Board Strategic Scorecard

March 2023 (January and February 2023 reporting period)

Board 31 March 2023

Contents

Document Purpose

The Board Strategic Scorecard aims to provide the Board with a monthly report on progress against key Programmes/Priorities for 2023. In doing so the Board Strategic Scorecard aims to:

- Track progress of key Programmes/Priorities at a high level

- Highlight issues relating to progress in a timely manner

- Support Board oversight and decision-making

- Minimise multiple requests and duplication of effort in collating reports for Board/DoH.

Ratings for Programmes/Priorities range from 1-5 and signify current progress of that Programme/Priority against the year-end targets /outputs/deliverables and therefore the Ambition Statement.

An Improvement Plan will be appended to the Scorecard for those Programmes/Priorities which were assigned a 1 or 2 rating in the previous month.

Following consideration by the Board, the Scorecard will be submitted to the Department of Health on a monthly basis, as part of the reporting arrangements in the DOH-Executive Performance Engagement Model and Oversight Agreement, consistent with the Letter of Determination.

2023 Proposed In-Year Monthly Rating Scale (January – October scorecard submissions)

Zone	Rating	Guiding Criteria
Green	5	**Strong assurance** that the 2023 Ambition Statement will be **fully achieved**, on the basis that: • All KPIs are currently on track against target profile and are expected to achieve the end-of-year target position; and • All Deliverables are currently on track and are expected to be completed by target date; and • There are no material issues or risks that are expected to impact on the achievement of the Ambition Statement.
	4	**Strong assurance** that the 2023 Ambition Statement will be **substantially achieved,** on the basis that: • At least 80% of KPIs are currently within 10% of target profile and this position is expected to be maintained to year-end; and • At least 80% of Deliverables are currently on track and this position is expected to be maintained to year-end; and • To the extent that there are material issues or risks to the achievement of the Ambition Statement, effective mitigations are in place.
Amber	3	**Some concerns** that the 2023 Ambition Statement will not be **substantially achieved**, on the basis that: • Between 50% and 80% of KPIs are currently within 10% of target profile; or • Between 50% and 80% of Deliverables are currently on track. • To the extent that there are material issues or risks to the achievement of the Ambition Statement, some mitigations are in place.
	2	**Concerns** that the 2023 Ambition Statement will **only be partially achieved,** on the basis that: • At least 50% of KPIs are currently within 20% of target profile; and • At least 50% of Deliverables are currently on track to be completed within two months of the target date. • There are material issues or risks to the achievement of the Ambition Statement, with limited mitigations in place. .
Red	1	**Significant concerns** that the 2023 Ambition Statement will **not be achieved**, given consideration of: • Less than 50% of KPIs are currently within 20% of target profile; or • Less than 50% of Deliverables are currently on track to be completed within two months of the target date. • There are material issues or risks to the achievement of the Ambition Statement, with no effective mitigations in place.

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Executive Summary

Executive Summary

Board Strategic Scorecard Rating Summary

Key Programmes/Priorities	Change from Previous Period	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Public Health (COVID -19 Test & Trace and Programme for Vaccination / Immunisation)			3										
2. Unscheduled Care (Emergency Department Performance)			1										
3. Reform of Primary Care, Community & ECC			3										
4. Reform of Home Support & Residential Care for Older Persons			3										
5. Reform of Scheduled Care			4										
6. Reform of Mental Health			4										
7. Reform of Disability Services			3										
8. Prevention & Early Intervention			4										
9. Enhancing Bed Capacity			3										
10. Quality & Patient Safety			3										
11. Patient & Service User Partnership			4										
12. Recruitment & Retention			3										
13. Finance & Procurement			3										
14. eHealth			4										
15. Capital Infrastructure			3										
16. Communications			3										
17. Planning & Implementation of RHAs			4										
18. Climate Action			4										
19. Women's Health			3										
20. Trust & Confidence			3										
Operational Services Report – Annex													
Risk Management - Annex													

Executive Summary

Current Overall Average Rating

Each of the 20 scorecards returned a rating of which the overall average rating is 3.25

- Seven scorecards returned a rating of 4 (i.e. 4 = strong assurance that the 2023 Ambition Statement will be substantially achieved)
- 12 scorecards returned a rating of 3 (i.e. 3 = some concerns that the 2023 Ambition Statement will not be substantially achieved)
- One scorecard (Unscheduled Care) returned a rating of 1 (i.e. = significant concerns that the 2023 Ambition Statement will not be achieved)

