

Health Service Executive

Social Inclusion

Key Performance Indicator Metadata 2018

Sub	stance Misuse	
1	KPI Title	%. of substance misusers (over 18 years) for whom treatment has commenced within one calendar month following assessment
1a	KPI Short Title	N/A
2	KPI Description	This is a calculation of the proportion of the overall number of substance users aged 18 years and over who having completed a needs assessment commenced treatment for their substance use at a HSE treatment centre within one calendar month (30 days) of that assessment. Substance use includes illicit drugs (opiates, cannabis, heroin, cocaine) and alcohol. Treatment includes Brief Intervention, individual counselling, group counselling, group education / awareness programme, medication-free therapy, social and / or occupational reintegration, family therapy, structured after care programme, opioid substitution treatment (OST), detoxification etc.
3	KPI Rationale	Speedy access to treatment is critical when substance users are at the stage of the change cycle to present for treatment. This is a performance indicator in Reducing Harm, Supporting Recover (2017 - 2025)
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2018 - 100%
4a	Target	100%
4b	Volume Metrics	N/A
5	KPI Calculation	The number of substance users aged 18 years and over for whom treatment commenced at a HSE treatment centre within one calendar month (30 days) of assessment is divided by the total number of substance users aged 18 years and over who commenced treatment at a HSE treatment centre during the reporting quarter and is then multiplied by 100.
6	Data Source	Information is sourced by HSE Addiction Service providers. Data is collated / verified via the Health Research Board (HRB) or Community Healthcare Organisation (CHO) 6, 7 & 9. The validated information is returned to the relevant CHO for submission to the National Business Information Unit (NBIU).
6a	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Quarterly, one quarter in arrears
8	Tracer Conditions	The number of people aged 18 years and over who have been assessed and commenced treatment for their substance use at a HSE treatment centre within one calendar month.
9	Minimum Data Set MDS	The minimum dataset is a National Drug Treatment Reporting System (NDTRS) form with standard demographic information, diagnosis, treatment record, referral reason etc.
10	International Comparison	Yes, through European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly, one quarter in arrears
13	KPI Report Period	Quarterly, one quarter in arrears
14	KPI Reporting Aggregation	National / CHO / LHO
15	KPI is reported in which reports?	Performance Profile / Management Data Report / Annual Report
16	Web link to data	https://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for	Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive
	PBI data support	Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie
	Governance/sign off	David Walsh, National Director Community Operations, Health Service Executive

Subs	tance Misuse	
1	KPI Title	No. of substance misusers (over 18 years) for whom treatment has commenced within one calendar month following assessment
1a	KPI Short Title	N/A
2	KPI Description	This is a count of the number of substance users, aged 18 years and over, who having completed a needs assessment have commenced treatment at a HSE treatment centre within one calendar month (30 days) of this assessment. Substance use includes illicit drugs (opiates, cannabis, heroin, cocaine) and alcohol. Treatment includes Brief Intervention, individual counselling, group counselling, group education / awareness programme, medication-free therapy, social and / or occupational reintegration, family therapy, structured after care programme, opioid substitution treatment (OST), detoxification etc.
3	KPI Rationale	Speedy access to treatment is critical when substance users are at the stage of the change cycle to present for treatment. This is a performance indicator in Reducing Harm, Supporting Recovery (2017-2025).
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2018 - 4,946
4a	Target	CHO 1-704, CHO 2-274, CHO 3-152, CHO 4-366, CHO 5-1,338, CHO 6-261, CHO 7-775, CHO 8-507, CHO 9-569
4b	Volume Metrics	N/A
5	KPI Calculation	Count all substance users aged 18 years and over who having completed a needs assessment have commenced treatment for their substance use at a HSE treatment centre within one calendar month (30 days) of that assessment, during the reporting quarter.
6	Data Source	Information is sourced by HSE Addiction Service providers. Data is collated / verified via the Health Research Board (HRB) or Community Healthcare Organisation (CHO) 6, 7 & 9. The validated information is returned to the relevant CHO for submission to the National Business Information Unit (NBIU).
6a	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Quarterly, one quarter in arrears
8	Tracer Conditions	The number of people aged 18 years and over who have been assessed and deemed appropriate for treatment for substance use at a HSE treatment centre and have commenced treatment within one calendar month of assessment.
9	Minimum Data Set MDS	The minimum dataset is a National Drug Treatment Reporting System (NDTRS) form with standard demographic information, diagnosis, treatment record, referral reason etc.
