



Primary Care Services
(Social Inclusion)
KPI Metadata based on
Division Operational Plan 2015

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	Total no. of clients in receipt of Opioid Substitution Treatment (outside prisons)
2	KPI Description	Number of clients in Opioid Substitution Treatment at the end of the calendar month.
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care, <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 9,400
5	KPI Calculation	Count, the number of clients receiving Opioid Substitution Treatment (outside prisons) at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Assurance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	No. of clients in Opioid Substitution Treatment in Clinics
2	KPI Description	Number of clients in Opioid Substitution Treatment in Clinics at the end of the calendar month.
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 5,400
5	KPI Calculation	Count, the number of clients receiving Opioid Substitution Treatment in clinics at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone.
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	No. of clients in Opioid Substitution Treatment with Level 2 General Practitioner's
2	KPI Description	Number of clients in Opioid Substitution Treatment with Level 2 General Practitioner's at the end of the calendar month.
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification: <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 2,000
5	KPI Calculation	Count, the number of clients receiving Opioid Substitution Treatment with Level 2 General Practitioner's the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone.
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	No. of clients in Opioid Substitution Treatment with Level 1 General Practitioner's
2	KPI Description	Number of clients in Opioid Substitution Treatment with Level 1 General Practitioner's at the end of the calendar month.
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 2,000
5	KPI Calculation	Count, the number of clients receiving Opioid Substitution Treatment with level 1 General Practitioner's at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
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	National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	No. of clients in Opioid Substitution Treatment in the Prisons
2	KPI Description	Number of clients in Opioid Substitution Treatment in the Prisons at the end of the calendar month.
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 490
5	KPI Calculation	Count, the number of clients receiving Opioid Substitution Treatment in the prisons at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report .
	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	No. Of clients transferred from Clinics to Level 1 General Practitioners
2	KPI Description	Number of clients transferred from Clinics to Level 1 General Practitioners at the end of the calendar month
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 300
5	KPI Calculation	Count, the number of clients transferred from Clinics to Level 1 General Practitioners at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
	Contact details for Data Manager / Specialist Lead	Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
	National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	No. Of clients transferred from Clinics to Level 2 General Practitioners
2	KPI Description	Number of clients transferred from Clinics to Level 2 General Practitioners at the end of the calendar month
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 100
5	KPI Calculation	Count, the number of clients transferred from Clinics to Level 2 General Practitioners at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
	Contact details for Data Manager / Specialist Lead	Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
	National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	No. Of clients transferred from Level 2 General Practitioners to Level 1 General Practitioners
2	KPI Description	Number of clients transferred from Level 2 General Practitioners to Level 1 General Practitioners at the end of the calendar month.
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 120
5	KPI Calculation	Count, the number of clients transferred from Level 2 General Practitioners to Level 1 General Practitioners at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF?: Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	Total no. of new clients in receipt of Opioid Substitution Treatment (outside prisons)
2	KPI Description	Number of new clients in receipt of Opioid Substitution Treatment (outside prisons)
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 500
5	KPI Calculation	Count, the number of new clients in receipt of Opioid Substitution Treatment (outside prisons) at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	Total no. of new clients in receipt of Opioid Substitution Treatment in clinics
2	KPI Description	Number of new clients in receipt of Opioid Substitution Treatment in clinics
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 400
5	KPI Calculation	Count, the number of new clients in receipt of Opioid Substitution Treatment in clinics at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report .
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	Total no. of new clients in receipt of Opioid Substitution Treatment with Level 2 General Practitioner's
2	KPI Description	Number of new clients in receipt of Opioid Substitution Treatment with Level 2 General Practitioner's
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 100
5	KPI Calculation	Count, the number of new clients in receipt of Opioid Substitution Treatment with Level 2 General Practitioner's at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF?: Yes
	Contact details for Data Manager / Specialist Lead	Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
	National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	Total no. of new clients in receipt of Opioid Substitution Treatment in prisons
2	KPI Description	Number of new clients in receipt of Opioid Substitution Treatment in prisons
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 210
5	KPI Calculation	Count, the number of new clients in receipt of Opioid Substitution Treatment in prisons at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report .
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	Total No. of Pharmacies providing Opioid Substitution Treatment
2	KPI Description	Number of Pharmacies providing Opioid Substitution Treatment
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 630
5	KPI Calculation	Count, the number of of Pharmacies providing Opioid Substitution Treatment at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Opioid Substitution Treatment		
1	KPI Title	Total no. of people obtaining Opioid Substitution Treatment from Pharmacies
2	KPI Description	Number of people obtaining Opioid Substitution Treatment from Pharmacies
3	KPI Rationale	Opioid Substitution Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 6,430
5	KPI Calculation	Count, the number of people obtaining Opioid Substitution Treatment from Pharmacies at the end of the calendar month.