KPIs and Deliverables

- 99 out of 124 KPIs have monthly target profiles. 75% of the 99 were reported on in this period, due to the lack of available data until late March / early April
- All 102 deliverables were updated. 86% are on track, 11% not started, 1% complete and 2% delayed

Key insights

- There are multiple reports across scorecards of essential structures having been established as key enablers to achieving priorities and programmes. Examples include the establishment of the working group for implementation of the Patient Engagement Roadmap (Patient and Service User scorecard); the kick-off of the Steering group to design a Physical Activity Referral Pathway (Prevention/Early Intervention scorecard); and delivery of the 2023 HSE Resourcing Strategy to the point of implementation (Recruitment and Retention scorecard).

- Recruitment and retention challenges (including the availability of skilled resources) are identified as significantly impacting performance across eight scorecards including Unscheduled Care (Emergency Department Performance), Reform of Disability Services, Reform of Mental Health Scorecard and Prevention and Early Intervention.

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Ambition Statement 2023: to maintain COVID-19 Test and Trace capacity in line with Public Health guidance and remain flexible to changing levels of demand in line with strategic direction of public health in terms of its operating model. Ensure effective delivery and monitoring of the COVID-19 vaccination programme and influenza vaccination programmes as informed by guidance/policy. Implement key priorities of Public Health Strategy.

Rating and Overview (3): Some concerns that the ambition statement will not be substantially achieved.

3   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Percentage of referrals for a COVID-19 test receiving appointment within 24 hours of request	Target	90.0%	90.0%	90.0%										
	Actual		97.0%	97.0%										
2. Percentage of test results communicated in 48 hours following swab	Target	75.0%	75.0%	75.0%										
	Actual		91.0%	92.0%										
3. Percentage of close contacts successfully contacted within 24 operational hours of contacts being collected	Target	90.0%	90.0%	90.0%										
	Actual		97.0%	95.0%										
4. Percentage of referrals meeting three-day target from test referral to completion of contact tracing	Target	90.0%	90.0%	90.0%										
	Actual		95.0%	96.0%										
5. COVID-19 vaccine uptake for priority Health Care Workers (No. of workers 282.1k)	Target	50.0%*												
	Actual		26.0%	27.0%										
6. COVID-19 vaccine uptake for people 65 years and over including those in Long Term Residential Care Facilities (727k)	Target	75.0%*												
	Actual		47.0%	48.0%										
7. COVID-19 vaccine uptake for immunocompromised >12 years (146k)	Target	50.0%*												
	Actual		14.0%	15.0%										
8. Influenza vaccine uptake in HSE Health Care Workers (No. of workers 105.6k)	Target	75.0%*												
	Actual			40.1%										
9. Influenza vaccine uptake for people 65 years and over (743k)	Target	75.0%*												
	Actual		76.0%	75.8%										
10. Influenza vaccine uptake for children within approved age category (No. of children 1.1m)	Target	50.0%*												
	Actual		15.0%	15.4%										
11. Number of Public Health Consultants contracted (target 84 WTE, of which 34 contracted in 2022)	Target	50	0	0	0	0	0	30	30	30	30	30	30	50
	Actual		0	0										

*Targets are based on achievement within 20 weeks of NIAC reccommendations - timing yet to be determined by NIAC

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Complete implementation of the Test and Trace Transition Strategy and supporting plan	Sep-23	On Track	Implementation of changes to PCR, antigen and serial testing in March 2023 will complete the final stages of the transition strategy. Implementation project plan in progress
2. Develop an integrated plan for the future sustainable operating model for COVID-19 vaccination in conjunction with the Influenza vaccination programme as appropriate	Sep-23	On Track	Planning in progress, moving towards a business as usual (BAU) sustainable model
3. Develop operational plans for 2023 to support other (new/existing) vaccination programmes with CVC resources where required	Sep-23	On Track	Planning in progress, moving towards a business as usual (BAU) sustainable model

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Implementation of changes to PCR, antigen and serial testing access	1. Test and Trace project plan in place to complete the transition of services
2. Improving access for children's flu vaccine to increase uptake	2. Developing a business case to consider the administration of the children's nasal flu vaccine directly in primary schools in future seasons
3. Low uptake among Healthcare workers	3. Increased clinics and communication campaign in January. Promotion to encourage uptake among at risk groups. Data and modelling initiative - %of Healthcare workers not eligible for booster 2

2. Unscheduled Care (Emergency Department Performance)

Ambition Statement 2023: to reduce during the year the length of time patients spend in Emergency Departments therefore providing safer, more effective and efficient delivery of care.