10	International Comparison	Yes, through European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly, one quarter in arrears
13	KPI Report Period	Quarterly, one quarter in arrears
14	KPI Reporting Aggregation	National / CHO / LHO
15	KPI is reported in which reports?	Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for	Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive
	PBI data support	Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie
	Governance/sign off	David Walsh, National Director Community Operations, Health Service Executive

Subs	tance Misuse	
1	KPI Title	% of substance misusers (under 18 years) for whom treatment has commenced within one week following assessment
1a	KPI Short Title	N/A
2	KPI Description	This is a calculation of the proportion of the overall number of substance users under 18 years of age, who having been assessed for treatment have commenced that treatment at a HSE treatment centre within one week (seven days) of that assessment. Substance use includes illicit drugs (opiates, cannabis, heroin, cocaine) and alcohol. Needs assessment aims to determine the seriousness and urgency of the drug / alcohol problem. An assessment of both the nature and extent of the addiction as well as the service users motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre. Treatment includes Brief Intervention, individual counselling, group counselling, group education / awareness programme, medication-free therapy, social and / or occupational reintegration, family therapy, structured after care programme, opioid substitution treatment (OST), detoxification etc.
3	KPI Rationale	Speedy access to treatment is critical when substance users are at the stage of the change cycle to present for treatment, particularly so for young people. This is a performance indicator in Reducing Harm, Supporting Recovery (2017-2025).
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2018 - 100%
4a	Target	100%
4b	Volume Metrics	N/A
5	KPI Calculation	The number of substance users aged under 18 years for whom treatment at a HSE treatment centre commenced within one week (seven days) following assessment is divided by the total number of substance users aged under 18 years treated at a HSE treatment centre during the reporting quarter and is then multiplied by 100.
6	Data Source	Information is sourced by HSE Addiction Service providers. Data is collated / verified via the Health Research Board (HRB) or Community Healthcare Organisation (CHO) 6, 7 & 9. The validated information is returned to the relevant CHO for submission to the National Business Information Unit (NBIU).
6a	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Quarterly, one quarter in arrears
8	Tracer Conditions	The number of people under the age of 18 years who have been assessed and commenced treatment at a HSE treatment centre for their substance use within one week of this assessment.
9	Minimum Data Set MDS	The minimum dataset is a National Drug Treatment Reporting System (NDTRS) form with standard demographic information, diagnosis, treatment record, referral reason etc.
10	International Comparison	Yes, through European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly, one quarter in arrears
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3	KPI Rationale	Speedy access to treatment is critical when substance users are at the stage of the change cycle to present for treatment, particularly so for young people.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2018 - 333
4a	Target	CHO 1-34, CHO 2-26, CHO 3-0, CHO 4-22, CHO 5-61, CHO 6-0, CHO 7-78, CHO 8-78, CHO 9-34
4b	Volume Metrics	N/A
5	KPI Calculation	Count all substance users aged under 18 years of age who having completed a needs assessment have commenced treatment at a HSE treatment centre within one week (seven days) of this assessment, during the reporting quarter.
6	Data Source	Information is sourced by HSE Addiction Service providers. Data is collated / verified via the Health Research Board (HRB) or Community Healthcare Organisation (CHO) 6, 7 & 9. The validated information is returned to the relevant CHO for submission to the National Business Information Unit (NBIU).
