



Opioid Aq	onist Treatment	
1	KPI Title	SI1 Total no. of clients in receipt of opioid agonist treatment (outside prisons)
1a	KPI Short Title	Total receiving treatment
2	KPI Description	This is a count of the number of clients (outside prisons) receiving opioid agonist treatment (OAT) in all settings (clinics, with level 1 and 2 General Practitioners (GPs)) at the end of the calendar month as recorded on the Central Treatment Lists (CTLs). In Ireland, OAT refers to the provision of both methadone and buprenorphine / buprenorphine-naloxone only products. OAT is provided in HSE drug treatment clinics and by GPs (levels 1 and 2) who have completed recognised training programmes coordinated by the Irish College of General Practitioners (ICGP). As per HSE published OST Guidelines (https://www.hse.ie/eng/services/publications/Primary/clinical-guidelines-for-opioid-substitution-treatment.pdf), OAT is described within the five phases of: assessing dependency (not specific to level 1 or 2 GPs), induction, stabilisation, maintenance and detoxification. Level 1 GPs can treat clients in the maintenance and detoxification phases of OAT in their own practice. Level 2 GPs can treat clients at all phases of OAT. OAT should be provided at the lowest level of complexity, matching the clients needs and as close to the clients home as possible.
3	KPI Rationale	OAT is considered a key component in the treatment of opioid dependence and plays an important role in Harm reduction, rehabilitation and recovery. It is provided in HSE drug treatment clinics and by level 1 and 2 GPs. It is important to track the overall numbers in treatment in all service settings
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 10,400
4a	Target Trajectory	HSE Dublin and North East - 3,222; HSE West and North West - 274; HSE Mid West - 446; HSE South West - 800; HSE Dublin and South East - 1,705; HSE Dublin and Midlands - 3,953
4b	Volume Metrics	N/A
5	KPI Calculation	Count, the number of clients (outside prisons) in all settings (HSE drug treatment clinics, level 2 and 1 GPs) recorded on the CTLs as receiving OAT at the end of the calendar month.
6	Data Source	The CTL consists of a complete register of all individuals receiving methadone (as treatment for problem with people who use opiates) in Ireland and is the administrative database to regulate the dispensing of methadone treatment. A separate database records individuals in receipt of buprenorphine / buprenorphine-naloxone products. Collectively these are referred to here as the CTLs.
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	Monthly in arrears
8	Tracer Conditions	Clients in receipt of OAT in HSE drug treatment clinics or with level 2 or 1 GPs at the end of the calendar month as recorded on the CTLs.
9	Minimum Data Set MDS	The minimum dataset comprises the CTL entry forms (methadone and buprenorphine / buprenorphine-naloxone) which record prescribing clinic and treatment date.
10	International Comparison	Engagement and retention of clients in OAT is an internationally recognised metric.
11	KPI Monitoring	Monthly in arrears
12	KPI Reporting Frequency	Monthly in arrears
13	KPI Report Period	Monthly in arrears
14	KPI Reporting Aggregation	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive

Opioid Ag	jonist Treatment	
1	KPI Title	SI64 Mean time in clinics from referral to assessment for opioid agonist treatment
1a	KPI Short Title	Mean time to assessment
2	KPI Description	This is a calculation of the mean number of days that a client waited to be assessed for opioid substitution treatment (OST) (waiting time) in a HSE OAT clinic during the reporting period. The waiting time is counted in days from the date the referral is received to the date of actual assessment. In Ireland, OAT refers to the provision of both methadone and buprenorphine / buprenorphine-naloxone only products. OAT is provided by doctors in HSE drug treatment clinics and by GPs (levels 1 and 2) in the community who have completed recognised training programmes co-ordinated by the Irish College of General Practitioners (ICGP). This KPI includes HSE OAT clinics only. The HSE published OAT Guidelines (https://www.hse.ie/eng/services/publications/Primary/clinical-guidelines-for-opioid-substitution-treatment.pdf), provide information and guidance to doctors on the prescribing of OAT.
3	KPI Rationale	OAT is considered a key component in the treatment of opioid dependence and plays an important role in rehabilitation and recovery. Assessment is undertaken in HSE drug treatment clinics to determine current dependence in accordance with World Health Organisation internationally accepted criteria. It also includes a full health assessment to identify unmet health care needs and to improve the clients general health. Timely access to assessment is critical when users are at this stage of the change cycle.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 4 days
4a	Target Trajectory	HSE Dublin and North East - 4 days; HSE West and North West - 4 days; HSE Mid West - 4 days; HSE South West - 4 days; HSE Dublin and South East - 4 days; HSE Dublin and Midlands - 4 days
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of days that each client referred for OAT assessment from HSE drug treatment clinics for his / her assessment in the reporting period. Combine the waiting times of all those assessed during the reporting period and divide it by the total number of clients assessed in the reporting period.
6	Data Source	Addiction Service Clinics, National GP Co-ordinator
6a	Data Sign Off	National Social Inclusion Office
6a 6b	Data Sign Off Data Quality Issues	National Social Inclusion Office  Data quality issues are addressed as they arise.
6b	Data Quality Issues Data Collection	Data quality issues are addressed as they arise.
6b 7	Data Quality Issues  Data Collection  Frequency	Data quality issues are addressed as they arise.  Monthly in arrears
6b 7 8	Data Quality Issues  Data Collection Frequency Tracer Conditions Minimum Data Set MDS	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT
6b 7 8 9	Data Quality Issues  Data Collection Frequency Tracer Conditions Minimum Data Set MDS	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT
6b 7 8 9 10	Data Quality Issues Data Collection Frequency Tracer Conditions Minimum Data Set MDS International Comparison	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT  Engaging and retaining clients in OAT is an internationally recognised metric.  Monthly in arrears
6b 7 8 9 10	Data Quality Issues Data Collection Frequency Tracer Conditions Minimum Data Set MDS International Comparison KPI Monitoring	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT  Engaging and retaining clients in OAT is an internationally recognised metric.  Monthly in arrears
6b 7 8 9 10 11	Data Quality Issues  Data Collection Frequency Tracer Conditions Minimum Data Set MDS International Comparison  KPI Monitoring KPI Reporting Frequency  KPI Report Period  KPI Reporting	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT  Engaging and retaining clients in OAT is an internationally recognised metric.  Monthly in arrears  Monthly in arrears
6b 7 8 9 10 11 12 13	Data Quality Issues Data Collection Frequency Tracer Conditions Minimum Data Set MDS International Comparison KPI Monitoring KPI Reporting Frequency KPI Report Period	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT  Engaging and retaining clients in OAT is an internationally recognised metric.  Monthly in arrears  Monthly in arrears
6b 7 8 9 10 11 12 13 14	Data Quality Issues  Data Collection Frequency Tracer Conditions Minimum Data Set MDS International Comparison  KPI Monitoring KPI Reporting Frequency  KPI Reporting Aggregation KPI is reported in which	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT  Engaging and retaining clients in OAT is an internationally recognised metric.  Monthly in arrears  Monthly in arrears  Monthly in arrears  National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
6b 7 8 9 10 11 12 13 14 15	Data Quality Issues Data Collection Frequency Tracer Conditions Minimum Data Set MDS International Comparison KPI Monitoring KPI Reporting Frequency KPI Reporting Aggregation KPI is reported in which reports?	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT  Engaging and retaining clients in OAT is an internationally recognised metric.  Monthly in arrears  Monthly in arrears  Monthly in arrears  National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)  Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
6b 7 8 9 10 11 12 13 14 15 16	Data Quality Issues Data Collection Frequency Tracer Conditions Minimum Data Set MDS International Comparison KPI Monitoring KPI Reporting Frequency KPI Reporting Aggregation KPI is reported in which reports? Web link to data	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT  Engaging and retaining clients in OAT is an internationally recognised metric.  Monthly in arrears  Monthly in arrears  Monthly in arrears  National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)  Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report  https://www.hse.ie/eng/services/publications/  N/A  Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
6b 7 8 9 10 11 12 13 14 15 16	Data Quality Issues Data Collection Frequency Tracer Conditions Minimum Data Set MDS International Comparison KPI Monitoring KPI Reporting Frequency KPI Reporting Aggregation KPI is reported in which reports? Web link to data Additional Information KPI owner/lead for	Data quality issues are addressed as they arise.  Monthly in arrears  Waiting times (days) for assessment for OAT  Waiting times (days) for assessment for OAT  Engaging and retaining clients in OAT is an internationally recognised metric.  Monthly in arrears  Monthly in arrears  Monthly in arrears  National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)  Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report  https://www.hse.ie/eng/services/publications/ N/A