Rating and Overview (1): Signifcant concerns that the 2023 Ambition Statement will not be achieved. The unscheduled care system remains under considerable pressure and is coping with continued levels of COVID-19 in hospital, Norovirus, and the additional pressures from the Wexford incident and International Protection migration. Acute and Community services are working intesively to mitigate any risks resulting from the overcrowding in emergency departments and are working with PMU and National Planning on the 3 year USC plan in addition to implementing learning from the After Action Review. At this point, the rating is 1 as key measures are beyond 20% of target in over 50% of KPIs. It is anticipated that this rating will improve as the winter surges ease and mitigating actions start to take effect.

1

Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Average daily number of patients on trolleys at 0800hrs	Target	<236	<236	<236										<236
	Actual		352	326										
2. Percentage of all attendees at ED who are in ED <24 hours	Target	97.0%	97.0%	97.0%										97.0%
	Actual		94.7%	95.0%										
3. Percentage of all attendees aged 75 years and over at ED who are discharged or admitted within nine hours of registration	Target	99.0%	99.0%	99.0%										99.0%
	Actual		50.9%	52.0%										
4. Percentage of all attendees aged 75 years and over at ED who are discharged or admitted within 24 hours of registration	Target	99.0%	99.0%	99.0%										99.0%
	Actual		87.1%	89.0%										
5. Number of beds subject to delayed transfers of care	Target	<350	<350	<350										<350
	Actual		556	570										
6. Percentage of patients arriving by ambulance at ED to physical and clinical handover within 20 minutes of arrival	Target	80.0%	80.0%	80.0%										80.0%
	Actual		7.5%											
7. Percentage of emergency re-admissions for acute medical conditions to the same hospital within 30 days of discharge* *Data is one month in arrears	Target	<11.1%	<11.1%	<11.1%										<11.1%
	Actual		11.4%											

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Development of a 3-Year Unscheduled Care Plan and Improvement Programme	Jul-23	Not Started	Ongoing planning proccess comenced by Strategy and Planning to develop USC
2. Actions from After Action Review	Jul-23	Not Started	Ongoing process - actions to feed into development of 3-Year Unscheduled Care programme

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Recruitment challenges in relation to retention of existing staff and recruitment of additional staff within EDs.	1. Ongoing engagement with HR regarding recruitment of staff alongside ongoing national and international recruitment campaigns.
2. Infection control requirements and respiratory illness (including COVID-19)	2. IPC requirements will continue to be managed in line with guidelines and evolving situation in relation to viruses. Promotion of vaccination uptake.
3. Increasing and sustained attendances and admissions due to the changing population demographic particularly in our older patient cohort.	3. Targeted focus on patient flow process and DToC
4. Capital funding requirements, construction challenges in relation to quality, increased programme of works, overall campus development plans.	4. Ongoing engagements with Department of Health, Estates, Acute and Community Operations in relation to exploring capacity options including modular builds and planning derogation.

Ambition Statement 2023: to enhance primary care, ECC and community care during the year, focusing on the continued operationalisation of 96 Community Health Networks and 30 Community Specialist Teams for both Integrated Care Programme, Older People (ICPOP) and Integrated Care Programme, Chronic Disease (ICPCD) with continued delivery of community diagnostic services with the overall aim of moving care closer to home and more integrated end-to-end care pathways for patients with Chronic Disease and Older Persons.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. ECC progressing as planned with a focus on performance management activity, impact and outcomes. Collection of a suite of activity metrics has commenced with a standard methodology and process for data collection and analysis. Dashboards have been developed and can be produced at CST and National level and can be flexed to reflect RHAs. Dashboards will facilitate analysis of service delivery and emerging trends over time.