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and 2 General Practitioners (GPs)) at the end of the calendar month as recorded on the Central Treatment Lists (CTLs). In Ireland, refers to the provision of both methadone and buprenorphine / buprenorphine-naloxone only products. OST is provided in HSE dru treatment clinics and by GPs (levels 1 and 2) who have completed recognised training programmes co-ordinated by the Irish Colled General Practitioners (ICGP). As per HSE published OST Guidelines (https://www.hse.ie/eng/services/publications/Primary/clinica guidelines-for-opioid-substitutio-A4-treatment.pdf), OST is described within the five phases of assessing dependency (not specific level 1 or 2 GPs), induction, stabilisation, maintenance and detoxification. Level 1 GPs can treat clients in the maintenance and detoxification phases of OST in their own practice. Level 2 GPs can treat clients at all phases of OST should be provided at towest level of complexity, matching the clients needs and as close to the clients home as possible. Set is considered a key component in the treatment of opioid dependence and plays an important role in rehabilitation and recover is provided in HSE drug treatment clinics and by level 1 and 2 GPs. It is important to track the overall numbers in treatment in all settings. Indicator Classification Access and Integration Access and Integration (Access and Integration I	Opio	id Substitution	
This is a count of the number of clients (outside prisons) receiving opioid substitution treatment (OST) in all settings (clinics, with Irad 2 General Practitioners (GPs)) at the end of the celendar month as recorded on the Central Treatment Lists (CTLs). In Ireland, refers to the provision of Lobe methadone and obsprenosphine - Disperenosphine - Dispe	1	KPI Title	Total no. of clients in receipt of opioid substitution treatment (outside prisons)
and 2 General Practitioners (GPa) at the end of the calendar month as recorded on the Central Treatment Lists (CTL3). In reland, refers to the provision of both methadone and buypernophine-halopernophi	1a	KPI Short Title	N/A
is provided in HSE drug treatment clinics and by level 1 and 2 GPs. It is important to track the overall numbers in treatment in all size strings Indicator Classification Access and Integration Access and Integration National Target NSP 2018 - 10,028 Target CHO1 (93), CHO2 (143), CHO3 (367), CHO4 (500), CHO5 (562), CHO6 (991), CHO7 (3,761), CHO8 (684), CHO9 (2,972) by Volume Metrics N/A KPI Calculation Count, the number of clients (outside prisons) in all settings (HSE drug treatment clinics, level 2 and 1 GPs) recorded on the CTLs receiving OST at the end of the calendar month. The CTL consists of a complete register of all individuals receiving methadone (as treatment for problem with opiate use) in Irelant is the administrative database to requise the dispensing of methadone treatment. A separate database records individuals in receiving methadone (as treatment for problem with opiate use) in Irelant is the administrative database to requise the dispensing of methadone treatment. A separate database records individuals in receiving methadone treatment. A separate database records individuals in receiving the data pathway. Character of Officer, Community Healthcare Organisation Data Quality Issues Data Quality Issues Data Quality Issues Data Quality issues are addressed as they arise along the data pathway. Monthly in arrears Tracer Conditions Clients in receipt of OST in HSE drug treatment clinics or with level 2 or 1 GPs at the end of the calendar month as recorded on the CTLs. International Comparison Engagement and retention of clients in OST is an internationally recognised metric. KPI Monthoring Monthly in arrears KPI Report Period Monthly in arrears KPI Reporting Aggregation National / CHO / LHO KPI is reported in which reports? Management Data Report KPI owner/lead for implementation N/A KPI owner/lead for implementation PBI data support Geraldine Littler (46 9251330, Geraldine Littler@hse.ie	2	KPI Description	detoxification phases of OST in their own practice. Level 2 GPs can treat clients at all phases of OST. OST should be provided at the
A National Target NSP 2018 - 10,028 4a Target CHO1 (93), CHO2 (143), CHO3 (367), CHO4 (500), CHO5 (562), CHO6 (991), CHO7 (3,761), CHO8 (684), CHO9 (2,972) 4b Volume Metrics N/A 5 KPI Calculation Count, the number of clients (outside prisons) in all settings (HSE drug treatment clinics, level 2 and 1 GPs) recorded on the CTLs receiving OST at the end of the calendar month. 6 Data Source The CTL consists of a complete register of all individuals receiving methadone (as treatment for problem with opiate use) in relam is the administrative database to regulate the dispensing of methadone treatment. A separate database records individuals in receiving methadone treatment. A separate database records individuals in receiving products. Collectively these are referred to here as the CTLs. 6a Data Sign Off Chief Officer, Community Healthcare Organisation 6b Data Quality Issues Data quality issues are addressed as they arise along the data pathway. 7 Data Collection Frequency Monthly in arrears 8 Tracer Conditions Clients in receipt of OST in HSE drug treatment clinics or with level 2 or 1 GPs at the end of the calendar month as recorded on the CTLs. 9 Minimum Data Set MDS The minimum dataset comprises the CTL entry forms (methadone and buprenorphine / buprenorphine-naloxone) which record prescribing clinic and treatment date. 10 International Comparison Engagement and retention of clients in OST is an internationally recognised metric. KPI Monitoring Monthly in arrears KPI Reporting Aggregation National / CHO / LHO KPI is reported in which reports? Management Data Report 16 Web link to data http://www.hse.ie/eng/services/publications/ KPI owner/lead for implementation PBI data support Geraldine Littler, 046 9251330, Geraldine Littler@hse.ie	3	KPI Rationale	OST is considered a key component in the treatment of opioid dependence and plays an important role in rehabilitation and recovery. It is provided in HSE drug treatment clinics and by level 1 and 2 GPs. It is important to track the overall numbers in treatment in all service settings
