine 6700 Clinical (medical) Genetics 7300 Palliative Medicine 7700 Metabolic Medicine 7900 Clinical Immunology</p>
3.	Rationale	<p>Overall length of stay is a useful indicator for the efficiency of hospital performance, and the improvements in efficiencies which will be delivered by the implementation of the Acute Medicine Programme. Length of stays for patients of medical specialties tend to be longer than other specialties and subsequent bed day usage of hospital bed stock tends to be greater. Therefore the monitoring of AvLOS in medical patients is important and the overall figure is useful as a summary measure at national level. More detailed monitoring of sub groups of AvLOS will be done through the Acute Medicine Programme.</p>
4.	Target	<p>NSP 2012 Target – 5.8 The national target AvLOS for medical patients is 5.8 days.</p>
5.	KPI Collection Frequency	<p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:</p>
6.	KPI Reporting Frequency	<p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually</p>
7.	KPI Calculation	<p>Number of bed days used for medical in patients divided by number of medical discharges including same day discharges.</p>
8.	Reporting Aggregation	<p><input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:</p>
9.	Data Sources Data Completeness Data Quality Issues	HIPE
10.	Tracer Conditions	<p>Discharges from medical specialties * (Cardiology, Dermatology, Endocrinology, Gastro-Enterology, Genito-Urinary Medicine, Geriatric Medicine, Haematology, Neurology, Oncology, Nephrology, Respiratory Medicine, Rheumatology, Infectious Diseases, General Medicine, Palliative Medicine, Rehabilitation Medicine, Clinical Medical Genetics, Metabolic Medicine, and Clinical immunology)</p>

Hospital Services: Clinical Programmes – Acute Medicine

11.	Minimum Data Set	Total number of medical* discharges, these include AMU same day discharges which are given an LOS= 0. Total number of bed days used for medical in patient discharges
12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	The overall length of stay KPI is to be reported in the National Service Plan additional sub groupings of lengths of stay templates will be developed for reporting on AMP performance.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie Dr. Orlaith O Reilly, Dr. Garry Courtney, Dr. Shane O Neill
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

1.	KPI title	Percentage of all patients arriving by ambulance wait <20mins for handover to doctor /nurse												
2.	Description	<p>% of all patients who arrive by ambulance and wait <20 minutes for handover to an ED nurse or doctor.</p> <p>Ambulance Patient Handover Time in ED (APHT) is measured from the time the ambulance arrives at the ED to the time patient handover occurs from the ambulance crew to nursing or medical staff in the ED. Patient transferred from an ambulance stretcher to an ED trolley must occur at the time of clinical handover.</p>												
3.	Rationale	<p>a. Delays handing over patients at EDs are a measure of inadequate access to ED accommodation and may be an indirect measure of access to in-patient beds.</p> <p>b. Delays to ED treatment are associated with poorer clinical outcomes for patients</p> <p>c. Delays cause discomfort to patients.</p> <p>d. Delays for ambulances at EDs mean the vehicles and crew are operationally unavailable. Increased ambulance response times result, causing increased clinical risk to patients in the community who need ambulances.</p> <p>e. Delays for ambulances at EDs wastes healthcare resources</p> <p>f. Experience in other countries points to ambulances being delayed to delay the start of measures of total time in the ED. This would be unacceptable and must be prevented through the combined introduction of AHT and total time in the ED performance indicators.</p> <p>g. The ambulance crew should be able to leave the patient in the ED once the handover has occurred.</p>												
4.	Target	NSP 2012 Target – 95% Target 95% of all patients to wait < 20 minutes												
5.	KPI Collection Frequency	<input checked="" type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Daily for 24 hours from midnight												
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually For 28 day periods commencing from national implementation date												
7.	KPI Calculation	<table border="1"> <tr> <td>Numerator</td> <td>All ED patients who arrive by ambulance and undergo handover in < 20 minutes.</td> </tr> <tr> <td>Denominator</td> <td>All ED patients who arrive by ambulance</td> </tr> <tr> <td>Inclusion criteria</td> <td>All patients arriving by ambulance at an Emergency Care Network facility (i.e. EDs or Local Injury Unit). Some Local Injury Units may not accept ambulances and will be excluded from this indicator. Inter-ED transfers will be included in this indicator.</td> </tr> <tr> <td>Exclusion criteria</td> <td>Patients who do not arrive by ambulance.</td> </tr> <tr> <td>Data report presentation</td> <td>Percentage proportion of ambulance arrivals handed over within 20 minutes.</td> </tr> <tr> <td>For data definitions see EMP Report 2011 document.</td> <td></td> </tr> </table>	Numerator	All ED patients who arrive by ambulance and undergo handover in < 20 minutes.	Denominator	All ED patients who arrive by ambulance	Inclusion criteria	All patients arriving by ambulance at an Emergency Care Network facility (i.e. EDs or Local Injury Unit). Some Local Injury Units may not accept ambulances and will be excluded from this indicator. Inter-ED transfers will be included in this indicator.	Exclusion criteria	Patients who do not arrive by ambulance.	Data report presentation	Percentage proportion of ambulance arrivals handed over within 20 minutes.	For data definitions see EMP Report 2011 document.	
Numerator	All ED patients who arrive by ambulance and undergo handover in < 20 minutes.													
Denominator	All ED patients who arrive by ambulance													
Inclusion criteria	All patients arriving by ambulance at an Emergency Care Network facility (i.e. EDs or Local Injury Unit). Some Local Injury Units may not accept ambulances and will be excluded from this indicator. Inter-ED transfers will be included in this indicator.													
Exclusion criteria	Patients who do not arrive by ambulance.													
Data report presentation	Percentage proportion of ambulance arrivals handed over within 20 minutes.													
For data definitions see EMP Report 2011 document.														
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: Emergency Care Network Governance Meeting.												
9.	Data Sources Data Completeness Data Quality Issues	The Ambulance Service will record the time of ambulance arrival. Clinical handover and patient transfer to a hospital trolley should occur concurrently. The time this occurs should be documented on the Pre-hospital Care Report by the nurse or doctor who accepts the patient. A copy of the Pre-hospital Care Report forms part of the patient's ED record. The time of patient handover (off trolley) will be manually recorded until such time that electronic means are developed to enable this. Ambulance arrival time will need to be entered retrospectively in the ED PAS and included in the EMP Minimum Dataset. The time of handover is the time of triage for ambulance patients. The interval between ambulance arrival and patient handover is the Ambulance Patient Handover Time (APHT).												

1.	KPI title	Percentage of new ED patients who leave before completion of treatment								
2.	Description	Patients who register but leave an ED or other emergency care unit before discharge by a clinician. This includes patients who leave against medical advice and those who leave after registration or triage but before they have been seen by a clinician.								
3.	Rationale	<p>a. Patients who leave the ED before being fully assessed, treated and formally discharged by a clinician may experience adverse clinical outcomes.</p> <p>b. More patients are likely to leave without assessment if there are prolonged ED waiting times. This is therefore a measure of patient access to care and a quality of care indicator.</p> <p>c. There is evidence to indicate that patient factors and hospital characteristics influence LBCT rates and that a proportion of these patients need subsequent urgent treatment ⁽¹⁾.</p> <p>d. This measure includes patients who leave against medical advice, between registration and triage or after triage but before a clinician has completed their treatment.</p> <p>e. The right of a competent patient to leave against medical advice (AMA) is recognised, but this patient cohort is included in the measure as high rates of patients leaving against medical advice may point to poor “customer service” in the ED or other community factors requiring health service intervention. Patient compliance with treatment is a factor in this measure.</p> <p>f. Review of data at departmental level may point to individual patients who habitually attend but do not wait. These patients may need additional health or social care support and all EDs should have processes in place to identify such patients and organise appropriate care for them.</p>								
4.	Target	NSP 2012 Target - < 5% of new patient attendances								
5.	KPI Collection Frequency	<input checked="" type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Daily i.e. for 24 hours from midnight								
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually For 28-day periods commencing on national implementation start date.								
7.	KPI Calculation	<table border="1"> <tr> <td>Numerator</td> <td>The number of patients who have left an emergency care unit before formal discharge by a clinician.</td> </tr> <tr> <td>Denominator</td> <td>All new ED patients and unscheduled return patients.</td> </tr> <tr> <td>Inclusion criteria</td> <td>All new ED patients and unscheduled return patients</td> </tr> <tr> <td>Exclusion criteria</td> <td>Scheduled return patients</td> </tr> </table>	Numerator	The number of patients who have left an emergency care unit before formal discharge by a clinician.	Denominator	All new ED patients and unscheduled return patients.	Inclusion criteria	All new ED patients and unscheduled return patients	Exclusion criteria	Scheduled return patients
Numerator	The number of patients who have left an emergency care unit before formal discharge by a clinician.									
Denominator	All new ED patients and unscheduled return patients.									
Inclusion criteria	All new ED patients and unscheduled return patients									
Exclusion criteria	Scheduled return patients									
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Emergency Care Network Governance Meeting								
9.	Data Sources Data Completeness Data Quality Issues	Administrative data PAS for unit (some EDs do not currently have PAS systems which record this data – for further work)								
10.	Tracer Conditions	A patient who registers but leaves the ED before discharge by a clinician. It includes patients who leave against medical advice or before being seen by a treating clinician (e.g. doctor or advanced nurse practitioner).								

11.	Minimum Data Set	<table border="1"> <tr> <td data-bbox="534 235 1029 302">Emergency Care Unit Identifier</td> <td data-bbox="1029 235 1452 302">ID of hospital (to be confirmed or included in EMP dataset)</td> </tr> <tr> <td data-bbox="534 302 1029 331">Local service-user identifier</td> <td data-bbox="1029 302 1452 331"></td> </tr> <tr> <td data-bbox="534 331 1029 392">UHI</td> <td data-bbox="1029 331 1452 392">Unique Health Identifier (not yet applicable)</td> </tr> <tr> <td data-bbox="534 392 1029 421">New patient attendance</td> <td data-bbox="1029 392 1452 421">Data set identifier</td> </tr> <tr> <td data-bbox="534 421 1029 450">Unscheduled patient attendance</td> <td data-bbox="1029 421 1452 450"></td> </tr> <tr> <td data-bbox="534 450 1029 479">Date patient presents</td> <td data-bbox="1029 450 1452 479"></td> </tr> <tr> <td data-bbox="534 479 1029 508">Time patient presents</td> <td data-bbox="1029 479 1452 508">Arrival Time</td> </tr> <tr> <td data-bbox="534 508 1029 537">Discharge disposition</td> <td data-bbox="1029 508 1452 537">Confirm in data set – AMA, LBCT</td> </tr> <tr> <td data-bbox="534 537 1029 566">ID of EM clinician who discharged patient</td> <td data-bbox="1029 537 1452 566">Code for LBCT</td> </tr> </table>	Emergency Care Unit Identifier	ID of hospital (to be confirmed or included in EMP dataset)	Local service-user identifier		UHI	Unique Health Identifier (not yet applicable)	New patient attendance	Data set identifier	Unscheduled patient attendance		Date patient presents		Time patient presents	Arrival Time	Discharge disposition	Confirm in data set – AMA, LBCT	ID of EM clinician who discharged patient	Code for LBCT
Emergency Care Unit Identifier	ID of hospital (to be confirmed or included in EMP dataset)																			
Local service-user identifier																				
UHI	Unique Health Identifier (not yet applicable)																			
New patient attendance	Data set identifier																			
Unscheduled patient attendance																				
Date patient presents																				
Time patient presents	Arrival Time																			
Discharge disposition	Confirm in data set – AMA, LBCT																			
ID of EM clinician who discharged patient	Code for LBCT																			
12.	International Comparison	<p>National rates in the US are quoted as 1.7 per 100 visits each year but with marked inter-site variation (0.84% to 15%).⁽¹⁾</p> <p>A rate of 3.6% is reported for the UK, with a range of 0-22% between EDs. A rate of 5% has been recommended in the UK but this excludes patients who have been seen by a decision maker and leave afterwards.⁽²⁾ The current UK target that is comparable to Total ED Time is for 95% compliance at 4 hours. The LBCT KPI for Ireland includes patients who leave after being seen by a clinician and a longer TEDT; a target of 5% will be more difficult to achieve.</p> <p>1. Acad Em Med 2009;16:949-955; Acad Em Med 2006;13:1074-1080. A&E Clinical Quality Indicators. Department of Health 17th December 2010. Available at http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_122868. Accessed 13th January 2011.</p>																		
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html																		
14.	Additional Information	EDIS implementation will increase the quality and amount of data available.																		
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:																		
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 Derek.mccormack@hse.ie																		
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232																		

1.	KPI title	Percentage of patients spending less than 24 hours in Clinical Decision Unit
2.	Description	The Clinical Decision Unit (CDU) length of stay is measured from the time of CDU Admission to the time of CDU departure.
3.	Rationale	<p>CDU care is based on focussed, evidence based patient assessment, delivered within a limited time-frame by Consultants in EM. It requires timely access to CDU beds for patients requiring this service.</p> <p>The CDU length of stay target aims to protect access to CDU beds by monitoring patient length of stay and identifying patients who experience prolonged duration of CDU admission.</p> <p>Prolonged CDU admission may be indicative of inappropriate CDU referral or poor access to other services including in-patient admission under the care of other specialist teams or transfer to another hospital setting.</p>
4.	Target	NSP 2012 Target – 95% 95% of patients to stay in CDU for less than 24 hours
5.	KPI Collection Frequency	<input checked="" type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	Number of patients admitted from ED or discharged from ED within 6 hours of registration *100/Total number of patients in ED
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Percentage acute stroke patients who spend all or some of their hospital stay in an acute or combined stroke unit.
2.	Description	Care of patients with acute stroke in an acute, combined (acute and rehabilitation) or rehabilitation stroke unit with sufficient beds to admit all cases requiring acute care or rehabilitation
3.	Rationale	To monitor development of acute and rehabilitation stroke services in accordance with the national stroke programme (national policy and national guidelines) To assess patient access to acute stroke unit care
4.	Target	NSP 2012 Target – 50% Target (Phase 1): At least 50% of patients with a principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63); Intracerebral Haemorrhage (ICD I61); Subarachnoid Haemorrhage (ICD I60) gain access to stroke unit care
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Continuous
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually (June and December - covering 1 st and 3 rd Quarters)
7.	KPI Calculation	Numerator = Number of patients with principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63); Intracerebral Haemorrhage (ICD I61); Subarachnoid Haemorrhage (ICD I60) for whom a YES response was made to Dataset No. 9/Admitted to stroke unit? Denominator = Number of patients with principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63); Intracerebral Haemorrhage (ICD I61); Subarachnoid Haemorrhage (ICD I60)] for whom a YES + NO +Unknown response was made to Dataset No. 9/Admitted to stroke unit?
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Data for Performance Measure 1 will be collected through the HIPE Portal/Stroke Register (where it is implemented) or in a paper version of same using HIPE data and local stroke registers.
10.	Tracer Conditions	
11.	Minimum Data Set	HIPE Portal Data Set (Version 14 July 28 th 2011)
12.	International Comparison	Royal College of Physicians UK National Sentinel Stroke Clinical Audit 2010 Round 7 https://audit.replondon.ac.uk/SentinelStroke/page/page.aspx?pc=welcme Safe Implementation of Treatments in Stroke (SITS) RIKS STROE 2010
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Percentage of patients with confirmed acute ischaemic stroke in whom thrombolysis is not contraindicated who receive thrombolysis.
2.	Description	Care of patients with acute stroke in an acute, combined (acute and rehabilitation) or rehabilitation stroke unit with sufficient beds to admit all cases requiring acute care or rehabilitation.
3.	Rationale	To monitor development of acute and rehabilitation stroke services in accordance with the national stroke programme (national policy and national guidelines) To assess patient access to acute stroke care.
4.	Target	NSP 2012 Target – At least 7.5% At least 7.5% of eligible patients with a principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63) should receive thrombolysis.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Continuous
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually (June and December - covering 1 st and 3 rd Quarters)
7.	KPI Calculation	Definitions: Numerator = Number of patients with principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63) for whom a YES response was made to Dataset No. 8/Treated with Thrombolysis? Denominator = Number of patients with principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63) for whom a YES and NO response was made to Dataset No. 8/Treated with Thrombolysis?
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Data for Performance Measure 3 will be collected through the HIPE Portal/Stroke Register (where it is implemented) or in a paper version of same using HIPE data and local stroke registers.
10.	Tracer Conditions	
11.	Minimum Data Set	HIPE Portal Data Set (Version 14 July 28 th 2011)
12.	International Comparison	Royal College of Physicians UK National Sentinel Stroke Clinical Audit 2010 Round 7 https://audit.rcplondon.ac.uk/SentinelStroke/page/page.aspx?pc=welcom SITS RIKS STROKE 2010
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Percentage of hospital stay for acute stroke patients in stroke unit who are admitted to an acute or combined stroke unit.
2.	Description	Care of patients with acute stroke in an acute, combined (acute and rehabilitation) or rehabilitation stroke unit with sufficient beds to admit all cases requiring acute care or rehabilitation
3.	Rationale	To monitor development of acute and rehabilitation stroke services in accordance with the national stroke programme (national policy and national guidelines) To assess patient access to acute stroke unit care
4.	Target	NSP 2012 Target – 50% Target (Phase 1): Patients with a principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63); Intracerebral Haemorrhage (ICD I61); Subarachnoid Haemorrhage (ICD I60) should spend at least 50% of their hospital stay in the stroke unit
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Continuous
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually (June and December - covering 1 st and 3 rd Quarters)
7.	KPI Calculation	Numerator = Number of stroke unit bed days of patients with principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63); Intracerebral Haemorrhage (ICD I61); Subarachnoid Haemorrhage (ICD I60) for whom a YES response was made to Dataset No. 9/Admitted to stroke unit? Denominator = Number total number of hospital bed days of patients with principal diagnosis of Cerebral Infarction (Ischaemic Stroke) (ICD I63); Intracerebral Haemorrhage (ICD I61); Subarachnoid Haemorrhage (ICD I60) for whom a YES response was made to Dataset No. 9/Admitted to stroke unit?
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Data for Performance Measure 2 will be collected through the HIPE Portal/Stroke Register (where it is implemented) or in a paper version of same using HIPE data and local stroke registers.
10.	Tracer Conditions	
11.	Minimum Data Set	HIPE Portal Data Set (Version 14 July 28 th 2011)
12.	International Comparison	Royal College of Physicians UK National Sentinel Stroke Clinical Audit 2010 Round 7 https://audit.rcplondon.ac.uk/SentinelStroke/page/page.aspx?pc=welcome
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Rate (%) readmission for heart failure within 3 months following discharge from hospital
2.	Description	Rate of readmission for heart failure within 3 months following discharge from hospital
3.	Rationale	Patients are at highest risk of readmission to hospital within 90 days of discharge. International evidence shows that structured programmes for heart failure can greatly reduce the readmission rate and this is accepted as an excellent measure of quality of hospital care for heart failure.
4.	Target	NSP 2012 Target – 27% Readmission rate of 27% by end 2012 Readmission rate <20% by end 2014
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually
7.	KPI Calculation	% of patients admitted with heart failure who are readmitted as emergency admission with heart failure within 90 days of discharge. Denominator: all patients admitted with principal diagnosis of acute decompensated heart failure (ICD 10 AM codes will be used – I50, I420, I426, I427, I429, I110)
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HIPE Portal
10.	Tracer Conditions	
11.	Minimum Data Set	Minimum dataset collected via HIPE Portal on all patients admitted with acute decompensated heart failure. Data collected at two time points – time of discharge and at 3-month follow up out-patient visit.
12.	International Comparison	Readmission indicator used in a number of countries
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Median (LOS) and bed days for patients admitted with principal diagnosis of acute decompensated heart failure.
2.	Description	Median length of stay and bed days for patients admitted to hospital with principal diagnosis of acute decompensated heart failure
3.	Rationale	Structured heart failure programmes should provide quicker access to specialist heart failure services resulting in quicker stabilisation and shorter time to discharge. Median LOS is preferred to mean LOS because of significant numbers of delayed discharges for non-medical reasons.
4.	Target	NSP 2012 Target – 7 days 7 days by end of 2012. 6 days by end 2014.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually
7.	KPI Calculation	Median length of stay for all patients discharged with principal diagnosis of heart failure (ICD 10 AM codes will be used – I50, I420, I426, I427, I429, I110)
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HIPE
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	Length of stay data available from only a few countries.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Percentage of patients with acute decompensated heart failure who are seen by the HF programme during their hospital stay.
2.	Description	The percentage of patients with acute decompensated heart failure who are seen by the heart failure programme during their hospital stay.
3.	Rationale	In order to achieve the planned benefits of the heart failure programme it is necessary that patients are seen by the heart failure programme and assessed by the lead consultant or his/her designate.
4.	Target	NSP 2012 Target – 65% 65% of patients admitted with heart failure are seen by heart failure programme by 2012. 80% of patients admitted with heart failure are seen by heart failure programme by 2014
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually
7.	KPI Calculation	% of patients admitted with heart failure who are seen by the heart failure lead consultant or designated physician. Denominator: all patients admitted with principal diagnosis of acute decompensated heart failure as recorded by HIPE (ICD 10 AM codes will be used – I50, I420, I426, I427, I429, I110) Numerator: number of patients seen by HF lead consultant or designate as reported through heart failure data set.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HIPE and HIPE Portal
10.	Tracer Conditions	
11.	Minimum Data Set	Minimum dataset collected via HIPE Portal on all patients admitted with acute decompensated heart failure. Data collected at two time points – time of discharge and at 3-month follow up out-patient visit.
12.	International Comparison	Not available
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

Hospital Services: Clinical Programmes – Acute Coronary Syndrome

1.	KPI title	Percentage of STEMI patients (without contraindication to Reperfusion therapy) who get PPCI
2.	Description	Type of Reperfusion therapy for STEMI (Heart attack)
3.	Rationale	International evidence supports PPCI at a Cath lab centre with good throughput if achievable within the a travel time of 120 mins. Current treatment is mainly rapid thrombolysis at local hospital (TL). Some patients will be contraindicated to treatment.
4.	Target	NSP 2012 Target – 50% 80% of STEMIs in Ireland to get PPCI as form of RT when programme is up and running fully
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: regular collection with treatment of Pt
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually
7.	KPI Calculation	Numerator: No of STEMI pts who got PPCI. Denominator: Total no of STEMI patients minus those contraindicated
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: out of hours (in hours = 9-5 Monday to Fri)
9.	Data Sources Data Completeness Data Quality Issues	Data is currently collected in 20 hosps (Heartbeat). HIPE Portal will be the new electronic data collection from Jan 2012 Heartbeat (Bulletin 19)
10.	Tracer Conditions	NA
11.	Minimum Data Set	Detail is set out and currently being modified in Heartbeat → HIPE Portal
12.	International Comparison	MINAP data (UK)
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

Hospital Services: Clinical Programmes – Acute Coronary Syndrome

1.	KPI title	Percentage reperfused STEMI patients(or LBBB) who get timely a) PPCI or b) Thrombolysis
2.	Description	The % STEMI patients (or LBBB) who get timely a) PPCI or b) Thrombolysis
3.	Rationale	International evidence supports swift restoration of blood flow to blocked coronary artery as a medical emergency. Current treatment is mainly rapid thrombolysis at local hospital (TL) but newest form of treatment is emergency primary angioplasty (PPCI) at Centre.
4.	Target	NSP 2012 Target – 70% 90% achieving timely RT as defined in No 2 above
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Routine collection
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually
7.	KPI Calculation	a) Timely PPCI Numerator: no of STEMI pts receiving RT who got timely PPCI as defined FMC to balloon <= 120 mins OR First door to balloon <= 120 mins Denominator : Total no of STEMI patients (or LBBB) who got PPCI b) Timely thrombolysis Numerator: no of STEMI pts receiving RT who got timely thrombolysis as defined: Door to needle <= 30 mins Denominator : Total no of STEMI patients (or LBBB) who got thrombolysis
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Data is currently collected in 20 hosps (Heartbeat). HIPE Portal will be the new electronic data collection from Jan 2012 HEARTBEAT
10.	Tracer Conditions	NA
11.	Minimum Data Set	Detail is set out and currently being modified in Heartbeat → HIPE Portal
12.	International Comparison	MINAP, IHI
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Median LOS and bed days for a) STEMI and b) Non-STEMI patients
2.	Description	The median LOS and bed days for a) STEMI and b) NonSTEMI patients
3.	Rationale	For STEMI the change in treatment from thrombolysis to primary angioplasty will result in a reduction in LOS of ~1 day when the programme is fully up and running. For NSTEMI early angiography is now indicated to inform treatment. It has the added advantage of improving LOS considerably. Initial goal is reduction of 1 day but is likely to be greater once the programme is fully operational.
4.	Target	NSP 2012 Target – 4 (STEMI) NSP 2012 Target – 6.5 (Non STEMI) a) Median LOS for STEMI 2009 HIPE data IRELAND = 5, DML = 4, DNE = 5, South = 4, West=5. Target Ireland and all regions with LOS= 4 b) Median LOS for NSTEMI 2009 HIPE data IRELAND = 6, DML = 5, DNE = 7, South = 5, West = 6.5 Target Ireland & all regions with LOS=5.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually
7.	KPI Calculation	Usual calculation for median with ranking and calculation of midpoint
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HIPE but a) awareness needed that it is not possible to link patient data (until there is unique pt identifier) b) HIPE can be behind. In Aug 2011 HIPE available for 2010 HIPE for 2010
10.	Tracer Conditions	STEMI = ICD 10 I21.0 – I21.3, NSTEMI = ICD 10 I21.4, I21.9,
11.	Minimum Data Set	Date of admission, date of discharge, ICD codes
12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As patients are transferred for investigation and treatment from local hospital to PPCI centre and back the true LOS can only be calculated with the use of a patient identifier. This is likely to need approval of Data Commissioner
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

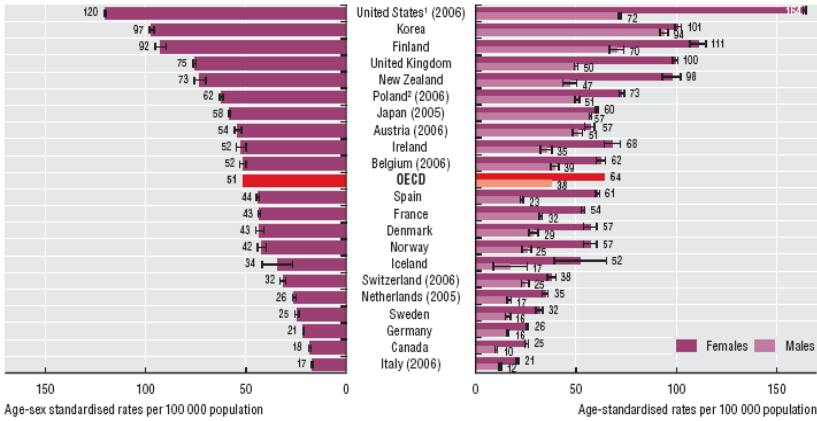
1.	KPI title	Mean and Median LOS (and bed days) for patients with COPD
2.	Description	Mean and Median Acute hospital stay – excluding day cases – as recorded on HIPE of patients aged 35+years with primary diagnosis J40*-J47*
3.	Rationale	Appropriate care in appropriate setting. Current wide variation between hospitals (2010 HIPE data: mean: 9.1 days: range 5-17 2010 HIPE data: median: 6 days: range 2-8)
4.	Target	NSP 2012 Target – 1 day reduction in AVLOS in sites with COPD outreach by end 2012 Sites with COPD outreach: 1 day reduction in AVLOS from baseline by end 2012 Mean of 8 days by end of 2014 Median of 5 days by end of 2014
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: ongoing on HIPE
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	Mean: Numerator: LOS (BDU for those with Primary Dx of COPD)x100 in period Denominator: total number of discharges for those with that Diagnosis in same period Median LOS of 50% of patients with Primary Dx of COPD
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: individual hospitals have this on ongoing basis
9.	Data Sources Data Completeness Data Quality Issues	HIPE
10.	Tracer Conditions	Aged 35+yrs, ICD-10 codes:J40*-J47*
11.	Minimum Data Set	HIPE: hospital name Age + 35 Admission type Non day primary Diagnosis J40* - J47* ICD-10 codes Number mean Events/discharges Median Length of stay Total
12.	International Comparison	Comparison with UK
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	Median LOS is more accurate especially for chronic conditions due to asymmetric distribution
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Percentage re-admission to same acute hospitals of patients with COPD within 90 days
2.	Description	Re-admission to same hospital – excluding day cases – as recorded on HIPE of patients aged 35+years with primary or secondary diagnosis J40*-j47* within 90 days of discharge
3.	Rationale	Appropriate care in appropriate setting. Rest of sentence deleted
4.	Target	NSP 2012 Target – Reduce rate by 15% in hospitals with COPD outreach progs: all other acute hospitals with AMU/AMAU by 5% By end of 2012, all acute hospitals with COPD outreach prg to have reduced 90 day re-adm rate by 15% and All other acute hospitals with AMU/AMAU to have reduced 90 day re-adm rate by 5%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: HIPE Each hospital site can supply this detail.
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	number of patients with primary or secondary Dx of J40-47 aged 35+yrs adm once in 90 day period as inpts vs number of patients with primary or secondary Dx of J40-47 aged 35+yrs adm as inpatients on more than one occasion in same time period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Hospital Site / HIPE
10.	Tracer Conditions	Aged 35+yrs, ICD-10 codes:J40*-J47*
11.	Minimum Data Set	HIPE: hospital name Age + 35 Admission type Non day primary Diagnosis J40* - J47* ICD-10 codes Number mean Events/discharges Median Length of stay Total
12.	International Comparison	UK – NHS
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

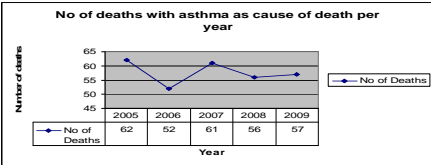
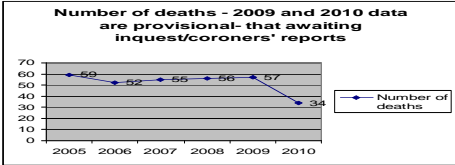
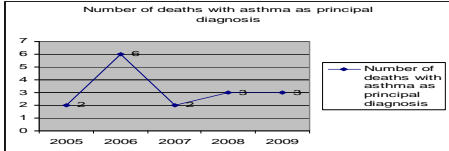
1.	KPI title	Number of acute hospitals with COPD outreach programme
2.	Description	The number of acute hospitals with COPD Early supported discharge programme, by a COPD Outreach service, for specified patients with uncomplicated AECOPD within 72 hrs of presentation that would otherwise require acute in-patient care
3.	Rationale	Appropriate care in appropriate setting See model of care
4.	Target	NSP 2012 Target – 15 programmes 15 programmes – end of 2012: By 2014, service in place in 80% of acute hospitals which see and admit patients with COPD (acute hospitals with ED, AMU/MAU/AMAU)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: ongoing
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually
7.	KPI Calculation	Numerator: number of acute hospitals (with ED/AMAU/MAU) which see and admit patients with COPD with COPD Outreach programme Denominator: total number of acute hospitals (with ED/MAU) which see and admit patients with COPD
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources	Hospital Managers/RDOs
10.	Tracer Conditions	
11.	Minimum Data Set	Hospitals by name/type
12.	International Comparison	British Thoracic Society
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Percentage of acute hospitals and Operational Areas with access to Pulmonary Rehabilitation Programme
2.	Description	Multidisciplinary PRP based on international best practice in terms of content and duration in place for all acute hospitals and LHO areas for people with COPD. See Model of care
3.	Rationale	Evidence of improved quality of life for patients
4.	Target	NSP 2012 Target – 25% By end of 2012, 25% of acute hospitals and LHOs to have access to Pulmonary Rehabilitation programme By end of 2014, 100% of acute hospitals and LHOs have access to a Pulmonary Rehabilitation Programme
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually
7.	KPI Calculation	Numerator: number of acute hospitals (with ED/MAU) and number of LHOs which can access PRP Denominator: total number of acute hospitals (with ED/MAU) and LHOs
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specific question - Hospital Managers/LHO/RDOs/ ISA Managers
10.	Tracer Conditions	
11.	Minimum Data Set	Hospitals Name/Type LHOs Name
12.	International Comparison	GOLD
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Percentage of nurses in primary and secondary care who are trained by national asthma programme
2.	Description	% nurses in primary and secondary care who are trained by national asthma programme The first phase of National Asthma Training Programme is targeting: <ul style="list-style-type: none"> • primary care nurses in PCTs, OOH services and GP practices; • secondary care nurses in ED departments and AMAUs. • Training is as defined by the asthma programme
3.	Rationale	Asthma guidelines are not being implemented fully across primary and secondary care. There is agreement at National and Hospital level to implement the National Asthma Programme, therefore the National Asthma Programme is making the reasonable assumption that when nurses are trained that they will be facilitated to support guideline concordant asthma management. Completion of the Asthma Education programme is required in order to implement National Asthma Programme guideline concordant care. Competence in managing asthma is a necessary competence for all health care providers.
4.	Target	90% of ED and AMAU nurses should have completed the relevant asthma education course by Dec 2012. 90% of nurses in primary care sites should have completed the relevant asthma education course by Dec 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	2 measures – primary and secondary care A. Primary Care Numerator is the number of primary care sites (PCTs, OOH services and GP practices) with 90% of nurses asthma education trained /Denominator is the number of all primary care asthma treatment sites invited for asthma guidelines training B. Secondary Care Numerator is the number of hospital EDs and AMAUs with 90% of nurses asthma education trained / Denominator is the number of all hospital EDs and/or AMAUs
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input checked="" type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: PCTs, GP practices and OOH primary care
9.	Data Sources (please specify any data quality or completeness issues)	RDOs via Regional Coordinator for National Clinical Care Programmes as agreed with the National Asthma Programme
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	RDOs, Hospital and Unit need the following on all nurses: <ul style="list-style-type: none"> • Name of nurse • Place of work – for hospitals, include hospital and unit, for primary care - region • Grade of staff Asthma training completed Y/N
12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	Trained staff members may move in or out of a health care facility, therefore regular confirmation of trained status of staff important
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
	Named contact for further information	Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
	Metric Sign off	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 01 635 2232

1	KPI Title	Number of asthma bed days prevented annually
2	Description	<p>Number of asthma bed days prevented</p> <p>Number of inpatient asthma bed days prevented is the number of asthma bed days expected (if the programme was not implemented) minus the number of asthma bed days observed after the programme is implemented. This should be per half year, year and since start of implementation of the programme.</p>
3	Rationale	<p>OECD reports on avoidable admission rates for asthma which indicates that there is room for improvement in Ireland.</p> <p>see http://www.oecd.org/dataoecd/55/2/44117530.pdf</p>  <p>It is predicted that with implementation of National Asthma Programme guideline concordant care in primary care and secondary care people with asthma should achieve better asthma control and:</p> <p style="text-align: center;">The number of people with asthma who develop acute exacerbations should be reduced The quality of treatment will be optimised, therefore the number of people with acute asthma exacerbations, who require hospital admission, should be reduced</p>
4	Target	<p>Prevent 10% asthma bed days per year in 2012, 2013 and 2014. The overall target of the National Asthma Programme is to decrease asthma bed days by 30% within 3 years, 40% by 5 years and 60% by 10 years.</p> <p>The first year for which the target is relevant is 2012. While the opportunity to decrease asthma bed days is greater in the early years, the programme will take time to implement so it is reasonable to aim for the same yearly target for first 3 years: to decrease asthma bed days by 10% of the 2012 estimate for bed days.</p> <p>Baseline data The “asthma bed days” trend is reasonably stable though decreasing slightly so as a baseline, the number of bed days in 2010 is being used (latest validated data available). The baseline should be reset when validated 2011 data are available. There were 12,582 asthma bed days in 2010. Using the 2010 as the baseline the target bed days are 11324 for 2012; 10191 for 2013; and 9172 for 2014 and the target reductions in asthma bed days are: 1258 (2012); 1133 (2013); 1019 (2014) * See 14. Additional information on estimates</p>
5	KPI Collection frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6	KPI reporting frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:

7	KPI calculation	Report number of asthma bed days as reported in HIPE subtracted from number of asthma bed days in previous year as reported in HIPE <ul style="list-style-type: none"> Specified time periods – quarter (e.g. implementation monitoring), yearly (e.g. progress re indirect cost savings) and since programme start (e.g. overall success of programme to date – there may be plateaux to progress, but maintaining reduced admissions should be noted) 																																
8	Reporting aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: Age groups – 0-4; 5-14; 15-44; 45-64; 65-74; 75+. Asthma bed days and mean lengths of stay vary for different age groups. Monitoring asthma bed days by these age groups will allow for analysis of trends of change after implementation starts																																
9	Data sources	HIPE –at national level following bi-annual hard deadline -30 th September and 31 st of March																																
10	Tracer Conditions	Asthma, acute asthma, asthma exacerbation, predominantly allergic asthma, non-allergic asthma, mixed asthma, asthma unspecified, status asthmaticus, acute severe asthma ICD-10 codes J45* OR J46* Excludes: chronic asthmatic (obstructive) bronchitis (J44.-) / chronic obstructive asthma (J44.-) / eosinophilic asthma (J82) / lung diseases due to external agents (J60-J70)																																
11	Minimum Data set	Number of discharges Number of bed days Mean length of stay																																
12	International Comparison	National Asthma Programme targets based on the experience of Asthma Programmes in Finland and British Columbia, Canada																																
13	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.htm																																
14	Additional information	<p>Trend data are taken from 6 years data and while there is a slightly decreasing trend overall, the adult trend is fairly stable, and the paediatric trend is stable for the last 4 reported years. (see table below)</p> <p>Validated HIPE data are usually available about 7-8 months after the year end. Provisional data are available sooner, but in 2010, the variation in provisional asthma bed days compared with validated asthma bed days ranged from 57% to 79% depending on age groups.</p> <table border="1"> <thead> <tr> <th>Age group</th> <th>2010 provisional</th> <th>2010</th> <th>Percentage of final figure</th> </tr> </thead> <tbody> <tr> <td>"0-4"</td> <td>1420</td> <td>2001</td> <td>71.0%</td> </tr> <tr> <td>"5-14"</td> <td>894</td> <td>1380</td> <td>64.8%</td> </tr> <tr> <td>"15-44"</td> <td>2581</td> <td>3561</td> <td>72.5%</td> </tr> <tr> <td>"45-64"</td> <td>2433</td> <td>3226</td> <td>75.4%</td> </tr> <tr> <td>"65-74"</td> <td>1000</td> <td>1259</td> <td>79.4%</td> </tr> <tr> <td>"75+"</td> <td>661</td> <td>1155</td> <td>57.2%</td> </tr> <tr> <td>All ages</td> <td>8989</td> <td>12582</td> <td>71.4%</td> </tr> </tbody> </table> <p>Data quality (including completeness issues as above) should be taken into account in the interpretation of data that is not yet validated.</p>	Age group	2010 provisional	2010	Percentage of final figure	"0-4"	1420	2001	71.0%	"5-14"	894	1380	64.8%	"15-44"	2581	3561	72.5%	"45-64"	2433	3226	75.4%	"65-74"	1000	1259	79.4%	"75+"	661	1155	57.2%	All ages	8989	12582	71.4%
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15	Metric reporting	Where is this information currently being reported? <input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:																																
	Named link person	Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie																																
	Metric Sign off	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 01 635 2232																																

1	KPI Title	Number of deaths caused by asthma annually
2	Description	<p>Number of deaths caused by asthma</p> <p>A. Number of deaths where asthma is considered the primary cause of death should be reported.</p> <p>B. Level of certainty about accuracy and completeness of A.</p>
3	Rationale	<p>Asthma deaths are potentially avoidable. Effective implementation of the National Asthma Programme should result in a dramatic reduction in asthma related deaths.</p> <p>In addition the healthcare history for each person who died as a result of asthma should be understood.</p> <p>Reporting will facilitate this understanding. Reporting of deaths due to asthma are currently problematic – however, monitoring of reported deaths due to asthma will go hand in hand with improving the accurate and timely classification of deaths due to asthma.</p>
4	Target	<p>90% reduction in mortality over 10 years - therefore only 5-6 deaths from asthma yearly after 10 years of implementing the National Asthma Programme and about 5 fewer deaths each year in the interim. Target is 55 in 2012; 50 in 2013; 45 in 2014.</p> <p>Baseline – there is no definitive source of data for deaths due to asthma – and each source varies but about or just under 60 in most recent validated year's data</p> <p>For example from 2005-2009:</p> <ul style="list-style-type: none"> – INIsPHO - there were between 52 and 62 deaths reported with asthma as cause of death in ROI <p><i>Expand table to see INIsPHO data</i></p>  <ul style="list-style-type: none"> – CSO vital statistics report between 52-59 deaths in 2005-2009 and 34 in 2010. However, CSO provides validated cause of death reports at least 2 years after the year end – await late registrations, coroners' reports etc. The latest validated cause of death data from CSO are from 2008. Validated 2010 data are expected in February 2013. CSO does not update published data in the interim. <p><i>Expand table to see CSO data</i></p>  <ul style="list-style-type: none"> – HIPE does not capture deaths due to asthma despite having codes for death – died with post mortem and died without post mortem. Reported number of deaths with asthma as principal diagnosis ranged from 2-6 per year <p><i>Expand table to see HIPE data</i></p>  <p>Therefore, accurate and timely measurement of deaths due to asthma appears not to be possible – however, the proposed National Asthma Mortality Study will address these issues.</p>
5	KPI Collection frequency	<p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:</p>

6	KPI reporting frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7	KPI calculation	A. Sentinel KPI – number of deaths with asthma as cause of death B. Level of certainty about A. B1=High level of certainty. B2=Uncertain. Certainty will be determined by analysis of accuracy and completeness of the mortality data sources.
8	Reporting aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: By Age groups- 0-44 and 45+
9	Data sources	Mortality Study being developed to use UK National Review of Asthma Deaths methodology Hospital HIPE (“live”); GRO; CSO; Coroners’ reports etc
10	Tracer Conditions	Deaths due to Asthma or Status Asthmaticus (J45* OR J46*) as a primary cause of death. COPD in young patients is likely to be misclassified asthma
11	Minimum Data set	To be developed
12	International Comparison	National Asthma Programme targets based on the experience of Asthma Programmes in Finland and British Colombia, Canada
13	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/performancereports/2012pr.html
14	Additional information	This KPI is important, however, the current data systems can not provide the information in a timely / accurate manner, therefore for 2012 the proposed Mortality Study may be able to produce a KPI number, but it is likely to be qualified by B2- uncertain. In the past issues related to the validity of asthma deaths reported have occurred, so consideration should be given at the time of reporting as to the accuracy of the report. Validity of current sources will be investigated, and methods to increase timeliness and accuracy of reporting will be developed by 2014.
15	Metric is a reporting requirement in which reports?	Where is this information currently being reported? <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
	Named link person	Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
	Metric Sign off	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 01 635 2232

1.	KPI title 1	Percentage reduction in lower limb amputation from Diabetes
2.	Description	The percentage change in lower limb amputations in patients with diabetes from the 2009 baseline
3.	Rationale	Diabetes is one of the leading causes of lower limb amputations. The Diabetes Programme aims to provide improved diabetic control through integrated care and improved recognition and management of diabetic foot complications which may lead to amputation. A reduction in lower limb amputations in patients with diabetes is expected on a population basis following the introduction of comprehensive integrated care and foot care for the population.
4.	Target	A 40% reduction in lower limb amputations in each region, for patients with diabetes resident in that region.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator divided by Denominator expressed as a percentage. Numerator: the number of lower limb amputations in patients who have a diagnosis of diabetes in the given year, who are resident in the area under reporting. Denominator: the total number of lower limb amputations in patients with diabetes in 2009 resident in the area under reporting. The indicator should be expressed as a percentage variance on the 2009 figure.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details
9.	Data Sources	HIPE
10.	Tracer (Conditions) terms	The terms/definitions which would be used to differentiate those who should be included in the data. Discharges from hospital (daycases and inpatients) with <u>any diagnosis of Diabetes</u> (E10-E14) who had an amputation procedure: amputation at hip (4437000), hindquarter amputation (4437300), amputation above the knee (4436700), amputation below the knee (4436702), disarticulation at knee (4436701), amputation of toe (4433800), amputation of toe including metatarsal bone (4435800), disarticulation through toe (9055700), disarticulation through ankle (4436100), midtarsal amputation (4436400), transmetatarsal amputation (4436401), amputation of ankle through malleoli of tibia and fibula (4436101)
11.	Minimum Data Set	<ul style="list-style-type: none"> Number of discharges for lower limb amputations in patients with diabetes in the reporting year. Number of discharges for lower limb amputations in patients with diabetes in the baseline year of 2009 resident in the area under reporting i.e. nationally or each HSE region.
12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Dr. Orlaith O Reilly, Director of Public Health, Public Health Department, Lacken, Dublin Road, Kilkenny Phone 056 7784124 email orlaith.oreilly@hse.ie
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

Hospital Services: Clinical Programmes – Diabetes

1.	KPI title	Percentage reduction in hospital discharges for lower limb amputation and foot ulcers in diabetics
2.	Description	The percentage reduction in hospital discharges for lower limb amputation and foot ulcers in diabetic patients
3.	Rationale	Diabetes is one of the leading causes of foot ulcers, which may lead to lower limb amputations. The Diabetes Programme aims to provide improved diabetic control through integrated care and improved recognition and management of diabetic foot complications which may lead to amputation. A reduction in lower limb amputations in patients with diabetes is expected on a population basis following the introduction of comprehensive integrated care and foot care for the population.
4.	Target	A 40% reduction in foot ulcers in each region, for patients with diabetes resident in that region.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator divided by Denominator expressed as a percentage. Numerator: the number of discharges for foot ulcers in patients who have a diagnosis of diabetes in the given year, who are resident in the area under reporting. Denominator: the total number of discharges for foot ulcers in patients with diabetes in 2009 resident in the area under reporting. The indicator should be expressed as a percentage variance on the 2009 figure.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources	HIPE
10.	Tracer (Conditions) terms	Ulcers in lower limb in Diabetics, excluding amputations Discharges from hospital (daycases and inpatients) with <u>any diagnosis of Diabetes</u> (E10-E14) who had an ulcer of the lower limb: L97 AND (E10*, E11*, E13*, E14*), E10.73, E11.73, E13.73, E14.73) and did NOT have an amputation of the lower limb: NOT (4437000, 4437300, 4436700, 4433800, 4435800, 9055700, 4436100, 4436400, 4436401, 4436101, 4436701, 4436702).
11.	Minimum Data Set	<ul style="list-style-type: none"> Number of discharges for lower limb ulcers in patients with diabetes in the reporting year. Number of discharges for lower limb ulcers in patients with diabetes in the baseline year of 2009 resident in the area under reporting i.e. nationally or each HSE region.
12.	International Comparison	Specific comparators not given
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	Where is this information currently being reported? <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Dr. Orlaith O Reilly, Director of Public Health, Public Health Department, Lacken, Dublin Road, Kilkenny Phone 056 7784124 email orlaith.oreilly@hse.ie
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

Hospital Services: Clinical Programmes – Diabetes

1.	KPI title	Percentage of registered Diabetics invited for retinopathy screening
2.	Description	The percentage of diabetics registered on the National Diabetic Retinopathy Screening Database who were invited for retinopathy screening in the year of reporting.
3.	Rationale	Diabetic retinopathy is one of the leading causes of blindness. The systematic annual screening of all diabetics for retinopathic eye changes and their referral and provision of treatment can significantly reduce sight loss.
4.	Target	90% of diabetics that are registered on the database should be invited for screening annually.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator - number of people invited for retinopathy screening in the reporting time period, resident in the area. Denominator – number of people registered on the National Diabetic Retinopathy Database in the time period under reporting and in the reporting area.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: Individual general practice
9.	Data Sources	The National Cancer Screening Programme Diabetic Retinopathy Database.
10.	Tracer (Conditions) terms	To be developed by the NCSS from the database specification
11.	Minimum Data Set	To be determined by the NCSS in the data specification
12.	International Comparison	The English Diabetic Retinopathy Screening Service targets a 90% invitation rate for retinopathy screening for registered diabetics.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	This KPI will be provided following the roll out of the National Diabetic Retinopathy Screening Programme by the NCSS in 2012
15.	Metric is a reporting requirement in which reports?	Performance Report and Health Stat NCSS Report to the Clinical Programmes Directorate <input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Pat Cafferty, National Cancer Screening Service, Tel: 01 865 9300 Dr. Orlaith O Reilly, HSE Clinical Programmes
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

1.	KPI title	Percentage reduction in median LOS for epilepsy inpatient discharges
2.	Description	% reduction in median LOS for epilepsy patients Median (50 th percentile) for length of stay for hospital inpatients with a principal diagnosis of epilepsy/ Status epilepticus/fit or seizure NOS
3.	Rationale	Adherence to model of care should lead to more efficient use of resources and reduction in median LOS
4.	Target	Reduction of overall median by 10% compared to same quarter for the reference (baseline) period
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Median LOS -----*100 Median LOS same quarter reference period For (ICD10 CM codes G40* G41* and R56.8)
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources	HIPE
10.	Tracer (Conditions) terms	None
11.	Minimum Data Set	HIPE
12.	International Comparison	Not available
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance-reports/2012pr.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	Where is this information currently being reported? <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie Sharon Morrow, RCPI, Tel: 01 6698820
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 01 635 2232

1.	KPI title	Percentage reduction in no. of bed days for epilepsy inpatient discharges
2.	Description	% reduction in no. of bed days for epilepsy inpatients discharges No. of bed days for hospital inpatients with a principal diagnosis of epilepsy/ Status epilepticus/ Fit or Seizure NOS
3.	Rationale	Adherence to model of care should lead to more efficient use of resources and reduction in bed days
4.	Target	Reduction in inpatient bed days by 10% compared to same quarter for the reference (baseline) period
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	No. of bed days -----*100 No. of bed days for reference period For ICD10 CM codes G40* G41* and R568
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources	HIPE
10.	Tracer (Conditions) terms	None
11.	Minimum Data Set	HIPE
12.	International Comparison	Not available
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	Where is this information currently being reported? <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 01 635 2232

Hospital Services: Clinical Programmes – Dermatology OPD

1.	KPI title 1	Number of new patients waiting >3 months for dermatology OPD appointment
2.	Description	New outpatient – attendance by a patient at a hospital clinic, for a planned treatment or consultation, who has not been treated at least once previously as an outpatient with the same condition (same consultant) within the previous 12 months.
3.	Rationale	This indicator is a key access indicator.
4.	Target	No patients should wait more than 3 months to be seen in dermatology outpatient clinic
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of new referrals waiting to be seen in hospital clinic by timeband
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	No OPD measure of performance internationally due to different structures of health service delivery.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/performancereports/2012pr.html
14.	Additional Information	ICD code disaggregation will be considered in subsequent phases of Data Quality Programme.
15.	Metric is a reporting requirement in which reports?	Where is this information currently being reported? <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Sharon Morrow – 087 6472805 email: sharonmorrow@rcpi.ie Dr Emer Feely, Department of Public Health, Dr Steeven's Hospital, Dublin 8 Ph: 01-6352115/ 2294 e-mail: emer.feely@hse.ie
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

Hospital Services: Clinical Programmes – Dermatology OPD

1.	KPI title 2	Referral: new attendance ratio
2.	Description	This refers to the ratio of the number of new patients referred to an outpatient clinic over a certain time period (e.g. per quarter) to the number of new outpatients seen in that clinic over the same time period.
3.	Rationale	This is an access indicator. A mismatch between the number of referrals and the number of new patients seen leads to the formation of a waiting list.
4.	Target	1:1
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Ratio of new referrals to hospital clinic per month: new patients seen in hospital clinic per month.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: Consultant level
9.	Data Sources	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	No OPD measure of performance internationally due to different structures of health service delivery.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	ICD code disaggregation will be considered in subsequent phases of Data Quality Programme.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Sharon Morrow – 087 6472805 email: sharonmorrow@rcpi.ie Dr Emer Feely, Department of Public Health, Dr Steeven's Hospital, Dublin 8 Ph: 01-6352115/ 2294 e-mail: emer.feely@hse.ie
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

Hospital Services: Clinical Programmes – Rheumatology OPD

1.	KPI title 1	Number of new rheumatology outpatients seen per hospital per year
2.	Description	New outpatient – attendance by a patient at a hospital clinic, for a planned treatment or consultation, who has not been treated at least once previously as an outpatient with the same condition (same consultant) within the previous 12 months.
3.	Rationale	All consultants should be seeing a minimum number of patients per year in order to meet demand. The number of outpatients to be seen per hospital per year can then be calculated.
4.	Target	New PI – Baseline to be set in 2012. Targets to be agreed (in line with British Society of Rheumatologists guidelines). The target per hospital will be the product of the number of outpatients to be seen per consultant per year and the number of wte consultant rheumatologists in the hospital (with reference also to the number of NCHDs in the hospital).
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of new referrals waiting to be seen in hospital clinic by timeband.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Data collected at consultant level
9.	Data Sources	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	No OPD measure of performance internationally due to different structures of health service delivery.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	ICD code disaggregation will be considered in subsequent phases of Data Quality Programme.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Sharon Morrow – 087 6472805 email: sharonmorrow@rcpi.ie Dr Emer Feely, Department of Public Health, Dr Steeven's Hospital, Dublin 8 Ph: 01-6352115/ 2294 e-mail: emer.feely@hse.ie
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

1.	KPI title	Referral: new attendance ratio
2.	Description	This refers to the ratio of the number of new patients referred to an outpatient clinic over a certain time period (e.g. per quarter) to the number of new outpatients seen in that clinic over the same time period.
3.	Rationale	This is an access indicator. A mismatch between the number of referrals and the number of new patients seen leads to the formation of a waiting list.
4.	Target	1:1
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Ratio of new referrals to hospital clinic per month: new patients seen in hospital clinic per month
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: Consultant level
9.	Data Sources	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	No OPD measure of performance internationally due to different structures of health service delivery.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	ICD code disaggregation will be considered in subsequent phases of Data Quality Programme.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Sharon Morrow – 087 6472805 email: sharonmorrow@rcpi.ie Dr Emer Feely, Consultant Dept of Public Health, Dr Steeven's Hospital Ph: 01-6352115/ 2294 e-mail: emer.feely@hse.ie
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

Hospital Services: Clinical Programmes – Neurology OPD

1.	KPI title	Length of time patients are waiting for neurology outpatient appointment
2.	Description	New outpatient – attendance by a patient at a hospital clinic, for a planned treatment or consultation, who has not been treated at least once previously as an outpatient with the same condition (same consultant) within the previous 12 months.
3.	Rationale	This indicator is a key access indicator
4.	Target	Target to be agreed
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of new referrals waiting to be seen in hospital clinic by timeband
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	No OPD measure of performance internationally due to different structures of health service delivery.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	ICD code disaggregation will be considered in subsequent phases of Data Quality Programme.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Sharon Morrow – 087 6472805 email: sharonmorrow@rcpi.ie Dr Emer Feely, Consultant Dept of Public Health, Dr Steeven's Hospital Ph: 01-6352115/ 2294 e-mail: emer.feely@hse.ie
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

1.	KPI title	Referral: new attendance ratio
2.	Description	This refers to the ratio of the number of new patients referred to an outpatient clinic over a certain time period (e.g. per quarter) to the number of new outpatients seen in that clinic over the same time period.
3.	Rationale	This is an access indicator. A mismatch between the number of referrals and the number of new patients seen leads to the formation of a waiting list.
4.	Target	1:1
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Ratio of new referrals to hospital clinic per month: new patients seen in hospital clinic per month
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details: Consultant level
9.	Data Sources	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	No OPD measure of performance internationally due to different structures of health service delivery.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance/2012pr.html
14.	Additional Information	ICD code disaggregation will be considered in subsequent phases of Data Quality Programme.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Sharon Morrow – 087 6472805 email: sharonmorrow@rcpi.ie Dr Emer Feely, Consultant Dept of Public Health, Dr Steeven's Hospital Ph: 01-6352115/ 2294 e-mail: emer.feely@hse.ie
Metric Sign off		Dr. Barry White, National Director, Clinical Strategy and Programmes Directorate Tel: 01 6352322

1.	KPI title	Number of inpatients discharged: i) inpatient ii) day case iii) elective iv) non elective/emergency
2.	Description	Number of Inpatient discharges – (adult and child) i) Inpatient – A patient admitted to hospital for treatment or investigation and is scheduled to stay for at least one night in the hospital ii) Day case – A patient who is admitted to hospital on an elective basis for care and/or treatment which does not require the use of a hospital bed overnight and who is discharged as scheduled. iii) Elective Treatment – A planned or non-emergency admission or procedure that has been arranged in advance. iv) Non elective/emergency – An unplanned admission that is urgently required.
3.	Rationale	Discharge of inpatients has emerged as a key efficiency bottleneck within hospital operations. As the last process in the inpatient care pathway, delays and variation in discharge are known to have significant repercussions to upstream processes such as emergency department patient flow and elective surgery scheduling/ cancellations.
4.	Target	NSP 2012 targets (i) Inpatient - 562,133 (iv) Elective – no target set (ii) Day Case – 787,557 (v) Non elective/emergency – no target set
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Total Inpatient discharges - Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Age band and Source of admission and Specialty and patient status
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer Conditions	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	Yes: hospital discharge by diagnosis is a recognised international metric.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

Hospital Services: Discharges Activity

1.	KPI title	Percentage of discharges which are public: i) Inpatient ii) Day case iii) Elective iv) Non elective/emergency
2.	Description	Number of public discharges (adult and child) Public - refers to a patient's status on discharge or placement on waiting list. A patient is considered "Public" where their stay in hospital is covered by GMS Medical Card or patient pays the appropriate Government levy i) Inpatient – A public patient admitted to hospital for treatment or investigation and is scheduled to stay for at least one night in the hospital ii) Day case – A public patient who is admitted to hospital on an elective basis for care and/or treatment which does not require the use of a hospital bed overnight and who is discharged as scheduled. iii) Elective Treatment – A public patient who has a planned or non-emergency admission or procedure that has been arranged in advance. iv) Non elective/emergency – A public patient who has an unplanned admission that is urgently required (e.g. MAU, SAU, Direct to Ward)
3.	Rationale	As a performance monitoring function to ensure hospital compliance with public private mix ratio of 80:20.
4.	Target	NSP 2012 i) inpatient – 80% iii) elective – no target set ii) day case – 80% iv) non elective/emergency – no target set
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: Number of patient discharges which were public (adult and child) x 100 Denominator: Total number of patient discharges (adult and child)
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: _Age band & Specialty_& patient status
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer Conditions	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	Yes, this is an internationally recognised metric (AUS, CAN, GB, ECHI)
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Derek McCormack, BIU, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	Number of Emergency Presentations
2.	Description	<p>Total number of patients who present themselves to hospital as emergency. They include Emergency Department attendances, attendances at MAUs and SAU's, and emergency presentations direct to wards.</p> <p>Emergency Presentations include new and return emergency attendances, emergency attendances at Paediatric Assessment Units, Medical Assessment Units and Surgical Assessment Units, emergency obstetric attendances and walk onto wards.</p> <p>Emergency attendances include new and return emergency attendances through the emergency department only.</p>
3.	Rationale	It is an important measure for clinical audit/governance and planning of services and to measure the unplanned attendances to each hospital to measure demand on the entire service.
4.	Target	2012 expected activity – 1,195,700
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>Number of Emergency Presentation</p> <p>Number of ED Attendances</p> <p>Count</p>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	<p>Sourced from Hospitals PAS systems</p> <p>Coverage all hospitals with recognised Emergency Departments</p> <p>Reporting all acute hospitals with recognised Emergency Departments</p>
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232

Hospital Services: Unscheduled Activity

1.	KPI title	Number of Emergency admissions
2.	Description	The number of inpatients who have been admitted as an emergency through the Emergency Department and all other non elective admissions. Non elective/emergency – An unplanned admission that is urgently required (e.g. MAU, SAU, Direct to Ward, OPD and Transfers).
3.	Rationale	As a performance monitoring function. It is an important measure for clinical audit/governance and as a measure for national service planning. There is a need to measure the unplanned admissions to each hospital to examine demand on the entire service.
4.	Target	2012 expected activity – 357,600
5.	KPI Collection Frequency	<input checked="" type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of Admissions from ED, MAU, SAU, Direct to Ward, OPD and Transfers. Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Hospitals PAS systems Coverage all hospitals with recognised Emergency Departments Reporting all acute hospitals with recognised Emergency Departments
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	Not a standard metric, although GB does collect something similar, but that is broken down by condition, and is able to determine the proportion of all presentation of a particular condition or ICD-10 code that presents acutely, or through ED.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 01 635 2232

Hospital Services: Outpatients Activity

1.	KPI title	Number of outpatient attendances
2.	Description	<p>This metric includes the total number of both new and return attendances.</p> <p>New Consultant-Attendance - The first face-to-face attendance with a Consultant or a member of the Consultant's Surgical or Medical Team as a result of a referral and for which the Consultant will have an identifiable record.</p> <p>The attendance may occur in a hospital Outpatient Department or on an outreach basis in a Health Centre or Primary Care Centre as a result of a referral, provided such attendance takes place in a clinic as defined elsewhere in this document.</p> <p>Only Consultant delivered Outpatient services, and <u>not</u> that of any other discipline are to be included.</p> <p>An attendance following referral from a Triage Physiotherapist Clinic or Triage Nurse Clinic may be considered as a new attendance.</p> <p>Return Attendance - Attendance by a patient who has been treated at least once previously as an outpatient with the same condition/ complaint, at a Consultant OPD Clinic, <u>or as an inpatient</u>.</p> <p>An attendance which follows an admission is considered to be a Return Attendance.</p> <p>An attendance where the patient is referred by the OPD Consultant or a member of that team following an ED Attendance is considered to be a Return Attendance.</p>
3.	Rationale	The monitoring of patient access.
4.	Target	NSP 2012 expected activity – baseline to be established during 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	Total New + Return Outpatient attendances Count.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other – give details: Ageband & Specialty.
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer Conditions	As per description no. 2 above
11.	Minimum Data Set	BIU- Acute MDR
12.	International Comparison	No OPD measure of performance internationally due to different structures of health service delivery.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	ICD code disaggregation will be considered in subsequent phases of Data Quality Programme.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Mary O'Connell, AND, Outpatient Data Quality Pgm, Tel: 01 274 4271
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	Total number of births
2.	Description	Total number of live births and still births greater than or equal to <i>500grms</i> .
3.	Rationale	Monitoring Function. Standard indicator of obstetric performance. An indicator needed for calculating population growth.
4.	Target	Expected activity NSP 2012 – 73,216
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of Live Births + Number of Still Births Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Hospitals PAS systems Coverage 19 hospitals 100% 19/19 hospitals reporting
10.	Tracer Conditions	Total number of live births and still births greater than or equal to <i>500grms</i> .
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 01 635 2232

1.	KPI title	Dialysis Modality – Haemodialysis
2.	Description	Quarterly Regional Clinical Leads Communication Forum with Consultant Nephrologists and the National Renal Office. This communication forum is held on a quarterly basis and when required can be held monthly. The forum allows for all haemodialysis issues arising in each HSE Region to be discussed and solutions applied nationally. Data on the Haemodialysis activity is collected biannually in June and December from each of the Renal Units within the current network of renal units around the country.
3.	Rationale	This KPI allows the National Renal Office to plan strategically for renal dialysis requirements each year and also to plan ahead and anticipate patient requirements going forward. It assists in the operation and planning needs of the current network of Renal Units in the country.
4.	Target	Expected activity 2012 is: 1,760 – 1,870 The total expected activity for dialysis modality (Haemodialysis and Home Therapies) is: 2,040 – 2,160.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Data collected biannually in June and at Year end December.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Data source is the biannual Census from each of the Renal Units within the current Network of units. It is envisaged that the I.T. Kidney Disease Clinical Patient Management System (KDCPMS) will capture the KPI data when it is fully operational within all the parent renal units and satellite units.
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	Biannual Census of Renal Units in June and December each year
12.	International Comparison	The Closest jurisdiction with which comparison can be made is the UK Renal Registry, which reports on an Annual basis. Within this dataset are available comparative metrics from Northern Ireland.
13.	Web link to data	Data and information is recorded on the National Renal Office Website @ www.hse/go/nro
14.	Additional Information	The roll out of the Kidney Disease Clinical Patient Management System(KDCPMS) will increase the quality and amount of data available.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Pat O'Connor, Nat. Renal Office, T: 01 620 1806 E:patj.oconnor@hse.ie Dr Liam Plant, National Clinical Director, National Renal Office Email: nro@hse.ie
Metric Sign off		Dr Barry White, National Director Clinical Programmes, Tel: 01 635 2500

1.	KPI title	Dialysis Modality - Home Therapies
2.	Description	Home Therapies offer an enhanced quality therapy - Quarterly Regional Clinical Leads Communication Forum on the enhancement of home therapies both Home Haemodialysis and Peritoneal Dialysis. This communication forum is held on a quarterly basis and when required can be held monthly. The forum allows for discussion on the development of all home therapy within the relevant network of units. Data on the Home Therapy activity is collected biannually in June and December from each of the Renal Units within the current network of renal units around the country.
3.	Rationale	The KPI allows the National Renal Office to plan strategically for renal dialysis requirements each year. It assists in the operation and planning needs of the current network of Renal Units in the country.
4.	Target	Expected activity 2012: 280 – 290 The total expected activity for dialysis modality (Haemodialysis and Home Therapies) is: 2,040 – 2,160.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Data collected biannually in June and at Year end December.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Data source is the biannual Census from each of the Renal Units within the current Network of units. It is envisaged that the I.T.Kidney Disease Clinical Patient Management System (KDCPMS) will capture the KPI data when fully operational within all the parent renal units and satellite units.
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	Biannual Census of Renal Units in June and December each year
12.	International Comparison	The Closest jurisdiction with which comparison can be made is the UK Renal Registry, which reports on an Annual basis. Within this dataset are available comparative metrics from Northern Ireland.
13.	Web link to data	Data and information is recorded on the National Renal Office Website @ www.hse/go/nro
14.	Additional Information	The roll out of the Kidney Disease Clinical Patient Management System(KDCPMS) will increase the quality and amount of data available
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Pat O'Connor, Nat. Renal Office, T: 01 620 1806 E:patj.oconnor@hse.ie Dr Liam Plant, National Clinical Director, National Renal Office Email: nro@hse.ie
Metric Sign off		Dr Barry White, National Director Clinical Programmes, Tel: 01 635 2500

1.	KPI title	Overall ALOS for all inpatient discharges and deaths
2.	Description	The average number of patient days for an admitted patient episode.
3.	Rationale	Average length of stay (ALOS) is used in assessment of quality of care, costs and efficiency and is used for health planning purposes.
4.	Target	NSP 2012 Target of 5.6
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Calculation $\frac{\text{Total bed days used}}{\text{Total inpatient discharges}} = \text{Average length of stay}$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Ageband & Specialty & patient Status
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Hospitals PAS systems Coverage all acute hospitals 100% All acute hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	Average Length of Stay, broken down by clinical condition, is a recognised international metric (GB, CAN, AUS, ECHI)
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	Overall Average Length of Stay (ALOS) for all inpatient discharges and deaths excluding LOS over 30 days
2.	Description	The average length of stay in days for all inpatient discharges and deaths excluding Length of Stay over 30 days. Length of stay is counted from the date of admission of the patient to an inpatient hospital bed until their date of discharge. For the purposes of this metric, ALOS values greater than 30 days are set to 30 days.
3.	Rationale	Average length of stay (ALOS) is used in assessment of quality of care, costs and efficiency and is used for health planning purposes.
4.	Target	NSP 2012 target – 4.5 days
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Trimmed length of stay (days) is calculated as the maximum of (discharge date – admission date and 30 days.)Where a case has been admitted and discharged on the same date, the length of stay is set to 0.5 days. The overall average length of stay is then calculated as the total number of beddays, trimmed as above, across inpatient discharges/deaths in the reporting period divided by the total number of inpatient discharges/deaths in the reporting period. Reporting of this metric is based on a rolling 12 month period 3 months in arrears.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Ageband & Specialty & patient Status
9.	Data Sources Data Completeness Data Quality Issues	Sourced from Hospitals PAS systems Coverage all acute hospitals in casemix programme All acute hospitals in casemix programme reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	Average Length of Stay, broken down by clinical condition, is a recognised international metric (GB, CAN, AUS, ECHI)
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	% of elective inpatients who had principal procedure conducted on day of admission
2.	Description	Elective inpatient admissions where the principal procedure was carried out on the day of admission as a percentage of all elective inpatient admissions where a procedure was carried out.
3.	Rationale	To aid in the development of the Elective Surgery Programme which is designed to optimise length of patient stay increasing the rates of day surgery in accordance with national standards for day surgery and shortening the length of patient stay for selected common in-patient surgical procedures.
4.	Target	NSP target 2012 – 75%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of elective inpatient procedures carried out on day of admission *100/number of elective admissions where a procedure was carried out.
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> HSE Area <input type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources (please specify any data quality or completeness issues)	Sourced from HIPE Coverage all acute hospitals in Casemix programme All acute hospitals reporting in Casemix programme
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	Yes, this is echoed nationally, but principally as a clinical audit measure, rather than a health outcome measure.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	Reporting of this metric is based on a rolling 12 month period 3 months in arrears.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	Number of Hospital delayed discharges
2.	Description	The number of patients in the hospital who have completed their Acute Phase of care and are medically fit for discharge.
3.	Rationale	Monitoring function. Used to assess how many patients could be discharged and looked after elsewhere or at home and are delaying another patient being in a bed that needs acute care. Overall measurement of delayed discharges is a useful indicator for the efficiency of hospital performance, and the improvements in efficiencies which will be delivered by the implementation of service improvements. Therefore the monitoring of delayed discharges is important and the overall figure is useful as a summary measure at national level.
4.	Target	NSP 2012 Target: <10%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Each Hospital through the weekly Delayed Discharge return.
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance-reports/2012pr.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Reduction in bed days lost through Delayed Discharges
2.	Description	Reducing the number of bed days lost by a Delayed Discharge
3.	Rationale	To monitor how a delayed discharge is affecting the number of bed days that could be used by an acute patient. Overall measurement of delayed discharges is a useful indicator for the efficiency of hospital performance, and the improvements in efficiencies which will be delivered by the implementation of service improvements. Therefore the monitoring of delayed discharges is important and the overall figure is useful as a summary measure at national level.
4.	Target	NSP 2012 Target: reduce by 10% .
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Each Hospital through the weekly Delayed Discharge return.
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance-reports/2012pr.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 Email: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Dr. Steevens Tel: 01 635 2232