3   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Number of therapy services patient contacts in Community Healthcare Networks	Target	1.60m	0.13m	0.27m	0.40m	0.53m	0.66m	0.80m	0.93m	1.07m	1.20m	1.33m	1.46m	1.60m
	Actual		0.11m											
2. Number of reviews carried out in General Practice in the Chronic Disease Management Treatment Programme, reducing requirement for hospital/ED attendance	Target	360,000	30,000	60,000	90,000	120,000	150,000	180,000	210,000	240,000	270,000	300,000	330,000	360,000
	Actual		34,804											
3. Number of patient contacts by Chronic Disease Community Specialist Teams (across Respiratory, Cardiology, Diabetes & Smoking Cessation)	Target	N/A												
	Actual		3,743											
4. Number of patient contacts by Older Persons Community Specialist Teams	Target	N/A												
	Actual		3,876											
5. Percentage of new patients seen by Older Persons Community Specialist Teams on the same day or next day of referral	Target	N/A												
	Actual		6.0%											
6. Percentage of patients with a frailty score of 6-9 (moderate to severe frailty) seen by Older Persons Commuity Specialist Teams	Target	N/A												
	Actual		46.0%											
7. Number of Community Diagnostics services (X-ray, CT, MRI, DEXA, Natriuretic Peptide Test, ECHO, Spirometry) delivered	Target	358,338	28,641	57,282	85,923	114,564	143,205	171,846	202,928	234,010	265,092	296,174	327,256	358,338
	Actual		35,518											

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Optimise recruitment of the remaining 1,000 frontline primary care staff and leadership roles for completion of the ECC Programme (2,484 recruited from approved 3,500 in 2022)	Dec-23	On Track	Governance oversight by ECC steering group of collaborative recruitment process between HR & ops. 2,297 WTE on boarded and 232 at an advanced stage of recruitment (Total 2,529 WTE's, 72% of target 3,500 WTE's achieved). All options and avenues in relation to recruitment of staff being explored
2. Commence implementation and roll out of Interim ICT solution	Jul-23	On Track	Procurement process underway Feb -mid April, solution implementation May - June, with transition to business as usual Q3 /Q4
3. Capital Infrastructure Programme	Dec-23	On Track	Extensive activity & financial modelling analysis by Capital workstream to guide planning needs & allocation. Operationalise 30 new projects (9 permanent & 21 interim) in addition to currently operational 18. Slippage in 2022 due to delays in proposal submissions/approvals & commencement of works
4. Refining and embedding of referral pathways	Dec-23	On Track	Monitoring, evaluation and learning process through ECC steering group and regional oversight groups to ensure fidelity to the model and transfer of learning and best practice

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.HR - continued recruitment of the remaining ECC staff in order to bring remaining teams online/operational	1. All options and avenues in relation to recruitment of staff being explored including targeted workstreams in areas such as physiology and candidate CNS's
2. Capital Infastructure - adequate space and accomodation for the delivery of services by multidisciplinary teams	2. Detailed plan developed & framework agreed, establishing monthly engagement with CHOs, starting March. Allows for more accurate & timely reporting of approved proposals
3. Implementation of the Inteirm ICT Solution	3. Proposals being developed for interim solution to support rollout of the ECC Programme, longer term while ICCMS is being developed, procured and implemented. Healthlink also being rolled out.
4. Performance Management - Activity, Impact & Outcomes move from structural metrics to activity, impact and outcome metrics	4. Collection of a suite of activitiy metrics, developed in conjunction with NCAGLs, commenced in '23 with standard methodology. Dashboards developed & can be produced at CST, CHO & National level

Ambition Statement 2023: to advance the reform agenda for older persons nationally, to better support older people and their families to remain in their own homes and communities in line with their wishes through: (i) preparation for the incoming Home Support Statutory Scheme; (ii) progressing the implementation of the interRAI Care Needs Assessment; (iii) finalising new operating models for Home Support and Public Community Based Residential Care; and (iv) finalising a future Day Service Strategy that supports our wider reform agenda.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. There is significant working ongoing to progress the reform agenda. Challenges remain in relation to the recruitment and retention of home support staff, work ongoing in collaboration led by National Community OPs and HR to mitigate the risks.