Target CHO1 (93), CHO2 (143), CHO3 (367), CHO4 (500), CHO5 (562), CHO6 (991), CHO7 (3,761), CHO8 (684), CHO9 (2,972) 4b Volume Metrics N/A KPI Calculation Count, the number of clients (outside prisons) in all settings (HSE drug treatment clinics, level 2 and 1 GPs) recorded on the CTLs receiving OST at the end of the calendar month. The CTL consists of a complete register of all individuals receiving methadone (as treatment for problem with opiate use) in reland is the administrative database to regulate the dispensing of methadone treatment. A separate database records individuals in receive buprenorphine / buprenorphine relakonce products. Collectively these are referred to here as the CTLs. Data Sign Off Chief Officer, Community Healthcare Organisation Data Quality Issues Data quality issues are addressed as they arise along the data pathway. Data Collection Frequency Monthly in arears Tracer Conditions Clients in receipt of OST in HSE drug treatment clinics or with level 2 or 1 GPs at the end of the calendar month as recorded on the CTLs. Minimum Data Set MDS The minimum dataset comprises the CTL entry forms (methadone and buprenorphine / buprenorphine-naloxone) which record prescribing clinic and treatment date. In International Comparison Engagement and retention of clients in OST is an internationally recognised metric. KPI Monitoring Monthly in arrears KPI ReportIng Frequency Monthly in arrears KPI ReportIng Aggregation National / CHO / LHO KPI is reported in which reports? Management Data Report Web link to data http://www.hse.ie/eng/services/publications/ N/A KPI owner/lead for implementation PBI data support Geraldine Littler, 046 9251330, Geraldine Littler@hse.ie	3a	Indicator Classification	Access and Integration
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12 KPI Reporting Frequency Monthly in arrears 13 KPI Report Period Monthly in arrears 14 KPI Reporting Aggregation National / CHO / LHO 15 KPI is reported in which reports? Management Data Report 16 Web link to data http://www.hse.ie/eng/services/publications/ 17 Additional Information N/A KPI owner/lead for Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive implementation PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	10	International Comparison	Engagement and retention of clients in OST is an internationally recognised metric.
13 KPI Report Period Monthly in arrears 14 KPI Reporting Aggregation National / CHO / LHO 15 KPI is reported in which reports? Management Data Report 16 Web link to data http://www.hse.ie/eng/services/publications/ 17 Additional Information N/A KPI owner/lead for Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive implementation PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	11	KPI Monitoring	Monthly in arrears
14 KPI Reporting Aggregation National / CHO / LHO 15 KPI is reported in which reports? Management Data Report 16 Web link to data http://www.hse.ie/eng/services/publications/ 17 Additional Information N/A KPI owner/lead for Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive implementation PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	12	KPI Reporting Frequency	Monthly in arrears
15 KPI is reported in which reports? Management Data Report 16 Web link to data http://www.hse.ie/eng/services/publications/ 17 Additional Information N/A KPI owner/lead for implementation PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	13	KPI Report Period	Monthly in arrears
16 Web link to data http://www.hse.ie/eng/services/publications/ 17 Additional Information N/A KPI owner/lead for implementation PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	14	KPI Reporting Aggregation	National / CHO / LHO
17 Additional Information N/A KPI owner/lead for implementation PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	15	KPI is reported in which reports?	Management Data Report
KPI owner/lead for Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive implementation PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	16	Web link to data	http://www.hse.ie/eng/services/publications/
Implementation PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	17	Additional Information	N/A
			Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive
Governance/sign off David Walsh, National Director Community Operations, Health Service Executive		PBI data support	Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie
		Governance/sign off	David Walsh, National Director Community Operations, Health Service Executive

1 1a 2	KPI Short Title KPI Description	Average Waiting Time from opioid substitution assessment to exit from waiting list or treatment commenced N/A
		N/A
2	KPI Description	
		This is a calculation of the average number of days following assessment for opioid substitution treatmet (OST) that a client who meets the criteria for OST treatment waited to: (i) commence this treatment (if a treatment place was immediately available) or (iii) exit from the waiting list for such treatment when a treatment place became available or (iii) exit the waiting list as he / she no longer meets the treatment criteria. In Ireland, OST refers to the provision of both methadone and buprenorphine / buprenorphine-naloxone only products. Assessment is undertaken in HSE drug treatment clinics and by level 2 GPs in the community who have completed recognised training programmes co-ordinated by the Irish College of General Practitioners. Once a diagnosis of opioid dependence is confirmed and the client has met the criteria for treatment commencement, the client commences OST if a treatment place is available in the clinic / with the level 2 GP. Otherwise he / she is placed on the National Treatment Waiting List (NWL) until a place becomes available. If during the period of waiting for a treatment place, the client no longer consents to engaging in the treatment or no longer fulfills the treatment criteria he / she exits the waiting list. This metric reflects the average waiting time, following assessment for OST, of all clients who waited to commence such treatment or to be removed from the treatment waiting list during the reporting period.