1.	KPI title	Percentage of day case surgeries as a % of day case plus inpatients for a specified basket of procedures (General Surgery, ENT, Ophthalmology).
2.	Description	% of day case surgeries as a % of day case plus inpatients for a specified basket of procedures (General Surgery, ENT, Ophthalmology). For details of the procedures making up the basket see the CompStat for Hospitals Users Guide http://hsenet.hse.ie/HSE_Central/CompStat/?importUrl=http://localhost:82/eng/staff/CompStat/linksinfo/
3.	Rationale	To aid in the development of the Elective Surgery Programme which is designed to optimise length of patient stay increasing the rates of day surgery in accordance with national standards for day surgery and shortening the length of patient stay for selected common in-patient surgical procedures.
4.	Target	NSP 2012 target - 75%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of day case surgeries x 100/ Total number of Day case & Inpatient Surgeries for the specified basket of procedures.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources (please specify any data quality or completeness issues)	Sourced from HIPE Coverage all acute hospitals in Casemix programme All acute hospitals reporting in Casemix programme
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	Reporting of this metric is based on a rolling 12 month period 3 months in arrears.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	Percentage delivered by Caesarean section
2.	Description	Number of births delivered by Caesarean section. Definition of Birth: the number of live births and still births greater than or equal to <i>500grms</i> .
3.	Rationale	Monitoring Function. Standard indicator of obstetric performance.
4.	Target	NSP 2012 target – 20%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Calculation $\frac{\text{Number of Caesarean Sections}}{\text{Total number of births}} \times 100$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources (please specify any data quality or completeness issues)	Sourced from Hospitals PAS systems Coverage 19 hospitals 100% 19 hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute MDR
12.	International Comparison	International figures vary widely depending on a range of circumstances
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232

1.	KPI title	No. of people waiting more than 4 weeks for an urgent colonoscopy
2.	Description	Number of patients receiving access to colonoscopy for urgent referral more than 4 weeks.
3.	Rationale	No patient should wait more than 4 weeks for urgent colonoscopy from time of referral. Recognised metric in providing rapid diagnosis of colon cancer; this leads to demonstrably improved patient outcomes.
4.	Target	No patient should wait greater than 4 weeks for urgent colonoscopy from time of referral.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of urgent colonoscopy treated within 4 weeks of referral X 100/ number of urgent colonoscopy treated.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Ageband & Specialty
9.	Data Sources (please specify any data quality or completeness issues)	Coverage 36 hospitals 100% 36/36 hospitals reporting
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	BIU – Acute - Urgent Colonoscopy Report
12.	International Comparison	Often part of an indicator sub-set in international documents, may not be explicitly noted, but present in some form or another internationally.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Mary Jackson, Principal Officer, Department of Health, 01 635 4337

1.	KPI title 1	Total Emergency Department Time on KPI Percentage of all attendees at ED who are discharged or admitted within 6 hours of registration
2.	Description	% of all new ED patients who wait less than 6 hours Total Emergency Department Time (TEDT) is measured from Arrival to ED Departure Time.
3.	Rationale	<ul style="list-style-type: none"> a. A 6 hour target for ED has been included in the HSE service plan for a number of years and Patient Experience Time, which is equivalent to TEDT, has been collected at a number of EDs since 2010. b. TEDT includes both productive clinical time and delays. This indicator aims to reduce the delays without compromising on quality of care ⁽¹⁾. c. Prolonged durations of stay in EDs are associated with poorer patient outcomes ^(2,3). d. Research in an Irish ED demonstrated that patient mortality increased exponentially after 6 hours total time spent in the ED⁽⁴⁾. e. Prolonged waiting times are associated with adverse outcomes for patients discharged from EDs.⁽⁵⁾ f. Patients waiting more than 6 hours should be cared for in a more appropriate care setting than an ED g. Patients who have completed their period of EM care draw on nursing and other ED resources that would be more effectively directed at new patients who require timely initial clinical assessment and nursing care. h. This indicator sets an upper limit on the duration of ED patient care. However, a small minority of patients may require longer than 6 hours care in an ED setting due to the complexity of their presenting problems. This is why a 95% compliance target has been set. i. An upper absolute limit of 9 hours is set to ensure that the 5% of patients who may not comply with the 6 hour target do not go on to have protracted waiting times. j. Monitoring the median, mean and centiles will allow EDs that do not achieve the target initially to monitor the timeliness of the care they provide, to better understand performance and demonstrate improvement towards achievement of the target. Secondary measures will also allow hospitals that meet the target to demonstrate exemplary performance in further reducing waiting times and will support benchmarking of hospital performance. k. The centile measures will also demonstrate any potentially unfavourable distortions in practice such as a rush to discharge or admit a disproportionate number of patients close to the 6-hour target time. l. Efficient care should not be rushed. Comparison of median and 75th centile data between similar EDs will indicate if a particular unit is managing patients at an unexpectedly quick rate. This will flag the need to investigate whether this variance represents more efficient or unacceptably rushed care.
4.	Target	Target 95% of all patients by September 2012 to wait <6 hours
5.	KPI Collection Frequency	<input checked="" type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: For 28 day periods commencing on national implementation start date

Hospital Services: Unscheduled Care

7.	KPI Calculation	<p>Numerator - All new ED patients who are admitted to a ward or discharged in less than 6 hours from their Arrival Time.</p> <p>Denominator - All new patient attendances at EDs, Local Emergency Units and Local Injury Units within Emergency Care Networks.</p> <p>Inclusion criteria - All new patients attending units listed above.</p> <p>Exclusion criteria - Scheduled return patients</p> <p>Data report presentation - (a) all new ED patients and unscheduled returns (b) all (a) who are subsequently admitted (c) all (a) who are discharged by an EM clinician. (d) all (a) who are discharged by a non-EM clinician (b) to (d) = level II data for EMP</p> <p>For data definitions see EMP Report 2011.</p> <p>Numerator - All new ED patients who are admitted to a ward or discharged in less than 6 hours from their Arrival Time.</p>																				
8.	Reporting Aggregation	<p>a. <input checked="" type="checkbox"/>HSE National <input checked="" type="checkbox"/>HSE Region <input type="checkbox"/>LHO Area <input checked="" type="checkbox"/>Hospital <input type="checkbox"/>County <input type="checkbox"/>Institution <input type="checkbox"/>CAMHT <input type="checkbox"/>PCT <input type="checkbox"/>Age <input type="checkbox"/>Gender <input type="checkbox"/>Socio Economic Class <input type="checkbox"/>Other – give details: Emergency Care Network Level</p>																				
9.	Data Sources (please specify any data quality or completeness issues)	<p>EDIS/PAS</p> <p>Administrative data PAS for unit (some EDs do not currently have PAS systems which record this data – for further work)</p> <p>EDIS implementation required to allow subgroup analysis</p>																				
10.	Tracer (Conditions) terms	<p>The terms/definitions which would be used to differentiate those who should be included in the data.</p> <p>Inclusion: New ED Patient Attendance: A patient who attends ED requesting emergency care for the first time with a particular condition and any patient transferred to or admitted through an ED who requires EM clinical care or resources. This includes unscheduled return patients.</p> <p>Exclusion: Scheduled Return: A patient for whom a subsequent ED visit is arranged, but who remains under the care of EM. This may include patients attending EM review clinics.</p>																				
11.	Minimum Data Set	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Emergency Care Unit Identifier</td> <td style="width: 50%; padding: 2px;">ID of hospital (to be confirmed or included in EMP dataset)</td> </tr> <tr> <td style="padding: 2px;">Local service-user identifier</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">UHI</td> <td style="padding: 2px;">Unique Health Identifier (not yet applicable)</td> </tr> <tr> <td style="padding: 2px;">Patient attendance</td> <td style="padding: 2px;">Data set identifier new and unscheduled returns</td> </tr> <tr> <td style="padding: 2px;">Date patient presents</td> <td style="padding: 2px;">ED dataset</td> </tr> <tr> <td style="padding: 2px;">Time patient presents</td> <td style="padding: 2px;">Arrival Time</td> </tr> <tr> <td style="padding: 2px;">Time patient admitted</td> <td style="padding: 2px;">ED Departure Time for patient</td> </tr> <tr> <td style="padding: 2px;">Time patient discharged</td> <td style="padding: 2px;">ED Departure Time for patient</td> </tr> <tr> <td style="padding: 2px;">ID of EM clinician who discharged patient</td> <td style="padding: 2px;">Propose Irish Medical Council Registration Number</td> </tr> <tr> <td style="padding: 2px;">ID of non-EM clinician who discharged patient</td> <td style="padding: 2px;">Propose Irish Medical Council Registration Number</td> </tr> </table>	Emergency Care Unit Identifier	ID of hospital (to be confirmed or included in EMP dataset)	Local service-user identifier		UHI	Unique Health Identifier (not yet applicable)	Patient attendance	Data set identifier new and unscheduled returns	Date patient presents	ED dataset	Time patient presents	Arrival Time	Time patient admitted	ED Departure Time for patient	Time patient discharged	ED Departure Time for patient	ID of EM clinician who discharged patient	Propose Irish Medical Council Registration Number	ID of non-EM clinician who discharged patient	Propose Irish Medical Council Registration Number
Emergency Care Unit Identifier	ID of hospital (to be confirmed or included in EMP dataset)																					
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Date patient presents	ED dataset																					
Time patient presents	Arrival Time																					
Time patient admitted	ED Departure Time for patient																					
Time patient discharged	ED Departure Time for patient																					
ID of EM clinician who discharged patient	Propose Irish Medical Council Registration Number																					
ID of non-EM clinician who discharged patient	Propose Irish Medical Council Registration Number																					

Hospital Services: Unscheduled Care

12.	International Comparison	<p>(1) A&E Clinical Quality Indicators. Department of Health 17th December 2010. Available at http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_122868. Accessed 13th January 2011</p> <p>(2) Sprivulis PC, Da Silva J-A, Jacobs IG, Frazer ARL, Jelinek GA (2006) The Association between hospital overcrowding and mortality among patients admitted via Western Australian emergency departments MJA 184 (5): 208</p> <p>(3) Richardson DB (2001) The access-block effect: relationship between delay to reaching an in-patient bed and in-patient length of stay MJA 177:49</p> <p>(4) Silke B, Plunkett P et al. European Journal of Emergency Medicine 2011 (in press)</p> <p>(5) Guttman A, Schull MJ, Vermullen MJ, Stukel TA. Association between waiting times and short term mortality and hospital admission after departure from emergency department: population based cohort study from Ontario, Canada. BMJ 2011;342:d2983doi:10.1136/bmj.d2983.</p> <p>(6) A six hour target for ED attendances is being used in New Zealand. New Zealand Ministry of Health. Available at http://www.moh.govt.nz/moh.nsf/indexmh/ed-target. Accessed 13th January 2011</p>
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	EDIS implementation will ensure data available from all sites.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 01 635 2232

Hospital Services: Unscheduled Care

1.	KPI title	No. and % of patents who were admitted through ED within 9 hours from registration
2.	Description	The percentage of patients discharged from ED and admitted to an inpatient bed within 9 hours of ED registration. Registration refers to the first documentation of a patients' presence in ED taken as the arrival time. This may be registration or triage depending on which occurs first. Discharge refers to the time that a patient physically leaves the ED.
3.	Rationale	Focusing on details of patients experience can help pinpoint problems with processes within the Emergency Department.
4.	Target	Target 100% of all patients
5.	KPI Collection Frequency	<input checked="" type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other
7.	KPI Calculation	
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources	
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	
12.	International Comparison	
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232

Hospital Services: Scheduled Care

1.	KPI title	Percentage of adults waiting >9 months (inpatient)
2.	Description	Percentage of adults waiting >9 months for inpatient procedure. Inpatient – A patient admitted to hospital for treatment or investigation and is scheduled to stay for at least one night in the hospital.
3.	Rationale	No adult should wait more than 9 months for an IP procedure. Waiting times for inpatient and outpatient services are standard measures internationally.
4.	Target	By end of September No Adult should wait greater than 9 months on an inpatient or day case waiting list. Expected activity end of September 2012 – zero
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
7.	KPI Calculation	Number of adults waiting >9Months on Inpatient WL *100/ Total Number of adult patients on Inpatient WL
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Ageband & Specialty
9.	Data Sources (please specify any data quality or completeness issues)	Business Intelligence Unit (BIU), Corporate Planning and Performance Sourced from National Treatment Purchase Fund (NTPF)
10.	Tracer (Conditions) terms	As per description no. 2 above
11.	Minimum Data Set	
12.	International Comparison	Waiting times for inpatient and outpatient services are standard measures internationally (AUS, CAN, GB, ECHI).
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

Hospital Services: Scheduled Care

1.	KPI title	Percentage of adults waiting >9 months (day case)
2.	Description	Percentage of adults waiting >9 months day case procedure. Day case – A patient who is admitted to hospital on an elective basis for care and/or treatment which does not require the use of a hospital bed overnight and who is discharged as scheduled.
3.	Rationale	No adult should wait more than 9 months for a day case procedure. Waiting times for inpatient and outpatient services are standard measures internationally.
4.	Target	By end of September No Adult should wait greater than 9 months on an inpatient or day case waiting list. Expected activity end of September 2012 – zero
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of adults waiting >9 Months on day case WL *100/ Total Number of adult patients on day case WL.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Ageband & Specialty
9.	Data Sources (please specify any data quality or completeness issues)	Business Intelligence Unit (BIU), Corporate Planning and Performance Sourced from National Treatment Purchase Fund (NTPF)
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	
12.	International Comparison	Waiting times for inpatient and outpatient services are standard measures internationally (AUS, CAN, GB, ECHI).
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

Hospital Services: Scheduled Care

1.	KPI title	No. and Percentage of children waiting >20 weeks (Inpatient)
2.	Description	No. and % of children waiting >20 weeks for an inpatient procedure.
3.	Rationale	No child should wait more than 20 weeks for an inpatient procedure. Waiting times for inpatient and outpatient services are standard measures internationally.
4.	Target	By end of September No Child should wait greater than 20 Weeks on an inpatient or day case waiting list. Expected activity end of September 2012 – zero
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of children waiting >20 Weeks on Inpatient WL *100/ Total Number of children on Inpatient WL
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Ageband & Specialty
9.	Data Sources (please specify any data quality or completeness issues)	Business Intelligence Unit (BIU) - Acute, Corporate Planning and Performance Sourced from NTPF
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	
12.	International Comparison	Waiting times for inpatient and outpatient services are standard measures internationally (AUS, CAN, GB, ECHI).
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

Hospital Services: Scheduled Care

1.	KPI title	No. and Percentage of children waiting >20 Weeks (Day Case)
2.	Description	No. and % of children waiting >20 Weeks for a day case procedure
3.	Rationale	No Child should wait more than 20 Weeks for a day case procedure. Waiting times for inpatient and outpatient services are standard measures internationally.
4.	Target	No Child should wait greater than 20 Weeks on an inpatient or day case waiting list. Expected activity end of September 2012 – zero
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of children waiting >3 Months on DC WL *100/ Total Number of children on DC WL
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Ageband & Specialty
9.	Data Sources (please specify any data quality or completeness issues)	Business Intelligence Unit (BIU) - Acute, Corporate Planning and Performance Sourced from NTPF.
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	
12.	International Comparison	Waiting times for inpatient and outpatient services are standard measures internationally (AUS, CAN, GB, ECHI).
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
	Named contact for further information	Derek McCormack, BIU Acute, Tel: 01 620 1690 E: Derek.mccormack@hse.ie
	Metric Sign off	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	Casemix adjusted public private mix by hospital for inpatients
2.	Description	This metric measures the public private mix of inpatient cases within hospitals taking into account the amount of resources that each case consumes. Resource usage is measured in terms of Casemix Units (CMUs) which are derived from the annual Casemix Budget Model. The metric gives the percentage of public work carried out for the hospital as whole in terms of CMUs rather than cases.
3.	Rationale	The purpose of this metric is to ensure hospital compliance with public private mix ratio of 80:20. Casemix Units are used rather than a simple public/private case count as the latter takes no account of the relative complexity of different case types.
4.	Target	NSP 2011 target – 80:20
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: The total number of inpatient CMUs attributed to public patients. Denominator: The total number of inpatient CMUs.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources	HIPE
10.	Tracer (Conditions) terms	None
11.	Minimum Data Set	HIPE file with DRG assignment
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	Casemix adjusted public private mix by hospital for day case
2.	Description	This metric measures the public private mix of day cases within hospitals taking into account the amount of resources that each case consumes. Resource usage is measured in terms of Casemix Units (CMUs) which are derived from the annual Casemix Budget Model. The metric gives the percentage of public work carried out for the hospital as whole in terms of CMUs rather than cases.
3.	Rationale	The purpose of this metric is to ensure hospital compliance with public private mix ratio of 80:20. Casemix Units are used rather than a simple public/private case count as the latter takes no account of the relative complexity of different case types.
4.	Target	NSP 2011 target – 80:20
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: The total number of daycase CMUs attributed to public patients. Denominator: The total number of daycase CMUs.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources	HIPE
10.	Tracer (Conditions) terms	None
11.	Minimum Data Set	HIPE file with DRG assignment
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
	Named contact for further information	Fiachra Bane, HIPE, Tel: 045 988330 Email: fiachra.bane@hse.ie
	Metric Sign off	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	Percentage of consultants compliant with contract levels: (Type B/B*)
2.	Description	Percentage of consultants on Type B Contract that are compliant with their contract levels. Type B Contract: Consultants holding Type B contracts may engage in privately remunerated professional medical practice only in hospitals/facilities operated by the Employer or as part of such activities that arise as part of the employment contract or in co-located private hospitals on public campuses. This volume of private practice shall not exceed 20% of the Consultants total workload in terms of Casemix Units.
3.	Rationale	The purpose of this metric is to ensure consultant compliance with a public private mix ratio of in accordance with their contracts. Casemix Units are used rather than a simple public/private case count as the latter takes no account of the relative complexity of different case types.
4.	Target	New PI, work is ongoing to collect this information during 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: In arrears
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: In arrears
7.	KPI Calculation	Numerator: Number of consultants in compliance with their contract terms Denominator: Total number of consultants
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: at consultant level.
9.	Data Sources (please specify any data quality or completeness issues)	From each Hospital to national lead office. New version of template developed by ESRI only being sent out to hospitals end of Qtr 1 2012
10.	Tracer (Conditions) terms	
11.	Minimum Data Set	
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		Andrew Condon, Acute Hospital Services, Tel: 635 2232
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232

1.	KPI title	Rate of MRSA bloodstream infections in acute hospitals per 1,000 beds days used
2.	Description	MRSA blood stream infections as a % of all Staphylococcus aureus (S.Aureus) infection in hospitals.
3.	Rationale	To indicate progress towards the goal of reducing MRSA in acute settings against the National target setting within the “Say No to Infection Strategy”.
4.	Target	NSP 2012 target – reduce to less than 0.067 per 1,000 bed days
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>Under the case definition for EARSS, data are collected on the first bloodstream isolate of <i>S. aureus</i> per patient per quarter. The following data are included in each report:</p> <ul style="list-style-type: none"> • The number of <i>S. aureus</i> isolates, including the number of MRSA isolates. • The percentage MRSA • The <i>S. aureus</i> and MRSA rates per 1,000 bed-days used <p>Denominator: acute beddays used, provided by the HSE BIU acute Unit. This is based on the average number of available acute in-patient beds during the previous month, and not on the total bed capacity of a hospital. It does not include long-stay or day case (including dialysis) bed use, but does include acute psychiatric bed use.</p>
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Microbiology laboratories in acute hospitals
10.	Tracer Conditions	Antibiotic use in hospitals
11.	Minimum Data Set	Quarterly data supply from Hospital Microbiology laboratories as per EARsnet protocol
12.	International Comparison	Similar to other countries eg UK
13.	Web link to data	http://www.hpsc.ie/hpsc/A-Z/MicrobiologyAntimicrobialResistance/InfectionControlandHealthcare-AssociatedInfection/Publications/
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
	Named contact for further information	Dr. Kevin Kelleher, AND, Health Protection, Tel: 061 483347
	Metric Sign off	Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 635 4025

Hospital Services: Health Care Associated Infection (HCAI)

1.	KPI title	Rate of new cases of <i>Clostridium difficile</i> associated diarrhoea in acute hospitals per 10,000 bed days used
2.	Description	National rate of new cases of <i>Clostridium difficile</i> associated diarrhoea in acute hospitals
3.	Rationale	<i>C. difficile</i> is a potentially preventable healthcare associated infection that causes significant morbidity and mortality. It has caused a number of significant outbreaks in hospitals and long term care facilities. Rates are linked to antibiotic prescribing patterns and adherence with infection prevention and control procedures.
4.	Target	NSP 2012 – less than 3.0 and 5% reduction in new cases of <i>Clostridium difficile</i> associated diarrhoea reported nationally each year over 3 years.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator data: New cases of <i>Clostridium difficile</i> associated diarrhoea in acute hospitals as per national case definition. Denominator data: 10,000 bed days used
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Data provided by acute hospitals (microbiologists, infection control nurses, surveillance & laboratory scientists) to HPSC on a quarterly basis.
10.	Tracer Conditions	Antibiotic consumption rates in hospitals and the community
11.	Minimum Data Set	Protocol www.hpsc.ie
12.	International Comparison	National case definition identical to EU and US case definitions therefore comparable with countries that use these case definitions.
13.	Web link to data	www.hpsc.ie
14.	Additional Information	All data on <i>C. difficile</i> can be found at www.hpsc.ie .
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> HealthStat <input checked="" type="checkbox"/> Other – give details: Quarterly reports to data providers
Named contact for further information		Dr. Kevin Kelleher, AND, Health Protection, Tel: 061 483347
Metric Sign off		Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 635 4025

1.	KPI title	Median hospital total antibiotic consumption rate (DDD per 100 bed days used) per hospital
2.	Description	The total antibiotic consumption rate (defined daily dose per 100 bed days) per hospital
3.	Rationale	To measure change in Antibiotic use and decreased number of bed days used, and implied less likelihood of antibiotic consumption.
4.	Target	NSP 2012 target is 83 Defined Daily Dose (DDD) per 100 bed days
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The principle measure of antibiotic consumption for each hospital is the inpatient antibiotic consumption rate, expressed as DDD (defined daily dose) per 100 bed days used.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Hospital Pharmacies.
10.	Tracer Conditions	Clostridium Difficile and MRSA rates
11.	Minimum Data Set	Protocol www.hpsc.ie
12.	International Comparison	Similar to other countries e.g. Europe.
13.	Web link to data	http://www.hpsc.ie/hpsc/A-Z/MicrobiologyAntimicrobialResistance/InfectionControlandHealthcare-AssociatedInfection/Publications
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		Dr. Kevin Kelleher, AND, Health Protection, Tel: 061 483347
Metric Sign off		Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 01 635 4025

Hospital Services: Health Care Associated Infection (HCAI)

1.	KPI title	Alcohol Hand Rub consumption (litres per 1,000 bed days used)
2.	Description	This is the volume of alcohol rub used by hospitals, which is an acceptable method of assessing hand hygiene compliance. It is expressed as volume (in litres) per 1000 bed days used in the hospital.
3.	Rationale	Alcohol based hand rubs have been shown to be an effective and rapid method of hand hygiene in healthcare settings. They are recommended as a primary means of hand hygiene in the Irish national guidelines.
4.	Target	NSP 2012 target is 23 litres per 1,000 bed days used
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The rate of usage per hospital is calculated as per the total volume of hand rub consumed in litres per 1000 bed days used. This is measured quarterly and annually. It excludes alcohol rub that is used for pre-operative surgical 'scrub'. Hospital activity data, bed days used are obtained from the Performance Management Unit of the HSE and is used to calculate the rate per hospital and expressed as litres/1000 bed days used.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Health Protection Surveillance Centre via hospitals
10.	Tracer Conditions	Hand hygiene compliance in hospitals, Clostridium Difficile and MRSA Rates
11.	Minimum Data Set	Protocol www.hpsc.ie
12.	International Comparison	Similar to other countries.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html HPSC website - http://www.hpsc.ie/hpsc/default.aspx
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		Dr. Kevin Kelleher, AND, Health Protection, Tel: 061 483347
Metric Sign off		Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 01 635 4025

1.	KPI title	% compliance of hospital staff with the World Health Organisation's (WHO) 5 moments of hand hygiene using the national hand hygiene audit tool
2.	Description	Compliance of hospital staff with the World Health Organisations (WHO) 5 moments of hand hygiene using the national hand hygiene audit tool.
3.	Rationale	Hand hygiene is one of the most effective means of reducing healthcare associated infection (HCAI). However, compliance by healthcare workers with recommended hand hygiene frequencies and techniques has been reported as suboptimal. WHO recommends direct observation (hand hygiene audit) as the gold standard of measuring adherence to hand hygiene guidelines.
4.	Target	NSP 2012 target is 85% compliance. Aim is to achieve over 90% compliance with hand hygiene by 2013.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: 2 types of hand hygiene audits (see point 7) National audits (acute hospitals only): – 7 wards biannually (i.e., reported nationally) Local audits (i.e., not reported nationally) in all areas where patient care occurs, but the frequency is determined locally based on resources etc.
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	% compliance by healthcare staff with WHO 5 moments of hand hygiene: 7 wards to be audited, 30 hand hygiene opportunities per ward and 210 opportunities per hospital. Procedure outlined in national protocol (http://www.hpsc.ie/hpsc/A-Z/Gastroenteric/Handwashing/AuditTools/File_12660_en.pdf)
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender
9.	Data Sources Data Completeness Data Quality Issues	Observational audit of hand hygiene compliance by healthcare staff in hospitals. National lead auditors trained and validated at national training sessions conduct audit.
10.	Tracer Conditions	Alcohol hand rub usage in hospitals, Clostridium Difficile and MRSA Rates
11.	Minimum Data Set	Compliance with WHO 5 moments of hand hygiene
12.	International Comparison	Broad comparisons can be made with other countries that use WHO methodology, however the exact method use to collect the data (sample size, auditor) varies from country to country
13.	Web link to data	www.hpsc.ie
14.	Additional Information	The HSE carried out a national audit on hand hygiene compliance in HSE acute hospitals in June 2011 using the criteria set out at (7) above. The Report was made available on 12 th October, 2011 and details can be found at www.hse.ie or www.hpsc.ie .
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> HealthStat <input type="checkbox"/> Other – give details:
Named contact for further information		Dr. Kevin Kelleher, AND, Health Protection, Tel: 061 483347
Metric Sign off		Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 01 635 4025

National Ambulance Service – First Responder ECHO calls

1.	KPI title	<p>First Responder response times to potential or actual 112(999) life threatening emergency calls:</p> <p>i) % of Clinical Status 1 ECHO incidents responded to by a first responder in 7 minutes and 59 seconds or less.</p>
2.	Description	<p>Clinical Status 1 ECHO Calls: Calls reporting an immediately life-threatening cardiac or respiratory arrest.</p> <p>First responder: An appropriately trained responder to Clinical Status 1 Calls dispatched through the Ambulance Control Centre. Community First Responders, in general, should be dispatched through the National Ambulance Service with the exception of some stand alone Community First Responders in remote or rural areas who are dispatched locally following a 999/112 call. The First Responder can either be an Advanced Paramedic or a minimum response of a Cardiac First Responder (CFR).</p> <p>Cardiac First Response (CFR): A Cardiac First Responder has completed Pre-Hospital Emergency Care Council's (PHECC) standard of education and training in Cardiac First Response (CFR) at the levels of CFR responder or CFR practitioner. The standard outlines the care management of major life-threatening emergencies, including heart attack, cardiac arrest, foreign body airway obstruction and stroke and includes Aspirin administration. The CFR+ standard is designed, as an extra module to the CFR responder level course, for specific groups with a paediatric AED requirement. Its aim is to enable course participants to develop competency in AED use, including paediatric pads where available, on a child. The practitioner level CFR course is aimed at healthcare professionals/ practitioners and includes additional skills such as oxygen use, pulse checks and two-rescuer CPR.</p> <p>Emergency First Response (EFR): An Emergency First Responder (EFR) is a Cardiac First Responder who has in addition completed a 5-day course designed for persons working as a non-transporting pre-hospital Responder. The EFR is trained to recognise and assess common life-threatening and common serious medical conditions. The PHECC Clinical Practice Guidelines authorise the EFR to administer oxygen and assist patients with the self administration of prescribed Salbutamol, GTN and Glucose gel medications. For the trauma patient the EFR's scope of practice extends to manual stabilisation of the cervical spine and collar application.</p> <p>Occupational First Aid (OFA): The occupational first aider is trained according the health and Safety Authority and FETAC (Level 5) standard and is specific to the provision of first aid in a place of work in compliance with the Health and Welfare at Work (General Application) Regulations (S.I. No. 229 of 2007). The OFA is trained to provide treatment for a minor injury and preserving life or minimising the consequences of injury or illness until handover to an appropriate healthcare professional/practitioner.</p> <p>Emergency Medical Technician (EMT): An Emergency Medical Technician is a registered practitioner who has completed PHECC's Standard of Education & Training at EMT level. Practitioners at this level are authorised to provide a range of medications by CPG and registered medical practitioner instructions. The duration of education an training is five weeks and is designed to provide the EMT with the knowledge and skills for working primarily in patient transport services and in supporting the pre-hospital response to patients accessing the 999/112 emergency medical services.</p> <p>Paramedic (P): A Paramedic is a registered practitioner who has completed PHECC's standard of education and training at Paramedic level. This is the minimum clinical level that is recommended to provide care and transport of an ill or injured patient following a 999/112 call. The Paramedic is principally engaged in assessing patient's needs, making informed clinical decisions, planning and administering procedures and medications and monitoring patients' responses both on scene and during transport.</p> <p>Advanced Paramedic (AP): An Advanced Paramedic (AP) is a registered practitioner who has completed as a minimum the PHECC's standard of education and training at Paramedic and has in excess of 6 years experience working with the ambulance service. The APs have obtained a Graduate Diploma from a recognized third level institution and undergone further training which enables them to perform additional procedures at the scene of an emergency</p>

		<p>including:</p> <ul style="list-style-type: none"> ▪ <i>Intubation</i> - during advanced cardiac life support procedures, an advanced paramedic can place a sterile tube into the trachea or throat to help the casualty breathe; ▪ <i>Cardiac resuscitation</i> - including CPR, defibrillation and drug administration; ▪ <i>Intravenous fluid resuscitation</i> - administration of fluids to support critically ill patients; ▪ <i>Pain management</i> - administration of drugs to relieve pain; ▪ <i>Chest decompression</i> - placement of a needle/tube in the chest to relieve pressure due to a collapsed lung; ▪ <i>Administration of intravenous (IV) and intramuscular (IM) medications</i> (drugs or fluids introduced directly into a vein or a muscle) to treat various medical conditions; ▪ <i>Stabilisation of cardiac conditions</i>: drugs may be administered to regulate the patient's heart rate when required <p>Verification time: The time required to determine the caller's telephone number, exact location of the incident and the nature of the complaint, by the call-taker in the Ambulance Control Centre.</p> <p>Response time: In order to calculate the response time the clock starts when the following details of the call have been ascertained:</p> <p style="padding-left: 40px;">Caller's telephone number Exact location of the incident; and Nature of the chief complaint</p> <p>The clock stops when the First Responder arrives at the scene of the incident. Response time has two distinct phases, Activation Time and Response Time. Activation time: The time allocated from assignment of call to mobilisation of the responding resource.</p> <p>Response time: The time mobilisation of the resource to arrival at the patient</p>
3.	Rationale	The purpose of the metric is to drive improvements in responding to life threatening illness. International Resuscitation Guidelines (ILCOR) have identified that patient survivability can be optimised if trained assistance can arrive within 8 minutes of the initial insult
4.	Target	NSP 2011 Target – New PI for 2011, baseline to be established Target and implementation time to be decided between HSE/HIQA/DoHC
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>Numerator: The total number of Clinical Status 1 ECHO emergency calls responded to in 7 minutes and 59 seconds or less from the time a call is verified to the arrival of a First Responder at the scene of an incident.</p> <p>Denominator: The total number of Clinical Status ECHO 1 calls received at the Ambulance Control Centre</p>
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details:

National Ambulance Service – First Responder ECHO calls

9.	Data Sources (please specify any data quality or completeness issues)	AMPDS (Advanced Medical Priority Dispatch System)
10.	Tracer (Conditions) terms	In Accordance with AMPDS, Clinical Status 1 ECHO calls refers to a potentially life threatening illness or injury of cardiac origin to be responded to by a first responder in 7 minutes and 59 seconds or less.
11.	Minimum Data Set	Any potentially life threatening injury of cardiac origin requiring a first response in 7 minutes and 59 seconds or less.
12.	International Comparison	The standard is based on HIQA Response Times and Quality Standards for Pre Hospital Emergency Care published on the 18 th January 2011. These standards are based on an analysis of similar standards in other jurisdictions.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html www.hiqa.ie
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		Pat McCreanor, Control and Performance Manager, NAS, Tel: 045 882 567 email: pat.mccreanor@hse.ie
Metric Sign off		Robert Morton, Assistant National Director, NAS, email: robert.morton@hse.ie Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

National Ambulance Service – First Responder DELTA calls

1.	KPI title	<p>First Responder response times to potential or actual 112(999) life threatening emergency calls:</p> <p>i) % of Clinical Status 1 Delta incidents responded to by a first responder in 7 minutes and 59 seconds or less.</p>
2.	Description	<p>Clinical Status 1 Delta Calls: Calls reporting an immediately life-threatening illness or injury</p> <p>First responder: An appropriately trained responder to Clinical Status 1 Calls dispatched through the Ambulance Control Centre. Community First Responders, in general, should be dispatched through the National Ambulance Service with the exception of some stand alone Community First Responders in remote or rural areas who are dispatched locally following a 999/112 call. The First Responder can either be an Advanced Paramedic or a minimum response of a Cardiac First Responder (CFR).</p> <p>Cardiac First Response (CFR): A Cardiac First Responder has completed Pre-Hospital Emergency Care Council's (PHECC) standard of education and training in Cardiac First Response (CFR) at the levels of CFR responder or CFR practitioner. The standard outlines the care management of major life-threatening emergencies, including heart attack, cardiac arrest, foreign body airway obstruction and stroke and includes Aspirin administration. The CFR+ standard is designed, as an extra module to the CFR responder level course, for specific groups with a paediatric AED requirement. Its aim is to enable course participants to develop competency in AED use, including paediatric pads where available, on a child. The practitioner level CFR course is aimed at healthcare professionals/ practitioners and includes additional skills such as oxygen use, pulse checks and two-rescuer CPR.</p> <p>Emergency First Response (EFR): An Emergency First Responder (EFR) is a Cardiac First Responder who has in addition completed a 5-day course designed for persons working as a non-transporting pre-hospital Responder. The EFR is trained to recognise and assess common life-threatening and common serious medical conditions. The PHECC Clinical Practice Guidelines authorise the EFR to administer oxygen and assist patients with the self administration of prescribed Salbutamol, GTN and Glucose gel medications. For the trauma patient the EFR's scope of practice extends to manual stabilisation of the cervical spine and collar application.</p> <p>Occupational First Aid (OFA): The occupational first aider is trained according the health and Safety Authority and FETAC (Level 5) standard and is specific to the provision of first aid in a place of work in compliance with the Health and Welfare at Work (General Application) Regulations (S.I. No. 229 of 2007). The OFA is trained to provide treatment for a minor injury and preserving life or minimising the consequences of injury or illness until handover to an appropriate healthcare professional/practitioner.</p> <p>Emergency Medical Technician (EMT): An Emergency Medical Technician is a registered practitioner who has completed PHECC's Standard of Education & Training at EMT level. Practitioners at this level are authorised to provide a range of medications by CPG and registered medical practitioner instructions. The duration of education an training is five weeks and is designed to provide the EMT with the knowledge and skills for working primarily in patient transport services and in supporting the pre-hospital response to patients accessing the 999/112 emergency medical services.</p> <p>Paramedic (P): A Paramedic is a registered practitioner who has completed PHECC's standard of education and training at Paramedic level. This is the minimum clinical level that is recommended to provide care and transport of an ill or injured patient following a 999/112 call. The Paramedic is principally engaged in assessing patient's needs, making informed clinical decisions, planning and administering procedures and medications and monitoring patients' responses both on scene and during transport.</p> <p>Advanced Paramedic (AP): An Advanced Paramedic (AP) is a registered practitioner who has completed as a minimum the PHECC's standard of education and training at Paramedic and has in excess of 6 years experience working with the ambulance service. The APs have obtained a Graduate Diploma from a recognized third level institution and undergone further training which enables them to perform additional procedures at the scene of an emergency including:</p> <ul style="list-style-type: none"> ▪ <i>Intubation</i> - during advanced cardiac life support procedures, an advanced paramedic can