6	Data Source	The Central Treatment List (CTL) is a National administrative database to regulate the dispensing of methadone treatment. The CTL also reports on the number of people being dispensed Buprenorphine/ Naloxone. (Suboxone®).
	Data Completeness	
	Data Quality Issues	
7	Data 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: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitution Treatment
9	Minimum Data Set	The required minimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Treatment date (episode) record, Name of Prescriber/ Clinic and Community Pharmacy (where appropriate).
10	International Comparison	Engaging and retaining clients in Opioid Substitution Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: The Data collection Co-Ordinator will receive and collate the data obtained from the Central Treatment List. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the National Performance Report.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported: <input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Homeless Services		
1	KPI Title	No. and % of service users admitted during the quarter to homeless emergency accommodation hostels/ facilities who have a medical card.
2	KPI Description	This metric is designed to measure the number and percentage of service users admitted during the quarter to emergency accommodation homeless hostels / facilities that have a current medical card. Service User: A service user is an individual who has been assessed as being homeless and placed in an emergency accommodation hostel/ facility. Emergency Accommodation: Emergency accommodation mainly refers to hostel type accommodation for short term / emergency use for people experiencing homelessness.
3	KPI 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.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 75%
5	KPI Calculation	Total number of persons admitted during the quarter to emergency accommodation homeless services who have a medical card i.e. 31st March, 30th June, 30th Sept , 31st December. Total number of persons admitted during the quarter to emergency accommodation homeless services i.e. 31st March, 30th June, 30th Sept , 31st December. Calculation Percentage of homeless people with medical cards in quarter (number of people admitted)/(number with a medical card) x 100 = %
6	Data Source	Emergency Accommodation Providers/ Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accommodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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:
8	Tracer Conditions	A person presenting as homeless and who required emergency accommodation who has a medical card
9	Minimum Data Set	The required minimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf . http://www.huduser.org/Publications/pdf/ahar.pdf
11	KPI Monitoring	KPI will be monitored on a quarterly basis: <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: Social Inclusion Specialists / Social Inclusion Managers/ Area Managers. The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI returns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCS by the 15th of the month for publication in the national Performance Report (PR)
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July), <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Homeless Services		
1	KPI Title	No and % of service users admitted during the quarter who did not have a valid medical card on admission and who were assisted by Hostel staff to acquire a medical card during the quarter.
2	KPI Description	This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities who did not have a current medical card and who were assisted to acquire one during the quarter. A service user is an individual who has been assessed as being homeless and placed in an emergency accommodation hostel/ facility. Emergency Accommodation Emergency accommodation mainly refers to hostel type accommodation for short term / emergency use for people experiencing homelessness.
3	KPI 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.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 90%
5	KPI Calculation	Total number of persons admitted during the quarter to emergency accommodation homeless services who <u>did not</u> were assisted to acquire one i.e. 31st March, 30th June, 30th Sept , 31st December. Total number of persons admitted during the quarter to emergency accommodation homeless services i.e. 31st March, 30th June, 30th Sept , 31st December. Calculation Percentage of homeless people admitted without medical cards in quarter (number of people admitted without medical cards)/(number assisted to acquire a medical card) x 100 = %
6	Data Source	Emergency Accommodation Providers/ Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accommodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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:
8	Tracer Conditions	A person presenting as homeless and who required emergency accommodation who has a medical card
9	Minimum Data Set	The required minimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g. http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf . http://www.huduser.org/Publications/pdf/ahar.pdf
11	KPI Monitoring	KPI will be monitored on a quarterly basis: <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: Social Inclusion Specialists / Social Inclusion Managers/ Area Managers. The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI returns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR)
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July), <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
	Contact details for Data Manager / Specialist Lead	Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
	National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Homeless Services		
1	KPI Title	% of service users admitted to homeless emergency accommodation hostels / facilities whose health needs have been assessed as part of a Holistic Needs Assessment (HNA) within two weeks of admission
2	KPI Description	Emergency Accommodation: Emergency accommodation mainly refers to hostel type accommodation for short term / emergency use for people experiencing homelessness. This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities whose health needs have been assessed as part of a Holistic Needs Assessment(HNA) within two weeks from the date of admission.