3	KPI Rationale	OST is considered a key component in the treatment of opioid dependence and plays an important role in rehabilitation and recovery. Timely access to treatment is critical when users have been assessed as suitable at this stage of the change cycle. It is therefore important to track the waiting times of people deemed suitable to avail of OST services from assessment to treatment commencement or exit from the treatment waiting list.
За	Indicator Classification	Access and Integration
1	National Target	NSP 2018 - 28 days
1a	Target	$CHO\ 1-28\ days,\ CHO\ 2-28\ days,\ CHO\ 3-28\ days,\ CHO\ 4-28\ days,\ CHO\ 5-28\ days,\ CHO\ 6-28\ days,\ CHO\ 7-28\ days,\ CHO\ 8-28\ days,\ CHO\ 9-28\ days$
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of days: (i) that each client assessed and meeting the criteria for OST treatment waited to commence his / her OST treatment, including time spent on the NWL, during the reporting period. (ii) that those clients who were assessed and met the criteria for OST treatment waited prior to exiting the waiting list as they no longe fulfilled the treatment criteria during the reporting period. Combine the waiting times from (i) and (ii) and divide it by the total number of people who commenced treatment or exited the waiting list during the reporting period.
3	Data Source	Addiction Service Clinics, National GP Co-ordinator
Sa .	Data Sign Off	National Social Inclusion Office
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Monthly in arrears
3	Tracer Conditions	Waiting times from OST assessment to treatment commencement or removal from waiting list due to criteria unfilled.
9	Minimum Data Set MDS	Waiting times from OST assessment to treatment commencement or removal from waiting list due to criteria unfilled.
10	International Comparison	Engaging and retaining clients in OST is an internationally recognised metric.
11	KPI Monitoring	Monthly in arrears
12	KPI Reporting Frequency	Monthly in arrears
13	KPI Report Period	Monthly in arrears
14	KPI Reporting Aggregation	National / CHO / LHO
15	KPI is reported in which reports?	Management Data Report / Annual Report
16	Web link to data	https://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive
	PBI data support	Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie
	Governance/sign off	David Walsh, National Director Community Operations, Health Service Executive

Opio	id Substitution	
1	KPI Title	Average Waiting Time from referral to assessment for opioid substitution treatment
1a	KPI Short Title	N/A
2	KPI Description	This is a calculation of the average number of days that a client waited to be assessed for opioid substitution treatment (OST) (waiting time) during the reporting period. The waiting time is counted in days from the date the referral is received to the date of actual assessment. In Ireland, OST refers to the provision of both methadone and buprenorphine / buprenorphine-naloxone only products. OST is provided by doctors in HSE drug treatment clinics and by GPs (levels 1 and 2) in the community who have completed recognised training programmes co-ordinated by the Irish College of General Practitioners (ICGP). The HSE published OST Guidelines (https://www.hse.ie/eng/services/publications/Primary/clinical-guidelines-for-opioid-substitution-treatment.pdf), provide information and guidance to doctors on the prescribing of OST
3	KPI Rationale	OST is considered a key component in the treatment of opioid dependence and plays an important role in rehabilitation and recovery. Assessment is undertaken in HSE drug treatment clinics and in the community by level 2 GPs to determine current dependence in accordance with World Health Organisation internationally accepted criteria. It also includes a full health assessment to identify unmet health care needs and to improve the clients general health. Timely access to assessment is critical when users are at this stage of the change cycle.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2018 - 3 days
4a	Target	CHO 1- 3 days, CHO 2-3 days, CHO 3-3 days, CHO 4-3 days, CHO 5-3 days, CHO 6-3 days, CHO 7-3 days, CHO 8-3 days, CHO 9-3 days
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of days that each client referred for OST assessment from HSE drug treatment clinics and the National GP Coordinator waited for his / her assessment in the reporting period. Combine the waiting times of all those assessed during the reporting period and divide it by the total number of people assessed in the reporting period.