		<p>place a sterile tube into the trachea or throat to help the casualty breathe;</p> <ul style="list-style-type: none"> ▪ <u>Cardiac resuscitation</u> - including CPR, defibrillation and drug administration; ▪ <u>Intravenous fluid resuscitation</u> - administration of fluids to support critically ill patients; ▪ <u>Pain management</u> - administration of drugs to relieve pain; ▪ <u>Chest decompression</u> - placement of a needle/tube in the chest to relieve pressure due to a collapsed lung; ▪ <u>Administration of intravenous (IV) and intramuscular (IM) medications</u> (drugs or fluids introduced directly into a vein or a muscle) to treat various medical conditions; ▪ <u>Stabilisation of cardiac conditions</u>: drugs may be administered to regulate the patient's heart rate when required <p>Verification time: The time required to determine the caller's telephone number, exact location of the incident and the nature of the complaint, by the call-taker in the Ambulance Control Centre.</p> <p>Response time: In order to calculate the response time the clock starts when the following details of the call have been ascertained:</p> <p style="padding-left: 40px;">Caller's telephone number Exact location of the incident; and Nature of the chief complaint</p> <p>The clock stops when the First Responder arrives at the scene of the incident. Response time has two distinct phases, Activation Time and Response Time. Activation time: The time allocated from assignment of call to mobilisation of the responding resource.</p> <p>Response time: The time mobilisation of the resource to arrival at the patient</p>
3.	Rationale	The purpose of the metric is to drive improvements in responding to life threatening illness. International Resuscitation Guidelines (ILCOR) have identified that patient survivability can be optimised if trained assistance can arrive within 8 minutes of the initial insult
4.	Target	NSP 2011 Target – New PI for 2011, baseline to be established Target and implementation time to be decided between HSE/HIQA/DoHC
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>Numerator: The total number of Clinical Status 1 Delta emergency calls responded to in 7 minutes and 59 seconds or less from the time a call is verified to the arrival of a First Responder at the scene of an incident.</p> <p>Denominator: The total number of Clinical Status Delta 1 calls received at the Ambulance Control Centre</p>
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details:
9.	Data Sources (please specify any data quality or completeness issues)	AMPDS (Advanced Medical Priority Dispatch System)

National Ambulance Service – First Responder Delta calls

10.	Tracer (Conditions) terms	
11.	Minimum Data Set	
12.	International Comparison	The standard is based on HIQA Response Times and Quality Standards for Pre Hospital Emergency Care published on the 18 th January 2011. These standards are based on an analysis of similar standards in other jurisdictions
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html www.hiqa.ie
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
Named contact for further information		Pat McCreanor, Control and Performance Manager, NAS, Tel: 045 882 567 email: pat.mccreanor@hse.ie
Metric Sign off		Robert Morton, Assistant National Director, NAS, email: robert.morton@hse.ie Simonetta Ryan, Principal Officer, Department of Health, Tel: 01 635 4301

1.	KPI title	% of Clinical Status 1 ECHO incidents responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less.
2.	Description	Clinical Status 1 ECHO Calls: calls reporting an immediately life-threatening illness or Injury Patient-carrying vehicle: any vehicle able to transport the patient in a clinically safe manner and dispatched from an Ambulance Service Control Centre. Examples include helicopter, lifeboat, aircraft, CEN* B compliant double-crewed fully equipped ambulance. Response time: the response time starts when the following details of the call have been ascertained: caller's telephone number; exact location of the incident; nature of the chief complaint. The clock stops when the transporting vehicle arrives at the scene of the incident. Response time has two distinct phases: activation time and response time. Activation time: from assignment of call to mobilisation of the responding resource. Response time: from mobilisation of the resource to arrival at the patient. CEN: Comité Européen de Normalisation (Committee for European Standardization)
3.	Rationale	To improve responses to life-threatening illness. International Resuscitation Guidelines (ILCOR) have identified that patient survivability can be optimised if trained assistance can arrive within 7 minutes and 59 seconds of the initial insult.
4.	Target	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: The total number of Clinical Status 1 ECHO emergency calls responded to in 18 minutes and 59 seconds or less from the time a call is verified to the arrival of a transporting vehicle at the scene of an incident. Denominator: The total number of Clinical Status 1 ECHO calls received at the Ambulance Control Centre
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other – give details:
9.	Data Sources	AMPDS (Advanced Medical Priority Dispatch System)
10.	Tracer Conditions	In Accordance with AMPDS Clinical Status 1 Echo refers to a potentially life-threatening illness or injury of cardiac origin responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less
11.	Minimum Data Set	Any potentially life-threatening illness or injury of cardiac origin responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less
12.	International Comparison	The standard is based on HIQA Response Times and Quality Standards for Pre Hospital Emergency Care, published on 18 January 2011. These standards are based on an analysis of similar standards in other jurisdictions
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html www.hiqa.ie
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> HealthStat <input checked="" type="checkbox"/> Other – give details: NSP
16.	Metric Completeness	100%
Named Link Person		Pat McCreanor, NAS Control and Performance Manager, pat.mccreanor@hse.ie Tel: 045 882592
Metric Sign off		Robert Morton, AND, National Ambulance Service, HSE. Tel: 045 882592 Charlie Hardy, Principal Officer, Department of Health. Tel: 01 635 4248

National Ambulance Service – First Responder DELTA calls

1.	KPI title	Percentage of Clinical Status 1 DELTA incidents responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less.
2.	Description	<p>Clinical Status 1 Delta Calls: calls reporting a potentially life-threatening illness or Injury</p> <p>Patient-carrying vehicle: any vehicle able to transport the patient in a clinically safe manner and dispatched from an Ambulance Service Control Centre. Examples include helicopter, lifeboat, aircraft, CEN* B compliant double-crewed fully equipped ambulance.</p> <p>Response time: the response time starts when the following details of the call have been ascertained: caller's telephone number; exact location of the incident; nature of the chief complaint. The clock stops when the transporting vehicle arrives at the scene of the incident.</p> <p>Response time has two distinct phases: activation time and response time. Activation time: from assignment of call to mobilisation of the responding resource. Response time: from mobilisation of the resource to arrival at the patient. * CEN: Comité Européen de Normalisation (Committee for European Standardization)</p>
3.	Rationale	To improve responses to potentially life-threatening illness. International evidence has identified that specific categories of patients have improved outcomes if delivered to the appropriate centre within a specific timeframe.
4.	Target	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Performance Contract (ISD) <input type="checkbox"/> HealthStat <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> Other – give details:
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>Numerator: The total number of Clinical Status 1 Delta emergency calls responded to in 18 minutes and 59 seconds or less from the time a call is verified to the arrival of a transporting vehicle at the scene of an incident.</p> <p>Denominator: The total number of Clinical Status Delta 1 calls received at the Ambulance Control Centre</p>
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other – give details:
9.	Data Sources	AMPDS (Advanced Medical Priority Dispatch System)
10.	Tracer Conditions	In Accordance with AMPDS Clinical Status 1 Delta refers to a potentially life-threatening non cardiac illness or injury responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less
11.	Minimum Data Set	Any potentially life-threatening non cardiac illness or injury responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less
12.	International Comparison	The standard is based on HIQA Response Times and Quality Standards for Pre Hospital Emergency Care, published on 18 January 2011. These standards are based on an analysis of similar standards in other jurisdictions
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html www.hiqa.ie

National Ambulance Service – First Responder DELTA calls

14.	Additional Information	As reported in the Performance Report.
	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> HealthStat <input checked="" type="checkbox"/> Other – give details: NSP
16.	Metric Completeness	100%
	Named contact for further information	Pat McCreanor, NAS Control and Performance Manager, pat.mccreanor@hse.ie Tel: 045 882592
	Metric Sign off (named person)	Robert Morton, AND, National Ambulance Service, HSE. Tel: 045 882592 Charlie Hardy, Principal Officer, Department of Health. Tel: 01 635 4248

Cancer Services

Cancer Services - Symptomatic Breast Cancer Services

1.	KPI title	Total number of urgent attendances
2.	Description	The number of new patients who attended the symptomatic breast clinic, whose referrals were triaged as urgent by the cancer centre.
3.	Rationale	Monitoring activity and breakdown of urgent/routine attendances.
4.	Target	NSP 2012 Target - 13,000
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: At the end of the clinic
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	A sum of the number of new patients who attended the cancer centre in the previous calendar month, whose referrals were triaged as urgent according to National Quality Assurance Standards for Symptomatic Breast Disease Services, by the specialist team. Calculation undertaken by the cancer centre.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	Symptomatic breast database in the cancer centres 100% coverage None
10.	Tracer Conditions	All patients who attend the symptomatic breast disease clinic and who adhere to the criteria for urgent referral to the clinic as defined by the National Quality Assurance Standards for Symptomatic Breast Disease Services, HIQA, 2006 ¹
11.	Minimum Data Set	1. The level of urgency assigned to the referral by the cancer centre. 2. The date of attendance at the symptomatic breast clinic
12.	International Comparison	Activity data that is used to compile information on access standards that are defined in the Irish National Quality Assurance Standards for Symptomatic Breast Disease Services, HIQA, 2006
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in Performance Report. ¹ http://www.hiqa.ie/system/files/Symptomatic_breast_Disease_Standards.pdf
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

Cancer Services - Symptomatic Breast Cancer Services

1.	KPI title	Total number of non urgent attendances
2.	Description	The number of new patients who attended the symptomatic breast clinic, whose referral was triaged as non-urgent by the cancer centre
3.	Rationale	Monitoring activity and breakdown of urgent/routine attendances
4.	Target	NSP 2012 Target – 25,000
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: At the end of the clinic
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	A sum of the number of new patients who attended the cancer centre in the previous calendar month, whose referrals were triaged as non urgent according to National Quality Assurance Standards for Symptomatic Breast Disease Services by the specialist team. Calculation undertaken by the cancer centre.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	Symptomatic breast database in the cancer centres 100% coverage None
10.	Tracer Conditions	All patients who attend the symptomatic breast disease clinic and who adhere to the criteria for non-urgent referral to the clinic as defined by the National Quality Assurance Standards for Symptomatic Breast Disease Services, HIQA, 2006 ¹
11.	Minimum Data Set	1. The level of urgency assigned to the referral by the cancer centre. 2. The date of attendance at the symptomatic breast clinic
12.	International Comparison	Activity data that is used to compile information on access standards that are defined in the Irish National Quality Assurance Standards for Symptomatic Breast Disease Services, HIQA, 2006.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report. ¹ http://www.hiqa.ie/system/files/Symptomatic_breast_Disease_Standards.pdf
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

Cancer Services - Symptomatic Breast Cancer Services

1.	KPI title	Number and percentage of attendances whose referrals were triaged as urgent by the cancer centre and adhered to the HIQA standard of 2 weeks for urgent referrals, (No. and percentage offered an appointment that falls within 2 weeks).
2.	Description	The number and percentage of attendances, whose referrals ⁱ were triaged as urgent by the cancer centre and were offered an appointment within 10 working days ⁱⁱ of the date of receipt of a letter of referral in the cancer office
3.	Rationale	Monitoring access
4.	Target	NSP 2012 Target - 12,350 (95%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: At the end of the clinic:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: The number of patients triaged as urgent by the cancer centre who attended a symptomatic breast clinic (during the reporting month) within 10 working days of the date of receipt of the referral letter in the cancer office or were offered an appointment to attend a symptomatic breast clinic within 10 working days of the date of receipt of the referral letter in the cancer office Denominator: The total number of patients triaged as urgent by the cancer centre who attended a symptomatic breast clinic during the reporting month. Percentage calculation undertaken by NCCP.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	Symptomatic breast database in the cancer centres 100% coverage None
10.	Tracer Conditions	All patients who attend the symptomatic breast disease clinic and who adhere to the criteria for urgent referral to the symptomatic breast disease clinic as defined by the National Quality Assurance Standards for Symptomatic Breast Disease Services, HIQA, 2006 Referrals: includes all sources of referrals and not just GP referrals A working day is defined as any <u>day</u> (other than Saturday, Sunday or bank holiday) on which scheduled clinics can be conducted. There may be additional days throughout the year that are designated as non working days (e.g. at Christmas) depending on the custom or practice of the hospital.
11.	Minimum Data Set	<ol style="list-style-type: none"> 1. The date of receipt of the referral letter in the cancer centre. 2. The level of urgency assigned to the referral by the cancer centre. 3. The date of the first appointment offered to the patient 4. The date of attendance at the symptomatic breast clinic
12.	International Comparison	Access standard as defined in the Irish National Quality Assurance Standards for Symptomatic Breast Disease Services, HIQA, 2006. Similar access standard in the UK – NHS Cancer Plan 2000.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report. http://www.hiqa.ie/system/files/Symptomatic_breast_Disease_Standards.pdf
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

Cancer Services - Symptomatic Breast Cancer Services

1.	KPI title	Number and percentage of attendances whose referrals were triaged as non-urgent by the cancer centre and adhered to the HIQA standard of 12 weeks for non urgent referrals. (No. and percentage offered an appointment that falls within 12 weeks).
2.	Description	The number and percentage of attendances whose referrals ⁱ were triaged as non-urgent ⁱⁱ by the cancer centre and were offered an appointment for a symptomatic breast clinic within 12 weeks (less than or equal to 84 days) of the date of receipt of the referral letter in the cancer office.
3.	Rationale	Monitoring access.
4.	Target	NSP 2012 Target - 23,750 (95%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: At the end of the clinic
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: The number of patients triaged by the cancer centre as non-urgent who attended a symptomatic breast clinic (during the reporting month) within 12 weeks (less than or equal to 84 days) of the date of receipt of the referral letter in the cancer office or were offered an appointment to attend a symptomatic breast clinic within 12 weeks (less than or equal to 84 days) of the date of receipt of the referral letter in the cancer office. Denominator: The total number of patients triaged by the cancer centre as non-urgent who attended a symptomatic breast clinic during the reporting month. Percentage calculation undertaken by NCCP.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	Symptomatic breast database in the cancer centres 100% coverage None
10.	Tracer Conditions	All patients referred to the symptomatic breast disease clinic who adhere to the criteria for non-urgent referral to the symptomatic breast disease clinic as defined by the National Quality Assurance Standards for Symptomatic Breast Disease Services, HIQA, 2006 ⁱ Referrals: includes all sources of referrals and not just GP referrals ⁱⁱ Non urgent includes early and routine referrals.
11.	Minimum Data Set	<ol style="list-style-type: none"> 1. The date of receipt of the referral letter in the cancer centre. 2. The level of urgency assigned to the referral by the cancer centre. 3. The date of the first appointment offered to the patient 4. The date of attendance at the symptomatic breast clinic
12.	International Comparison	Access standard as defined in the Irish National Quality Assurance Standards for Symptomatic Breast Disease Services, HIQA, 2006
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report. ¹ http://www.hiqa.ie/system/files/Symptomatic_breast_Disease_Standards.pdf
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

Cancer Services – Breast Cancer Screening

1.	KPI title	Number of women who attend for breast screening
2.	Description	Number of women aged between 50 and 64 years screened per month
3.	Rationale	The percentage of women in the target age group being screened must reach at least 70% for programme success (i.e. reduction in mortality).
4.	Target	NSP 2012 Target – 140,000
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	A sum of the number of new patients who attended for breast screening in the reporting month. Calculation undertaken by the Performance Evaluation Unit of the screening service.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Source Data completeness Data quality Issues	National cancer screening service (part of the HSE – National Cancer Control Programme). 100% coverage None
10.	Tracer Conditions	Women aged between 50 and 64 years who attend for breast screening
11.	Minimum Data Set	1. Medical record number 2. Mammogram date
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

1.	KPI title	No. of Attendances at rapid access lung clinic
2.	Description	Total number of new, return attendances and DNAs to the rapid access lung clinic
3.	Rationale	Monitoring activity
4.	Target	NSP 2012 Target - To be determined
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	A sum of the number of new and return attendances and new and return DNAs at a lung cancer rapid access clinic on a date between the first and the last date inclusive of any given month. Calculation undertaken by the cancer centre.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	Cancer Centre 100% coverage None
10.	Tracer Conditions	All patients referred to the rapid access lung clinic who adhere to the criteria for referral to the rapid access lung clinic as defined by the National Lung Cancer Rapid Access Service GP Referral Guidelines, NCCP ¹ New attendance is defined as an attendance by a patient who has not been investigated at least once previously as an outpatient at a lung cancer rapid access clinic with the same condition/complaint within the previous 12 months and has not been treated previously for lung cancer in the cancer centre at any time. Return attendance is defined as an attendance by a patient who has been seen at least once previously as an outpatient at a lung cancer rapid access clinic with the same condition/complaint within the previous 12 months.
11.	Minimum Data Set	1. The date of new patient attendance at the rapid access lung clinic 2. The date of return patient attendance at the rapid access lung clinic 3. The date of DNAs
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report. ¹ http://www.hse.ie/eng/services/Find_a_Service/HospsCancer/dooradoyle/MWCC/RapidAccessGuide.pdf
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

1.	KPI title	Number & percentage of patients attending the rapid access clinic who attended or were offered an appointment within 10 working days of receipt of referral in the cancer centre
2.	Description	Number and percentage of patients attending the rapid access clinic that attended or were offered an appointment within 10 working days of receipt of referral in the cancer centre.
3.	Rationale	Monitoring access
4.	Target	NSP 2012 Target – 95%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: The number of patients who attended or were offered an appointment to attend a rapid access lung clinic (during the reporting month) within 10 working days of the date of receipt of the referral letter in the cancer centre. Denominator: The total number of patients who attended a rapid access lung clinic during the reporting month. Percentage calculation undertaken by NCCP.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	Cancer Centre 100% coverage None
10.	Tracer Conditions	All patients referred to the rapid access lung clinic who adhere to the criteria for referral to the rapid access lung clinic as defined by the National Lung Cancer Rapid Access Service GP Referral Guidelines, NCCP ¹
11.	Minimum Data Set	1. The date of receipt of the referral letter in the cancer centre. 2. The date of the first appointment offered to the patient 3. The date of attendance at the rapid access lung clinic
12.	International Comparison	Similar access standard in the UK – NHS Cancer Plan 2000
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report. ¹ http://www.hse.ie/eng/services/Find_a_Service/HospsCancer/dooradoyle/MWCC/RapidAccessGuide.pdf
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

1.	KPI title	Number of centres providing surgical services for prostate cancers
2.	Description	Number of centres providing primary surgery for prostate cancer.
3.	Rationale	Monitoring service development and centralisation
4.	Target	NSP 2012 Target – 6
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of centres providing primary surgical treatment
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	National Cancer Control Programme
10.	Tracer Conditions	Men with prostate cancer (C61*) who require primary surgical treatment (radical prostatectomy) for treatment of their disease
11.	Minimum Data Set	Number of centres providing primary surgical treatment for prostate cancer
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: Monthly Activity Data
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

1.	KPI title	Number of new / return attendances and DNAs at rapid access prostate clinics
2.	Description	Total number of new, return attendances and DNAs to the rapid access prostate clinic
3.	Rationale	Attendance figures will monitor activity rates at these new clinics and support evaluation of the effectiveness of the referrals process
4.	Target	Still in establishment mode so activity will be monitored this year with a view to setting expected activity levels in 2013
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	A sum of the number of new and return attendances and new and return DNAs at a prostate cancer rapid access clinic on a date between the first and the last date inclusive of any given month. Calculation undertaken by the cancer centre.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	Rapid access prostate clinic returns 100% coverage None
10.	Tracer Conditions	All patients referred to the rapid access prostate clinic who adhere to the criteria for referral as defined by the National Prostate Cancer GP Referral Guidelines, NCCP. ¹ New attendance is defined as an attendance by a patient who has not been investigated at least once previously as an outpatient at a prostate cancer rapid access clinic with the same condition/complaint within the previous 18 months and has not been treated previously for prostate cancer in the cancer centre at any time. Return attendance is defined as an attendance by a patient who has been seen at least once previously as an outpatient at a prostate cancer rapid access clinic with the same condition/complaint within the previous 18 months.
11.	Minimum Data Set	1. The date of new patient attendance at the rapid access prostate clinic 2. The date of return patient attendance at the rapid access prostate clinic 3. The date of DNAs
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report. ¹ http://www.hse.ie/eng/services/Find_a_Service/HospitalsCancer/dooradoyle/MWCC/ProstateCancerReferralGuide.pdf
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: Monthly Activity Data
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

1.	KPI title	Number and percentage of patients attending the rapid access clinic who attended or were offered an appointment within 20 working days of receipt of referral in the cancer centre.
2.	Description	Number and percentage of patients seen or offered an appointment to be seen within 20 working days of referral.
3.	Rationale	This is in accordance with clinical guidelines on access to diagnosis with the ultimate aim of best outcome for the patient.
4.	Target	NSP 2012 Target: 90%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: the number of patients who attended or were offered an appointment to attend (in the reporting period) a rapid access prostate clinic within 20 working days of the date of receipt of referral letter in the cancer centre. Denominator: total number of patients who attended a rapid access prostate clinic during the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	Rapid access prostate clinic returns from cancer centres. 100% coverage None
10.	Tracer Conditions	All patients referred to the rapid access prostate clinic who adhere to the criteria for referral as defined by the National Prostate Cancer GP Referral Guidelines, NCCP ¹
11.	Minimum Data Set	1. The date of receipt of the referral letter in the cancer centre. 2. The date of the first appointment offered to the patient 3. The date of attendance at the rapid access prostate clinic
12.	International Comparison	No standard international metric available for rapid access prostate cancer clinics
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: Monthly Activity Data
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

1.	KPI title	Number of centres providing services for rectal cancers
2.	Description	Number of centres providing primary surgical treatment for rectal cancer.
3.	Rationale	Monitoring service centralisation
4.	Target	NSP 2012 Target – 8
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of centres providing primary surgical treatment.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Cancer Centre
9.	Data Source Data completeness Data quality Issues	National Cancer Control Programme
10.	Tracer Conditions	Men with rectal cancer (C19*, C20*) who require primary surgical treatment for treatment of their disease
11.	Minimum Data Set	Number of centres providing primary surgical treatment for rectal cancer
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: Monthly Activity Data
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

1.	KPI title	Number of patients who completed radiotherapy treatment for breast, lung, rectal or prostate cancer in the preceding quarter.
2.	Description	Number of patients who completed radical treatment for breast, prostate, lung or rectal cancer in the preceding quarter.
3.	Rationale	Numbers treated is an indicator of access to this important cancer treatment modality.
4.	Target	NSP 2012 Target: to be determined. New centres are still in establishment mode so activity will be monitored in 2012 with a view to setting targets in 2013.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	A sum of the number of patients who completed radiotherapy treatment for breast, prostate, lung or rectal cancer in the five HSE radiotherapy facilities.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: HSE radiotherapy facility
9.	Data Source Data completeness Data quality Issues	Electronic patient record 100% coverage None
10.	Tracer Conditions	Patients who completed radical treatment for breast (C50*, D05*), prostate (C61*), lung (C34*) or rectal cancer (C19*, C20*) in the preceding quarter.
11.	Minimum Data Set	1. Diagnosis 2. Date of treatment completion
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: Monthly Activity Data
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

1.	KPI title	Number and percentage of patients undergoing radiotherapy treatment for breast, prostate, lung or rectal cancer who commenced treatment within 15 working days of being deemed ready to treat by the radiation oncologist.
2.	Description	Percentage of patients undergoing radical treatment for breast, prostate, lung or rectal cancer who commenced treatment within 15 working days of being deemed ready to treat by the radiation oncologist
3.	Rationale	Radiotherapy treatment should commence within a clinically acceptable timeframe once the patient is deemed ready to treat
4.	Target	NSP 2012 Target: 90%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Numerator: Number of breast, prostate, lung or rectal patients whose radiotherapy treatment was completed in the reporting period <u>and</u> for whom that treatment commenced within 15 days of being deemed ready to treat Denominator: Number of breast, prostate, lung or rectal patients whose radiotherapy treatment was completed in the reporting period
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other – give details: By tumour type within HSE radiotherapy facility
9.	Data Source Data completeness Data quality Issues	Electronic patient record 100% coverage Some data definitions still being clarified
10.	Tracer Conditions	Patients who completed radical treatment for breast (C50*, D05*), prostate (C61*), lung (C34*) or rectal cancer (C19*, C20*) in the preceding quarter.
11.	Minimum Data Set	1. Diagnosis 2. Date of ready to treat 3. Date of start of treatment 4. Date of completion of treatment
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: Monthly Activity Data
Named Link Person		Dr. Deirdre Murray, NCCP Tel: 021 4927601 Email: DeirdreE.Murray@hse.ie
Metric Sign off		Dr. Susan O'Reilly, National Director, NCCP Tel: 01 8287100 Mary Jackson, Principal Officer, Department of Health, Tel: 01 6354337

Older People Services

1.	KPI title	<p>Home Care Package recipients</p> <ul style="list-style-type: none"> i) Total no. of people in receipt of HCPs ii) No. and % direct provision iii) No and % indirect provision iv) No. and % cash grant v) No. and % respite vi) No. and % multiple types
2.	Description	<p>i) A Home Care Package (HCP) consists of community services and supports which may be provided to assist an older person, depending on their individual assessed care needs, to return home from hospital or residential care or to remain at home.</p> <p>A HCP refers to the enhanced level of community services and supports above the normal levels available from mainstream community services. HCPs do not replace existing services. The actual HCP provided to any individual may include paramedical, nursing, respite and/or home help and/or other services depending on the assessed care needs of the individual applicant.</p> <p>Enhanced level of community services is any additional level of services, over and above mainstream level of service, which is provided to support the assessed needs of the applicant (National Guidelines HCP Scheme)</p> <p>Note: National Guidelines state that if the HCP is provided “through a combination (Category “Direct”, “Indirect” is assigned on the basis of whichever element of the Home Care Package is the greatest cost)</p> <p>The number of clients in receipt of home care packages on the last day of the calendar month. ii) and iii) (below) added together will total the number of persons in receipt on last day of the month.</p> <p>ii) Direct Provision - Number of persons who are in receipt of a HCP on the last day of the month which is being delivered <u>predominantly</u> (on the basis of whichever element of the Home Care Package is the greatest cost), by HSE employed staff.</p> <p>iii) Indirect Provision - Number of persons in receipt of a HCP on the last day of the month which is being delivered <u>predominantly</u> (on the basis of whichever element of the Home Care Package is the greatest cost) by voluntary/private providers. If all or most of a HCP is provided by way of cash grant then its counted within indirect HCPs</p> <p>iv) Cash Grants - Number of persons in receipt of a “Cash Grant” towards the provision of HCP. This is a subsection of Indirect Provision Home Care Packages.</p> <p>No new cash grants will be approved from 1st Dec 2010 so that the number in receipt will be reducing in 2011. (Ref National Guidelines)</p> <p>v) Respite - No of clients in receipt of a HCP on the last day of the month where the HCP is solely for the purpose of respite care in a residential setting. T could be provided directly or indirectly. Do not count HCP’s where respite is only an element of the package.</p> <p>vi) Multiple Types - Number of people who are in receipt of a HCP on the last day of the month which is delivered by more then one provider. E.g. HSE and voluntary provider, HSE and private provider, voluntary and private providers, private and private providers, cash grant and any other service provider</p>
3.	Rationale	<p>Monitor and Measure provision of service and report on activity against NSP.</p> <p>A separate funding stream has been provided by the DoHC for Home Care Packages. Therefore there is a requirement to monitor provision of service and report on activity; provide analysis of provision of enhanced public community services, analysis of indirect provision to enhance Service, Quality and VFM and appropriate use of HCP to support family/carer, in lieu of residential respite</p>

Older People Services – Home Care Packages

4.	Target	NSP 2012 Target – 10,870
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Metric 15.131.3 - Total number of clients in Receipt of a Home Care Package on the last day of the month. = No. at start of month + no of new clients – (no ceased during the month) Direct/Indirect/Multiple & Respite – count at the end of the month. On approval of HCP, decision regarding how services are to be provided (e.g. direct / indirect / respite, etc) is made and recorded
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age under/over 65 <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other
9.	Data Sources Data Completeness Data Quality Issues	Populated template by LHO is submitted to the BIU analyst through Regional Specialists in HSE West, DNE and DML. South returns through RDO office
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	SFOP - Older People Dataset
12.	International Comparison	Not applicable
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

Older People Services – Home Care Packages

1.	KPI title	Total number of Home Care Packages provided
2.	Description	<p>The total number of home care packages provided in the past calendar month in the LHO based on the Planning Cost.</p> <p>Home Care Package (HCP): HCPs consist of enhanced levels of community based services e.g. nursing, therapy, home help, respite etc. HCPs are provided where the input of enhanced levels of support are required to support older people to remain at home or to return to home following hospitalisation. They also enhance the support of early discharges from the acute sector and prevent inappropriate admissions to long term residential care.</p>
3.	Rationale	<p>A separate funding stream has been provided by the DoHC for Home Care Packages. Therefore there is a requirement to monitor provision of service and report on activity.</p> <p>This metric is based on financial data and the amount spent on Home Care Packages based on the Planning Cost of a Home Care Package. This differs to the total number in receipt of a home care package which counts the actual numbers receiving the service.</p>
4.	Target	NSP 2012 Target – 5,300
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of home care packages provided in the past calendar month in the HSE Region based on the Planning Cost set out in the Service Plan. This metric is calculated using financial expenditure to data supplied by each of the 4 Areas. The weekly planning cost used in calculating the number of HCPs is currently €500 per week as per Service Plan 2011.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age, under and over 65's <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Work to be completed with regions to verify accuracy and completeness of data.
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	Not applicable.
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

Older People Services – Home Care Packages

1.	KPI title	Total number of new Home Care Package clients
2.	Description	Total number of new clients that commenced a home care package for the first time in the past calendar month from the first day of the month to the last day of the month in the LHO regardless of duration of the package. When funding is fully allocated the number of new HCPs is dependent on persons in receipt of HCP finishing their package.
3.	Rationale	A separate funding stream has been provided by the DoHC for Home Care Packages. Therefore there is a requirement to monitor provision of service and report on activity. Measures the throughput of scheme, and allows service to predict availability of resources.
4.	Target	NSP 2012 Target – 4,800
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Total number of new clients that commenced a home care package for the first time in the past calendar month from the first day of the month to the last day of the month in the LHO regardless of duration of the package.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age under/over 65 <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Populated template by LHO is submitted to the BIU analyst through Regional Specialists in HSE West, DNE and DML. South returns through RDO office
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	SFOP - Older People Dataset
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

Older People Services – Home Help Hours

1.	KPI title	Total number of home help hours provided for all care groups, (excluding provision of hours from Home Care Packages).
2.	Description	<p>Home Help Service provides personal and/or essential domestic care to dependent people to support them to live at home. It should support and complement the informal care already been provided.</p> <p>The total number of home help hours delivered through home visits by home help worker employed by HSE or providers receiving funding from the HSE from the Home Help Budget (excludes provision of home help hours from Home Care Packages) during the reporting period (1 calendar month). This includes hours provided to Older People, Disabilities, Mental Health and Children and Families but <u>excludes</u> provision of hours from Home Care Packages.</p>
3.	Rationale	Monitor the quantity of service delivered against service plan targets and facilitate adjustment to achieve targets if required.
4.	Target	NSP 2012 Target – 10.70m hours
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>The number of Home Help hours delivered to clients in a calendar month from the Home Help budget</p> <p>This figure is reported cumulatively (i.e. month and YTD). e.g. the March figure would be the Jan-March figures added together. (BIU)</p>
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age (>65<65 only) <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: by care group, e.g. older people, disabilities, mental health, children & families, other
9.	Data Sources Data Completeness Data Quality Issues	Populated template by LHO is submitted to the BIU analyst through Regional Specialists in HSE West, DNE and DML. South returns through RDO office
10.	Tracer Conditions	As per description/
11.	Minimum Data Set	SFOP- Older People Dataset
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

Older People Services – Home Help Hours

1.	KPI title	Total number of people in receipt of home help hours (excluding provision of hours from Home Care Packages)
2.	Description	The number of clients in receipt of a home help service on the last day of the month. This includes people in the following care groups, older people, disabilities, mental health and children and families. Home Help Service provides personal and/or essential domestic care to dependent people to support them to live at home. It should support and complement the informal care already being provided.
3.	Rationale	This metric provides information on the usage of home help hours in the community and the number of people supported by the HSE to remain at home.
4.	Target	NSP 2012 Target – 50,002
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of clients receiving home help hours in the LHO on the last day of the reporting month.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: - care group, e.g. older people, children and families, mental health, disability.
9.	Data Sources Data Completeness Data Quality Issues	Populated template by LHO is submitted to the BIU analyst through Regional Specialists in HSE West, DNE and DML. South returns through RDO office
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	SFOP - Older People Dataset
12.	International Comparison	Not applicable
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

1.	KPI title	Total number of day care places for older people
2.	Description	<p><i>Day service</i> is a generic term used in referring to two types of day service /activity programme delivered in a social day centre /club or day care centre.</p> <p>The following are the different service models for day services. Definitions may be subject to review once 2nd survey has been completed.</p> <p>Social <i>clubs /active retirement groups /clubs provide</i> community-based programmes that provide non-medical care primarily social and recreational activities to older people. There is limited personal care assistance, supervision, or assistance essential for sustaining Activities of daily living (ADL); on a less than 24-hour basis. These centres are operated by voluntary groups /active retirement groups /organisations and receive financial support from the HSE under Section 39.</p> <p>Social <i>day care support</i> consists of community-based programmes that provide non-medical care to meet the needs of older people in a structured, comprehensive programme that provides a variety of services in a protective setting on a less than 24-hour basis. Participants may demonstrate moderate impairments in functioning and cognition but do not require the intervention or services of a registered nurse (RN) or therapist acting under the supervision of the client's GP / physician. These centres are operated by voluntary groups /organisations and receive financial support from the HSE under Section 39.</p> <p>HSE <i>Day Care</i> Centres are predominately nurse led services and have a supervised daytime programme of activities and interventions. These services include nursing and when necessary rehabilitative therapy services /other health related medical services for the purpose of restoring or maintaining optimal capacity for self-care in addition to core services. These programmes provide services through individual plans of care and target older persons who could be at risk of institutional placement if interventions are not provided. Participants have moderate to substantial degrees of impairments in functioning and cognition.</p> <p>Dementia Specific <i>day care</i> centres consist of community-based programmes that provide day care for persons in the various stages (mild, moderate, or severe) of Alzheimer's disease or other dementias. The majority of these centres are operated by Alzheimer Society of Ireland and receive financial support from HSE under Section 39 grant aid.</p> <p><i>N.B. Consultant led Day Hospitals attached to acute Hospitals were excluded from the day care survey.</i></p>
3.	Rationale	The purpose of this metric is to monitor provision of all day services funded to any extent by the HSE, including Alzheimer Society of Ireland (ASI) specific, and report on activity
4.	Target	NSP 2012 target – targets to be determined
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Day Care Survey for 2011
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:

9.	Data Sources Data Completeness Data Quality Issues	Day Care Survey 2011 - Each LHO area to submit data to a central database and final figures reported to BIU analyst.
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