3	KPI Rationale	Under national homeless policy, the HSE is responsible for the health and in house care needs of homeless persons 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. Care / Support plans are prepared to enable homeless persons 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
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 85%
5	KPI Calculation	(a) The count of persons admitted to homeless emergency accommodation hostels/ facilities during the quarter ended 31st March, 30th June, 30th Sept and 31st December. (b) The count of persons admitted to homeless emergency accommodation hostels/ facilities whose health needs have been assessed as part of a Holistic Needs Assessment within two weeks from the date of admission, during the quarter ended 31st March, 30th June, 30th Sept and 31st December. This is reported also as a percentage in the Performance report. The percentage is calculated by the BIU. The number is cumulative in the quarter and each person should be counted once only in each quarter.
6	Data Source	Emergency Accommodation Providers/ / Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accommodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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:
8	Tracer Conditions	Any person presenting as homeless and deemed by the Homeless Persons Unit / Local Authority to require emergency accommodation would normally be admitted to an emergency hostel/facility if available and supported by a written care plan as outlined by the criteria contained by the Holistic needs assessment protocol.
9	Minimum Data Set	The required minimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form.
10	International Comparison	Yes: e.g. http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf . http://www.huduser.org/Publications/pdf/ahar.pdf
11	KPI Monitoring	KPI will be monitored on a quarterly basis: <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: Social Inclusion Specialists / Social Inclusion Managers/ Area Managers. The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July), <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
	Contact details for Data Manager / Specialist Lead	Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
	National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Homeless Services		
1	KPI Title	% of service users admitted to homeless emergency accommodation hostels / facilities whose health needs have been assessed and are being supported to manage their physical / general health, mental health and addiction issues as part of their care/support plan
2	KPI Description	<p>Service User: A service user is an individual who has been assessed as being homeless and placed in an emergency accommodation hostel/ facility.</p> <p>Health Needs Assessment: is a detailed assessment of an individual's health needs and is an integral part of the Holistic Needs Assessment (HNA) which is fundamental component of the care/support 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 health and care related needs including general healthcare, mental health, and addiction issues.</p> <p>Homeless Emergency Accommodation: Emergency accommodation mainly refers to hostel type accommodation for short term / emergency use for people experiencing homelessness. Care / Support Plan: A care /support plan is an individualised plan formulated by a care worker in consultation with the individual resident, their families and other appropriate professionals 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.</p>
3	KPI Rationale	Under national homeless policy, the HSE is responsible for the health and in house care needs of homeless persons with a significant amount of HSE homeless funding being provided to meet the pay costs of care staff across the hostel network. This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities whose health needs have been assessed and that person(s) is being supported by hostel staff to manage their physical/general health, mental health and addiction issues, where required. Support provided by hostel staff in addressing the health needs of homeless persons is key to the effective operation of a Care Planning system which is crucial in to enable them to maximize 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.
	Indicator Classification (National Standards better safer healthcare)	<p>Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).</p> <p><input checked="" type="checkbox"/> Person Centered Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management</p>
4	KPI Target	2015 Operational Plan Target: 80%
5	KPI Calculation	<p>(a) The count 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) The count of persons admitted to homeless emergency accommodation hostels/ facilities whose needs have been assessed and are being supported to manage their physical/mental health as part of their care/support plan during the quarter ended 31st March, 30th June, 30th Sept and 31st December. This is reported also as a percentage in the Performance report. The percentage is calculated by the BIU. The number is cumulative in the month and each person should be counted once only</p>
6	Data Source	Emergency Accommodation Providers/ Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accommodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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:
8	Tracer Conditions	Any person presenting as homeless and deemed by the Homeless Persons Unit / Local Authority to require emergency accommodation would normally be admitted to an emergency hostel/facility if available.
9	Minimum Data Set	the required minimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g. http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf . http://www.huduser.org/Publications/pdf/ahar.pdf
11	KPI Monitoring	<p>KPI will be monitored on a quarterly basis:</p> <p><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: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCR by the 15th of the month for publication in the national Performance Assurance Report (PAR).</p>
12	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:
13	KPI report period	<p><input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</p> <p><input type="checkbox"/> Monthly in arrears (June data reported in July), <input checked="" type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2)</p> <p><input type="checkbox"/> Rolling 12 months (previous 12 month period)</p>
14	KPI Reporting Aggregation	<p><input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital</p> <p><input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:</p>
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie

National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000
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Social Inclusion: Needle Exchange

1	KPI Title	No. of Pharmacies recruited to provide Needle Exchange Programme
2	KPI Description	Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance misuse addiction.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. Each unique individual who uses the service is recorded so the PNEX also provides a way in which to monitor persons who have drug issues nationwide. Needle exchange is a key element of the National Drugs Strategy.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 129
5	KPI Calculation	Count the numbers of pharmacies trained and with an agreed SLA to provide the service by the end of 2015.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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: monthly metric captured quarterly in arrears.