6	Data Source	Addiction Service Clinics, National GP Coordinator
6a	Data Sign Off	National Social Inclusion Office
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Monthly in arrears
8	Tracer Conditions	Waiting times (days) for assessment for OST
9	Minimum Data Set MDS	Waiting times (days) for assessment for OST
10	International Comparison	Engaging and retaining clients in OST is an internationally recognised metric.
11	KPI Monitoring	Monthly in arrears
12	KPI Reporting Frequency	Monthly in arrears
13	KPI Report Period	Monthly in arrears
14	KPI Reporting Aggregation	National / CHO / LHO
15	KPI is reported in which reports?	Management Data Report / Annual Report
16	Web link to data	https://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive
	PBI data support	Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie
	Governance/sign off	David Walsh, National Director Community Operations, Health Service Executive

1 KPI Title No. and % of service users admitted to homeless emergency accommodation hostels / facilities whose health in within two weeks of admission NA KPI Short Title NIA KPI Description This is a count and a calculation of the number and percentage of service users (individuals who have been as admitted to emergency accommodation homeless hostels / facilities (i.e. accommodation facility for short term experiencing) homelessness) whose health needs (health needs (health needs to essessment of an init is an integral part of an overall assessment process which is a fundamental component of the care/support pl completed in co-operation with the service users key worker / project worker and should cover the full range of related needs including general healthcare, mental health, and addiction issues) have been assessed within two of the date of their admission. Under national homeless policy, the HSE is responsible for the health and in house care needs of homeless per network. Completion of a health needs assessment is required to facilitate the effective operation of a care plan health and care needs of homeless peole. Care / suppole. Care	ssessed as being homeless) // emergency use for people dividual's health needs and lanning system. It is f a person's health and care vo weeks (14 calendar days) ersons across the hostel nnning system to address the maximise their potential rove outcomes for service 9) (73%), CHO 7 (94) (73%), cose health needs were of service users admitted to re in the quarter and each ervice users admitted to s of their date of admission, dation hostels / facilities
This is a count and a calculation of the number and percentage of service users (individuals who have been as admitted to emergency accommodation homeless hostels / facilities (i.e. accommodation facility for short term experiencing homelessness) whose health needs (health needs assessment is a detailed assessment of an inc is an integral part of an overall assessment process which is a fundamental component of the care/support pl completed in co-operation with the service users key worker / project worker and should cover the full range of related needs including general healthcare, mental health, and addiction issues) have been assessed within two of the date of their admission. Inder national homeless policy, the HSE is responsible for the health and in house care needs of homeless perceived. Completion of a health needs assessment is required to facilitate the effective operation of a care plan health and care needs of homeless people. Care / support plans are prepared to enable homeless persons to and return to independent living, where possible. This approach has proven internationally to significantly improved to the facility of the properties of the properties of the properties of the properties with varying support needs. Indicator Classification Quality and Safety NSP 2018 - 1,035 (73%) CHO 1 (60) (73%) , CHO 2 (91) (73%), CHO 3 (139) (73%), CHO 4 (351) (73%), CHO 5 (76) (73%), CHO 6 (9) (74%), CHO 8 (114) (73%), CHO 9 (101) (73%) N/A KPI Calculation (i) Count the number of service users admitted to homeless emergency accommodation hostels / facilities who assessed within two weeks of their date of admission, during the reporting quarter. (ii) Count the total number of service users admitted to homeless emergency accommodation hostels / facilities whose health needs were assessed within two weeks during the reporting quarter. (iii) Calculate the percentage by dividing the number of service users admitted to homeless emergency accommodation hostels / facilities whose health needs were assessed	I/ emergency use for people dividual's health needs and lanning system. It is f a person's health and care to weeks (14 calendar days) ersons across the hostel unning system to address the imaximise their potential rove outcomes for service. B) (73%), CHO 7 (94) (73%), one health needs were of service users admitted to re in the quarter and each ervice users admitted to soft their date of admission, dation hostels / facilities.