1.	KPI title	No of people being funded under NHSS in long term residential care at the end of the reporting month
2.	Description	This metric measures the total number of people both public and private who are in receipt of long term residential care services and who are supported under the Nursing Homes Support Scheme. This includes State Support only, State Support and Nursing Home Loan, Nursing Home Loan only. It also includes 'Savers' i.e. people in public long term care at the commencement of the scheme who did not opt for the NHSS along with people on subvention and in older persons contract beds who did not opt for the scheme.
3.	Rationale	The rationale is to establish the number of people in long-term residential care who are receiving financial support from the State. In the transition years of the scheme, there may be some individuals receiving support via the subvention scheme or contract beds. However, ultimately the Nursing Homes Support Scheme will be the only State funded means of accessing long-term residential care.
4.	Target	NSP 2012 target – 23,611
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Data to be reported on the basis of the number of people in receipt of NHSS support on the last day of every month
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Nursing Home Support Scheme Database. Subvention and contract bed LHO returns via Regional Business Unit Bed Management System
10.	Tracer Conditions	
11.	Minimum Data Set	Nursing Home Support Scheme Database
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

1.	KPI title	Number and proportion of those who qualify for ancillary state support who chose to avail of it.
2.	Description	<p>Where your assets include land and property in the State (i.e. chargeable assets), the 5% contribution based on such assets may be deferred. This is an optional benefit of the scheme called ancillary State support.</p> <p>The number of persons 'who qualify for ancillary state support' are all applicants who declare chargeable assets on their application for State support.</p> <p>The number of persons 'who qualify for ancillary state support who chose to avail of it' are all applicants who declare chargeable assets on their application for State support <u>and</u> who also apply for ancillary state support in relation to those assets.</p> <p>Finally, the 'number and proportion of those who qualify for ancillary state support who choose to avail of it' is the number who avail of the ancillary state support as a % of the number who 'qualify'.</p> <p>The metric measures the number of people who apply for ancillary state support. However, it also tells us what percentage of people with chargeable assets apply for ancillary state support. For example, if 100 people apply for ancillary state support and this represents 50% of all people who qualify for ancillary state support, then the total number of people with chargeable assets, i.e. people who could have applied for the loan, stands at 200.</p>
3.	Rationale	The number of people who qualify <u>and</u> choose to avail of the loan tells us the number of people actually in receipt of the Nursing Home Loan. The proportion of people who qualify and choose to avail of the loan allows us to measure the level of uptake of the loan amongst those who qualify and allows us to calculate the percentage of applicants who possess land-based assets within the State. This is useful data for the purposes of understanding asset wealth amongst the nursing home population which, in turn, is critical in the context of the preparation of the annual estimates for the scheme.
4.	Target	NSP 2012 Target – Demand Led
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Data to be reported on the basis of the number of people in receipt of ancillary State support on the last day of every month, and on the basis of the number of people as a percentage of those who 'qualify', on the last day of every month.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:

9.	Data Sources Data Completeness Data Quality Issues	Nursing Home Support Scheme Database
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	Nursing Home Support Scheme Database
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

1.	KPI title	Percentage of complete applications processed within 4 weeks
2.	Description	Fair Deal: percentage of complete applications processed within 4 weeks
3.	Rationale	Monitoring function.
4.	Target	NSP 2012 Target – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Nursing Home Support Scheme Database
10.	Tracer Conditions	Not applicable.
11.	Minimum Data Set	Nursing Home Support Scheme Database
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	Additional NHSS reported in the HSE Performance Report monthly.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

Older People Services – Subvention and Contract Beds

1.	KPI title	Number in receipt of subvention
2.	Description	There are currently two rates of subvention a basic rate and an enhanced rate. This metric is the number of clients in receipt of subvention on the last day of the month and includes enhanced subvention.
3.	Rationale	With the introduction of 'A Fair Deal' subvention has ceased and there will be no new clients under the subvention scheme. The purpose of this metric is to measure the number of persons remaining on subvention.
4.	Target	NSP 2012 Target – 760
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Total number of clients in receipt of subvention on last day of month.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Template completed by Nursing Home Support Office in each LHO and returned to RDO Business Unit, which is then sent to the Non Acute BIU.
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	No
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

Older People Services – Subvention and Contract Beds

1.	KPI title	Number in receipt of enhanced subvention
2.	Description	There are currently two rates of subvention a basic rate and an enhanced rate. This metric is the number of clients in receipt of enhanced subvention on the last day of the month.
3.	Rationale	With the introduction of 'A Fair Deal' subvention has ceased and there will be no new clients under the subvention scheme. The purpose of this metric is to measure the number of persons remaining on enhanced subvention.
4.	Target	NSP 2012 Target – 540
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Total number of clients in receipt of enhanced subvention on last day of month.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Template completed by Nursing Home Support Office in each LHO and returned to RDO Business Unit, which is then sent to the Non Acute BIU.
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	No
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

Older People Services – Subvention and Contract Beds

1.	KPI title	Number of people in long-term residential care who are in contract beds
2.	Description	This refers to individuals in beds which have been contracted by the HSE in private nursing homes.
3.	Rationale	With the introduction of the Nursing Homes Support Scheme, the use of contract beds is being ceased. The purpose of this metric is to measure the number of persons remaining in contract beds.
4.	Target	A reduction in numbers each month would be anticipated as new entrants to long-term residential care receive support under the Nursing Homes Support Scheme.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Data to be reported on the basis of the number of people in contract beds on the last day of every month
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Returns submitted to the Non Acute BIU at LHO level via the Regions
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	No
12.	International Comparison [Is this a standard International metric?]	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16.	Metric Completeness	New Metric 2012
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off (named person)		Noel Mulvihill, AND Older People, HSE Tel: 01 8908714. Geraldine Fitzpatrick, Principal Officer, Department of Health. Tel: 01 6354585

Older People Services – Subvention and Contract Beds

1.	KPI title	No. of long stay residents in public and voluntary nursing homes admitted before 27 th October 2009 (saver cases)
2.	Description	This refers to individuals who were in public and voluntary nursing homes prior to the Nursing Homes Support Scheme commencing and who are paying long-stay charges.
3.	Rationale	The Nursing Homes Support Scheme is now the only system of financial support available to new entrants to nursing homes. The purpose of this metric is to measure the number of 'saver' cases remaining in public and voluntary nursing homes.
4.	Target	A reduction in numbers each month would be anticipated as new entrants to long-term residential care receive support under the Nursing Homes Support Scheme.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Data to be reported on the basis of the number of 'saver' cases on the last day of every month
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Nursing Homes Support Scheme Database SFOP Bed Management System
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Nursing Homes Support Scheme Database Bed Management System
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	None
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16.	Metric Completeness	New Metric 2012
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off (named person)		Noel Mulvihill, AND Older People, HSE Tel: 01 8908714. Geraldine Fitzpatrick, Principal Officer, Department of Health. Tel: 01 6354585

1.	KPI title	Number of beds in public residential care settings for Older People
2.	Description	The total number of beds in public designated centres for older people -This includes all HSE facilities and all facilities receiving funding under s.38 of the Health Act 2004 which are registered with HIQA under the Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2009 (S.I. 245 of 2009). In other words, it includes HSE and section 38 residential care facilities for older people which provide 24 hour nursing care. These facilities provide some or all of the following for older people: long-term care, respite, rehabilitation, convalescence and palliative care.
3.	Rationale	It is policy to maintain public provision of residential care services, including nursing home care, for older people. This metric enables this provision to be monitored and to be contrasted against the total national provision of residential care.
4.	Target	NSP 2012 target – 7,089 – 7,432 minimum and maximum range
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly in arrears <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Beds counted on the last day of every month and temporary closures are included within the overall figure. Monthly in arrears.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Template completed and returned based on monthly Bed Register to BIU via the National office SFOP
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	SFOP Bed Management System.
12.	International Comparison	Not applicable.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	Reported monthly in arrears. As reported in the Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Geraldine Fitzpatrick, Principal Officer, Department of Health, Tel: 01 635 4585

Older People Services – Elder Abuse

1.	KPI title	Number of new referrals by Region
2.	Description	Numbers of referrals of elder abuse received by Senior Case Workers. Elder abuse is defined as “a single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person or violates their human and civil rights”.
3.	Rationale	To compare referrals from the four different administrative regions and identify possible gaps.
4.	Target	NSP 2012 Target – 2,000
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Elder Abuse Database returned to national office by the dedicated case workers in each area, then to Non Acute BIU, CPCP.
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	SFOP Elder Abuse database
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Marie Kennedy, Principal Officer, Department of Health, Tel: 01 674 3206

Older People Services – Elder Abuse

1.	KPI title	Number and percentage of new referrals broken down by abuse type: i) physical ii) psychological iii) financial iv) neglect
2.	Description	Physical This may include hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions. Psychological This may include emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks. Financial This may include theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. Neglect Ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating. Failing to provide appropriate equipment.
3.	Rationale	To monitor and improve services through identifying the different types of abuse being reported to the HSE.
4.	Target	Not applicable
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<u>Number by abuse type</u> Total number of abuse types x 100
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Elder Abuse Database returned to national office by the dedicated case workers in each area, then to Non Acute BIU, CPCP.
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	SFOP Elder Abuse Database
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Marie Kennedy, Principal Officer, Department of Health, Tel: 01 674 3206

Older People Services – Elder Abuse

1.	KPI title	Number of active cases
2.	Description	Elder abuse is defined as “a single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person or violates their human and civil rights”. Active cases are those alleged cases of elder abuse which have not been closed by the Senior Case Workers.
3.	Rationale	To compare referrals from the four different administrative regions and identify possible gaps.
4.	Target	Not applicable
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count of active cases.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other
9.	Data Sources Data Completeness Data Quality Issues	Elder Abuse Database returned to national office by the dedicated case workers in each area, then to Non Acute BIU, CPCP.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	SFOP Elder Abuse Database
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Marie Kennedy, Principal Officer, Department of Health, Tel: 01 674 3206

1.	KPI title	Percentage of referrals receiving first response from Senior Caseworkers within 4 weeks
2.	Description	Referral should receive first response within 4 weeks of referral being received by the HSE.
3.	Rationale	All cases should have received an initial response within 4 weeks. Failure to meet this target indicates problems in this area.
4.	Target	NSP 2012 Target – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	$\frac{\text{No. of referrals receiving first response from senior case workers within 4 weeks}}{\text{No. of referrals}} \times 100 =$
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Elder Abuse Database returned to national office by the dedicated case workers in each area, then to Non Acute BIU, CPCP.
10.	Tracer Conditions	As per description.
11.	Minimum Data Set	SFOP Elder Abuse Database
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Supplementary Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Non Acute Manager BIU, Tel: (01) 635 2673 Email: john.mccusker@hse.ie
Metric Sign off		Noel Mulvihill Assistant National Director Older People Tel: 01 8131 800 Marie Kennedy, Principal Officer, Department of Health, Tel: 01 674 3206

Mental Health

Mental Health Services – Adult Inpatient Services

1.	KPI title	Number of admissions to adult acute inpatient units
2.	Description	This metric is designed to measure the total number admitted to adult mental health acute inpatient units.
3.	Rationale	This metric is used to support the preparation of indicators based on rates of admission. Reduced admissions could be used as a proxy measure for provision of community alternatives. Similarly, a trend of increasing admission rates could alert the HSE to a lack of capacity in community settings and/or increased demand for secondary care mental health services.
4.	Target	NSP 2012 Target – 14,163
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Quarterly in arrears
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Health Research Board to BIU Non acute Team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD PC
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Adult Inpatient Services

1.	KPI title	Median length of stay
2.	Description	Median length of stay is the middle number in the sequence of numbers created by listing all of the figures for length of stay during the period of less than one year. Where such a sequence has an even amount of numbers, the median is the average of the two middle numbers.
3.	Rationale	Measurement of length of stay can be used as a comparator to reflect traditional responses to need and a proxy in relation to the development of community interventions and supports.
4.	Target	NSP 2012 Target – 11
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly (in arrears) <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly (in arrears) <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details:
7.	KPI Calculation	Median length of stay is the middle number in the sequence of numbers created by listing all of the figures for length of stay during the period of less than one year. Where such a sequence has an even amount of numbers, the median is the average of the two middle numbers.
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Health Research Board to BIU Non acute Team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	The HRB collects and reports on the mean (i.e. the average) the median (as described at No. 7 above and the range of length of stay. The calculations exclude patients with a length of stay greater than one year. Further information about the way in which the calculations are made is detailed on Page 5 of the Quarterly HRB Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Adult Inpatient Services

1.	KPI title	Rate of admissions to adult acute inpatient units per 100,000 population in mental health catchment per quarter.
2.	Description	This metric is designed to measure the rate of admission per 100,000 population in mental health catchment to adult mental health acute inpatient units.
3.	Rationale	Reduced admissions could be used as a proxy measure for provision of community alternatives.
4.	Target	NSP 2012 Target – 77.3
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>Total number of admissions to acute inpatient units divided by population aged 18 or over in mental health catchment * 100,000</p> <p>Rates are currently collected and calculated by HRB using existing MH catchment area populations rather than LHO area populations. This is particularly relevant given that rates are calculated per 100,000 population. More info available from HRB</p>
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Health Research Board to BIU Non acute Team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat Other – give details: ISDPC
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Adult Inpatient Services

1.	KPI title	First admission rates to adult acute units (that is, first ever admission), per 100,000 population in mental health catchment area per quarter
2.	Description	First admissions are admissions of persons who were not previously admitted to the receiving hospital or unit or to any other psychiatric in-patient facility.
3.	Rationale	This metric is designed to measure first admission rates to adult acute units (that is, first ever admission). per 100,000 in the mental health catchment area.
4.	Target	NSP 2012 Target – 24.6
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Quarterly in arrears
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Quarterly in arrears
7.	KPI Calculation	Number of First admission to acute units (that is, first ever admission) during reporting period divided by population aged 18 years or over *100,000 First Admissions / rates are currently collected and calculated using existing MH catchment area populations rather than LHO area populations. This is particularly relevant given that rates are calculated per 100,000 population. More info available from HRB.
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Health Research Board to BIU Non acute Team.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD-PC
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Adult Inpatient Services

1.	KPI title	Acute re-admission as a percentage of admissions
2.	Description	In-patient readmission rates to adult acute inpatient units.
3.	Rationale	This metric is designed to measure the percentage of patients readmitted to adult mental health acute inpatient units and is linked to the earlier metric on Total admissions – see comments there.
4.	Target	NSP 2012 Target – 68%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	1. Total No. of Admissions minus total number of first admissions = total no. of readmissions 2. Total no. of readmissions is divided by total admissions and presented as percentage
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Health Research Board to BIU Non acute Team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD PC
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Adult Inpatient Services

1.	KPI title	Inpatient readmission rates to adult acute units per 100,000 population in mental health catchment area per quarter
2.	Description	Re-admissions are admissions of persons who were either previously admitted to the receiving hospital or unit or to any other psychiatric in-patient facility. The relevant number is calculated by subtracting the number of first admissions from total admissions and expressed as a rate per 100,000 head of population in mental health catchment area.
3.	Rationale	This metric is designed to measure readmission rates to acute units, per 100,000 population. Readmission rates can be an indicator of the effectiveness of interventions and/or an indicator of the prevalence of severe and enduring mental illness requiring episodic inpatient interventions.
4.	Target	NSP 2012 Target – 52.7
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of Admissions to acute units - Number of First admission to acute units (that is, first ever admission), / Population *100,000
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Health Research Board to BIU Non acute Team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Adult Inpatient Services

1.	KPI title	Number of adult acute inpatient beds per 100,000 population in the mental health catchment area per quarter
2.	Description	The total number of acute psychiatric beds within the mental health catchment per 100,000 population.
3.	Rationale	The metric tracks the number of acute inpatient beds per 100,000 population to be measured against the recommendations in A Vision for Change
4.	Target	NSP 2012 Target – 22.6
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of acute Inpatient places / Population *100,000 / rates are currently collected and calculated by HRB using existing MH catchment area populations rather than LHO area populations. This is particularly relevant given that rates are calculated per 100,000 population. More info available from HRB.
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Health Research Board to BIU Non acute Team.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISDPC
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Adult Inpatient Services

1.	KPI title	Number of adult involuntary admissions
2.	Description	<p>HRB (NPIRS) definition: The legal status recorded by NPIRS is that recorded on admission. Changes may occur in legal status following admission but this is not recorded by the NPIRS.</p> <p>In addition in accordance with 16(1)A of the Mental Health Act 2001 details of all Admission Orders must be provided to the Mental Health Commission.</p>
3.	Rationale	The metric collects data of the number of adult service users who are admitted involuntarily under the Mental Health Act.
4.	Target	NSP 2012 Target – 1,388
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Health Research Board to BIU Non acute Team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD PC
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Adult Inpatient Services

1.	KPI title	Rate of adult involuntary admissions per 100,000 population in mental health catchment per quarter
2.	Description	HRB (NPIRS) definition : The legal status recorded by NPIRS is that recorded on admission. Changes may occur in legal status following admission but this is not recorded by the NPIRS. In addition in accordance with 16(1)A of the Mental Health Act 2001 details of all Admission Orders must be provided to the Mental Health Commission.
3.	Rationale	The metric collects data of the rate per 100,000 population of adults admitted involuntarily under the Mental Health Act 2001.
4.	Target	NSP 2012 Target – 7.6
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	No. of involuntary admissions expressed as a rate per 100,000
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Health Research Board to BIU Non acute Team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD PC
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Child and Adolescent

1.	KPI title	No. of Child and Adolescent Community Mental Health Teams
2.	Description	<i>Vision for Change</i> recommended the number of Community Child and Adolescent Mental Health Teams.
3.	Rationale	Implementation of recommendations of A Vision for Change and to address the Regulations of the Mental Health Commission.
4.	Target	NSP 2012 Target – 57
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of Community Child and Adolescent Mental Health Teams.
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	RDO to BIU team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

1.	KPI title	No. of Child and Adolescent Day Hospital Teams
2.	Description	<i>Vision for Change</i> has recommended the number of Child and Adolescent Day Hospital Teams.
3.	Rationale	Implementation of recommendations of A Vision for Change and to address the Regulations of the Mental Health Commission.
4.	Target	NSP 2012 Target - 2
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of Day Hospital Teams.
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	RDO to BIU team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	No
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Number of Paediatric Liaison Teams
2.	Description	<i>Vision for Change</i> recommended number of Paediatric Liaison Teams.
3.	Rationale	Monitor implementation of recommendations of A Vision for Change
4.	Target	NSP 2012 Target – 3
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of Paediatric Liaison Teams.
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	RDO to BIU Team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	No
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Number of Child/Adolescent admissions to HSE Child and Adolescent mental health in-patient units
2.	Description	Number of admissions to HSE Child and Adolescent Inpatient Units.
3.	Rationale	To monitor the number of admissions to each C&A unit
4.	Target	NSP 2012 Target – 140
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Annually.
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	RDO to BIU – Non-Acute
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Number of children/adolescents admitted to adult HSE mental health inpatient units: i) <16 yrs ii) <17 yrs iii) <18 yrs
2.	Description	Number of children/adolescents admitted to adult HSE mental health inpatient units.
3.	Rationale	The Mental Health Commission code of practice on regulating the admission of children under 18 to adult inpatient units. From July 1 st 2009, no child under 16 is to be admitted to an adult inpatient unit except in exceptional circumstances, from December 2010, no child under 17 can be admitted to an adult inpatient unit except under exceptional circumstances. With effect from 1 st December 2011, no child under 18 should be admitted to an adult inpatient unit unless in exceptional circumstances. This metric is to monitor compliance with the code of practice.
4.	Target	NSP 2012 target – 80 (<16 yrs – 0, <17 yrs – 16, <18 yrs – 64)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> HSE Area <input type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	MHC to BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	The reporting of this data other than in totals nationally could lead to breaches of Data Protection.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> Population Health Common Dataset <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882502. Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Number of involuntary admissions of children and adolescents
2.	Description	Involuntary admission of children is regulated by procedures under Section 25 of the Mental Health Act.
3.	Rationale	To monitor the trend of involuntary admission.
4.	Target	NSP 2012 Target – 16
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	CAMHS Team /Approved Centre to Business Intelligence Unit (BIU)
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Percentage of involuntary admissions of children and adolescents
2.	Description	Involuntary admissions expressed as a percentage of all admissions of children and adolescents.
3.	Rationale	To monitor trends of involuntary admission.
4.	Target	NSP 2012 Target – 5%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Annually.
7.	KPI Calculation	Involuntary admissions expressed as a percentage of all admissions of children and adolescents.
8.	Reporting Aggregation	<input type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	CAMHS Teams / Approved Centres to BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Number of child/adolescent referrals (including re-referred) received by mental health services
2.	Description	This metric is designed to measure the number of child/ adolescents (i) under 16yrs and (ii) over 16years but not yet reached their 18 th birthday referred to each CAMH Service during the reporting period.
3.	Rationale	The purpose of this metric is to gain information over time on the numbers of referrals to support the monitoring and evaluating of trends over time per area/ region and across the service nationally.
4.	Target	NSP 2012 Target – 12,493
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count – the total number of child/adolescent referrals received
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	From CAMHS team to LHO to RDO to CPCP Business Intelligence Unit.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	No. of child / adolescent referrals (including re-referred) accepted by Mental Health Services
2.	Description	This metric is designed to measure the number child/ adolescent (i) under 16y and (ii) over 16y but not yet reached their 18 th birthday accepted by each CAMH Service during the reporting period.
3.	Rationale	The purpose of this metric is to gain information over time on the numbers of referrals accepted, based on the criteria operated by the CAMHS team in that particular reporting period and monitoring and evaluating the trends over time per HSE region and across the service nationally.
4.	Target	NSP 2012 Target – 8,461
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	From CAMHS team to LHO to RDO to CPCP BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Total number of new (including re-referred) child/adolescent cases offered first appointment and seen
2.	Description	Number of new (including re-referred) child / adolescent cases seen by a clinical WTE.
3.	Rationale	To monitor trends in relation to referrals.
4.	Target	NSP 2012 Target – 7,824
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	From CAMHS team to LHO to RDO to CPCP BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Number and percentage of new / referred cases offered first appointment and seen: i) <3 months ii) >12 months
2.	Description	Refers to children/adolescents. Wait time: The number of months from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days.
3.	Rationale	Wait times to CAMHS for mental health assessment provide a measure of service in the community. Monitoring the number of new (including re-referred) cases seen overall from referral and evaluating the trends over time per HSE region and across the service nationally as it relates to target.
4.	Target	NSP 2012 Target – (<3mths – 70%, >12mths – 0%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	From CAMHS team to LHO to RDO to CPCP BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Number of cases closed/discharged by CAMHS service
2.	Description	This metric is designed to measure the number of cases closed/discharged from each CAMH Service during the reporting period.
3.	Rationale	The purpose of this metric is to gain information over time on the numbers of cases closed/discharged and monitoring and evaluating the trends over time per area/ region and across the service nationally.
4.	Target	NSP 2012 Target – 7,740
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Total number of child/adolescent cases closed/discharged.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	From CAMHS team to LHO to RDO to CPCP BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Percentage of cases closed/discharged by CAMHS service
2.	Description	This metric is designed to measure the number of cases closed/discharged by each CAMH Service during the reporting period expressed as a percentage of accepted referrals.
3.	Rationale	The purpose of this metric is to gain information over time on the numbers of cases closed/discharged and monitoring and evaluating the trends over time per area/ region /nationally.
4.	Target	NSP 2012 Target – 80%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count, total number of child/adolescent cases closed/discharged.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	From CAMHS team to LHO to RDO to CPCP BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services – Child and Adolescent

1.	KPI title	Percentage on waiting list for first appointment at end of each quarter by wait time: i) <3 months ii) 3-6 months iii) 6-9 months iv) 9-12 months v) >12 months
2.	Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment) as a percentage of all waiting.
3.	Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
4.	Target	NSP Target 2012 – (<3mths – 35%, 3-6 mths – 25%, 6-9 mths – 20%, 9-12 mths – 20%, >12 mths – 0)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	CAMHS team to LHO to RDO to CPCP BIU non-acute team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

1.	KPI title	Number on waiting list for first appointment at end of each quarter by wait time: i) <3 months ii) 3-6 months iii) 6-9 months iv) 9-12 months v) >12 months
2.	Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3.	Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
4.	Target	NSP Target 2012 – (<3 mths – 624, 3-6 mths – 452, 6-9 mths – 365, 9-12 mths – 358, >12 mths – 0)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> County <input type="checkbox"/> Institution <input checked="" type="checkbox"/> Other – give details: Individual Teams
9.	Data Sources Data Completeness Data Quality Issues	From CAMHS team to LHO to RDO to CPCP BIU non-acute team
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Martin Rogan, Assistant National Director Mental Health Tel: 045 882 502 Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

1.	KPI title	Number of repeat deliberate self harm presentations in ED
2.	Description	The WHO definition of deliberate self harm is 'an act with non fatal outcome in which an individual deliberately initiates a non-habitual behaviour, that without intervention from others will cause harm, or deliberately ingests a substance in excess of the prescribed or generally recognised therapeutic dosage, and which is aimed at realising changes that the person desires via the actual or expected physical consequences'. For this metric we are reporting the number of individuals who present 2 or more times having self harmed.
3.	Rationale	There is a strong association between repeated self harm and suicide. Reducing the number of repeated self harm presentations will be an indicator of whether intervention and treatment plans with this group of patients is having a positive effect.
4.	Target	NSP 2012 Target – 1,348
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> HSE Area <input type="checkbox"/> LHO Area <input type="checkbox"/> County <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	National Suicide Research Foundation annually in arrears to NOSP to BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
13.	Web link to data	www.nsf.ie
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Geoff Day, National Office for Suicide Prevention 01 635 2179 geoff.day1@hse.ie Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Mental Health Services– Child and Adolescent

1.	KPI title	Number of suicides in arrears per CSO Year of Occurrence
2.	Description	Count per CSO Year of Occurrence. Currently the CSO provide the data on the national mortality rate for suicide, the year of occurrence data is the most accurate data however it is dependent on the speed at which deaths by suicide are registered. All deaths by external cause require an inquest, and the death is not registered until after the inquest. Many inquests are not scheduled until the following year (for various reasons). Therefore, it takes some time before the deaths that occurred in any year are registered. The most recent year for which we have year of occurrence data is 2008.
3.	Rationale	Although the year of occurrence data is usually 2 years old it nevertheless provides consistent and comparable data on which to assess trends over time and plan interventions which can reduce the annual numbers of suicides.
4.	Target	Not applicable
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: annually in Q3.
7.	KPI Calculation	Number of suicides reported to the Central Statistics Office (CSO) following a Coroners Inquest.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> HSE Area <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Central Statistics office to NOSP to BIU
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
13.	Web link to data	www.cso.ie
14.	Additional Information	As reported in the HSE Performance Report and the HSE Annual Suicide Prevention Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager non acute BIU Tel. 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Geoff Day, National Office for Suicide Prevention 01 635 2179 geoff.day1@hse.ie Luke Mulligan, Principal Officer, Department of Health, Tel: 01 635 3234

Disability Services

Disability Services – Day Services

1.	KPI title	Number of work/work -like activity WTE places for persons with intellectual disability and/or autism.
2.	Description	The number of WTE places used by adult persons with ID and/or autism in Work/Like-Work Activities. This metric refers to the following 4 descriptors as outlined in the National Review of HSE Day Services. a) Therapeutic b) Sheltered Work-Commercial c) Sheltered Work-Like Work d) External Work-Like Work.
3.	Rationale	The purpose of the metric is to monitor the number of Work/Like-Work Activity Whole Time Equivalent (WTE) places provided for adult persons with intellectual disability and/or autism.
4.	Target	NSP 2012 Target – 1,578 The implementation of recommendations flowing from the review of Day Services is expected to result in a 10% decline in the number of people engaged in these services. As these people are largely also engaged in other Day Services, a consequent increase in those numbers is not expected.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other - give details:
7.	KPI Calculation	Count. WTE place is defined as a place used by an adult person who attends the service for 30 hours a week. In some cases the person will not attend for a full 30 hours. In this event, the WTE is calculated by dividing the total number of hours used by participants by 30 hours in the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance No. Work is ongoing on the collection of this information during 2012.
10.	Tracer (Conditions) terms	As per description
11.	Minimum Data Set	Yes - National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

Disability Services – Day Services

1.	KPI title	Number of persons with intellectual disability and/or autism benefiting from work/work -like activity services
2.	Description	The number of adult persons with ID and/or autism in Work/Like-Work Activities. This metric refers to the following four descriptors as outlined in the National Review of HSE Day Services. a) Therapeutic b) Sheltered Work-Commercial c) Sheltered Work-Like Work, d) External Work-Like Work. One person may attend more than one day service or engage in more than one Work/Like work activity.
3.	Rationale	The purpose of the metric is to monitor the number of adult persons with intellectual disability and/or autism benefiting from Work/Like-Work Activity Services.
4.	Target	NSP 2012 Target – 3,084 The implementation of recommendations flowing from the review of Day Services is expected to result in a 10% decline in the number of people engaged in these services. As these people are largely also engaged in other Day Services, a consequent increase in those numbers is not expected.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count, this metric is calculated by reporting on the total number of adults who have used the service in the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. No. Work is ongoing on the collection of this information during 2012
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes - National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other: give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of work/work-like activity WTE places provided for persons with physical and/or sensory disability.
2.	Description	The number of WTE places used by adult persons with physical and/or sensory disability in Work/Like-Work Activities. This metric refers to the following four descriptions as outlined in the National Review of HSE Day Services. a) Therapeutic b) Sheltered Work-Commercial, c) Sheltered Work-Like Work, d) External Work-Like Work.
3.	Rationale	The purpose of this metric is to monitor the number of Work/Like-Work Activity Whole Time Equivalent (WTE) adult places provided for persons with physical and/or sensory disability.
4.	Target	NSP 2012 Target – 71
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count. WTE place is defined as a place used by an adult person who attends the service for 30 hours a week. In some cases the person will not attend for a full 30 hours. In this event, the WTE is calculated by dividing the total number of hours worked by participants by 30 in the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Disability Information Unit (DIU – OGS system). No. Work is ongoing on the collection of this information during 2012.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes - National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	The implementation of recommendations flowing from the review of Day Services is expected to result in a 10% decline in the number of people engaged in these services. As these people are largely also engaged in other Day Services, a consequent increase in those numbers is not expected.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other: give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of persons with physical and/or sensory disability benefiting from work/work-like activity services
2.	Description	The number of adult persons with physical and/or sensory disability in Work/Like-Work Activities. This metrics refers to the following four descriptions as outlined in the National Review of HSE Day Services. a) Therapeutic, b) Sheltered Work-Commercial c) Sheltered Work-Like Work, d) External Work-Like Work.
3.	Rationale	The purpose of the metric is to monitor the number of adult persons with physical and/or sensory disability benefiting from Work/Like-Work Activity Services.
4.	Target	NSP 2012 Target - 138.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count. This metric is calculated by reporting on the total number of adults who have used the service in the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Disability Information Unit (DIU – OGS system). No. Work is ongoing on the collection of this information during 2012.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes - National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of Rehabilitative Training places provided (all disabilities)
2.	Description	The number of Adult Rehabilitative Training (RT) WTE places provided as per the OGS database. This does not necessarily equal the number of persons availing of places since some WTE places may be occupied by more than one person.
3.	Rationale	The purpose of the metric is to monitor the number of RT places provided (all disabilities).
4.	Target	NSP 2012 Target - 2,627
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count. This metric is point in time on the last day of the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Disability Information Unit (DIU – OGS system). New PI Work is ongoing on the collection of this information during 2011.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes - National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of persons (all disabilities) benefiting from Rehabilitative Training (RT)
2.	Description	The number of adult persons in Rehabilitative Training as per the OGS database.
3.	Rationale	The purpose of the metric is to monitor the number of persons (all disabilities) benefiting from Rehabilitative Training (RT)
4.	Target	NSP 2012 Target - 2,991
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count. The number of persons who are attending the service at the end of the reporting period
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Disability Information Unit (DIU – OGS system). Complete
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes - National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of persons with intellectual disability and/or autism benefiting from Other Day Services (excluding RT and Work/Work-Like Activities)
2.	Description	The number of adult persons with intellectual disability and/or autism benefiting from Other Day Services (Excluding RT and Work/Like-Work Activities). All individuals engaged in the following descriptors should be returned; <ul style="list-style-type: none"> • Supported Employment • Sheltered Employment • Open Employment • All Other Day Care
3.	Rationale	The purpose of the metric is to monitor the number of adult persons with intellectual disability and/or autism benefiting from Other Day Services (Excluding RT and Work/Like-Work Activities).
4.	Target	NSP 2012 Target – 12,430
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count: The total number of persons with intellectual disability and/or autism benefiting from Other Day Services (excluding RT and Work/Like-Work Activities).
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Disability Information Unit (DIU – OGS system). Complete.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Disability template. Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of persons with physical and/or sensory disability benefiting from Other Day Services (excluding RT and Work/Work-Like Activities)
2.	Description	The number of adult persons with physical and/or sensory disability benefiting from Other Day Services (excluding RT and Work/Like-Work Activities). All individuals engaged in the following descriptors should be returned; <ul style="list-style-type: none"> • Supported Employment • Sheltered Employment • Open Employment • All Other Day Care
3.	Rationale	The purpose of the metric is to monitor the number of adult persons with a physical and/or sensory disability benefiting from Other Day Services (excluding RT and Work/Like-Work Activities).
4.	Target	NSP 2012 Target – 2,581
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count: the total number of persons with a physical and / or sensory disability in Other Day Services (excluding RT).
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Complete.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Disability template. Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of persons with intellectual disability and/or autism benefiting from residential services
2.	Description	<p>The total number of adults and children with intellectual disability and/or autism in HSE and HSE funded residential services.</p> <p>This metric is designed to count all persons who used residential places in the reporting period. Each LHO should count the people they fund, wherever they receive their service, rather than the people who receive a service within their geographical boundaries.</p> <p>All individuals who are benefitting from the following list of places should be included:</p> <ul style="list-style-type: none"> • 7 day places • 5 day places • Places in nursing homes • Places outside LHO • Places outside of the state <p>Collected for children and Adults separately.</p>
3.	Rationale	The purpose of the metric is to monitor the number of adults and children benefiting from residential services for persons with intellectual disability.
4.	Target	NSP 2012 Target – 8,416
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other NOTE: Report frequency for children: Annually
7.	KPI Calculation	Count: the total No. of adult (18 years +) and children (0-17 years) service users with an intellectual disability and autism benefiting from residential services.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	<p>HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance.</p> <p>Complete.</p>
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Disability template. Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of persons with physical and/or sensory disability benefiting from residential services
2.	Description	<p>The total number of adults and children with physical and/or sensory disability in HSE and HSE funded services. Each LHO should count the people they fund, wherever they receive their service, rather than the people who receive a service within their geographical boundaries.</p> <p>All individuals who are benefitting from the following list of places should be included:</p> <ul style="list-style-type: none"> • 7 day places • 5 day places • Places in nursing homes • Places outside LHO • Places outside of the state <p>Collected for Children and Adults separately.</p>
3.	Rationale	The purpose of this metric is to monitor numbers of adults and children benefiting from residential services with physical and/or sensory disabilities. It is designed to count all persons who used residential places in the reporting period.
4.	Target	NSP 2012 Target – 708
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Report frequency for children: Annually:
7.	KPI Calculation	Count: the total number of persons with physical and/or sensory disability benefiting from residential services. Each LHO should count the people they fund, wherever they receive their service, rather than the people who receive a service within their geographical boundaries.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	<p>HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance.</p> <p>Complete</p>
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Disability template. Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of bed nights in residential centre-based respite services used by persons with intellectual disability and/or autism.
2.	Description	Total number of bed nights in residential centre-based respite services used by adults and children with intellectual disability and/or autism during the reporting period. This metric is calculated by taking the total number of bed nights used during the reporting period, (cumulative within the quarter). Collected for Adults and Children separately.
3.	Rationale	The purpose of the metric is to monitor the utilisation of centre based Respite Services for adults and children with intellectual disability and/or autism.
4.	Target	NSP 2012 Target – 139,565
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Reporting frequency for children: Annually
7.	KPI Calculation	Count: the total number of bed nights in residential centre based respite used by persons with intellectual disability and autism.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Complete
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