Opioid Age	onist Treatment	
1	KPI Title	SI65 Mean time in clinics from opioid agonist treatment assessment to treatment commenced
1a	KPI Short Title	Mean time to treatment
2	KPI Description	This is a calculation of the mean number of days following assessment for opioid agonist treatment (OAT) that a client who meets the criteria for OAT treatment waited to commence this treatment in a HSE OAT clinic after assessment. In Ireland, OAT refers to the provision of both methadone and buprenorphine / buprenorphine-naloxone only products. Assessment is undertaken in HSE drug treatment clinics and by level 2 GPs in the community who have completed recognised training programmes coordinated by the Irish College of General Practitioners. Once a diagnosis of opioid dependence is confirmed and the client has met the criteria for treatment commencement, the client commences OAT if a treatment place is available in the clinic / with the level 2 GP. This metric reflects the mean waiting time, following assessment for OAT, of all clients who waited to commence such treatment in a HSE OAT clinic or to be removed from the treatment waiting list during the reporting period.
3	KPI Rationale	OAT is considered a key component in the treatment of opioid dependence and plays an important role in rehabilitation and recovery. Timely access to treatment is critical when users have been assessed as suitable at this stage of the change cycle. It is therefore important to track the waiting times of people deemed suitable to avail of OAT services from assessment to treatment commencement or exit from the treatment waiting list.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 28 days
4a	Target Trajectory	HSE Dublin and North East - 28 days; HSE West and North West - 28 days; HSE Mid West - 28 days; HSE South West - 28 days; HSE Dublin and South East - 28 days; HSE Dublin and Midlands - 28 days
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of days that each client assessed and meeting the criteria for OAT treatment waited to commence his / her OAT treatment in a HSE OAT clinic, including time spent on the NWL, during the reporting period that those clients who were assessed and met the criteria for OAT treatment waited prior to exiting the waiting list as they no longer fulfilled the treatment criteria during the reporting period. Combine the time from assessment to treatment for all clients assessed and waiting for treatment and divide it by the total number of clients who commenced treatment or exited the waiting list during the reporting period.
6	Data Source	Addiction Service Clinics
6a	Data Sign Off	National Social Inclusion Office
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	Monthly in arrears
8	Tracer Conditions	Waiting times from OAT assessment to treatment commencement or removal from waiting list due to criteria unfilled.
9	Minimum Data Set MDS	Waiting times from OAT assessment to treatment commencement or removal from waiting list due to criteria unfilled.
10	International Comparison	Engaging and retaining clients in OAT is an internationally recognised metric.
11	KPI Monitoring	Monthly in arrears
12	KPI Reporting Frequency	Monthly in arrears
13	KPI Report Period	Monthly in arrears
14	KPI Reporting Aggregation	National / Health Region (HR) / Integrated Health Area (IHA)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	https://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive

Substance \	Use	
1	KPI Title	SI22 % of substance users (over 18 years) for whom treatment has commenced within one calendar month following assessment
1a	KPI Short Title	(O18) treatment within one month following assessment
2	KPI Description	This is a calculation of the proportion of substance users aged 18 years and over, who having completed a needs assessment commenced treatment for their substance use at a HSE treatment centre within one calendar month (30 days) of that assessment. Substance use includes illicit drugs (opiates, cannabis, heroin, cocaine) and alcohol. The needs assessment (including the use of an evidence-based screening tool) establishes the nature and extent of addiction, immediate risk and the appropriate treatment. Treatment includes: Brief Intervention; extended brief intervention; individual counselling; group counselling; group education/awareness programmes; medication-free therapy; social and/or occupational reintegration; family therapy; structured after care programmes; opioid agonist treatment (OAT); detoxification etc.
3	KPI Rationale	Speedy access to treatment is critical when substance users are at the stage to present for treatment. This is a performance indicator in Reducing Harm, Supporting Recovery (2017 - 2025)
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 100%
4a	Target Trajectory	N/A
4b	Volume Metrics	N/A
5	KPI Calculation	The number of substance users aged 18 years and over for whom treatment commenced at a HSE treatment centre within one calendar month (30 days) of assessment in the reporting quarter is divided by the total number of substance users aged 18 years and over who commenced treatment at a HSE treatment centre during the reporting quarter and is then multiplied by 100.
6	Data Source	Information is sourced by the HSE Addiction Service providers. Data is collated / verified by the Health Research Board (HRB) or Health Region (HR) . The validated information is returned to the relevant HR for submission to the National Business Information Unit (NBIU).
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection	Quarterly, one quarter in arrears
8	Tracer Conditions	The number of people aged 18 years and over who have been assessed and commenced treatment for their substance use at a HSE treatment centre and those who commenced this treatment within one calendar month.
9	Minimum Data Set MDS	The minimum dataset is a National Drug Treatment Reporting System (NDTRS) form with standard demographic information, diagnosis, treatment record, referral reason etc.
10	International Comparison	Yes, through European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
11	KPI Monitoring	Quarterly
12	<b>KPI Reporting Frequency</b>	Quarterly, one quarter in arrears
13	KPI Report Period	Quarterly, one quarter in arrears
14	KPI Reporting	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
	Web link to data	https://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie

Substance	Misuse	
1	KPI Title	SI25 - % of substance users (under 18 years) for whom treatment has commenced within one week following assessment
1a	KPI Short Title	[U18] treatment within 1 week following assessment
2	KPI Description	This is a calculation of the proportion of substance users under 18 years of age, who having been assessed for treatment have commenced that treatment at a HSE treatment centre within one week (seven days) of that assessment. Substance use includes illicit drugs (opiates, cannabis, heroin, cocaine) and alcohol. The needs assessment (including the use of an evidence-based screening tool) establishes the nature and extent of addiction, immediate risk and the appropriate treatment. Treatment includes: Brief Intervention; extended brief intervention; individual counselling; group counselling; group education/awareness programmes; medication-free therapy; social and/or occupational reintegration; family therapy; structured after care programmes; opioid agonist treatment (OAT); detoxification etc.
3	KPI Rationale	Speedy access to treatment is critical when substance users are at the stage to present for treatment, particularly so for young people. This is a performance indicator in Reducing Harm, Supporting Recovery (2017-2025).
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 100%
4a	Target Trajectory	100%
4b	Volume Metrics	N/A
5	KPI Calculation	The number of substance users aged under 18 years for whom treatment at a HSE treatment centre commenced within one week (seven days) following assessment is divided by the total number of substance users aged under 18 years who commenced treatment at a HSE treatment centre during the reporting quarter and is then multiplied by 100.
6	Data Source	Information is sourced by the HSE Addiction Service providers. Data is collated / verified by the Health Research Board (HRB) or Health Region (HR). The validated information is returned to the relevant HR for submission to the National Business Information Unit (NBIU).
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection	Quarterly, one quarter in arrears
8	Tracer Conditions	The number of people under the age of 18 years who have been assessed and commenced treatment at a HSE treatment centre for their substance use and those who commenced within one week of this assessment.
9	Minimum Data Set MDS	The minimum dataset is a National Drug Treatment Reporting System (NDTRS) form with standard demographic information, diagnosis, treatment record, referral reason etc.
10	International Comparison	Yes, through European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
11	KPI Monitoring	Quarterly
12	<b>KPI Reporting Frequency</b>	Quarterly, one quarter in arrears
13	KPI Report Period	Quarterly, one quarter in arrears
14	KPI Reporting	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive

Problem A	Ilcohol Use	
1	KPI Title	SI 36 - % of problem alcohol users (over 18 years) for whom treatment has commenced within one calendar month following assessment
1a	KPI Short Title	% over 18 commencing treatment in one month
2	KPI Description	This is a calculation of the proportion of problem alcohol users aged 18 years and over, who having had their needs for treatment assessed, have commenced treatment in a HSE treatment centre within one calendar month (30 days) of this assessment, during the reporting quarter. The needs assessment (including the use of an evidence-based screening tool) establishes the nature and extent of addiction, immediate risk and the appropriate treatment. Treatment includes: Brief Intervention; extended brief intervention; individual counselling; group counselling; group education/awareness programmes; medication-free therapy; social and/or occupational reintegration; family therapy; structured after care programmes; detoxification etc.
3	KPI Rationale	Speedy access to treatment is critical when problem alcohol users are at this stage of the change cycle.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 100%
4a	Target Trajectory	HSE Dublin and North East (100%), HSE West and North West (100%), HSE Mid West (100%), HSE South West (100%), HSE Dublin and South East (100%), HSE Dublin and Midlands (100%)
4b	Volume Metrics	N/A
5	KPI Calculation	The number of problem alcohol users aged 18 years and over, who commenced treatment at a HSE treatment centre within one calendar month (30 days) of having their needs assessed, in the reporting quarter, is divided by the total number of problem alcohol users 18 years and over, who commenced treatment at a HSE treatment centre during the reporting quarter and is then multiplied by 100. Numerator: Number of problem alcohol users aged 18 years and over, who commenced treatment at a HSE treatment centre, within one calendar month (30 days) of having their needs assessed, in the reporting quarter. Denominator: Total number of problem alcohol users 18 years and over, who commenced treatment at a HSE treatment centre during the reporting quarter x 100
6	Data Source	Information is sourced by the HSE Addiction Service providers. Data is collated / verified by the Health Research Board (HRB) or Health Region (HR). The validated information is returned to the relevant HR for submission to the National Business Information Unit (NBIU).
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	Quarterly, one quarter in arrears
8	Tracer Conditions	Problem alcohol users aged 18 years and over who commenced treatment at a HSE treatment centre and those who commenced this treatment within one calendar month (30 days) of assessment
9	Minimum Data Set MDS	The minimum dataset is a National Drug Treatment Reporting System (NDTRS) form with standard demographic information, diagnosis, treatment record and referral reason.
10	International Comparison	Yes through the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly, one quarter in arrears
13	KPI Report Period	Quarterly, one quarter in arrears
14	KPI Reporting Aggregation	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive

Problem A	Alcohol Use	
1	KPI Title	Sl39 - % of problem alcohol users (under 18 years) for whom treatment has commenced within one week following assessment
1a	KPI Short Title	% U18 commencing treatment in one week
2	KPI Description	This is a calculation of the proportion of alcohol users aged under 18 years, who having had their needs for treatment assessed, have commenced treatment in a HSE treatment centre, within one week (seven days) of this assessment, during the reporting quarter. The needs assessment (including the use of an evidence-based screening tool) establishes the nature and extent of addiction, immediate risk and the appropriate treatment. Treatment includes: Brief Intervention; extended brief intervention; individual counselling; group counselling; group education/awareness programmes; medication-free therapy; social and/or occupational reintegration; family therapy; structured after care programmes; detoxification etc.
3	KPI Rationale	Speedy access to treatment is critical when problem alcohol users are at this stage of the change cycle.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 100%
4a	Target Trajectory	HSE Dublin and North East (100%), HSE West and North West (100%), HSE Mid West (100%), HSE South West (100%), HSE Dublin and South East (100%), HSE Dublin and Midlands (100%)
4b	Volume Metrics	N/A
5	KPI Calculation	The number of problem alcohol users aged under 18 years, for whom treatment at a HSE treatment centre commenced within one week (seven days) of having their needs assessed, is divided by the total number of alcohol users aged under 18 years who having had their needs assessed, commenced treatment during the quarter and is multiplied by 100.  Numerator: The number of alcohol users aged under 18 years who commenced treatment within one week (7 days) of having had their needs assessed, during the reporting quarter.  Denominator: The total number of alcohol users aged under 18 years who having had their needs assessed, commenced treatment during the reporting quarter x 100.
6	Data Source	Information is sourced by the HSE Addiction Service providers. Data is collated / verified by the Health Research Board (HRB) or Health Region(HR). The validated information is returned to the relevant HR for submission to the Business Information Unit (BIU).
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	Quarterly, one quarter in arrears
8	Tracer Conditions	Problem alcohol users aged under 18 years who have commenced treatment at a HSE treatment centre and those who commenced this treatment within one week of having their needs assessed.
9	Minimum Data Set MDS	The minimum dataset is a National Drug Treatment Reporting System (NDTRS) form with standard demographic information, diagnosis, treatment record and referral reason.
10	International Comparison	Yes through the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly, one quarter in arrears
13	KPI Report Period	Quarterly, one quarter in arrears
14	KPI Reporting Aggregation	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	implementation	
	implementation NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie Grace Rothwell, National Director Access & Integration, Health Service Executive

Homeles	s Services	
1	KPI Title	SI52- % of new individual service users admitted to Supported Temporary Accommodations (STA), Private Emergency
		Accommodations (PEA), and/or Temporary Emergency Accommodations (TEA) during the quarter whose health needs have been assessed within two weeks of admission
1a	KPI Short Title	Assessments within 2 weeks
2	KPI Description	This KPI calculates the proportion of service users (single adults assessed as experiencing homelessness) who remain in Supported Temporary Accommodations (accommodations or hostels with onsite professional support), Private Emergency Accommodations (such as hotels, B&Bs, and other emergency-use residential facilities where supports are provided on a visiting basis), and/or Temporary Emergency Accommodations (emergency accommodation with no or minimal support) for at least 14 calendar days, and whose health needs have been assessed within this period.
3	KPI Rationale	Under national homeless policy, the HSE is responsible for the health and in house care needs of people experiencing homelessness across emergency accommodations. Completion of a health needs assessment is required to facilitate effective care planning and case management to address the health and care needs of people experiencing homelessness. Care / support plans are prepared to enable service users 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.
3a	Indicator Classification	Quality and Safety
4	National Target	NSP 2025 National Target - 86%
4a	Target Trajectory	HSE Dublin and North East (86%), HSE West and North West (86%), HSE Mid West (86%), HSE South West (86%), HSE Dublin and South East (86%), HSE Dublin and Midlands (86%)
4b	Volume Metrics	N/A
5	KPI Calculation	(i) Count the number of service users admitted to homeless emergency accommodations (STA, TEA and/or PEA) during the reporting quarter whose health needs were assessed within two weeks of their date of admission. (ii) Count the total number of service users admitted to homeless emergency accommodation for at least 14 days during the reporting quarter. The number is cumulative in the quarter and each person should be counted once only in each quarter. (iii) Calculate the percentage by dividing the number of service users admitted to homeless emergency accommodation hostels / facilities for at least 14 days whose health needs were assessed within two weeks of their date of admission, during the reporting quarter, by the total number of service users admitted to homeless emergency accommodations (STA, TEA and/or PEA) during the reporting quarter and multiply by 100.
6	Data Source	Data is sourced from emergency accommodation providers (STA, PEA and/or TEA) who return it to Health Region (HR) Social Inclusion Services for verification / validation.
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection	Quarterly
•	Frequency	
8	Tracer Conditions	•Service users admitted to homeless emergency accommodation / facilities including those whose health needs were assessed within two weeks of admission
9	Minimum Data Set MDS	•Service users admitted to homeless emergency accommodation / facilities including those whose health needs were assessed within two weeks of admission
10	International Comparison	No
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive

Homeless	Services	
1	KPI Title	SI53- % of new individual service users admitted to Supported Temporary Accommodations (STA), Private Emergency Accommodations (PEA), and/or Temporary Emergency Accommodations (TEA) during the quarter whose health needs have been assessed and are being supported to manage their physical / general health, mental health and/or addiction issues as part of their care / support plan
1a	KPI Short Title	N/A
2	KPI Description	This is a calculation of the proportion of service users (single adult individuals who have been assessed as experiencing homelessness) admitted to emergency accommodations including Supported Temporary Accommodations (accommodations, hostels, with onsite professional support), Private Emergency Accommodations (this may include hotels, B&Bs and other residential facilities that are used on an emergency basis. Supports are provided to services users on a visiting supports basis), and/or Temporary Emergency Accommodations (emergency accommodation with no (or minimal) support) whose health needs have been assessed and that person(s) is being supported by key workers to manage e.g. their physical / general health, mental health and addiction issues, where required, as part of their care / support plan and case management. This plan is an individualised plan formulated by a key worker in consultation with the service user, that describes what kind of services and care that person should receive. It is a key component in the implementation of an effective care and case management approach.
3	KPI Rationale	Under national homeless policy, the HSE is responsible for the health and in house care needs of people experiencing homelessness. A significant amount of HSE homeless funding is provided to meet the pay costs of care staff who work with and support people experiencing homelessness across emergency accomodation. Support provided by key workers in addressing the health needs of people experiencing homelessness is key to the effective operation of a care planning and case management approach which is crucial 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.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 85%  LISE Dublin and North Foot (95%) LISE West and North West (95%) LISE South West (95%) LISE
4a	Target Trajectory	HSE Dublin and North East (85%), HSE West and North West (85%), HSE Mid West (85%), HSE South West (85%), HSE Dublin and South East (85%), HSE Dublin and Midlands (85%)
4b 5	Volume Metrics KPI Calculation	N/A (i) Count the number of people admitted to homeless emergency accommodation (STA, PEA, TEA) whose needs were assessed
		and were supported to manage their physical / general health, mental health and addiction issues as part of their care/support plan during the reporting quarter.  (ii) Count the total number of people admitted to homeless emergency accommodation (STA, PEA, TEA) during the reporting quarter. The number is cumulative in the quarter and each person should be counted once only.  (iii) Calculate the percentage by dividing the number of people admitted to homeless emergency accommodation (STA, PEA, TEA) whose needs were assessed and were supported to manage their physical / general health, mental health and addiction issues as part of their care/support plan during the reporting quarter by the total number of people admitted to homeless emergency accommodation (STA, PEA, TEA) during the reporting quarter and multiply by 100.
6	Data Source	Data is sourced from emergency accomodation providers who return it to Community Healthcare Organisation (CHO) Social Inclusion Services for verification/ validation.
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection	Quarterly
8	Frequency Tracer Conditions	Service users presenting as homeless and admitted to emergency accommodation who had their needs assessed and were
		being supported to manage their needs as part of their care plan.
9	Minimum Data Set MDS	Service users admitted to emergency accommodation who had their needs assessed and were being supported to manage their needs as part of their care plan.
10	International Comparison	No No
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive

Needle Exc	change	
1	KPI Title	SI 46 No. of unique individuals attending pharmacy needle exchange
1a	KPI Short Title	N/A
2	KPI Description	This is a count of the number of unique individuals (clients) attending pharmacies as part of the Needle Exchange Programme in the reporting month. The Needle Exchange Programme is an anonymous and confidential service available in Community Healthcare Organisations (CHOs) 1,2,3,4,5 and 8. Pharmacists participating in the programme encourage clients to return used equipment in the sharps bins provided, to attend addiction clinics for treatment; to meet with outreach workers for support on injecting technique if appropriate and to get tested for blood borne viruses. A unique identifier is used for each client attending. Each unique client is free to attend the pharmacy as many times as he / she needs to in the month and is encouraged to take enough needles to ensure clean equipment for every hit/injection.
3	KPI Rationale	The Pharmacy Needle Exchange Programme is available to substance users to ensure that people who inject drugs have access to sterile equipment and can dispose of used equipment in a safe manner.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 1,400
4a	Target Trajectory	HSE Dublin and North East - 175, HSE West and North West - 75, HSE Mid West - 50, HSE South West - 715, HSE Dublin and South East - 300, HSE Dublin and Midlands - 85
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of unique individuals attending pharmacies as part of the Needle Exchange Programme in the reporting month.
6	Data Source	Records submitted by pharmacies and the Needle Exchange Programme National Liaison Pharmacist.
6a	Data Sign Off	Needle Exchange Programme National Liaison Pharmacist
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	Monthly metric reported tri monthly one quarter in arrears.
8	Tracer Conditions	Unique individuals attending Pharmacy Needle Exchange Programme.
9	Minimum Data Set MDS	Unique individuals attending Pharmacy Needle Exchange Programme.
10	International Comparison	Needle exchange data is reported annually by 29 countries to the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). Ireland provides needle exchange programme data only.
11	KPI Monitoring	Monthly metric reported tri monthly one quarter in arrears.
12	KPI Reporting Frequency	Monthly metric reported tri monthly one quarter in arrears.
13	KPI Report Period	Monthly metric reported tri monthly one quarter in arrears.
14	KPI Reporting Aggregation	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive

Traveller	Health	
1	KPI Title	SI60 Number of people who received information on or participated in positive mental health initiatives
1a	KPI Short Title	N/A
2	KPI Description	This is a count of the number of people (aged 15 years and over) who received information on positive mental health and wellbeing or took part in positive mental health and wellbeing initiatives or were signposted to appropriate services during the reporting quarter.
3	KPI Rationale	Monitoring the number of people, per CHO, who receive information on and participate in positive mental health initiatives and those who were signposted to appropriate services allows us to identify the number of people who received this information or participated in related initiatives, to measure the level of mental health and wellbeing awareness raising and signposting to appropriate services in the Traveller population.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target -5,272
4a	Target Trajectory	HSE Dublin and North East -928, HSE West and North West -1183, HSE Mid West -562, HSE South West -557, HSE Dublin and South East - 850, HSE Dublin and Midlands- 1192
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of people (aged 15 years and over) who received information on or participated in positive mental health and wellbeing initiatives or were signposted to appropriate services during the reporting quarter. Monitoring the achievement of the annual target is undertaken by monitoring the cumulative activity in respect of each of the four quarters i.e. Quarter 1 + Quarter 2 + Quarter 3 + Quarter 4.
6	Data Source	Traveller Health Units (THUs), Community Healthcare Organisations (CHOs) and the National Business Information Unit (NBIU).
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	The number of people (aged 15 years and over) who received information on or participated in positive mental health initiatives or were signposted to appropriate services.
9	Minimum Data Set MDS	THU and CHO records of individual and group positive mental health information provision and initiatives and signposting to appropriate services.
10	International Comparison	No
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	MPILL Data Cumpart	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	NBIU Data Support	Delitite Devili, Lead Data Arialyst, 300iai inclusion, Tel. 007 1091797 Email: Delitite.Devili@nse.le

Travelle	er Health	
1	KPI Title	SI59- No. of people who received information on cardiovascular health or participated in related initiatives
1a	KPI Short Title	N/A
2	KPI Description	This is a count of the number of people (aged 15 years and over) who were provided with health information on or participated in related initiatives on cardiovascular health, on an individual (one to one) or group basis including participation in the Small Changes Big Difference, Traveller Preventative Education Programme or were signposted to appropriate services during the reporting quarter.
3	KPI Rationale	The All Ireland Traveller Health Study - published in September 2010 - found that: • 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 / Stroke.  Provision of information on cardiovascular health helps raise awareness of health conditions prevalent among the Traveller population and to signpost people to appropriate services. Monitoring the number of people, per CHO, who receive this information allows the number of people who received this information or participated in related activities to be identified, to measure the level of awareness raising of these conditions and to support those requiring further assessment / management to be referred to appropriate services.
3a	Indicator Classification	Quality and Safety
4	National Target	NSP 2025 National Target - 5,272
4a	Target Trajectory	HSE Dublin and North East - 928, HSE West and North West - 1183, HSE Mid West - 562, HSE South West - 557, HSE Dublin and South East - 850, HSE Dublin and Midlands - 1192
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of people (aged 15 years and over) who received information on or participated in related initiatives on cardiovascular health on an individual or group basis or were signposted to appropriate services during the reporting quarter. Monitoring the achievement of the annual target is undertaken by monitoring the cumulative activity across the four quarters i.e. Quarter 1 + Quarter 2 + Quarter 3 + Quarter 4.
6	Data Source	Traveller Health Units (THUs), Community Healthcare Organisations (CHOs) and the National Business Information Unit (NBIU).
6a	Data Sign Off	REO, Health Region
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection	Quarterly
8	Tracer Conditions	The number of people (aged 15 years and over) who were provided with information on or participated in related initiatives on cardiovascular health or were signposted to appropriate services.
9	Minimum Data Set MDS	THU and Health Region (HR) records of individual and group health information on cardiovascular health and signposting to appropriate services.
10	International Comparison	1 No.
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting	National / Health Region (HR) / Integrated Health Area (IHA)/Local Health Office (LHO)
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	https://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive

Migrant Health					
1	KPI Title	SI61- No of staff who completed the eLearning Intercultural Awareness programme			
1a	KPI Short Title	N/A			
2	KPI Description	This is a count of the number of staff (HSE, S38, S39 and others) who complete the eLearning Intercultural Awareness programme on www.hseland.ie at the end of the calendar month.			
3	KPI Rationale	The Intercultural Awareness eLearning programme supports staff to be aware and respectful of ethnic, cultural and religious diversity of people who use our services. The main aim of this programme is to reduce the potential harm that unconscious bias may cause.			
3a	Indicator Classification	Access and Integration			
4	National Target	NSP 2025 National Target - 2,500			
4a	Target Trajectory	N/A			
4b	Volume Metrics	N/A			
5	KPI Calculation	Count, the number of staff (HSE, S38,S39 and other) completing the eLearning Intercultural awareness programme at the end of the calendar month.			
6	Data Source	HSELanD collect completion data from all registered learners on www.hseland.ie			
6a	Data Sign Off	REO, Health Region			
6b	Data Quality Issues	Data quality issues are addressed as they arise.			
7	Data Collection	Monthly in arrears			
0	Frequency	No of all the share and all the share and a later dusting to share and to share all the share and a same and a			
8	Tracer Conditions	No of staff who completed the eLearning Introduction to eLearning Intercultural Awareness programme			
9	Minimum Data Set MDS	The minimum dataset comprises registration and completion data for registered users on www.hseland.ie. This dataset contains geographical and professional information.			
10	International Comparison	No.			
11	KPI Monitoring	Monthly in arrears			
12	KPI Reporting Frequency	Monthly in arrears			
13	KPI Report Period	Monthly in arrears			
14	KPI Reporting Aggregation	National			
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report			
16	Web link to data	https://www.hse.ie/eng/services/publications/			
17	Additional Information	N/A			
18	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive			
19	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie			
20	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive			

Migrant Health					
1	KPI Title	SI62- No of staff who completed the eLearning Introduction to Guidance on Ethnic Data Collection			
1a	KPI Short Title	N/A			
2	KPI Description	This is a count of the number of staff (HSE, S38, S39 and others) who complete the eLearning Introduction to Guidance on Ethnic Data Collection on www.hseland.ie at the end of the calendar month.			
3	KPI Rationale	Collection of ethnic data is the process of collecting, recording and analysing information (data) that we collect from patients or service users. The collection of this data helps to identify and measure if our health system is serving everyone equally and make sure that our services meet the needs of a diverse population including Ethnic Minorities.			
3a	Indicator Classification	Access and Integration			
4	National Target	NSP 2025 National Target - 500			
4a	Target Trajectory	N/A			
4b	Volume Metrics	N/A			
5	KPI Calculation	Count, the number of staff (HSE, S38,S39 and other) completing the eLearning Intercultural awareness programme at the end of the calendar month.			
6	Data Source	HSELanD collect completion data from all registered learners on www.hseland.ie			
6a	Data Sign Off	REO, Health Region			
6b	Data Quality Issues	Data quality issues are addressed as they arise.			
7	Data Collection Frequency	Monthly in arrears			
8	Tracer Conditions	No of staff who completed the eLearning Introduction to Guidance on Ethnic Data Collection			
9	Minimum Data Set MDS	The minimum dataset comprises registration and completion data for registered users on www.hseland.ie. This dataset contains geographical and professional information.			
10	International Comparison	No.			
11	KPI Monitoring	Monthly in arrears			
12	KPI Reporting Frequency	Monthly in arrears			
13	KPI Report Period	Monthly in arrears			
14	KPI Reporting Aggregation	National			
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report			
16	Web link to data	https://www.hse.ie/eng/services/publications/			
17	Additional Information	N/A			
18	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive			
19	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie			
20	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive			

DSGBV		
1	KPI Title	Sl63- No of staff who completed the online Domestic, Sexual and Gender-Based Violence (DSGBV) Training programme
1a	KPI Short Title	N/A
2	KPI Description	This is a count of the number of staff (HSE, S38, S39 and others) who complete the eLearning DSGBV programme on www.hseland.ie at the end of the calendar month.
3	KPI Rationale	The DSGBV eLearning programme supports staff to be develop awareness of DSGBV, recognise the signs and impact of DSGBV, respond to victims and survivors and refer to services as appropriate.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2025 National Target - 3000
4a	Target Trajectory	N/A
4b	Volume Metrics	N/A
5	KPI Calculation	Count, the number of staff (HSE, S38,S39 and other) completing the eLearning Intercultural awareness programme at the end of the calendar month.
6	Data Source	HSELanD collect completion data from all registered learners on www.hseland.ie
6a	Data Sign Off	
6b	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	Monthly in arrears
8	Tracer Conditions	No of staff who completed the eLearning Introduction to eLearning DSGBV programme
9	Minimum Data Set MDS	The minimum dataset comprises registration and completion data for registered users on www.hseland.ie. This dataset contains geographical and professional information.
10	International Comparison	N/A
11	KPI Monitoring	Monthly in arrears
12	KPI Reporting Frequency	Monthly in arrears
13	KPI Report Period	Monthly in arrears
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Management Data Report (MDR)/National Performance Report (NPR)/ Regional Performance Report (RPR) / Annual Report
16	Web link to data	https://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
18	KPI owner/lead for implementation	Joseph Doyle, National Lead, Social Inclusion, Access & Integration, Health Service Executive
19	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Social Inclusion, Tel: 087 1891797 Email: Deirdre.Devin@hse.ie
20	Governance/sign off	Grace Rothwell, National Director Access & Integration, Health Service Executive