admitted to emergency accommodation homeless hostels / facilities (i.e. accommodation facility for short term experiencing homelessness) whose health needs (health needs assessment is a detailed assessment of an inc is an integral part of an overall assessment process which is a fundamental component of the care/support pl completed in co-operation with the service users key worker / project worker and should cover the full range of related needs including general healthcare, mental health, and addiction issues) have been assessed within two of the date of their admission. 3 KPI Rationale Under national homeless policy, the HSE is responsible for the health and in house care needs of homeless perhetwork. Completion of a health needs assessment is required to facilitate the effective operation of a care plat health and care needs of homeless people. Care / support plans are prepared to enable homeless persons to and return to independent living, where possible. This approach has proven internationally to significantly improvent users with varying support needs. 3a Indicator Classification Quality and Safety 4 National Target NSP 2018 - 1,035 (73%) 4a Target CHO 1 (60) (73%) , CHO 2 (91) (73%), CHO 3 (139) (73%), CHO 4 (351) (73%), CHO 5 (76) (73%), CHO 6 (9) (74%), CHO 8 (114) (73%), CHO 9 (101) (73%) 4b Volume Metrics N/A 5 KPI Calculation (i) Count the number of service users admitted to homeless emergency accommodation hostels / facilities who assessed within two weeks of their date of admission, during the reporting quarter. (ii) Count the total number of homeless emergency accommodation hostels / facilities during the reporting quarter. The number is numulative person should be counted once only in each quarter. (iii) Calculate the percentage by dividing the number of service users admitted to homeless emergency accommodation hostels / facilities during the reporting quarter. The number is sent homeless emergency accommodation hostels / facilities during the reporting quarter. Death homeless emergency	I/ emergency use for people dividual's health needs and lanning system. It is f a person's health and care to weeks (14 calendar days) ersons across the hostel unning system to address the imaximise their potential rove outcomes for service. B) (73%), CHO 7 (94) (73%), one health needs were of service users admitted to re in the quarter and each ervice users admitted to soft their date of admission, dation hostels / facilities
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6b Data Quality Issues Data quality issues are addressed as they arise along the data pathway. 7 Data Collection Frequency Quarterly	on (CHO) Social Inclusion
7 Data Collection Frequency Quarterly	
8 Tracer Conditions Service users admitted to homeless emergency accommodation / facilities including those whose health needs	
weeks of admission	s were assessed within two
9 Minimum Data Set MDS Service users admitted to homeless emergency accommodation / facilities including those whose health needs weeks of admission	s were assessed within two
10 International Comparison No	
11 KPI Monitoring Quarterly	
12 KPI Reporting Frequency Quarterly	
13 KPI Report Period Quarterly	
14 KPI Reporting Aggregation National / CHO	
15 KPI is reported in which reports? Management Data Report	
16 Web link to data http://www.hse.ie/eng/services/publications/	
17 Additional Information N/A	
KPI owner/lead for Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive implementation	
PBI data support Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie	
Governance/sign off David Walsh, National Director Community Operations, Health Service Executive	

Travell	er Health	
1	KPI Title	Number of people who received information on type 2 diabetes or participated in relative initiatives
1a	KPI Short Title	N/A
2	KPI Description	This is a count of the number of people (aged 15 years and over) who were provided with health information on or participated in related initiatives on type 2 diabetes on an individual (one to one) or group basis, including participation in the Small Changes Big Difference, Traveller Preventative Education Programme, or were signposted to appropriate services during the reporting quarter.
3	KPI Rationale	The All Ireland Traveller Health Study - published in September 2010 - found that: • Traveller groups appear to have a greater burden of chronic disease than the general population with conditions such as diabetes increased by a factor of two. Provision of information on type 2 diabetes helps raise awareness of health conditions prevalent among the Traveller population and to signpost people to appropriate services. Monitoring the number of people, per CHO, who receive this information allows the number of people who received this information or participated in related initiatives to be identified, to measure the level of awareness raising of these conditions and to support those requiring further assessment / management to be referred to appropriate services.
За	Indicator Classification	Quality and Safety
4	National Target	NSP 2018 - 3,735 (Annual target)
4a	Target	CHO 1-232, CHO 2-725, CHO 3-374, CHO 4-381, CHO 5-449, CHO 6 / 7 / 9 - 912, CHO 8-662
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of people (aged 15 years and over) who were provided with health information on type 2 diabetes on an individual or group basis or were signposted to appropriate services during the reporting quarter. Monitoring the achievement of the annual target is undertaken by monitoring the cumulative activity across the four quarters i.e. Quarter 1 + Quarter 2 + Quarter 3 + Quarter 4. Therefore each individual (aged 15 years and over) is counted only once in the calendar year regardless of the number of times he / she presents for information or signposting on type 2 diabetes.
6	Data Source	Traveller Health Units (THUs), National Social Inclusion Office and the National Business Information Unit (NBIU).
6a	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	The number of people (aged 15 years and over) who were provided with health information on type 2 diabetes on an individual (one to one) or group basis or were signposted to appropriate services.
9	Minimum Data Set MDS	THU / CHO records of individual and group health information provision on type 2 diabetes and signposting to appropriate services.
10	International Comparison	No.
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National / CHO
15	KPI is reported in which reports?	Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for	Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive
	PBI data support	Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie
	Governance/sign off	David Walsh, National Director Community Operations, Health Service Executive

Travell	er Health	
1	KPI Title	Number of people who received information on cardiovascular health or participated in related intiatives
1a	KPI Short Title	N/A
2	KPI Description	This is a count of the number of people (aged 15 years and over) who were provided with health information on or participated in related initiatives on cardiovascular health, on an individual (one to one) or group basis including participation in the Small Changes Big Difference, Traveller Preventative Education Programme or were signposted to appropriate services during the reporting quarter.