Disability Services – Respite Services

1.	KPI title	Number of persons with intellectual disability and/or autism benefiting from residential centre-based respite services.
2.	Description	Number of adults and children with intellectual disability and/or autism benefiting from residential centre-based respite services. Collected for Adults and Children separately.
3.	Rationale	The purpose of this metric is to monitor the total number of adults and children who used the service during the reporting period.
4.	Target	NSP 2012 Target – 5,115
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Report frequency for children: Annually
7.	KPI Calculation	Count: the total number of persons with intellectual disability and/or autism benefiting from residential centre-based respite services.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Complete
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of bed nights in residential centre based respite services used by persons with physical and/or sensory disability
2.	Description	Total number of bed nights in residential centre based respite services used by adults and children with physical and/or sensory disability during the reporting period. It is calculated by counting the total number of bed nights used during the reporting period. Collected for Adults and Children separately.
3.	Rationale	The purpose of the metric is to monitor the utilisation of centre based Respite Services for adults and children with physical and/or sensory disability.
4.	Target	NSP 2011Target – 13,782
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Report frequency for children: Annually
7.	KPI Calculation	Count: the total number of bed nights in residential centre based respite services used by persons with physical and/or sensory disability, (cumulative within the quarter).
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Complete.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Disability template. Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

1.	KPI title	Number of persons with physical and/or sensory disability benefiting from residential centre-based respite services.
2.	Description	Number of adults and children with physical and/or sensory disability using residential centre-based respite services.
3.	Rationale	The purpose of the metric is to monitor the number of adults and children using the provision of residential centre-based respite services for persons with physical and/or sensory disability during the reporting period. Collected for adults and children separately.
4.	Target	NSP 2012 Target – 1,220
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Report frequency for children: Annually
7.	KPI Calculation	Count: the total number of persons with a physical and / or sensory disability benefiting from residential centre-based respite places.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Complete
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Disability template. Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

Disability Services – PA / Home Support Hours

1.	KPI title	Number of Personal Assistant / Home Support hours used by persons with physical and/or sensory disability.
2.	Description	Number of Personal Assistant / Home Support hours used by persons with physical and/or sensory disability, (not already counted in Older Persons data). This metric should be collected for adults and children separately.
3.	Rationale	Monitoring of development of Personal Assistant services.
4.	Target	NSP 2012 Target – 1.64m
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Report frequency for children: Annually
7.	KPI Calculation	Count: the total number of Personal Assistant / Home Support hours used by persons with a physical and / or sensory disability.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Complete
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Disability template. Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

Disability Services – PA / Home Support Hours

1.	KPI title	Number of persons with physical and/or sensory disability benefiting from Personal Assistant / Home Support hours
2.	Description	Number of adults and children with physical and/or sensory disability benefiting from Personal Assistant / Home Support hours (not already counted in Older Persons data). This metric should be collected for Adults and Children separately.
3.	Rationale	Monitoring of development of Personal Assistant services.
4.	Target	NSP 2011 Target – 11,571
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Report frequency for children: Annually
7.	KPI Calculation	Count: the total number of persons with physical and/or sensory disability benefiting from Personal Assistant / Home Support hours.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	HSE Area Business managers via Local Health Offices to Business Intelligence Unit, Corporate Planning and Corporate Performance. Complete
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes, Disability template. Through RDO to BIU
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

Disability Services – Disability Act Compliance

1.	KPI title	Number of requests for assessments received
2.	Description	The number of applications for Assessments of Need as recorded in the Assessment of Need database.
3.	Rationale	This metric is in line with the Disability Act 2005.
4.	Target	NSP 2012 Target – 3,636
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in Arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count, the total number of applications for Assessments of Need received, as recorded in the Assessment of Need database.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Disabilities Information Unit to BIU non-acute team. Complete
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes. National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Colm Desmond, Principal Officer, Department of Health, Tel: 01 635 4107

Disability Services – Disability Act Compliance

1.	KPI title	Number of assessments commenced as provided for in the regulations
2.	Description	The number Assessments of Need which commenced stage 2 of the process, as recorded in the Assessment of Need database. (Implementation: Part 2-Disability Act).
3.	Rationale	This metric is in line with the Disability Act 2005.
4.	Target	NSP 2012 Target – 3,327
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of Assessments of Need which commenced stage 2 of the process, as provided for in the regulations and recorded in the Assessment of Need database.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Disabilities Information Unit to BIU non-acute team Complete.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes. National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Luke Mulligan, Principal Officer, Department of Health, Tel: 635 3234

Disability Services – Disability Act Compliance

1.	KPI title	Number of assessments commenced within the timelines as provided for in the regulations
2.	Description	The number of Assessments of Need which commenced stage 2 of the process within three months of the date of receipt of a completed application, as provided for in the regulations and recorded in the Assessment of Need database. Total number also expressed in percentage terms. (Implementation: Part 2-Disability Act).
3.	Rationale	This metric is in line with the Disability Act 2005.
4.	Target	NSP 2012 Target – 3,327
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The number of Assessments of Need which commenced stage 2 of the process within three months of the date of receipt of a completed application, as provided for in the regulations and recorded in the Assessment of Need database. Total number also expressed in percentage terms.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Disabilities Information Unit to BIU non-acute team. Complete
10.	Tracer Conditions	As per description
11.	Minimum Data Set	National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD-PC
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Luke Mulligan, Principal Officer, Department of Health, Tel: 635 3234

Disability Services – Disability Act Compliance

1.	KPI title	Number of assessments completed as provided for in the regulations
2.	Description	The number of Assessments of Need which have been completed as provided for in the regulations and Assessment Reports forwarded to the Liaison Officer / Case Manager. (Implementation: Part 2-Disability Act).
3.	Rationale	This metric is in line with the Disability Act 2005.
4.	Target	NSP 2012 Target – 3,327
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of Assessments of Need which have been completed as provided for in the regulations and Assessment Reports forwarded to the Liaison Officer / Case Manager.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Disabilities Information Unit to BIU non-acute team. Complete.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes. National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Luke Mulligan, Principal Officer, Department of Health, Tel: 635 3234

Disability Services – Disability Act Compliance

1.	KPI title	Number of assessments completed within the timelines as provided for in the regulations
2.	Description	The number of Assessments of Need completed within three months of their commencement OR within a revised time frame negotiated as per paragraph 10 of the Regulations accompanying the Disability Act which allows for exceptional circumstances. Total number also expressed in percentage terms. (Implementation: Part 2-Disability Act).
3.	Rationale	This metric is in line with the Disability Act 2005.
4.	Target	NSP 2012 Target – 3,327
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in Arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of Assessments of Need completed within three months of their commencement OR within a revised time frame negotiated as per paragraph 10 of the Regulations accompanying the Disability Act which allows for exceptional circumstances.. Total number also expressed in percentage terms.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Disabilities Information Unit to BIU non-acute team Complete.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes. National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: ISD-PC
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Luke Mulligan, Principal Officer, Department of Health, Tel: 635 3234

1.	KPI title	Number of service statements completed
2.	Description	The number of Service Statements which have been completed and forwarded to applicants.
3.	Rationale	This metric is in line with the Disability Act 2005.
4.	Target	NSP 2012 Target – 2,828
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The number of Service Statements which have been completed and forwarded to applicants.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Disabilities Information Unit to BIU non-acute team. Due to commence Quarter 2, 2011. Dependant on IT expansion
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes. National Disability Unit
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Luke Mulligan, Principal Officer, Department of Health, Tel: 635 3234

Disability Services – Disability Act Compliance

1.	KPI title	Number of service statements completed within the timelines as provided for in the regulations
2.	Description	The number of Service Statements completed within one month of the date of receipt of the Assessment Report by the Liaison Officer / Case Manager, as provided for in the regulations. Total number also expressed in percentage terms.
3.	Rationale	This metric is in line with the Disability Act 2005.
4.	Target	NSP 2012 Target – 2,828
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of Service Statements completed within one month of the date of receipt of the Assessment Report by the Liaison Officer / Case Manager, as provided for in the regulations.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Disabilities Information Unit to BIU non-acute team Due to commence reporting Quarter 2, 2011. Dependant on IT expansion.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes. National Disability Unit
12.	International Comparison	No.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details
Named contact for further information		John McCusker, BIU, Tel: 01 6352673 Email: john.mccusker@hse.ie
Metric Sign off		Cate Hartigan, AND, Disabilities, Email: cate.hartigan1@hse.ie Luke Mulligan, Principal Officer, Department of Health, Tel: 635 3234

*Child Protection and
Welfare Services*

Child Protection and Welfare Services – After Care

1.	KPI title	Number of young adults aged 18-21(18-20 inclusive) in receipt of an aftercare service on the last day of the reporting period
2.	Description	This metric measures the number of young adults between the ages of 18-20 (inclusive) (18-20 up to 21 st Birthday) who are in receipt of an aftercare service as per section 45 of the Child Care Act 1991/HSE National After Care Policy.
3.	Rationale	To assess the provision of aftercare services.
4.	Target	NSP 2012, Baseline to be established in 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of young adults on the last day of the quarter in this category who are in receipt of an aftercare service.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – After Care

1.	KPI title	Number of young adults aged 18-21 (18-20 inclusive) in receipt of an aftercare service who are in full time education on the last day of the reporting period.
2.	Description	This metric measures the number of young adults between the ages of 18-20 (inclusive) (18-20 up to 21 st Birthday) who are in receipt of an aftercare service as per section 45 of the Child Care Act 1991/HSE National After Care Policy and who are in full time education.
3.	Rationale	To assess the provision of aftercare services.
4.	Target	NSP 2012, Baseline to be established in 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of young adults on the last day of the quarter in this category who are in receipt of an aftercare service and who are in full time education.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Child Abuse

1.	KPI title	Number of referrals of child abuse and child welfare concerns
2.	Description	This metric is designed to measure the number of referrals of child abuse and child welfare concerns received during the reporting period. (Abuse is categorised within Children First as one of the following: Emotional abuse, Physical abuse, Sexual abuse and Neglect.)
3.	Rationale	Indicator of volume of referrals and responsiveness of service to such referrals.
4.	Target	NSP 2012, Demand Led.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This metric is collected quarterly in arrears.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This metric is to be reported quarterly in arrears</u>
7.	KPI Calculation	This metric looks at the number of referrals of child abuse and child welfare concerns received in the administrative area during the reporting period and the services response to such referrals.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices. Returned by local areas who have implemented the Referral phase of the NCCIS.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Child Abuse

1.	KPI title	Percentage of referrals of child abuse where a preliminary enquiry took place within 24 hours (1 working day)
2.	Description	This metric is designed to extract the percentage of child abuse referrals received during the reporting period where a preliminary enquiry took place within 24 hours (1 working day) of receipt of the referral.
3.	Rationale	Indicator of volume of referrals and responsiveness of service to such referrals.
4.	Target	NSP 2012, Baseline to be established in 2012
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is collected quarterly in arrears.
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported quarterly in arrears.
7.	KPI Calculation	<p>This figure is produced by dividing the number of referrals of child abuse by the total number of referrals of child abuse where a preliminary enquiry took place within 24 hours (1 working day) for example:</p> <p>LHO has 50 referrals of child abuse, 25 of which had a preliminary enquiry within 24 hours x 100%)</p> <p>Calculation: $\frac{\text{Total number of referrals of child abuse} - 50}{\text{No. of referrals of child abuse with preliminary enquiry within 24hrs (25)}} \times 100\% = 50\%$</p>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	<p>HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.</p> <p>Returned by local areas who have implemented the Referral phase of the NCCIS.</p>
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	<p>Monthly Performance Supplementary Report (Reported in PR Quarterly)</p> <p>http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html</p>
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		<p>Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376</p> <p>Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235</p>

Child Protection and Welfare Services – Child Abuse

1.	KPI title	Percentage of referrals of child abuse which led to an initial assessment
2.	Description	This metric is designed to measure the percentage of child abuse referrals received which led to an initial assessment.
3.	Rationale	Indicator of volume of referrals and responsiveness of service to such referrals, and when assessments have taken place following a preliminary enquiry.
4.	Target	NSP 2012, Demand Led.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This metric is collected quarterly in arrears.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This metric is to be reported quarterly in arrears.</u>
7.	KPI Calculation	<p>The figure is produced by dividing the total number referrals of child abuse which led to an initial assessment by the total number of referrals of child abuse.</p> <p>LHO area has 50 referrals of child abuse, 25 of which received an initial assessment, x 100%).</p> <p>Calculation: $\frac{\text{Total No of referrals of child abuse which led to an initial assessment (25)}}{\text{Total No. of referrals of child abuse (50)}} \times 100 = 50\%$</p>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	<p>HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.</p> <p>Returned by local areas who have implemented the Referral phase of the NCCIS.</p>
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	<p>Monthly Performance Supplementary Report (Reported in PR Quarterly)</p> <p>http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html</p>
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		<p>Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376</p> <p>Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235</p>

Child Protection and Welfare Services – Child Abuse

1.	KPI title	Percentage of initial assessments which took place within 21 days of the referral
2.	Description	This metric is designed to measure the number of initial assessments that took place as a result of a referral of child abuse received during the reporting period and of those initial assessments commenced how many were completed within 21 days of the referral/report.
3.	Rationale	Indicator of volume of referrals and responsiveness of service to such referrals, and when assessments have taken place.
4.	Target	NSP 2012, Baseline to be established in 2012
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This metric is collected quarterly in arrears.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This metric is to be reported quarterly in arrears.</u>
7.	KPI Calculation	<p>The figure is produced by dividing the number of referrals of child abuse who received an initial assessment and the IA were completed within 21 days of the referral by the total number of initial assessments commenced.</p> <p>LHO area has 50 referrals of child abuse that received an initial assessment, 25 of which were completed within 21 days of the referral x 100%).</p> <p>Calculation: <u>Of the No of IA completed within 21 days of referral (25)</u> Of the No. of referrals of child abuse that led to an IA (50) (25)x100% = 50%</p>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	<p>HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.</p> <p>Returned by local areas who have implemented the Referral phase of the NCCIS.</p>
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	<p>Monthly Performance Supplementary Report (Reported in PR Quarterly)</p> <p>http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html</p>
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		<p>Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376</p> <p>Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235</p>

Child Protection and Welfare Services – Child Abuse

1.	KPI title	Percentage of initial assessments which led to the child being listed on the Child Protection Notification System (CPNS)
2.	Description	As an outcome of an Initial Assessment following a child abuse referral, this metric measures the number of children that were listed to CPNS as an action following the initial assessment (IA). (<u>Following rollout of NCCIS standardised business process</u>)
3.	Rationale	Indicator of volume of listings to CPNS as an action following initial assessment.
4.	Target	NSP 2012, Demand Led.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This metric is collected quarterly in arrears.</u>
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This metric is to be reported quarterly in arrears.</u>
7.	KPI Calculation	This figure is produced by dividing the number of children listed to CPNS following child abuse referrals as an action of the initial assessment by the number of initial assessments. LHO area has 50 initial assessments, 25 of which resulted in a child being listed to CPNS x 100%). Calculation: <u>Of the No of IA completed within 21 days of referral (25)</u> Of the No. of referrals of child abuse that led to an IA (50) (25)x100% = 50%
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices. Returned by local areas who have implemented the Referral phase of the NCCIS.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Family Support Services

1.	KPI title	Number of Children referred to a Family Support Service during the reporting period
2.	Description	<p>This metric is designed to measure the number of children who were referred to a family support services in the reporting period from any of the services listed below:</p> <p>A comprehensive list of agencies providing these services is available to HSE staff via the Intranet on the link below: http://hsetnet.hse.ie/hse_central/commercial_and_support_services/national_contracts_office/document_management/service_level_agreements/national_register.html</p>
3.	Rationale	Data obtained from this measure can be used for service planning.
4.	Target	NSP 2012, Baseline to be established in 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is collected quarterly in arrears.
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported quarterly in arrears.
7.	KPI Calculation	This metric will be a census style count on the last day of each quarter. The count will be the number of children who were referred to a family Support Service during the quarter.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Family Support Services

1.	KPI title	Number of Children in receipt of a Family Support Service during the reporting period.
2.	Description	<p>This metric is designed to measure the number of children in receipt of a family support services in the reporting period from any of the services listed below:</p> <p>A comprehensive list of agencies providing these services is available to HSE staff via the Intranet on the link below: http://hsenet.hse.ie/hse_central/commercial_and_support_services/national_contracts_office/document_management/service_level_agreements/national_register.html</p>
3.	Rationale	Data obtained from this measure can be used for service planning.
4.	Target	NSP 2012, Baseline to be established in 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is collected quarterly in arrears.
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported quarterly in arrears.
7.	KPI Calculation	This metric will be a census style count on the last day of each quarter. The count will be the number of children who were referred to a family Support Service during the quarter.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	<p>The Number and Percentage of children in care by care type:</p> <ul style="list-style-type: none"> • Special Care Units (<u>Ballydowd; Coovagh House; Glenn Alainn</u>) • High Support (<u>Rath Na nÓg; Crannóg Nua; Sacre Coeur; La Nua; Clodagh House; Ferryhouse; Elm House.</u>) • Residential General (Note: <u>Include Special Arrangements</u>) • Foster care (not including day fostering) • Foster care with relatives • Other Care Placements
2.	Description	<p>This metric is designed to measure the number and percentage of children in care by care type, categorised as follows:</p> <ul style="list-style-type: none"> • Special Care Units (<u>Ballydowd; Coovagh House; Glenn Alainn</u>) • High Support (<u>Rath Na nÓg; Crannóg Nua; Sacre Coeur; La Nua; Clodagh House; Ferryhouse; Elm House.</u>) • Residential General (Note: <u>Include Special Arrangements</u>) • Foster care (not including day fostering) • Foster care with relatives • Other Care Placements
3.	Rationale	This metric ensures Compliance with the 1995 Child Care Regulations.
4.	Target	<p>NSP 2012 expected activity/target:</p> <ul style="list-style-type: none"> • Special Care Units (see above) 0.3% • High Support (see above) 0.5% • Residential General (Note: <u>Include Special Arrangements</u>) <7% • Foster care (not including day fostering) 59% • Foster care with relatives 30% • Other Care Placements 3% <p>Number of children in Care overall expected activity 2012 – 6,526</p>
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>The figure is produced by dividing the number of children in a care type (<i>for each care type, Residential, Foster Care, Foster Care with Relatives FCWR, Other</i>) by the total number of Children in Care (i.e. LHO area has 158 children in care, 29 of which are in Foster Care With Relatives 29/158x100%)</p> <p>Calculation: $\frac{\text{Number of Children in FCWR}(29)}{\text{Number of Children Care (158)} \times 100\% = 18\%$</p>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	<p>Monthly Performance Supplementary Report (Reported in PR Quarterly)</p> <p>http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html</p>
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		<p>Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376</p> <p>Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235</p>

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	The Number and Percentage of children in Private Residential Care: Special Care Placements at the end of the reporting period.
2.	Description	This metric is designed to measure the number and percentage of children who are in private residential care Special Care Placements at the end of the reporting period.
3.	Rationale	To ensure compliance with regulations. Data obtained from this measure can also be used for service planning. (Indicator of quality service provision and service performance).
4.	Target	Metric should be as near to zero as possible in line with policy NSP 2012 Target - 0
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of children in a private residential care Special Care Placement by the total number of children in residential care Special Care Placement. Calculation: <u>No. of Children in a private residential care special care placement</u> Number of Children residential Care Special Care Placement
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	Number and Percentage of children in Private Residential Care: High Support Placements at the end of the reporting period.
2.	Description	This metric is designed to measure the number and percentage of children who are in private residential care High Support Placements at the end of the reporting period.
3.	Rationale	To ensure compliance with regulations. Data obtained from this measure can also be used for service planning. (Indicator of quality service provision and service performance).
4.	Target	Metric should be as near to zero as possible in line with policy NSP 2012 Expected Target - 0
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of children in a private residential care High Support Placement by the total number of children in residential care High Support Placement. Calculation: $\frac{\text{No. of Children in a private residential care High Support placement}}{\text{Number of Children residential Care High Support Placement}}$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	Number and Percentage of children in Private Residential Care: Residential General Placements (including special arrangements) at the end of the reporting period.
2.	Description	This metric is designed to measure the number and percentage of children who are in private residential care Residential General Placements (including special arrangements) at the end of the reporting period.
3.	Rationale	To ensure compliance with regulations. Data obtained from this measure can also be used for service planning. (Indicator of quality service provision and service performance).
4.	Target	Metric should be as near to zero as possible in line with policy NSP 2012 Target - 0
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of children in a private residential care High Support Placement by the total number of children in residential care High Support Placement. Calculation: <u>No. of Children in a private residential care High Support placement</u> Number of Children residential Care High Support Placement
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	Number and Percentage of children in Foster Care Private (General Foster Care)
2.	Description	This metric is designed to measure the number and percentage of children in Foster Care General who are in private foster care placements at the end of the reporting period.
3.	Rationale	To ensure compliance with regulations. Data obtained from this measure can also be used for service planning. (Indicator of quality service provision and service performance).
4.	Target	Metric should be as near to 1% as possible in line with policy NSP 2012 Target - 1%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of children foster care general in a private foster care placement by the total number of children in foster care general. Calculation: $\frac{\text{Number of Children in foster care general in a private foster care placement}}{\text{Number of Children foster care general}}$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	Number and Percentage of children in Foster Care Private (Foster Care with Relatives)
2.	Description	This metric is designed to measure the number and percentage of children in Foster Care with Relatives who are in private foster care placements at the end of the reporting period.
3.	Rationale	To ensure compliance with regulations. Data obtained from this measure can also be used for service planning. (Indicator of quality service provision and service performance).
4.	Target	Metric should be as near to 1% as possible in line with policy NSP 2012 Target - 1%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of children foster care general in a private foster care placement by the total number of children in foster care general. Calculation: $\frac{\text{Number of Children in foster care general in a private foster care placement}}{\text{Number of Children foster care general}}$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	Number of children in single care residential placements
2.	Description	Total number of children in single residential placements in each region. A child may be placed intentionally because of behaviour; resources etc or they may end up being the only child by default i.e. was not the intention. This does not include children who are alone for one or two nights because their peers are off site or where a child is in a planned bridging/transitional process as per the care plan.
3.	Rationale	Indicator of quality service provision and service performance.
4.	Target	Metric should be as near to zero as possible in line with policy NSP 2012 Target - 0
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This metric will be a census style count on the last day of the reporting period. The count will be for children who are in a residential unit at midday on the last calendar day of a given month.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	Number of children in residential care age 12 or under
2.	Description	This metric measures the number of children aged 12 years and under on the last day of the reporting period who is in residential care. This number excludes placement in a residential placement for the purpose of foster care respite.
3.	Rationale	In the context of the policy statement relating to the use of residential care for children under 12 years of age, this indicator provides a good input to determining service performance and delivery.
4.	Target	Metric should be as near to zero as possible in line with policy NSP 2012 Target - 0
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This metric will be a census style count on the last day of the reporting period. The count will be for children who are in a residential unit at midday on the last calendar day of a given month.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Areas Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Residential & Foster Care

1.	KPI title	Number of children in care in third placement within 12 months (all care types)
2.	Description	This metric measures the total number of children in care on the last day of the reporting period that are in their third (or greater) care placement in the 12 months immediately prior to return date. For the purposes of this metric the count of placement should not include respite or shared care placements.
3.	Rationale	This is a key indicator of service performance. A high number of placements can be an indicator of issues with service provision.
4.	Target	NSP 2012 Target - 0
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of children in category on last day of the quarter.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Sourced from business managers via information officers – childcare statistics/local health offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Children in Care in Education

1.	KPI title	Number of children in care aged 6 to 16 inclusive
2.	Description	This metric measures the number of children in care (in education) aged 6 to 16 inclusive on the last day of the reporting period.
3.	Rationale	School attendance for children in care is a positive indicator. Non attendance is a serious risk factor for children in care.
4.	Target	NSP 2012 Target – 4,365 Nationally.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of children in all care categories on last day of quarter who are between the ages of 6 to 16 (inclusive).
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Children in Care in Education

1.	KPI title	Number and percentage of children in care aged between 6 and 16 years (inclusive) in full time education.
2.	Description	<p>This metric measures the number and percentage of children in care aged between 6 and 16 years (inclusive) on the last day of the quarter (Q2 and Q4) who are in full time education.</p> <p>Full time education is:</p> <ol style="list-style-type: none"> 1. A recognised Educational establishment 2. Registered Home Schooling 3. Carline, Youth reach or any course/training that is approved by the NEWB. (To establish this a local Education welfare officer can be consulted) 4. For the purpose of this document a child will be considered in full time education if it has been assessed and agreed as part of the care plan that a special educational arrangement has been put in place that meets the Childs needs.
3.	Rationale	School attendance for children in care is a positive indicator. Non attendance is a serious risk factor for children in care.
4.	Target	NSP 2012 Target - 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually June /Dec <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>The figure is produced by dividing the total number of children in care aged between 6 and 16 (inclusive) who are in full time education by, the total number children in care aged between 6 and 16 (inclusive)</p> <p>(Example, LHO has 98 children in care aged 6-16 (inclusive) of whom 96 are in full time education $96/98 \times 100\%$)</p> <p>Calculation: Number of children in care aged between 6-16(inclusive) who are in full time education (96) Number of children in care aged between 6-16 (inclusive) $(96/98) \times 100\% = 98\%$</p>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Allocated Social Workers

1.	KPI title	Number and percentage of children in care, by care type, who have an allocated social worker at the end of the reporting period: i) No. and % of children in Special care Units ii) No. and % of children in High Support iii) No. and % of children in Residential General iv) No. and % of children in Foster Care v) No. and % of children in Foster Care with Relatives vi) No. and % of children in Other Care Placements
2.	Description	This metric is designed to measure the number and percentage of children in care by care type, categorised as follows: <ul style="list-style-type: none"> • Special Care Units • High Support • Residential General (Note: <u>Include Special Arrangements</u>) • Foster care (not including day fostering) • Foster care with relatives • Other Care Placements Who have an allocated Social Worker at the end of the reporting period.
3.	Rationale	This Performance Indicator ensures Compliance with the 1995 Child Care Regulations. Care planning is an important component for the provision of services to children in care. It is important that the plan be reviewed regularly to take account of changing circumstances and the needs of the child.
4.	Target	NSP 2012 Target - 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of children in a care type (<i>for each care type, Residential, Foster Care, Foster Care with Relatives FCWR, Other</i>) who have an allocated social worker by the total number of Children in Care type (example, DSC have 158 children in care, 119 of which have an allocated social worker 119/158x100%) Calculation: $\frac{\text{Number of Children in Care with an allocated S/W (119)}}{\text{Number of Children Care (158)}} \times 100\% = 75\%$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers - Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Care Planning

1.	KPI title	Percentage of children in care who currently have a written care plan as defined by Child Care Regulations 1995; by care type at the end of the reporting period. i) No. and % of children in Special care Units ii) No. and % of children in High Support iii) No. and % of children in Residential General iv) No. and % of children in Foster Care v) No. and % of children in Foster Care with Relatives vi) No. and % of children in Other Care Placements
2.	Description	This metric is designed to measure the number and percentage of children at the end of the reporting period in care who currently have a written care plan as defined by Child Care regulations 1995 by care type <ul style="list-style-type: none"> • Special Care Units • High Support • Residential General (Note: <u>Include Special Arrangements</u>) • Foster care (not including day fostering) • Foster care with relatives • Other Care Placements <p>Definition of an up to date care plan: A care plan is required to be reviewed annually. If a child has a care plan that has been reviewed within 18 months of its last review it is considered an up to date care plan.</p>
3.	Rationale	This Performance Indicator ensures Compliance with the 1995 Child Care Regulations. Care planning is an important component for the provision of services to children in care. It is important that the plan be reviewed regularly to take account of changing circumstances and the needs of the child.
4.	Target	NSP 2012 Target - 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of children in a care type (<i>for each care type, Residential, Foster Care, Foster Care with Relatives FCWR, Other</i>) who have a written care plan by the total number of Children in Care type (example, LHO area has 158 children in care, 5 of which are in residential care $5/12 \times 100\%$) Calculation: $\frac{\text{Number of Children in Residential Care with a written care plan (5)}}{\text{Number of Children in Residential Care (12)}} \times 100\% = 42\%$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers - Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Foster Carer

1.	KPI title	Total number of foster carers
2.	Description	This metric measures the number of foster carers (approved and unapproved) at the end of the reporting period.
3.	Rationale	To assess the number of the foster care approved and unapproved.
4.	Target	NSP 2012 – Target 4,263 (Nationally)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details
7.	KPI Calculation	This is a census count of the total number of foster carers approved and unapproved on the last day of the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers - Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Foster Carer

1.	KPI title	Number and percentage of foster carers approved by the Foster Care Panel
2.	Description	This metric covers a range of measures in relation to Foster Carers who are approved by the Foster Care Panel, as a percentage of the total foster care population.
3.	Rationale	To assess the performance of the foster care service in relation to approval and registration of foster carers.
4.	Target	NSP 2012 - Target 3,837 (90%) Nationally.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the total number of foster carers (approved & unapproved) by the number of foster carers approved by the Foster Care Panel (Part III of Regulations) (example, administrative area has 170 foster carers (approved & unapproved), 167 of which are approved by the foster care panel, Part III of Regulations 167/170x100%) Calculation: <u>Number of foster carers approved by the Foster Care Panel, Part III of regulations (167)</u> Number of foster carers (approved & unapproved) (170)x100% = 98%
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers - Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	Yes.
13.	Web link to data	Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Available through the HSE's Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

1.	KPI title	Number and percentage of relative foster carers where children have been placed for longer than 12 weeks whilst the foster carers are awaiting approval by the Foster Care Panel (Part III of regulations)
2.	Description	This metric is based on the number of relative foster carers where children have been placed for 12 weeks or longer where the foster carers are awaiting approved by the Foster Care Panel.
3.	Rationale	To assess the performance of the foster care service in relation to approval and registration of relative foster carers. This will also allow for comparisons to be made for approval of relative foster carers against levels of approval in the general foster carer cohort.
4.	Target	NSP 2012, Baseline to be established in 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the total number of relative foster carers who are not approved by the Foster Care Panel (Part III of Regulations) with whom children have been placed for longer than 12 weeks; by, the total number of relative foster carers who are not approved by the foster care panel, Part III of Regulations. (Example, administrative area has 32 relative foster carers who are not approved by the Foster Care Panel, Part III of Regulations 22 of whom have children placed with them for 12 weeks or longer $22/32 \times 100\%$) Calculation: <u>Number of relative foster carers not approved by the foster care panel, Part III of regulations and who have children placed with them for 12 weeks or longer (22)</u> <u>Number of relative foster carers not approved by the foster care panel, Part III of regulations (32) $\times 100\% = 69\%$</u>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE monthly Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Denis O'Sullivan, Principal Officer, Dept. Children & Youth Affairs T: 01 6473048

Child Protection and Welfare Services – Foster Carer

1.	KPI title	Number and percentage of approved foster carers with an allocated social worker
2.	Description	The metric details the number of approved foster carers who have been approved by the Foster Care Panel (Part III Regulations) with an allocated social worker and expresses the figure as a percentage of the total approved foster carer population.
3.	Rationale	To assess the performance of the foster care service in relation to the allocation of social workers.
4.	Target	NSP 2012 Target – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the total number of approved foster carers who have been approved by the Foster Care Panel (Part III of Regulations) who have an allocated social worker by, the total number of approved foster carers who have been approved by the Foster Care Panel (Part III of Regulations). (Example, LHO area has 182 approved foster carers who have been approved by the foster care panel, Part III of Regulations 165 of whom have an allocated social worker 165/182x100%) Calculation: Number of approved foster carers who have been approved by the foster care panel, Part III of regulations and who have an allocated social worker (165) Number of approved foster carers who have been approved by the foster care panel, Part III of regulations (182)x100% = 91%
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the monthly Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Denis O'Sullivan, Principal Officer, Dept. Children & Youth Affairs T: 01 6473048

Child Protection and Welfare Services – Children & Homelessness

1.	KPI title	Number of children placed in youth homeless centres/units for more than 4 consecutive nights (or more than 10 separate nights over a year).
2.	Description	Each Region will identify the centres that will be used for reporting. They will only count children placed by reason of homelessness only. Reporting will be annually Q4 returns.
3.	Rationale	Annual measurement of placements in youth homeless centres is an indicator of service performance.
4.	Target	NSP 2012, Baseline to be established in 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is an annual census count of children on 31 st December who in this category who placed in youth homeless centres/units for more than 4 consecutive nights (or more than 10 separate nights over a year)
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE Performance Report
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services – HSE, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Children & Homelessness

1.	KPI title	Number and percentage of children in care placed in a specified youth homeless centre / unit.
2.	Description	This metric looks at the numbers of children in care who have been placed in a specified homeless hostel on all care orders by reason of homelessness only on 31 st December 2012. .
3.	Rationale	Annual indicator of service provision to children in care, ensuring appropriate placement to meet the specific requirements of the child.
4.	Target	NSP 2012, Baseline to be established in 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>The figure is produced by dividing the total number of children in care, who have been placed in a specified youth homeless hostel on a care order, by the total number children in care.</p> <p>(Example, LHO has 98 children in care of whom 6 have been placed in a homeless hostel $6/98 \times 100\%$)</p> <p>Calculation: Number of children in care who have been placed in a specified youth hostel (6) <hr style="width: 80%; margin-left: 0;"/> Number of children in care 98 $(6/98) \times 100\% = 6.1\%$</p>
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Monthly Performance Supplementary Report (Reported in PR Quarterly)
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services – HSE, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Out of Hours

1.	KPI title	Number of referrals made to the Emergency Out of Hours Place of Safety Service.
2.	Description	This metric measures the number of referrals made to the Emergency Out of Hours Place of Safety Service as per Section 12 of the Child Care Act.
3.	Rationale	To measure the demand for service out side normal working hours of the numbers of referrals made to the Emergency Out of Hours Place of Safety Service as per Section 12 of the Child Care Act.
4.	Target	NSP 2012 target – 395 Nationally
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Total number of referrals made to the emergency Out of Hours place of safety service in a quarter.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Regions reported Nationally via Dublin Mid Leinster.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE's Monthly Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other : give details
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Out of Hours

1.	KPI title	Number of children placed with the Emergency Out of Hours Placement Service.
2.	Description	This metric measures the number of children (not placements) who are placed with the Emergency Out of Hours Placement Service during the quarter. Should it become apparent that some children are accessing the service more than once in a quarter (e.g. a child may be placed on a section 12 twice in a Quarter) this is still counted as one child.
3.	Rationale	To measure the demand for service outside normal working hours.
4.	Target	NSP 2012 Target – 270 Nationally
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count - total number of children placed in the emergency Out of Hours place of safety service in a quarter.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Regions reported Nationally via Dublin Mid Leinster.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE's Monthly Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Out of Hours

1.	KPI title	Number of nights accommodation supplied by the Emergency Out of Hours Placement Service
2.	Description	This metric measures the total number of nights accommodation supplied by the Emergency Out of Hours Placement Service.
3.	Rationale	To measure the demand for service outside normal working hours.
4.	Target	NSP 2012 Target – 549 Nationally
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a count of the number of night's accommodation that was supplied by the Emergency Out of Hours Placement Service.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	HSE Regions reported Nationally via Dublin Mid Leinster.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	As reported in the HSE's Monthly Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Michele Clarke, Principal Officer, Dept. Children & Youth Affairs T: 01 6473235