3   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Ensure by the end of the year that 60% of all new home support care needs assessments undertaken by community staff use the standardised care needs assessment tool (interRAI)	Target	60.0%	0.0%	0.0%	0.0%	10.0%	20.0%	30.0%	40.0%	40.0%	45.0%	50.0%	55.0%	60.0%
	Actual		1.7%	1.5%										
2. Number of interRAI Care Needs Facilitators in place	Target	128	0	0	0	0	0	42	63	84	106	128	128	128
	Actual		0	2										
3. Number of Home Support Hours Delivered in 2023 (in 2022 a total of 21m hours were delivered)	Target	23.90m	2.00m	3.84m	5.84m	7.78m	9.88m	11.82m	13.83m	15.99m	17.94m	19.94m	21.89m	23.90m
	Actual		1.74m	3.42m										
4. Reduce the number of people waiting for home support services following home support needs assessment undertaken by community staff (December 2022 n = 6,680)	Target	<6680	<6680	<6680										
	Actual		6,369	6,244										
5. Number of people in receipt of Home Support (excluding provision from Intensive Home Care Packages)	Target	55,910	55,910	55,910										
	Actual		56,272	56,781										
6. Cost of Home Support Hours delivered in 2023 (in 2022 the total cost of hours delivered was €578.2)	Target	€689.00m	€58.00m	€111.00m	€168.00m	€224.00m	€285.00m	€341.00m	€398.00m	€461.00m	€517.00m	€574.00m	€631.00m	€689.00m
	Actual		€50.17m	€98.57m										

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Establish the National Home Support Scheme Office	Oct-23	On Track	Site identified, PM assigned and work progressing. Anticipated occupation Q3 2023. Posts: HoS, Grade VII and Grade V in post. Balance of posts in progress
2. Finalise specification and complete procurement for Home Support ICT System	Dec-23	On Track	Detailed draft service specifications for procurement of Home Support System completed, CHO validation workshop planned for March. Approval to commence procurement awaited from Digital Governance Oversight Unit pending commencement of peer review process
3. Establish new framework arrangements and pricing for the provision of publicly funded home support services	May-23	Delayed	Procurement Oversight & Steering Group established and led by ND Community Operations. Invitation to participate published on eTenders 1 Sept 22. Stage 1 outcome complete and tenderers notified. Stage 2 under consideration. Engagement continues with provider rep bodies and DoH
4. Finalise new operating model for public community-based residential care for submission to HSE Board	Sep-23	On Track	National Community Public Based Residential Care Steering Group and associated work streams have been established. Work is being progressed
5. Finalise reformed Day Service Strategy for submission to HSE Board	Sep-23	On Track	It is expected that the deadline will be met and it is envisaged that work will commence in April

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Recruitment and retention of key clinical grades across publicly funded home support services	1. Ongoing engagement with National Community operations, HR and DoH to address recruitment and retention challenges across home support services
2. Collaboration with union bodies and wider teams across community settings	2. Ongoing support to National Community Operations in respect of engagements with union bodies
3. Buy in from service delivery system to implement interRAI across priority areas in the context of competing demands	3. Ongoing work of interRAI implementation group and communication with service delivery areas

5. Reform of Scheduled Care

Ambition Statement 2023: to progress a series of strategic reforms and tactical interventions to reduce the length of time patients are waiting for planned care, working towards the Sláintecare multi-year targets of 10 weeks (outpatients), 12 weeks (inpatient/daycases) and 10 days (diagnostics). Particular focus in 2023 will include the implementation of: (i) the prioritised modernised care pathways; (ii) Patient Centred Booking Arrangements; (iii) Patient Initiated Reviews; and (iv) the health performance visualisation platform.

Rating and Overview (4): Strong assurance that the 2023 Ambition Statement will be substantially achieved