3	KPI Rationale	The All Ireland Traveller Health Study - published in September 2010 - found that: • 52% of Travellers aged 40 – 60 had been diagnosed with high blood pressure in the past 12 months compared to 35% of the general Irish population. • 25 % of Travellers died from Heart Disease / Stroke. Provision of information on cardiovascular health helps raise awareness of health conditions prevalent among the Traveller population and to signpost people to appropriate services. Monitoring the number of people, per CHO, who receive this information allows the number of people who received this information or participated in related activities to be identified, to measure the level of awareness raising of these conditions and to support those requiring further assessment / management to be referred to appropriate services.
3a	Indicator Classification	Quality and Safety
4	National Target	NSP 2018 - 3,735 (Annual Target)
4a	Target	CHO 1-232, CHO 2-725, CHO 3-374, CHO 4-381, CHO 5-449, CHO 6/7/9 - 912, , CHO 8-662
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of people (aged 15 years and over) who received information on or participated in related initiatives on cardiovascular health on an individual or group basis or were signposted to appropriate services during the reporting quarter. Monitoring the achievement of the annual target is undertaken by monitoring the cumulative activity across the four quarters i.e. Quarter 1 + Quarter 2 + Quarter 3 + Quarter 4.
6	Data Source	Traveller Health Units (THUs), Community Healthcare Organisations (CHOs) and the National Business Information Unit (NBIU).
6a	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	The number of people (aged 15 years and over) who were provided with information on or participated in positive mental health initiatives or were signposted to appropriate services.
9	Minimum Data Set MDS	THU and CHO records of individual and group health information on cardiovascular health and signposting to appropriate services.
10	International Comparison	No.
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National / CHO
15	KPI is reported in which reports?	Management Data Report
16	Web link to data	https://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for	Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive
	PBI data support	Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie
	Governance/sign off	David Walsh, National Director Community Operations, Health Service Executive

Need	dle Exchange	
1	KPI Title	No. of unique individuals attending pharmacy needle exchange
1a	KPI Short Title	N/A
2	KPI Description	This is a count of the number of unique individuals (clients) attending pharmacies as part of the Needle Exchange Programme in the reporting month. The Needle Exchange Programme is an anonymous and confidential service available in Community Healthcare Organisations (CHOs) 1,2,3,4,5 and 8. Pharmacists participating in the programme encourage clients to return used equipment in the sharps bins provided, to attend addiction clinics for treatment; to meet with outreach workers for support on injecting technique if appropriate and to get tested for blood borne viruses. A unique identifier is used for each client attending. Each unique client is free to attend the pharmacy as many times as he / she needs to in the month and is encouraged to take enough needles to ensure clean equipment for every hit/injection.
3	KPI Rationale	The Pharmacy Needle Exchange Programme is available to substance users to ensure that people who inject drugs have access to sterile equipment and can dispose of used equipment in a safe manner.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2018 - 1,628
4a	Target	CHO 1 (27), CHO 2 (111), CHO 3 (232), CHO 4 (429), CHO 5 (320), CHO 8 (509)
4b	Volume Metrics	N/A
5	KPI Calculation	Count the number of unique individuals attending pharmacies as part of the Needle Exchange Programme in the reporting month.
6	Data Source	Records submitted by pharmacies and the Needle Exchange Programme National Liaison Pharmacist.
6a	Data Sign Off	Needle Exchange Programme National Liaison Pharmacist
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Monthly metric reported tri monthly one quarter in arrears.
8	Tracer Conditions	Unique individuals attending Pharmacy Needle Exchange Programme.
9	Minimum Data Set MDS	Unique individuals attending Pharmacy Needle Exchange Programme.
10	International Comparison	Needle exchange data is reported annually by 29 countries to the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). Ireland provides needle exchange programme data only.
11	KPI Monitoring	Monthly metric reported tri monthly one quarter in arrears.
12	KPI Reporting Frequency	Monthly metric reported tri monthly one quarter in arrears.
13	KPI Report Period	Monthly metric reported tri monthly one quarter in arrears.
14	KPI Reporting Aggregation	National / CHO
15	KPI is reported in which reports?	Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	N/A
	KPI owner/lead for implementation	Siobhán McArdle, Head of Operations Primary Care, Community Operations, Health Service Executive
	PBI data support	Geraldine Littler, 046 9251330, Geraldine.Littler@hse.ie
	Governance/sign off	David Walsh, National Director Community Operations, Health Service Executive