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Number of notified Early Years Services in operational area.
2.	Description	Number of Early Years services that have notified the HSE and are currently operating an Early Years service at the end of the reporting period.
3.	Rationale	Indicator of volume of services notified which is required for service planning.
4.	Target	NSP 2012 Target – 4,841 Nationally
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of the number of Early Years Services that have notified the HSE and are currently operating an Early Years Service at the end of the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSEs Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Moira O'Mara, Principal Officer, Dept. of Children & Youth Affairs, Tel: 01 6473000

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Percentage of Early Years Services which received an inspection
2.	Description	Number of Early Years Services in each Local Health Office which has notified the HSE and are currently operating a preschool service and who have received an annual inspection (first and annual inspection to be included) during the reporting period.
3.	Rationale	This is a key indicator of service performance levels.
4.	Target	NSP 2012 Target – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>The figure is produced by dividing the total number of Early Years Services operating who have received a first/annual inspection by, the total number of early Years Services that have notified the HSE and are currently operating a service.</p> <p>(Example, LHO has 220 Early Years Services operating of whom 21 received an inspection $21/220 \times 100\%$)</p> <p>Calculation: Number of Early Years Services in the LHO that had a first/annual inspection (21) Number of Early Years Services in the LHO $(21/220) \times 100\% = 9.5\%$</p>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSE's Monthly Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Moira O'Mara, Principal Officer, Dept. of Children & Youth Affairs Tel: 01 6473000

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Number & percentage of Early Years Services that are fully compliant on Inspection
2.	Description	Number of operational Early Years Services in the LHO that had an annual inspection (first and annual inspection to be included) and are found on inspection not to have areas which require attention by the service provider as the service is found to be in general fully compliant with the 2006 Pre school Regulations during the reporting period.
3.	Rationale	This will identify the level of Early Years Services who are achieving full compliance with the 2006 Early years Regulations.
4.	Target	NSP 2012, Baseline to be established in 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of the number of Early Years Services that have received a first/annual inspection and have been deemed fully compliant at the end of the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSE's Monthly Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Moira O'Mara, Principal Officer, Dept. of Children & Youth Affairs Tel: 01 6473000

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Number of notified full day Early Years Services in LHO
2.	Description	Number of Early Years Services in the Local Health Office that have notified the HSE as a full day service and are currently operating a full day Early Years Services during the reporting period.
3.	Rationale	This will give a baseline for the percentage of Full Day Services inspected in the LHO area.
4.	Target	NSP 2012 Target – 1,569 Nationally
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details
7.	KPI Calculation	This is a census count of the number of Early Years Services in the LHO that have notified the HSE and are currently operating a full day Early Years Services at the end of the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSE's Monthly Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Maira O'Mara, Principal Officer, Dept. of Children & Youth Affairs Tel: 01 6473000

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Percentage of full day early years services which received an annual inspection
2.	Description	Number of early years services in the LHO that have notified the HSE and are currently operating a <u>full day</u> and who have received an annual inspection during the reporting period.
3.	Rationale	This is a high risk category of notified services which are prioritised for inspection.
4.	Target	NSP 2012 Target – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of Early Years Services providing a Full Day service by the number of Early Years Services providing a full day service who have received an inspection (i.e. DSC have 20 Early Years services providing a Full Day service, 15 of which were received an inspection 15/20x100%) Calculation: <u>Number of Early Years services providing a Full Day service who received an inspection (15)</u> Number of Early years Services providing a Full Day Service (20)x100% = 75%
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSE's Monthly Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Moira O'Mara, Principal Officer, Dept. of Children & Youth Affairs, Tel: 01 6473000

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Number of Early Years Services in the operational area that have closed during the quarter.
2.	Description	This metric measures the number of Early Years Services whose closure has been notified to the HSE during the reporting period.
3.	Rationale	This is an indicator of Early Years service viability in the sector.
4.	Target	NSP 2012, Demand Led
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of the number of Early Years Services whose closure has been notified to the HSE during the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSE's Monthly Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services, Tel: 01 635 2376 Moira O'Mara, Principal Officer, Dept. of Children & Youth Affairs, Tel: 01 6473000

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Number of complaints received in relation to Early Years Services
2.	Description	The number of complaints made against an Early Years service and or staff member received by the HSE. During the reporting period.
3.	Rationale	Considerable time is spent by HSE Staff investigating complaints. This will give an indication of the level of complaints received.
4.	Target	NSP 2012, Demand Led.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of the number of complaints received regarding Early Years services and or staff member to the HSE at the end of the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSE's Monthly Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services – HSE Tel: 01 635 2376 Moirá O'Mara, Principal Officer, Dept. of Children & Youth Affairs Tel: 01 6473000

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Percentage of complaints investigated.
2.	Description	This metric will measure the number of complaints investigated against the number of complaints received during the reporting period.
3.	Rationale	It is a priority for Early Years Services that complaints received are investigated. This will give an indication of service response to complaints.
4.	Target	NSP 2012 Target – 100%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The figure is produced by dividing the number of complaints received during the reporting period by the number of complaints investigated during the reporting period (i.e. DSC have received 20 complaints, 15 of which were investigated 15/20x100%) Calculation: $\frac{\text{Number of complaints investigated (15)}}{\text{Number of Complaints received (20)} \times 100\% = 75\%$
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSE's Monthly Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services Tel: 01 635 2376 Maira O'Mara, Principal Officer, Dept. of Children & Youth Affairs Tel: 01 6473000

Child Protection and Welfare Services – Early Years Services

1.	KPI title	Number of prosecutions taken on foot of inspections in the quarter
2.	Description	This metric will measure where punitive action, that is, criminal proceedings has been taken by the HSE against an Early Years Service.
3.	Rationale	To measure the number of prosecutions taken by the HSE against an Early Years Provider under the Child Care (Early years Services) Regulations 2006.
4.	Target	NSP 2012, Demand Led.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	This is a census count of the number of prosecutions taken by the HSE against an Early Years Provider under the Child Care (Early years Services) Regulations during the reporting period.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CAMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources and Completeness	Area Business managers via Information Officers- Child Care Statistics/ Local Health Offices.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	HSE's Monthly Performance Report http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
14.	Additional Information	Early years Inspection Services Information http://www.hse.ie/eng/services/Find_a_Service/Children_and_Family_Services/Early_years_Services/Early_years_inspection_services/
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> Health Stat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker, Manager, Non Acute, BIU, Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Gordon Jeyes, National Director Children and Family Services – HSE, Tel: 01 635 2376 Moira O'Mara, Principal Officer, Dept. of Children & Youth Affairs, Tel: 01 6473000

Palliative Care

1.	KPI title	Wait times for: i) Specialist Palliative Care Inpatient bed within 7 days ii) specialist Palliative Care inpatient bed within 1 month
2.	Description	This is the number of days from referral or request for transfer to the date of admission to the Specialist Palliative Care Inpatient Unit calculated as a percentage. 1) The term active is used to distinguish referrals that request a service to start as soon as possible from the common situation in palliative care where referrals are made in a prospective manner (referral made in advance for a service that may be required at some stage in the future). The latter group are not considered to be active until a service has actually been requested. It is important not to include these prospective (also known as pending, inactive or deferred) referrals in active referrals if wait times from active referral to first seen by service are being calculated. If time of initial prospective referral is used it will artificially lengthen wait times.
3.	Rationale	To determine the length of time a new patient has been waiting for admission to the Specialist Palliative Care inpatient bed.
4.	Target	NSP 2012 targets: i) Specialist Palliative Care Inpatient bed within 1 month – 98% ii) Specialist Palliative Care Inpatient bed within 7 days – 91%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	0 – 7days, 8 – 14days, 15 – 21days, 22 – 28days, > 1 month Example, number of patients who waited for admission in the 5 cohorts outlined above divided by the total number of patients awaiting admission, multiplied by 100 = %
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to Business Intelligence Unit, (BIU) CPCP
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes.
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

1.	KPI title	Wait times for: <ol style="list-style-type: none"> 1 Specialist Palliative care services in the community (home care) provided to patients in their place of residence within 7 days <ul style="list-style-type: none"> • Home • Nursing Home • Non Acute hospital 2 Specialist Palliative care services in the community (home care) provided to patients in their place of residence within 1 month <ul style="list-style-type: none"> • Home • Nursing Home • Non Acute hospital
2.	Description	This metric is calculated as a percentage. The Specialist Palliative care community based team provide care in patient's place of residence (Home, Non Acute hospital or Nursing home) .This is the number of days from referral or request for transfer to the date of first face to face home care visit. <ol style="list-style-type: none"> 1) This is the time interval from a referral to first seen by Specialist Palliative Care services or time interval from acceptance of a referral to first seen. Time interval from active request for transfer (from one setting of Specialist Palliative Care to another) to first seen by other setting can also be calculated. 2) The term active is used to distinguish referrals that request a service to start as soon as possible from the common situation in palliative care where referrals are made in a prospective manner (referral made in advance for a service that may be required at some stage in the future). The latter group are not considered to be active until a service has actually been requested. It is important not to include these prospective (also known as pending, inactive or deferred) referrals in active referrals if wait times from active referral to first seen by service are being calculated. If time of initial prospective referral is used it will artificially lengthen wait times. 3) If a referral to a service is made in advance of a patient needing a service e.g. a Specialist Palliative Care Acute Hospital makes a Specialist Palliative Care in the community referral for a patient in an acute hospital but the service is to start at a future date when the patient is discharged: the transfer request date is the date that the patient is discharged. If a patient is only remaining in one setting of care because another setting is not available to take over care of the patient (e.g a patient in hospital who can't be discharge until Specialist Palliative Care in the community can visit patient): the transfer request date is the date that the request for the follow up service was made. This item allows services to determine wait times for transfer between different settings of care.
3.	Rationale	To determine the number of days the new patient has been waiting for the first face to face home care visit
4.	Target	NSP 2012 targets: <ol style="list-style-type: none"> i) Specialist Palliative care services in the community (home care) provided to patients in their place of residence within 1 month– 97% ii) Specialist Palliative care services in the community (home care) provided to patients in their place of residence within 7 days – 79%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	0 – 7days, 8 – 14days, 15 – 21days, 22 – 28days, > 1 month Calculation example: number of patients who waited for home care services in the five cohorts (outlined above), divided by the total no. of patients who waited for services, multiplied by 100 = %.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:

9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to BIU non-acute
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

1.	KPI title	Number of patients in receipt of treatment in Specialist Palliative care inpatient units
2.	Description	The number of patients who received Specialist Palliative Care inpatient care during the month. Each patient is counted once only
3.	Rationale	To determine the total number of patients who received specialist palliative care inpatient care during the month.
4.	Target	NSP 2012 Target: 349 DML 108 (31%), DNE 42 (12%), South 60 (17%), West 139 (40%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of patients who received inpatient care during the month.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to BIU non-acute
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

1.	KPI title	Number of admissions to Specialist Palliative Care inpatient Units
2.	Description	The total number of admissions for Specialist Palliative care inpatient stay during the month. If a patient had more than one admission, each admission is included in the final total.
3.	Rationale	To determine the total number of admissions to Specialist Palliative care inpatient units during the month for monitoring/accountability purposes.
4.	Target	NSP 2012 Target – 2,865 DML 833 (29%), DNE 350 (12%), South 465 (16%), West 1217 (43%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count, total number of admissions for Specialist palliative care inpatient stay during the month.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to BIU non-acute.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Monthly Activity Data
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

1.	KPI title	Number of discharges, transfers from the Specialist Palliative care In-patient Units
2.	Description	This is the number of Specialist Palliative care inpatient unit stays that ended during the month as a discharge or transfer. A discharge takes place when a patient is fully discharged from the specialist palliative care in patient unit and specialist palliative care services. When a patient is finished with one setting of specialist palliative care and moves to another, this is considered to be a transfer.
3.	Rationale	To determine the number of discharges and transfers from the Specialist Palliative Care In-patient Units.
4.	Target	NSP 2012 target – Discharges – 231, Transfers 1,486
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Give the number of Specialist palliative care inpatient unit stays that ended during the month. If a patient had more than one admission, include each discharge and transfer in the final total.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to BIU non-acute.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Monthly Activity Data
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

Palliative Care – Community Home Care

1.	KPI title	Number of patients in receipt of Specialist Palliative care in the community
2.	Description	The number of patients in receipt of Specialist Palliative Care in the community (home care) at any time during the month. Each patient is counted once only. Specialist Palliative care in the community (home care) is care provided to patients in their place of residence (home, Non acute hospital or nursing home)
3.	Rationale	To determine the total number of patients who received Specialist Palliative Care in the community during the month.
4.	Target	NSP 2012 Target - 3026 DML 653 (21%), DNE 604 (20%), South 866 (29%), West 903 (30%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count, the total number of patients who received Specialist Palliative Care in the community at any time during the month.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to BIU non-acute.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

1.	KPI title	Number of patients in receipt of Specialist palliative day care services.
2.	Description	The number of patients in receipt of Specialist Palliative Day Care services) at any time during the month. Each patient is counted once only. Specialist Palliative Day care is care provided to patients in a day care/day hospice setting.
3.	Rationale	To determine the total number of patients who received Specialist Palliative Day care during the month.
4.	Target	NSP 2012 Target - 320 DML 87 (27%), DNE 61 (19%), South 83 (26%), West 89 (28%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of patients in receipt of Specialist palliative day care services is the number of patients attending this service.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to BIU non-acute.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

1.	KPI title	Number patients in receipt of care in designated Palliative care support beds
2.	Description	The number of patients in receipt of care in designated non specialist Palliative care support beds. Each patient is counted once only
3.	Rationale	To determine the total number of patients who received care in designated non specialist palliative care support beds during the month.
4.	Target	NSP 2012 Target - 154 DML 56 (36%), DNE 8 (5%), South 59 (38%), West 31 (20%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The total number of patients who received care in designated non Specialist palliative care support beds at any time during the month.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to BIU non-acute.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

1.	KPI title	Number of new patients seen or admitted to the specialist palliative care service i) Specialist Palliative Care Inpatient units ii) Specialist Palliative Care services in the community (Home Care)
2.	Description	This is the age of new patients in years i.e. Age on registration (years) 0 – 11yrs 12 – 17 yrs 18 – 64 yrs 65 years and over
3.	Rationale	To determine the age of new patients to the service.
4.	Target	NSP 2012 target: 1. Specialist Palliative Care Inpatient units 174 2. Specialist Palliative Care services in the community (Home care) 645
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count (monthly average)
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Specialist care units to RDO office and RDO office to BIU non-acute.
10.	Tracer Conditions	As per description
11.	Minimum Data Set	Yes
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other: give details
Named contact for further information		John McCusker Manager Non Acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

Social Inclusion

Social Inclusion – Methadone Treatment

1.	KPI title	Total number of clients in methadone treatment (outside prisons)
2.	Description	Number of clients in methadone treatment at the end of the calendar month.
3.	Rationale	Methadone is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
4.	Target	NSP 2012 Target – 8,640
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly in arrears <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Count, the number of clients in methadone treatment at the end of the calendar month.
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other
9.	Data Sources Data Completeness Data Quality Issues	Two national registers record drug treatment data in Ireland: the National Drug Treatment Reporting System (NDTRS) is an epidemiological database that records demand for treatment for problem alcohol and drug use, and the Central Treatment List (CTL) is an administrative database to regulate the dispensing of methadone treatment. This data is submitted to the EMCDDA by the HRB & DoHC.
10.	Tracer Conditions	A person who is a heroin user whom is considered suitable for Methadone treatment
11.	Minimum Data Set	
12.	International Comparison	Engaging and retaining clients in methadone treatment is an international metric.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker. Manager Non acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion – Methadone Treatment

1.	KPI title	Total number of clients in methadone treatment (prisons)
2.	Description	Number of clients in methadone treatment at the end of the calendar month in Prison
3.	Rationale	Continuity of methadone treatment of those entering and leaving prison is an important treatment option. The provision of this treatment serves to minimize the spread of blood-borne diseases in a high risk environment. This metric is aligned to the prison methadone audit system which tracks the effectiveness of the care pathway between prison and community.
4.	Target	NSP 2012 Target – 520
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly in arrears <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Number of clients in methadone treatment at the end of the calendar month in Prison
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Two national registers record drug treatment data in Ireland: the National Drug Treatment Reporting System (NDTRS) is an epidemiological database that records demand for treatment for problem alcohol and drug use, and the Central Treatment List (CTL) is an administrative database to regulate the dispensing of methadone treatment. This data is submitted to the EMCDDA by the HRB & DoHC.
10.	Tracer Conditions	A person who is a heroin user whom is considered suitable for Methadone treatment.
11.	Minimum Data Set	
12.	International Comparison	Engaging and retaining clients in methadone treatment is an international metric.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker. Manager Non acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

1.	KPI title	Percentage of substance misusers (over 18 yrs) for whom treatment has commenced within one calendar month following assessment
2.	Description	The number and percentage of substance misusers, over 18 years of age, for whom treatment has commenced within one calendar month following assessment.
3.	Rationale	Access to treatment speedily and readily is important when clients are at this stage of the change cycle: This is a measure for the HSE contained in the NDS (Interim 2009-2016) and the NAPS 2007-2016.
4.	Target	NSP 2012 target – 1260 (100%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Percentage calculation: The number of substance misusers for whom treatment commenced within one month of assessment divided by the total number of Adult substance misusers treated during the month multiplied by 100 = %
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	RDO, HRB
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: National Drugs Strategy
Named contact for further information		John McCusker. Manager Non acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

1.	KPI title	Percentage of substance misusers (under 18 yrs) for whom treatment has commenced within two weeks following assessment
2.	Description	The number of substance misusers under 18 years of age, for whom treatment, as deemed appropriate, has commenced within two weeks following assessment.
3.	Rationale	Speedy access to treatment is critical when clients are at this stage of the change cycle but particularly so for young people – this is a PI in the NDS (Interim 2009-2016).
4.	Target	NSP 2012 target – 105 (100%)
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The number of substance misusers (under 18yrs) for whom treatment commenced following assessment. Percentage calculation: The number of substance misusers under 18yrs for whom treatment commenced within two weeks after assessment divided by the total number of substance misusers under 18 yrs of age treated during the month.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	RDO, HRB
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	No
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	As reported in the HSE Performance Report.
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: National Drugs Strategy (Interim 2009-2016) NAPS 2007-2016
Named contact for further information		Stephen Toft, Data Analyst, Tel: 01 6352270 Email: Stephen.toft1@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion – Homeless Services

1.	KPI title	Number of individual service users admitted to statutory and voluntary managed residential homeless services who have medical cards.
2.	Description	Number of individual service users admitted to statutory and voluntary managed residential homeless services who have medical cards at the end of each quarter. Emergency accommodation does not include B&B and transitional accommodation.
3.	Rationale	Health and well being may be severely compromised when one is homeless so it is critical that homeless people are able to access Primary Care Services quickly and easily – thus a medical card is a critical starting point.
4.	Target	NSP 2012 expected activity/target – 75%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	Total number of persons residing in emergency accommodation homeless services who have a medical card on the last day of each quarter, .i.e. 31 st March, 30 th June, 30 th Sept , 31 st December. Total number of persons residing in emergency accommodation homeless services on the last day of each quarter .i.e. 31 st March, 30 th June, 30 th Sept , 31 st December. <u>Calculation</u> $\frac{\text{Number of homeless people with medical cards in quarter}}{\text{Total number of homes in emergency accommodation in quarter}} \times 100 = \%$
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Area Managers / Regional Social Inclusion Specialists/ Social Inclusion Managers.
10.	Tracer Conditions	A person with no fixed abode
11.	Minimum Data Set	Personal Demographic details such as Name, DOB, Medical Card Number
12.	International Comparison	No
13.	Web link to data	As reported in the Performance Report
14.	Additional Information	This will be included in the SLA with Agencies Template has been developed to capture this PI
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker. Manager Non acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

1.	KPI title	Number and percentage of service users admitted to homeless emergency accommodation hostels/ facilities whose needs have been formally assessed within one week.
2.	Description	<p>This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities whose needs have been formally assessed within one week of the date of admission.</p> <p>A “Needs Assessment” is a detailed assessment of an individual’s needs and is a fundamental component of the care planning system. It is completed in co operation with the person’s key worker/ project worker and should cover the full range of a person’s care and care related needs including general healthcare, mental health, addiction issues, housing, income adequacy, training & employment, life skills, etc.</p> <p>It is acknowledged that the same person may experience homelessness and avail of homeless services on number of occasions in any given timeframe. However for the purpose of this metric and in order to eliminate duplicate counting, service users should only be counted once in any given reporting period. i.e. quarter.</p>
3.	Rationale	Under national homeless policy the HSE is responsible for the health and in house care needs of homeless persons and a significant amount of HSE homeless funding is provided to meet the pay costs of care staff across the hostel network. The implementation of a formal Needs Assessment is a key component in the effective operation of a Care Planning system and is crucial in addressing and supporting the health and care needs of homeless people to enable them to maximise their potential and return to independent living, where possible. This approach has proven internationally to significantly improve outcomes for service users with varying support needs.
4.	Target	NSP 2012 expected activity/target – 80%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	(a) Total number of persons admitted to homeless emergency accommodation hostels/ facilities during the quarter ended 31 st March, 30 th June, 30 th Sept and 31 st December. (b) Total number of persons admitted to homeless emergency accommodation hostels/ facilities whose needs have been formally assessed within one week from the date of admission, during the quarter ended 31 st March, 30 th June, 30 th Sept and 31 st December.
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Area Managers / Regional Social Inclusion Specialists/ Social Inclusion Managers.
10.	Tracer Conditions	A person with no fixed abode
11.	Minimum Data Set	No
12.	International Comparison	No
13.	Web link to data	As reported in the Performance Report
14.	Additional Information	This will be included in the SLA with Agencies Template to be developed which will capture this PI Services which are excluded from this PI are the following - B & B type accommodation
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker. Manager Non acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

1.	KPI title	Number and percentage of service users admitted to homeless emergency accommodation hostels/ facilities who have a written care plan in place within two weeks.
2.	Description	<p>This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities that have a written care plan in place within two weeks from the date of admission.</p> <p>It is acknowledged that the same person may experience homelessness and avail of homeless services on number of occasions in any given timeframe. However for the purpose of this metric and in order to eliminate duplicate counting, service users should only be counted once in any given reporting period, i.e. quarter.</p> <p>Care plan: “a plan formulated by a Care Worker in consultation with individual residents, their families and other appropriate professionals that describes what kind of services and care that person should receive”. (Source: Quality & Fairness – A Health System for You. Health Strategy 2001).</p>
3.	Rationale	Under national homeless policy the HSE is responsible for the health and in house care needs of homeless persons and a significant amount of HSE homeless funding is provided to meet the pay costs of care staff across the hostel network. The implementation of a formal Needs Assessment is central to the effective operation of a Care Planning system in addressing and supporting the health and care needs of homeless people to enable them to maximise their potential and return to independent living, where possible. This approach has proven internationally to significantly improve outcomes for service users with varying support needs.
4.	Target	NSP 2012 expected activity/target – 80%
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly in arrears <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>(a) Total number of persons admitted to homeless emergency accommodation hostels/ facilities during the quarter ended 31st March, 30th June, 30th Sept and 31st December.</p> <p>(b) Total number of persons who have a written care plan in place within two weeks from the date of admission during the quarter ended 31st March, 30th June, 30th Sept and 31st December.</p>
8.	Reporting Aggregation	<input type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Sources Data Completeness Data Quality Issues	Area Managers / Regional Social Inclusion Specialists/ Social Inclusion Managers.
10.	Tracer Conditions	A person with no fixed abode
11.	Minimum Data Set	No
12.	International Comparison	No
13.	Web link to data	As reported in the Performance Report
14.	Additional Information	This will be included in the SLA with Agencies Template to be developed which will capture this PI
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named contact for further information		John McCusker. Manager Non acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion – Needle Exchange

1.	KPI title	Number of Pharmacies recruited to provide Needle Exchange Programme
2.	Description	Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the country. As part of this programme Pharmacies will re recruited and trained to provide a needle exchange service.
3.	Rationale	<ul style="list-style-type: none"> • Key element of the National Drugs Strategy. • Agreed target with the Elton John Foundation- the joint funders of the project. • Model of good practice for future service development.
4.	Target	The national target is 65 pharmacies recruited by quarter 3 2012.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> X Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	How often is the KPI reported e.g. the agreed reporting timeframe in the NSP. <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> x Annually <input type="checkbox"/> Other – give details:
.	KPI Calculation	The numbers of pharmacies trained and with an agreed SLA to provide the service.
8.	Reporting Aggregation	The levels at which the information is available <input type="checkbox"/> XHSE National <input checked="" type="checkbox"/> HSE Region LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> XCounty <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Source Data Completeness Data Quality Issues	Records submitted by pharmacies and the national liaison pharmacists office. Data Completeness and any Data Quality issues 100% coverage. No data quality issues.
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	Needle exchange is reported annually by 28 countries to the EMCDDA. This will be the first time that Ireland we be in a position to collect/ provide any needle exchange information.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	Plans are in place to carry out an effectiveness review of all types of needle exchange.
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
Named link person		John McCusker. Manager Non acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Michael Conroy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion – Traveller Health Screening

1.	KPI title	Number of clients to receive national health awareness raising/ screening programmes (breast check, cervical smear screening, men's health screening, blood pressure testing) delivered through the traveller health units/ Primary Health care projects.
2.	Description	Monitoring of the number of clients per THU/ISA region facilitated to access National screening programmes and participating in awareness raising programmes and, where necessary referred for assessment for treatment.
3.	Rationale	<p>The All Ireland Traveller Health Study - published in September 2010 - found that</p> <ul style="list-style-type: none"> • 52% of Travellers aged 40 – 60 had been diagnosed with high blood pressure in the past 12 months compared to 35% of the general Irish Population. • 25 % of Travellers died from Heart Disease, and 19% from Cancer. <p>Traveller Primary Health Care Projects will:</p> <p>1) assist Traveller clients to access National Screening Programmes such as Breast Check and Cervical Check;</p> <p>2) conduct awareness programmes for cardiovascular disease and, where necessary, assist those who need further assessment to be referred to PCT's and acute services.</p>
4.	Target	<p>NSP 2012 Target - 1,650 clients</p> <p>(Based on a Traveller population of 36,224 with 46% in the 18 – to 65 years of age. The target is 10% of 18-65 population per THU/Primary Health Care Project with appropriate age groups to be targeted based on current national screening guidelines).</p>
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	<p>Number of clients per THU assisted to access National screening programmes at the end of each six month period.</p> <p>Number of clients per THU participating in awareness raising programmes for Cardiovascular disease.</p>
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> CMHT <input type="checkbox"/> PCT <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Other – give details:
9.	Data Source Data Completeness Data Quality Issues	Regional Social Inclusion Unit via Traveller Health Units
10.	Tracer Conditions	
11.	Minimum Data Set	
12.	International Comparison	The disease profile of the Traveller community is similar to certain minority ethnic populations in other countries eg Australian Aboriginals, Native Americans.
13.	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html
14.	Additional Information	
15.	Metric is a reporting requirement in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16.	Metric Completeness	
Named contact for further information		John McCusker. Manager Non acute BIU. Tel 01 6352673. Email: john.mccusker@hse.ie
Metric Sign off		Diane Nurse, Assist. National Director, Integrated Services, Tel: 01 6201666 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

1.	KPI title	Agencies with whom the HSE has a Service Arrangement / Grant Aid agreement in place: 1. % of Agencies 2. % of Funding
2.	Description	The percentage of overall number of Agencies, and the total committed funding to the Non statutory Sector covered by completed current Governance Documentation.
3.	Rationale	The HSE has a legislative responsibility to use its resources in the most beneficial, effective and efficient manner to improve, promote and protect the health and welfare of the public; The extensive services provided by the Non Statutory Sector, are no exception to this responsibility, and the use of national standard governance documentation, is the control mechanism utilised to ensure that this funding, is adequately governed. The monitoring of the use of these governance documents provides assurances to the RDOs and senior management, and the board that the HSE is meeting its legislative responsibilities.
4.	Target	Percentage completed monthly against total registered. 100% of Agencies and funding annually.
5.	KPI Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Monthly with the exception of January and February, with first monthly stats available in April for end of March.
6.	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
7.	KPI Calculation	The metric calculates. ➤ % of total number of funding arrangements with Agencies covered by completed governance documentation ➤ % of total funding amount covered by completed governance documentation
8.	Reporting Aggregation	<input checked="" type="checkbox"/> HSE National <input checked="" type="checkbox"/> HSE Region <input checked="" type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> Socio Economic Class <input checked="" type="checkbox"/> Other – give details: Individual Agency and also care group details are available.
9.	Data Sources Data Completeness Data Quality Issues	The Register of Non Statutory Service Providers. This Register is maintained at budget management level, either at the HSE local area, or other management unit, and is collated through Local Leads to the Regional Leads and then to the National Business support unit (NBSU). Some corporate and national returns are made directly to the NBSU. Currently there are: ➤ DML 13 returns ➤ DNE 9 returns ➤ South 13 returns ➤ West 11 returns ➤ Corporate 7 returns The availability of information is dependant on the local and regional leads ensuring all funded agencies are included and information updated and returned.
10.	Tracer (Conditions) terms	All Agencies funded by the HSE to provide personal health and social services, should be included on the Register and have the appropriate completed governance documentation in place.
11.	Minimum Data Set	The Guide to the Register provides an explanation of the Data set and identifies those that are compulsory. Link below. http://hsenet.hse.ie/HSE_Central/Commercial_and_Support_Services/National_Contracts_OfficeNon_Statutory_Provided_Services/Service_Level_Agreements/Explanatory_Guide_to_National_Register_2011-Version_4.doc
12.	International Comparison	Governance Documentation in line with NHS UK and other European countries.
13.	Web link to data	http://hsenet.hse.ie/HSE_Central/Commercial_and_Support_Services/National_Contracts_OfficeNon_Statutory_Provided_Services/

14.	Additional Information	<p>The Documentation in use up to the end of 2011 has been revised and all funding arrangements must use the amended documentation from 1.1.12.</p> <p>In addition an operational manual outlining the procedures for the comprehensive management of the HSE's relationship with the non statutory sector will be available, and provides operational guidance, control forms and protocols to supports the operation of a standard governance framework, with the sector.</p>
15.	Metric is a reporting requirement in which reports?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> HealthStat <input type="checkbox"/> Other – give details: ISD
Named contact for further information		Patricia McCormack, Planning Specialist, NBSU, ISD, Email: patriciam.mccormack@hse.ie
Metric Sign off		Patrick Lynch, AND, Integrated Services Directorate, Email: patrick.lynch@hse.ie Tracey Conroy, Principal Officer, Department of Health, Tel: 01 635 4731

National Performance Indicator and Activity Suite

Promoting and Protecting Health				
Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Immunisations and Vaccines				
% children (aged 12 months) who have received 3 doses Diphtheria (D ₃), Pertussis (P ₃), Tetanus (T ₃) vaccine Haemophilus influenzae type b (Hib ₃) Polio (Polio ₃) hepatitis B (HepB ₃) (6 in 1)	AND HP Quarterly	95%	90%	95%
% children at 12 months of age who have received two doses of the Pneumococcal Conjugate vaccine (PCV ₂)		95%	89%	95%
% children at 12 months of age who have received two doses of the Meningococcal group C vaccine (MenC ₂)		95%	89%	95%
% children (aged 24 months) who have received 3 doses Diphtheria (D ₃), Pertussis (P ₃), Tetanus (T ₃) vaccine, Haemophilus influenzae type b (Hib ₃), Polio (Polio ₃), hepatitis B (HepB ₃) (6 in 1)		95%	95%	95%
% children (aged 24 months) who have received 3 dose Meningococcal C (MenC ₃) vaccine		95%	95%	95%
% children (aged 24 months) who have received 1 dose Haemophilus influenzae type B (Hib) vaccine		New PI 2012	New PI 2012	95%
% children (aged 24 months) who have received 3 doses Pneumococcal Conjugate (PCV ₃) vaccine		New PI 2012	New PI 2012	95%
% children (aged 24 months) who have received the Measles, Mumps, Rubella (MMR) vaccine		95%	91%	95%
% children (aged 4-5 years) who have received 1 dose 4-in-1 vaccine (Diphtheria, Tetanus, Polio, Pertussis)		New PI 2012	New PI 2012	95%
% children (aged 4-5 years) who have received 1 dose Measles, Mumps, Rubella (MMR) vaccine		New PI 2012	New PI 2012	95%
% children (aged 11-14 years) who have received 1 dose Tetanus, low dose Diphtheria, Acellular Pertussis (Tdap) vaccine		New PI 2012	New PI 2012	95%
No. and % of first year girls who have received third dose of HPV vaccine by August 2012	AND HP Annually	New PI 2012	New PI 2012	New PI 2012 80%
No. and % of sixth year girls who have received third dose of HPV vaccine by August 2012		New PI 2012	New PI 2012	New PI 2012 80%
Child Health / Developmental Screening				
% of newborns who have had newborn bloodspot screening (NBS)	AND HP Quarterly	New PI 2012	New PI 2012	100%
% newborn babies visited by a PHN within 48 hours of hospital discharge		95%	83%	95%
% of children reaching 10 months within the reporting period who have had their child development health screening on time before reaching 10 months of age	AND HP Monthly	90%	82%	95%
Tobacco Control				
No. of sales to minors test purchases carried out	AND EH Quarterly	80	292	216
No. of offices, per region, carrying out sales to minors test purchase activities	AND EH Bi-annually	2 per region	13	2 per region (different offices)
No. and % HSE hospital campuses with tobacco-free policy	ND Quality and Patient Safety Quarterly	New PI 2012	New PI 2012	17 34%
No. of frontline staff trained in brief intervention smoking cessation across primary care and acute campuses		New PI 2012	New PI 2012	3,521
Food Safety				
% of Category 1, 2 food businesses receiving inspection target as per FSAI Guidance Note Number 1	AND EH Quarterly	100%	92%	100%
Cosmetic Product Safety				
No. of cosmetic product inspections	AND EH Quarterly	New PI 2012	New PI 2012	750
International Health Regulations				
All designated ports and airports to receive an inspection to audit compliance with the IHR 2005	AND EH Bi-annually	8	8	8
Health Inequalities				
No. of hospitals implementing a structured programme to address health inequalities (as outlined in the HSE <i>Health Inequalities Framework</i> and specified in this metric)	AND EH Bi-annually	New PI for 2012	New PI for 2012	5

Promoting and Protecting Health

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
No. of PCTs implementing a structured programme to address health inequalities (as outlined in the HSE <i>Health Inequalities Framework</i> and specified in this metric)		New PI for 2012	New PI for 2012	10