8	Tracer Conditions	Any member of the population , service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	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: monthly metric captured quarterly in arrears.
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (monthly quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Needle Exchange		
1	KPI Title	No of unique individuals attending pharmacy needle exchange
2	KPI Description	Pharmacies are providing a needle exchange service to persons with a substance misuse addiction. This KPI captures the number of individuals availing of this service.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. The contents of the pack have been specifically chosen to reduce the risk to the injecting drug user and to minimise the spread of blood borne viruses. This is an anonymous and confidential service. The number of unique clients attending each pharmacy is collated along with the number of packs given out monthly. Pharmacists strongly encourage all clients to return packs. Pharmacists encourage patients to attend addiction clinics for treatment. The number of unique individuals using the service is collated.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 1,253
5	KPI Calculation	Count
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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: monthly metric captured quarterly in arrears.
8	Tracer Conditions	any member of the population, service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	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: monthly metric captured quarterly in arrears.
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (monthly quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Needle Exchange		
1	KPI Title	No. of pharmacy needle exchange packs provided
2	KPI Description	Pharmacy pack consists of 10 "One hit kits" i.e. 1ml syringes with an inbuilt filter, 10 citric acid sachets, 10 spoons for liquefying the heroin, 10 alcohol swabs, 1 mini sharps bin, 4 condoms and a leaflet which provides information on how to access addiction services, safe injecting practices and what to do in the case of a drug overdose. Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance misuse addiction.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. The contents of the pack have been specifically chosen to reduce the risk to the injecting drug user and to minimise the spread of blood borne viruses. This is an anonymous and confidential service. The number of unique clients attending each pharmacy is collated along with the number of packs given out monthly. Pharmacists strongly encourage all clients to return packs. Pharmacists encourage patients to attend addiction clinics for treatment. The number of unique individuals using the service is collated.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 3,303
5	KPI Calculation	Count
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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: monthly metric captured quarterly in arrears.
8	Tracer Conditions	any member of the population, service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	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: monthly metric captured quarterly in arrears.
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (monthly quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
	Contact details for Data	Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
	National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Needle Exchange		
1	KPI Title	Average no. of needles / syringe packs per person
2	KPI Description	This is the average number of clean needles issued each month to unique individuals who are participating in the needle exchange programme from participating pharmacies. Service users are strongly encouraged to return used needles but are still provided with clean needles if no returns are brought back.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. Each unique individual who uses the service is recorded so the PNEX also provides a way in which to monitor persons who have drug issues nationwide. Needle exchange is a key element of the National Drugs Strategy.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 16
5	KPI Calculation	Number of clean needles provided each month divided by the number of unique individuals attending for that month. E.g. 11600 needles/400 unique individuals in the month = 29 clean needles per unique individual per month.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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: monthly metric captured quarterly in arrears.
8	Tracer Conditions	Any member of the population , service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	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: monthly metric captured quarterly in arrears.
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (monthly quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Needle Exchange		
1	KPI Title	No. & % of Pharmacy needle exchange packs returned per month
2	KPI Description	Pharmacy pack consists of 10 "One hit kits" i.e. 1ml syringes with an inbuilt filter, 10 citric acid sachets, 10 spoons for liquefying the heroin, 10 alcohol swabs, 1 mini sharps bin, 4 condoms and a leaflet which provides information on how to access addiction services, safe injecting practices and what to do in the case of a drug overdose. Pharmacies are recruited and trained to provide a needle exchange service to persons with a substance misuse addiction. Service users are strongly encouraged to return used needles but are still provided with clean needles if no returns are brought back.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. The contents of the pack have been specifically chosen to reduce the risk to the injecting drug user and to minimise the spread of blood borne viruses. This is an anonymous and confidential service. The number of unique clients attending each pharmacy is collated along with the number of packs given out monthly. Pharmacists strongly encourage all clients to return packs. Pharmacists encourage patients to attend addiction clinics for treatment. The number of unique individuals using the service is collated.
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	2015 Operational Plan Target: 981 (30%)
5	KPI Calculation	The total number of personal sharps bins returned each month divided by the total number of packs given out each month, expressed as a percentage. Calculated at the end of each month.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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: monthly metric captured quarterly in arrears.
8	Tracer Conditions	Any member of the population, service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA. This will be the second time that Ireland will be in a position to collect/ provide any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	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: monthly metric captured quarterly in arrears.