Primary Care, Community (Demand-Led) Schemes and other Community Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Primary Care				
No. of PCTs implementing structured GP Chronic Disease Management for Diabetes to incorporate the structured management of chronic diseases within this cohort of patients	AND PC Quarterly	New PI for 2012	New PI for 2012	Dependent upon timing of commencement of programme
No. of Health and Social Care Networks in operation	AND PC Monthly	New PI for 2012	New PI for 2012	50
No. of Health and Social Care Networks in development		New PI for 2012	New PI for 2012	79
% of Operational Areas with community representation for PCT and Network Development	ND Quality and Patient Safety Quarterly	New PI for 2012	New PI for 2012	17 100%
GP Out of Hours				
No. of contacts with GP out of hours	AND PCRS Monthly	968,000	957,126	957,126
Physiotherapy Referral				
No. of patients for whom a primary care physiotherapy referral was received in the reporting month	AND PC Monthly	New PI for 2012	New PI for 2012	169,006
Health Care Associated Infection: Antibiotic Consumption				
Consumption of antibiotics in community settings (defined daily doses per 1,000 inhabitants per day)	ND Quality and Patient Safety Bi-annually	New PI for 2012	21.7 (Q2 data)	21
Orthodontics				
No. of patients receiving active treatment during reporting period	National Lead Oral Health Quarterly	18,000	13,777	13,777
No. of patients in retention during reporting period		Disaggregated in 2011	3,466	3,466
No. of patients who have been discharged with completed orthodontic treatment during reporting period		2,000	1,423	1,423
Community (Demand-Led) Schemes: Performance Activity				
Medical and GP Visit Cards				
No. persons covered by Medical Cards	AND PCRS Monthly	1,779,585	1,733,126	1,838,126
(Incl. no. persons covered by discretionary Medical Cards)		80,502	76,644	85,000
No. persons covered by GP Visit Cards		138,816	132,097	204,482
(Incl. no. persons covered by discretionary GP Visit Cards)		17,423	16,904	20,000
Long Term Illness				
No. of claims	AND PCRS Monthly	978,111	825,255	844,241
No. of items		3,178,861	2,731,595	2,794,437
Drug Payment Scheme				
No. of claims	AND PCRS Monthly	3,836,264	3,187,303	2,726,939
No. of items		11,355,342	9,880,639	8,453,510
GMS				
No. prescriptions	AND PCRS Monthly	20,364,442	20,336,688	22,154,661
No. of items		63,076,913	57,146,092	61,589,957
No. of claims – Special items of Service		740,274	863,736	859,123
No. of claims – Special Type Consultations		1,098,668	1,108,649	1,074,340
HiTech				
No. of claims	AND PCRS Monthly	435,345	428,994	452,267
DTSS				
No. of treatments (above the line)	AND PCRS Monthly	968,784	961,500	1,164,805
No. of treatments (below the line)		53,916	41,989	50,867
No. of patients who have received treatment (above the line)		New PI 2011	---	To be reported during 2012

Primary Care, Community (Demand-Led) Schemes and other Community Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
No. of patients who have received treatment (below the line)		New PI 2011	---	To be reported during 2012
Community Ophthalmic Scheme	AND PCRS			
No. of treatments	Monthly	715,455	708,862	739,579
i). Adult		652,186	648,889	677,007
ii). Children		63,269	59,973	62,572
Community (Demand-Led) Schemes: Performance Indicators				
Medical Cards	AND PCRS			
% of Medical Cards processed which are issued within 15 working days of complete application	Quarterly, reporting commencing Q2	---	---	90%
Median time between date of complete application and issuing of Medical Card		---	---	Baseline to be set in 2012 (for reporting from Q2)
GP Visit Cards	AND PCRS			
% of GP Visit cards processed which are issued within 15 working days of complete application	Quarterly, reporting commencing Q2	---	---	90%
Median time between date of complete application and issuing of GP Visit Card		---	---	Baseline to be set in 2012 (for reporting from Q2)

Hospital Services: Clinical Programmes New Performance Indicators 2012

Performance Indicators	Reported By and Frequency	Target 2012
Acute Medicine		
% of all new medical patients attending the acute medical unit (AMU) who spend less than 6 hours from ED registration to AMU departure	Clinical Lead Monthly	95%
Medical patient average length of stay		5.8
ED		
% of all patients arriving by ambulance wait < 20 mins for handover to doctor / nurse	Clinical Lead Monthly	95%
% of new ED patients who leave before completion of treatment		< 5% of new patient attendances
% of patients spending less than 24 hours in Clinical Decision Unit		95%
Stroke		
% acute stroke patients who spend all or some of their hospital stay in an acute or combined stroke unit	Clinical Lead Bi-annually, commencing Q4	50%
% of patients with confirmed acute ischaemic stroke in whom thrombolysis is not contraindicated who receive thrombolysis		At least 7.5%
% of hospital stay for acute stroke patients in stroke unit who are admitted to an acute or combined stroke unit		50%
Heart Failure		
Rate (%) re-admission for heart failure within 3 months following discharge from hospital	Clinical Lead Quarterly Commencing Q3	27%
Median LOS and bed days for patients admitted with principal diagnosis of acute decompensated heart failure	Clinical Lead Quarterly Commencing Q1	7 days
% patients with acute decompensated heart failure who are seen by HF programme during their hospital stay	Clinical Lead Quarterly Commencing Q3	65%
Acute Coronary Syndrome		
% STEMI patients (without contraindication to reperfusion therapy) who get PPCI	Clinical Lead Quarterly Commencing Q3	50%
% reperfused STEMI patients (or LBBB) who get timely		
a) PPCI or		70%
b) thrombolysis		70%
Median LOS and bed days for		
a) STEMI	Clinical Lead Quarterly Commencing Q1	4
b) Non-STEMI pts		6.5

Hospital Services: Clinical Programmes New Performance Indicators 2012

Performance Indicators	Reported By and Frequency	Target 2012
COPD Mean and median LOS (and bed days) for patients with COPD	Clinical Lead Quarterly	1 day reduction in AVLOS in sites with COPD outreach by end 2012
% re-admission to same acute hospitals of patients with COPD within 90 days		Reduce rate by 15% in hospitals with COPD outreach progs; all other acute hospitals with AMU / AMAU by 5%
No. of acute hospitals with COPD outreach programme	Clinical Lead Bi-annually	15 programmes
% of acute hospitals and Operational Areas with access to Pulmonary Rehabilitation Programme		25%
Asthma % nurses in primary and secondary care who are trained by national asthma programme	Clinical Lead Annually	90%
No. of asthma bed days prevented annually		1,258
No. of deaths caused by asthma annually		55
Diabetes % reduction in lower limb amputation from Diabetes	Clinical Lead Annually	40%
% reduction in hospital discharges for lower limb amputation and foot ulcers in diabetics		40%
% of registered Diabetics invited for retinopathy screening	Clinical Lead Quarterly Commencing Q3	90%
Epilepsy % reduction in median LOS for epilepsy inpatient discharges	Clinical Lead Quarterly	10%
% reduction in no. of bed days for epilepsy inpatient discharges		10%
Dermatology OPD No. of new patients waiting > 3 months for dermatology OPD appointment	Clinical Lead Quarterly, commencing Q2	0
Referral: New Attendance ratio		Baseline to be set in 2012
Rheumatology OPD No. of new rheumatology outpatients seen per hospital per year	Clinical Lead Quarterly, commencing Q2	Baseline to be set in 2012
Referral: New Attendance ratio		Baseline to be set in 2012
Neurology OPD Length of time patients are waiting for neurology outpatient appointment	Clinical Lead Quarterly, commencing Q2	Baseline to be set in 2012
Referral: New Attendance ratio		Baseline to be set in 2012

Hospital Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity 2011	Projected Outturn 2011	Expected Activity 2012
Performance Activity				
Discharges Activity* Inpatient	AND Acute Services	574,400	585,861	568,285
Day Case		**755,100	**755,474	732,810
% Discharges which are Public Inpatient	AND Acute Services Monthly	80%	78%	80%
Day Case		80%	85%	80%
Unscheduled Activity No. of emergency presentations	AND Acute Services	1,199,900	1,172,168	1,195,700
No. of emergency admissions		361,400	371,499	357,600
Outpatients Activity No. of outpatient attendances	AND Acute Services	3,591,700	No data available due to reclassification of metrics	To be confirmed by Q1 2012
Births Activity Total no. of births	AND Acute Services	74,200	73,490	73,216
Dialysis Modality	National Renal			

Hospital Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity 2011	Projected Outturn 2011	Expected Activity 2012
Haemodialysis	Office	1,650 – 1,740	1,670	1,760 – 1,870
Home Therapies	Bi-annually	245 – 270	245	280 – 290
Total		1,895 – 2,010	1,915	2,040 – 2,160
Performance Indicators				
ALOS Overall ALOS for all inpatient discharges and deaths	AND Acute Services Monthly	5.6	6	5.6
Overall ALOS for all inpatient discharges and deaths excluding LOS over 30 days		5	4.7	4.5
Inpatient % of elective inpatients who had principal procedure conducted on day of admission		75%	49%	75%
% of emergency re-admissions for acute medical conditions to the same hospital within 28 days of discharge	AND Acute Services Monthly	New PI 2012	New PI 2012	9.6%
No. of people re-admitted to ICU within 48 hours	AND Acute Services Monthly	New PI 2012	New PI 2012	New PI 2012 Baseline to be established
% of emergency hip fracture surgery carried out within 48 hours (pre-op LOS: 0, 1 or 2)	AND Acute Services Monthly	New PI 2012	80%	95%
No. of first presentations to hospital with a primary diagnosis of development dysplasia of hip (DDH) at 1 year of age or older	AND Acute Services Quarterly	New PI 2012	New PI 2012	New PI 2012
Delayed Discharges No. of hospital delayed discharges	AND Acute Services / AND Older People Monthly	---	817	Reduce by 10%
Reduction in bed days lost through delayed discharges		New PI 2012	New PI 2012	Reduce by 10%
Day case % of day case surgeries as % of day case plus inpatients, for a specified basket of procedures	AND Acute Services Monthly	75%	72%	75%
Outpatients (OPD) An agreed set of OPD metrics will be in place and reported by Quarter 2 2012	AND Acute Services Monthly	---	Data unavailable due to reclassification of metrics in 2011	To be confirmed by Q1 2012
Births % delivered by Caesarean Section		20%	27%	20%
Colonoscopy / Gastrointestinal Service No. of people waiting more than 4 weeks for an urgent colonoscopy		0	0	0
No. and % of people waiting over 3 months following a referral for all gastrointestinal scopes		New PI 2012	New PI 2012	New PI 2012 ≤ 5%
Unscheduled Care % of all attendees at ED who are discharged or admitted within 6 hours of registration		100%	Data in 2011 was not inclusive of all hospitals. New reporting being introduced in 2012 will capture this data	95% by Sept. 2012
No. and % of patients who were admitted through ED within 9 hours from registration		New reporting time band 2012	New reporting time band 2012	100%
Scheduled Care % of adults waiting > 9 months (inpatient)	AND Acute Services Monthly	New reporting time band 2012	New reporting time band 2012	0 0%
% of adults waiting > 9 months (day case)				0 0%
No. and % of children waiting > 20 weeks (inpatient)		0	1,294 60%	0 0%
No. and % of children waiting > 20 weeks (day case)		0	1,312 53%	0 0%

Hospital Services				
Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity 2011	Projected Outturn 2011	Expected Activity 2012
Consultant Public: Private Mix Casemix adjusted public private mix by hospital for inpatients	AND Acute Services Quarterly	80:20	Under review, baseline to be established	80:20
Casemix adjusted public private mix by hospital for day case		80:20		80:20
Consultant Contract Compliance % of consultants compliant with contract levels by hospital type (Type B / B* / C)		100%		100%
Blood Policy No. of units of platelets ordered in the reporting period	ND Quality and Patient Safety Monthly	22,000	22,210	21,500 (3% reduction)
% of units of platelets outdated in the reporting period		< 10%	< 4.5%	< 10%
% usage of O Rhesus negative red blood cells		< 11%	< 12.9%	< 11%
% of red blood cell units rerouted to hub hospital		< 5%	< 4.4%	< 5%
% of red blood cell units returned out of total red blood cell units ordered		< 2%	< 1.1%	< 2%
Health Care Associated Infection (HCAI) Rate of MRSA bloodstream infections in acute hospitals per 1,000 bed days used	ND Quality and Patient Safety Quarterly	0.085	0.071 (Q2 data)	< 0.067
Rate of new cases of Clostridium Difficile associated diarrhoea in acute hospitals per 10,000 bed days used		New PI for 2012	3.2 (Q2 data)	< 3.0
Median hospital total antibiotic consumption rate (defined daily dose per 100 bed days) per hospital	ND Quality and Patient Safety Bi-annually	76	86 (combined Q1 and Q2 data)	83
Alcohol Hand Rub consumption (litres per 1,000 bed days used)		23	22.7 (combined Q1 and Q2 data)	23
% compliance of hospital staff with the World Health Organisation's (WHO) 5 moments of hand hygiene using the national hand hygiene audit tool	ND Quality and Patient Safety Bi-annually	New PI for 2012	75%	85%
Ambulance				
First Responder response times to potential or actual 112 (999) life threatening emergency calls % of Clinical Status 1 ECHO incidents responded to by first responder in 7 minutes and 59 seconds or less	AND Ambulance Monthly	75%	49%	75%
% of Clinical Status 1 DELTA incidents responded to by first responder in 7 minutes and 59 seconds or less		75%	26%	75%
% of Clinical Status 1 ECHO incidents responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less		Baseline to be established	69%	80% by June 2012 85% by Dec 2012
% of Clinical Status 1 DELTA incidents responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less		Baseline to be established	67%	80% by June 2012 85% by Dec 2012

*The actual breakdown of reductions between inpatient and day cases may vary once detailed hospital business plans are finalised

** Dublin Mid Leinster figures do not include St. Luke's day case activity

Cancer Services				
Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Symptomatic Breast Cancer Services No. of urgent attendances	NCCP Monthly	13,000	13,690	13,000
No. of non urgent attendances		26,000	24,666	25,000
No. and % of attendances whose referrals were triaged as urgent by the cancer centre and adhered to the HIQA standard of 2 weeks for urgent referrals (No. and % offered an appointment that falls within 2 weeks)		12,350 95%	13,590 99.3%	12,350 95%
No. and % of attendances whose referrals were triaged as non-urgent by the cancer centre and adhered to the HIQA standard of 12 weeks for non-urgent referrals (No. and % offered an appointment that falls within 12 weeks)		25,000 95%	23,441 95%	23,750 95%

Cancer Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Breast Cancer Screening No. of women who attend for breast screening	NCCP Monthly	New PI for 2012	New PI for 2012	140,000
Lung Cancers No. of attendances at rapid access lung clinic	NCCP Quarterly	New PI for 2011	1,924	To be determined
No. and % of patients attending the rapid access clinic who attended or were offered an appointment within 10 working days of receipt of referral in the cancer centre		95%	1,713 89%	95%
Prostate Cancers No. of centres providing surgical services for prostate cancers	NCCP Quarterly	5	7	6
No. of new / return attendances and DNAs at rapid access prostate clinics		New PI for 2012	New PI for 2012	To be determined
No. and % of patients attending the rapid access clinic who attended or were offered an appointment within 20 working days of receipt of referral in the cancer centre		New PI for 2012	New PI for 2012	90%
Rectal Cancers No. of centres providing services for rectal cancers	NCCP Quarterly	8	13	8
Radiotherapy No. of patients who completed radiotherapy treatment for breast, lung, rectal or prostate cancer in preceding quarter	NCCP Quarterly	New PI for 2012	New PI for 2012	To be determined
No. and % of patients undergoing radiotherapy treatment for breast, prostate, lung or rectal cancer who commenced treatment within 15 working days of being deemed ready to treat by the radiation oncologist		New PI for 2012	New PI for 2012	90%

Older People Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Home Care Packages* Total no. of persons in receipt of a HCP	AND SOP Monthly	10,230	10,870	10,870
No. of HCPs provided		5,300	5,300	5,300
No. of new HCP clients		4,400	5,629	4,800
Home Help Hours No. of home help hours provided for all care groups (excluding provision of hours from HCPs)	AND SOP Monthly	11.98m	11.20m	10.70m
No. of people in receipt of home help hours (excluding provision of hours from HCPs)		54,000	50,623	50,002
Day Care No. of day care places for older people	To be determined	Baseline to be set	National survey undertaken Q4 to inform 2012 targets	Targets to be determined
NHSS No. of people being funded under NHSS in long term residential care at end of reporting month	AND SOP Monthly	Baseline to be set	22,341	23,611
No. and proportion of those who qualify for ancillary state support who chose to avail of it		Baseline to be set	3,744	Demand-led
% of complete applications processed within four weeks		100%	100%	100%
Subvention and Contract Beds No. in receipt of subvention	AND SOP Monthly	Dependent on uptake of NHSS	1,300	760
No. in receipt of enhanced subvention		Dependent on uptake of NHSS	720	540
No. of people in long-term residential care who are in contract beds		New PI for 2012	New PI for 2012	To be reported in 2012
No. of long stay residents in public and voluntary nursing homes admitted before 27 Oct 2009 (saver cases)		New PI for 2012	New PI for 2012	To be reported in 2012
Public Beds No. of beds in public residential care setting for older people	AND SOP Monthly	8,200	7,987	7,089-7,432

Older People Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
				Minimum and maximum range
Elder Abuse No. of new referrals by region	AND SOP Quarterly	Demand-led	2,213	2,000
No. and % of new referrals broken down by abuse type:				
i). Physical		Baseline to be set	335 11%	---
ii). Psychological		Baseline to be set	897 30%	---
iii). Financial		Baseline to be set	587 19%	---
iv). Neglect		Baseline to be set	482 16%	---
No. of active cases		New PI for 2011	1,798	---
% of referrals receiving first response from senior case workers within four weeks		100%	100%	100%

*The outturn for the number of new HCP clients for 2011 includes additional clients funded under the €8m new development funding and clients approved following implementation of the new standard definition for HCPs in 2011. Therefore the number of new clients for 2012 is expected to be 4,800 overall and is based on turnover within existing funding.

Mental Health Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Adult Inpatient Services	AND MH Quarterly			
No. of admissions to adult acute inpatient units		14,908	14,163	14,163
Median length of stay		10.5	11	11
Rate of admissions to adult acute inpatient units per 100,000 population in mental health catchment area		88.1	83.5	77.3
First admission rates to adult acute units (that is, first ever admission), per 100,000 population in mental health catchment area		26.7	26.7	24.6
Acute re-admissions as % of admissions		69%	68%	68%
Inpatient re-admission rates to adult acute units per 100,000 population in mental health catchment area		61.4	56.9	52.7
No. of adult acute inpatient beds per 100,000 population in the mental health catchment area		24.2	24.2	22.6
No. of adult involuntary admissions		1,332	1,388	1,388
Rate of adult involuntary admissions per 100,000 population in mental health catchment area		7.86	8.2	7.6
Child and Adolescent	AND MH Quarterly			
No. of child and adolescent Community Mental Health Teams		54	56	57
No. of child and adolescent Day Hospital Teams		3	2	2
No. of Paediatric Liaison Teams		3	3	3
No. of child / adolescent admissions to HSE child and adolescent mental health inpatient units	AND MH Monthly	220	140	140
No. of children / adolescents admitted to adult HSE mental health inpatient units*	AND MH Quarterly	< 100	130	80
i). < 16 years			4	0
ii). < 17 years			33	16
iii). < 18 years			93	64
No. and % of involuntary admissions of children and adolescents	AND MH Annually	16 5%	16 5%	16 5%
No. of child / adolescent referrals (including re-referred) received by mental health services	AND MH Monthly	11,319	12,493	12,493
No. of child / adolescent referrals (including re-referred) accepted by mental health services		7,925	8,461	8,461

Mental Health Services				
Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Total no. of new (including re-referred) child / adolescent referrals offered first appointment and seen		7,503	7,824	7,824
No. and % of new / re-referred cases offered first appointment and seen				
i). < 3 months		5,088 68%	5,367 61%	70%
ii). > 12 months		720 9%	623 7%	0%
No. and % of cases closed / discharged by CAMHS service		New PI 80% of accepted referrals	7,740 109%	7,740 80%
Total no. on waiting list for first appointment at end of each quarter	AND MH Quarterly	2,221 (reduce no. waiting by > 5%)	1,856	1,799 (reduce no. waiting by > 5%)
No. and % on waiting list for first appointment at end of each quarter by wait time:				
i). < 3 months		802 ---	646 35%	624 35%
ii). 3-6 months		570 ---	460 25%	452 25%
iii). 6-9 months		570 ---	462 25%	365 20%
iv). 9-12 months		---	New PI	358 20%
v). > 12 months		277 ---	288 16%	0
No. of suicides in arrears per CSO Year of Occurrence	NOSP Annually	New PI	506 (2008 validated)	---
No. of repeat deliberate self harm presentations in ED		1,342 1% reduction on 2010	1,348	1,348

*The Mental Health Commission Regulations recognise that there will be occasions where it is clinically necessary to admit a child to an adult unit

Disability Services				
Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Day Services				
No. of work / work-like activity WTE places provided for persons with intellectual disability (ID) and / or autism	AND Disabilities Bi-annually	1,393	1,613	1,578
No. of persons with ID and / or autism benefiting from work / work-like activity services		2,731	3,084	3,084
No. of work / work-like activity WTE places provided for persons with physical and / or sensory disability		58	73	71
No. of persons with physical and / or sensory disability benefiting from work / work-like activity services		112	138	138
No. of Rehabilitative Training places provided (all disabilities)	AND Disabilities Monthly	2,624 New PI	2,627	2,627
No. of persons (all disabilities) benefiting from Rehabilitative Training (RT)		2,915	2,991	2,991
No. of persons with ID and / or autism benefiting from Other Day Services (excl. RT and work / work-like activities)	AND Disabilities Bi-annually	14,077	12,430	12,430
No. of persons with physical and / or sensory disability benefiting from Other Day Services (excl. RT and work / work-like activities)		3,924	2,581	2,581
Residential Services				
No. of persons with ID and / or autism benefiting from residential services	AND Disabilities Quarterly	8,350	8,416	8,416
No. of persons with physical and / or sensory disability benefiting from residential services		894	708	708
Respite Services	AND Disabilities			

Disability Services				
Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
No. of bed nights in residential centre based respite services used by persons with ID and / or autism	Quarterly	139,456	142,704	139,565
No. of persons with ID and / or autism benefiting from residential centre based respite services		4,681	5,115	5,115
No. of bed nights in residential centre based respite services used by persons with physical and / or sensory disability		6,461	14,092	13,782
No. of persons with physical and / or sensory disability benefiting from residential centre based respite services		2,979	1,220	1,220
Personal Assistant (PA) / Home Support Hours No. of PA / home support hours used by persons with physical and / or sensory disability	AND Disabilities Quarterly	Original Target NSP11 required reclassification due to definitional issues	1.68m	1.64m
No. of persons with physical and / or sensory disability benefiting from PA / home support hours		Original Target NSP11 required reclassification due to definitional issues	11,571	11,571
Disability Act Compliance No. of requests for assessments received	AND Disabilities Quarterly	3,006	3,305	3,636
No. of assessments commenced as provided for in the regulations		2,645	3,020	3,327
No. of assessments commenced within the timelines as provided for in the regulations		2,645	2,199	3,327
No. of assessments completed as provided for in the regulations		2,346	3,209	3,327
No. of assessments completed within the timelines as provided for in the regulations		2,346	725	3,327
No. of service statements completed		2,346	2,252	2,828
No. of service statements completed within the timelines as provided for in the regulations		2,346	1,205	2,828
Services for Children and Young People % progress towards completion of local implementation plans for progressing disability services for children and young people	AND Disabilities Bi-annually Q2 and Q4	New PI	New PI	100%

Child Protection and Welfare Services				
Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
After Care No. of young adults aged 18 to 21 in receipt of an aftercare service on the last day of the reporting period	Office of ND Quarterly	New PI	---	Baseline to be established in 2012
No. of young adults aged 18 to 21 in receipt of an aftercare service who are in full time education on the last day of the reporting period	Office of ND Quarterly	New PI	---	Baseline to be established in 2012
Child Protection – Child Abuse i). No. of referrals of child abuse and welfare concerns	Office of ND Quarterly	To be reported in 2011	---	Demand-led
ii). % of referrals of child abuse where a preliminary enquiry took place within 24 hours		78%	---	Baseline to be established in 2012
iii). % of referrals which lead to an initial assessment		New PI	---	Demand-led
iv). % of these initial assessments which took place within 21 days of the referral		100%	---	Baseline to be established in 2012
v). % of initial assessments which led to the child being listed on the Child Protection Notification System (CPNS)		New PI	---	Demand-led
Family Support Services No. of children referred during the reporting period	Office of ND Quarterly	New PI	New PI	Baseline to be established in 2012
No. of children in receipt of a family support service at the end of the reporting period		New PI	New PI	Baseline to be established in 2012

Child Protection and Welfare Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Residential and Foster Care	Office of ND Monthly			
No. and % of children in care by care type		5,985	6,215	6,526
i). Special Care		< 0.2%	0.3%	0.3%
ii). High Support		< 0.5%	0.5%	0.5%
iii). Residential General Care (Note: Include special arrangements)		< 6.3%	6.5%	< 7%
iv). Foster care (not including day fostering)		60%	61.2%	59%
v). Foster care with relatives		30%	28.9%	30%
vi). Other care placements		3%	2.5%	3%
No. and % of children in private residential care (Note: Include special arrangements)		New PI	New PI	0%
No. and % of children in foster care private		New PI	New PI	1%
No. of children in single care residential placements		0	12	0
No. of children in residential care age 12 or under		0	46	0
No. of children in care in third placement within 12 months (all care types)		0	150	0
Children in Care in Education	Office of ND Quarterly			
i). No. of children in care aged 6 to 16 inclusive	New PI	4,158	4,365	
ii). No. and % of children in care between 6 and 16 years, in full time education	Office of ND Bi-annually	100%	4,072 97.9%	100%
Allocated Social Workers	Office of ND Monthly			
No. and % of children in care who have an allocated social worker at the end of the reporting period:		100%	5,789 93.1%	100%
i). No. and % of children in special care		100%	20 100%	100%
ii). No. and % of children in high support		100%	29 93.5%	100%
iii). No. and % of children in residential general care		100%	404 99.8%	100%
iv). No. and % of children in foster care		100%	3,550 93.3%	100%
v). No. and % of children in foster care with relatives		100%	1,641 91.2%	100%
vi). No. and % of children in other care placements	100%	145 94.2%	100%	
Care Planning	Office of ND Monthly			
No. and % of children in care who currently have a written care plan as defined by <i>Child Care Regulations 1995</i> , at the end of the reporting period		100%	5,713 91.9%	100%
i). No. and % of children in special care		100%	20 100%	100%
ii). No. and % of children in high support		100%	29 93.5%	100%
iii). No. and % of children in residential general care		100%	391 96.5%	100%
iv). No. and % of children in foster care		100%	3,524 92.6%	100%
v). No. and % of children in foster care with relatives		100%	1,614 89.7%	100%
vi). No. and % of children in other care placements	100%	133 86.4%	100%	
Foster Carer	Office of ND Quarterly			
Total no. of foster carers		New PI	4,060	4,263
No. and % of foster carers approved by the foster care panel		New PI	3,391 83.5%	3,837 90%
No. and % of relative foster carers where children have been placed for longer than 12 weeks whilst the foster carers are awaiting approval by the foster care		0%	New PI	Baseline to be established in

Child Protection and Welfare Services

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
panel, Part III of Regulations				2012
No. and % of approved foster carers with an allocated worker		100%	3,046 89.8%	100%
Children and Homelessness	Office of ND Annually (Q4)	New PI	New PI	Baseline to be established in 2012
No. of children placed in youth homeless centres / units for more than four consecutive nights (or more than 10 separate nights over a year)		New PI	New PI	Baseline to be established in 2012
No. and % of children in care placed in a specified youth homeless centre / unit		New PI	New PI	Baseline to be established in 2012
Out of Hours	Office of ND Quarterly	New PI	377	395
No. of referrals made to the Emergency Out of Hours Place of Safety Service		New PI	257	270
No. of children placed with the Emergency Out of Hours Placement Service		New PI	523	549
Early Years Services	Office of ND Quarterly	4,461	4,841	4,841
No. of notified early years service in operational areas	Office of ND Monthly	100%	59.0%	100%
% of early years services which received an inspection	Office of ND Quarterly	New PI	---	Baseline to be established in 2012
No. and % of early years services that are fully compliant		New PI	1,569	1,569
No. of notified full day early years services		100%	---	100%
% of full day services which received an annual inspection		New PI	---	Demand-led
No. of early years services in the operational area that have closed during the quarter		New PI	---	Demand-led
No. of early years service complaints received		100%	---	100%
% of complaints investigated		New PI	---	Demand-led
No. of prosecutions taken on foot of inspections in the quarter				

Palliative Care

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Waiting Times Inpatient:	AND Acute Services			
i) Specialist palliative care inpatient bed within 7 days	Monthly	92%	91%	91%
ii) Specialist palliative care inpatient bed within 1 month		98.2%	98%	98%
Waiting Times Community	AND Acute Services			
Specialist palliative care services in the community (home care) provided to patients in their place of residence within 7 days (Home, Nursing Home, Non Acute hospital)	Monthly	78%	79%	79%
Specialist palliative care services in the community (home care) provided to patients in their place of residence within 1 month (Home, Nursing Home, Non Acute hospital)		98%	97%	97%
Inpatient Units	AND Acute Services			
No. of patients in receipt of treatment in specialist palliative care inpatient units	Monthly	326	349	349
No. of admissions to specialist palliative care inpatient units		2,617	2,865	2,865
No. of discharges, transfers from the specialist palliative care inpatient unit				
i). Discharges		277	148	148
ii). Transfers		1,486	970	970
iii). Deaths*		---	1,389	---
Community Home Care	AND Acute Services			
No. of patients in receipt of specialist palliative care in the community	Monthly	2,851	3,026	3,026

Palliative Care

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Day Care No. of patients in receipt of specialist palliative day care services	AND Acute Services Monthly	277	320	320
Community Hospitals No. of patients in receipt of care in designated palliative care support beds	AND Acute Services Monthly	125	154	154
New Patients No. of new patients seen or admitted to the specialist palliative care service (reported by age profile)	AND Acute Services Monthly			
i). Specialist palliative care inpatient units		120	174	174
ii). Specialist palliative care services in the community (home care)		605	645	645

* Outturn 2011 is actual number as reported in October 2011 Performance Report

Social Inclusion

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Methadone Treatment No. of clients in methadone treatment (outside prisons)	National Lead SI Monthly	8,500	8,622	8,640
No. of clients in methadone treatment (prisons)		500	564	520
Substance Misuse No. and % of substance misusers (over 18 years) for whom treatment has commenced within one calendar month following assessment	National Lead SI Quarterly	--- 100%	1,025 95.8%	1,260 100%
No. and % of substance misusers (under 18 years) for whom treatment has commenced within two weeks following assessment		--- 100%	86 100%	105 100%
Homeless Services No. of individual service users admitted to statutory and voluntary managed residential homeless services who have medical cards	National Lead SI Quarterly	New PI for 2011 75%	1,346 81%	1,346 75%
No. and % of service users admitted to homeless emergency accommodation hostels / facilities whose needs have been formally assessed within one week	National Lead SI Quarterly,	---	New PI for 2012	80%
No. and % of service users admitted to homeless emergency accommodation hostels / facilities who have a written care plan in place within two weeks	commencing Q2	---	New PI for 2012	80%
Needle Exchange No. of pharmacies recruited to provide Needle Exchange Programme	National Lead SI Bi-annually Q1 and Q4	---	New PI for 2012	45 in Q1 65 in Q3
Traveller Health Screening No. of clients to receive national health awareness raising / screening programmes (breast check, cervical smear screening, men's health screening, blood pressure testing) delivered through the Traveller Health Units / Primary Health Care Projects	National Lead SI Bi-annually	---	New PI for 2012	1,650

Governance

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
Quality and Patient Safety Audit Service (QPSAS) % of QPSAS audits commenced as specified in annual QPSAS strategic plan	ND Quality and Patient Safety Quarterly	100%	100%	100%
% of QPSAS audits completed within the timelines agreed in approved QPSAS audit plans		75%	85%	90%
% of audit recommendations from final QPSAS audit reports tracked within timelines		New PI 2012	New PI 2012	100%
% of QPSAS audits incorporating structured service user involvement		New PI 2012	New PI 2012	50%
Service Level Agreements Agencies with whom the HSE has a Service Arrangement / Grant Aid Agreement in place:	AND ISD Quarterly			

Governance

Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2011	Projected Outturn 2011	Expected Activity / Target 2012
i). % of agencies		100%	99%	100%
ii). % of funding		100%	99%	100%
Parliamentary Questions % of Parliamentary Questions dealt with within 15 days	ND Communications Quarterly	75%	75%	75%
Complaints % of complaints investigated within legislative timeframe	ND Quality and Patient Safety Quarterly	75%	76%	75%
Finance and HR Variance from budget under:	AND Finance Monthly	To be reported in the Annual Financial Statements 2011		
i). I&E				≤ 0%
ii). Income collection				≤ 0%
iii). Pay				≤ 0%
iv). Non pay				≤ 0%
v). Revenue and Capital Vote				≤ 0%
Absenteeism rates	AND HR Monthly	3.5%	4.75%	3.5%
Variance from approved WTE ceiling		≤ 0%	-0.76%	≤ 0%

ALOS	Average Length of Stay	MAU	Medical Assessment Unit
AMP	Acute Medicine Programme	MDR	Monitoring Data Return
AMU	Acute Medical Unit	MDS	Minimum Data Set
ANP	Advanced Nurse Practitioner	MDT	Multi-Disciplinary Team
BIU	Business Information Unit	MHC	Mental Health Commission
CAMHS	Child and Adolescent Mental Health Services	MMR	Measles, Mumps, Rubella vaccine
CEO	Chief Executive Officer	MRSA	Methicillin-resistant Staphylococcus Aureus
CME	Continuing Medical Education	NAS	National Ambulance Service
CMHT	Community Mental Health Team	NAU	National Advocacy Unit
CNU	Community Nursing Unit	NCCIS	National Child Care Information System
CPP	Crisis Pregnancy Programme	NCCP	National Cancer Control Programme
CSO	Central Statistic Office	NCHD	Non-Consultant Hospital Doctor
DIU	Disability Information Unit	NCR	National Cancer Registry
DNA	Did Not Attend	NDTRS	National Drug Treatment Reporting System
DML	Dublin Mid Leinster	NHSS	Nursing Homes Support Scheme
DNE	Dublin North East	NOSP	National Office for Suicide Prevention
DOHC	Department of Health and Children	NQS	National Quality Standards
DTSS	Dental Treatment Services Scheme	NRS	National Recruitment Services
ECD	Executive Clinical Director	NSP	National Service Plan
ED	Emergency Department	NTPF	National Treatment Purchase Fund
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction	OPD	Outpatient Department
EMP	Emergency Medicine Programme	PCRS	Primary Care Reimbursement Scheme
ESP	Elective Surgery Programme	PCT	Primary Care Team
ESRI	The Economic and Social Research Institute	PHN	Public Health Nurse
GMS	General Medical Service	PI	Performance Indicator
GP	General Practitioner	PQ	Parliamentary Question
HCAI	Health Care Associated Infection	PR	Performance Report
HCP	Home Care Package	PSA	Public Service Agreement
HIPE	Health Inpatient Enquiry	PTS	Patient Transport Service
HIQA	Health Information and Quality Authority	QCC	Quality and Clinical Care
HPSC	Health Protection Surveillance Centre	RDO	Regional Director of Operations
HPV	Human Papilloma Virus	RT	Rehabilitative Training
HR	Human Resources	RTA	Road Traffic Accident
HRB	Health Research Board	SAT	Single Assessment Tool
HSCN	Health and Social Care Network	SAU	Surgical Assessment Unit
HSE	Health Service Executive	SLA	Service Level Agreement
IBTS	Irish Blood Transfusion Service	STEMI	ST Elevation Myocardial Infarction
ICRU	Intensive Care Rehabilitation Unit	VFM	Value for Money
ICT	Information Communication Technology	WHO	World Health Organisation
ICU	Intensive Care Unit	WTE	Whole Time Equivalent
ICV	Intermediate Care Vehicle		
IDU	Intravenous Drug User		
ISD	Integrated Services Directorate		
ISP	Integrated Services Programme		