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (monthly quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie

National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000
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Social Inclusion: Traveller Health Screening

1	KPI Title	Number of people who received awareness raising and information on type 2 diabetes and cardiovascular health
2	KPI Description	Monitoring of the number of clients per THU/ISA region who received awareness raising and information on type 2 diabetes and cardiovascular health. The key aim is to build and strengthen the knowledge, awareness and skills of participants to reduce their risk of developing Type 2 Diabetes and Cardiovascular Disease.
3	KPI Rationale	Travellers are at a much higher risk of developing CVD when compared to the background Irish population which is likely to be contributing to their high mortality rates and reduced life expectancy(Slattery 50:2011). Incidence of Heart Disease and cancer is set to increase. Obesity is the leading cause of Cancer in Non Smokers (Healthy Ireland 2013-2025, 2013:10) "Cardiovascular Health must be approached through a combination of population based approaches which target the entire population and high risk approaches which focus on individuals in contact with Health Services"(Changing Cardiovascular Health 2010-2019:3)
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2015 Target - Nationally 3,470 - CHO1- 245, CHO2- 695, CHO 3-350, CHO4 -320, CHO5 - 395, CHO 6 - 130, CHO7 - 475, CHO 8 - 585, CHO 9 - 275
5	KPI Calculation	Number of Traveller (over 18)who participate in Type 2 Diabetes & Cardiovascular Disease Education/Prevention or Awareness Raising Programmes on e.g Healthy Eating, Physical Activity, Smoking and Coping with Stress
6	Data Source	Regional Social Inclusion Unit via Traveller Health Units
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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:
8	Tracer Conditions	The numbers of personswho received awareness raising and information on type 2 diabetes and cardiovascular health
9	Minimum Data Set	The required miniuimum dataset for this metric is standard demographic information, on people who received awareness training or information
10	International Comparison	The disease profile of the Traveller community is similar to certain minority ethnic populations in other countries eg Australian Aboriginals, Native Americans.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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 KPI is submitted to the Social Inclusion Specialist leading on Traveller Health for collation into a national return.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
Contact details for Data Manager / Specialist Lead		Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
National Lead/Division		National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000

Social Inclusion: Traveller Health Screening

1	KPI Title	Number of people who received awareness and participated in positive mental health initiatives
2	KPI Description	Traveller PHC Projects are supporting Travellers in a range of positive mental health initiatives, as well as supporting Travellers with broader determinants of health, linking directly and signposting to services. Data relating to Projects work in this area with Traveller men, women and young Travellers can be recorded such as outreach with individuals and families, community workshops, awareness days, relevant training programmes, stress management, cultural awareness training, work on broader social determinants of health and links and signposting to services
3	KPI Rationale	Travellers experience poorer mental health and higher suicide rates than the general population. Suicide rates among Travellers are 6 times the rate of the general population (AITHS 2010). Sixty one (61%) of Travellers (aged 15+) reported at least one day in the last month when their mental health was not good (AITHS 2010). Prevention of suicide must be broad based and include ways to influence mental health for the better in Traveller community. Promotion of positive mental health and wellbeing, awareness raising and increased links with services are key to meeting the needs of the Traveller community. The relative difference in trends according to socio- economic group includes mental health including references to poverty, inequality and other social & economic determinants of health (Healthy Ireland, page 10)
	Indicator Classification (National Standards better safer healthcare)	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2015 Target - Nationally 3,470 - CHO1- 245, CHO2- 695, CHO 3-350, CHO4 -320, CHO5 - 395, CHO 6 - 130, CHO7 - 475, CHO 8 - 585, CHO 9 - 275
5	KPI Calculation	Number of Travellers involved in: awareness raising and participation in positive mental health initiatives through e.g. Outreach, Workshops, Training, Awareness Days
6	Data Source	Regional Social Inclusion Unit via Traveller Health Units
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data 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:
8	Tracer Conditions	The numbers of persons who presented for screening
9	Minimum Data Set	The required minimum dataset for this metric is standard demographic information, Diagnosis, Treatment record, referral reason, commences.
10	International Comparison	The disease profile of the Traveller community is similar to certain minority ethnic populations in other countries eg Australian Aboriginals, Native Americans.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <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 KPI is submitted to each Regional Social Inclusion Specialist for oversight who in turn submit it to the national office for collation into a national return.
12	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:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> CHO <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input checked="" type="checkbox"/> Performance Report (NSP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	Is this information in CIF? : Yes
	Contact details for Data Manager / Specialist Lead	Information Analyst: Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Specialist Lead: Joseph Doyle, National Planning Specialist, National Social Inclusion Office Email: joseph.doyle@hse.ie
	National Lead/Division	National Lead: Mr John Hennessey, National Director Primary Care Services, Tel: 01 635 2000