4 Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Percentage of patients waiting longer than 15 months for an outpatient appointment	Target	<10.0%	21.0%	20.0%	19.0%	18.0%	17.0%	16.0%	15.0%	14.0%	13.0%	12.0%	11.0%	<10.0%
	Actual		21.0%	20.4%										
2. Percentage of patients waiting longer than 9 months for an inpatient or daycase procedure	Target	<10.0%	24.1%	23.0%	22.0%	20.0%	19.0%	18.0%	16.0%	15.0%	14.0%	12.0%	11.0%	<10.0%
	Actual		24.1%	25.0%										
3. Percentage of patients waiting longer than 9 months for a GI Scope	Target	<5.0%	6.0%	6.0%	6.0%	6.0%	6.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	<5.0%
	Actual		6.0%	6.0%										
4. Percentage of routine outpatients scheduled in chronological order	Target	85.0%	85.0%	85.0%										85.0%
	Actual		60.0%	60.9%										
5. Percentage of routine inpatient and day case procedures scheduled in chronological order	Target	85.0%	85.0%	85.0%										85.0%
	Actual		75.0%	75.0%										
6. New to Return Ratio (2022 full year ratio was 1:2.6)	Target	1:2.5	1:2.5	1:2.5										1.2.5
	Actual		1:2.6	1:2.6										
7. Number of additional service users removed from waiting lists due to community waiting list initiatives	Target	11,026	523	1207	1985	2805	3638	4496	5,707	6,855	8,031	9,122	10,163	11,026
	Actual		587	1200										
8. Number of additional appointments and procedures delivered through insourcing and outsourcing waiting list initiatives (OPD, IPDC,GI, Advanced Clinical Prioritisation)	Target	97.9k	4.0k	8.0k	14.0k	22.6k	31.6k	41.2k	49.2k	57.5k	69.0k	79.4k	88.0k	97.9k
	Actual		4.8k	11.0k										
9. Spend to date	Target	€90.00m	€6.00m	€14.00m	€22.00m	€29.00m	€36.00m	€45.00m	€51.00m	€58.00m	€67.00m	€75.00m	€82.00m	€90.00m
	Actual		€0.00m	€19.00m										

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Finalise and approve a multi-annual waiting list plan outlining plans to deliver Sláintecare Maximum Wait Time Targets	Apr-23	On Track	A first draft of the multi-annual waiting list plan has been developed building on progress made in 2022 and with consideration to the draft 2023 Waiting List Action Plan and is currently being circulated for review and feedback
2. Implement Patient Centred Booking Arrangements for outpatient appointments in nine additional hospitals to increase patient choice of appointment	Dec-23	On Track	Patient centred booking arrangements have been implemeneted in ULHG and initial positive impacts have been demonstrated. Planning to scale implementation is complete and implementation discussions are in progress with 5 additional sites
3. Implement the agreed strategy to reduce DNAs for new and review outpatient appointments in 22 hospitals with highest DNA rates	Dec-23	On Track	The DNA strategy was implemented in three hospital sites (PUH, Mercy and SUH) in 2022. Further engagement required with Sligo. Engagement is ongoing with 8 additional hospitals to progress implementation of the DNA strategy. Planning for remaining site rollout is underway
4. Progress the implementation of the seven prioritised care pathways and commence implementation of the remaining 29 pathways	Dec-23	On Track	Recruitment has commenced with funding letters and PNNs issued for seven pathways. Active site engagement has commenced, including the first meeting of the National Implementation Oversight Group, with identified pathway leads for each hospital group
5. Implement patient-initiated reviews in 22 hospitals to drive a reduction in the number of review appointments, and increase capacity for new appointments	Dec-23	On Track	PIR is being implemented in two additional specialities in CHI within the next three weeks. Training underway for four sites in ULHG with a target go-live of next week (w/c 20 March). Implementation planning has commenced with three sites in SSWHG
6. Expand the implementation of HPVP from 19 to 28 hospitals	Dec-23	On Track	Change management support is being provided directly to hospital sites to ensure the benefits of the system are fully realised. Technical scoping has progressed with two additional sites. A new solution is being technically scoped to address the data sharing concerns with the voluntary hospitals
7. Implement the Theatre Transformation Programme to optimise theatre utilisation in four Hospital Groups	Dec-23	On Track	National Perioperative Pathway Enhancement Steering Group mobilised. Phase 1 HGs agreed – Saolta & DMHG. HG CEOs engagement progressing, sites selected: DMHG: MRHT, SJH, Reeves'; Saolta: MPUH, RUH, SUH and UHG. Next steps: Engagement with Site CEOs, identification of Site MDTs, & site mobilisation
8. Support each Hospital Group to complete an analysis of health system demand and capacity at hospital and specialty level	Dec-23	On Track	Engagement is ongoing with Hospital Groups to agree an approach and immediate next steps. Detailed discussions have been undertaken in relation to two hospital sites
9. Continue to develop five surgical hubs and open the first hub by December 2023	Dec-23	On Track	A Steering Group to support the implementation of the surgical hubs has been established. Five sub-committees are being established (HR, Finance, Model of Care, ICT and Capital). Site-level assessment is underway and a number of options are being explored for each site
10. Finalise detailed business case, project brief and procurement strategy for Cork and Galway Elective Hospitals. Complete site selection for Dublin Elective Hospital(s)	Dec-23	On Track	A detailed programme plan has been prepared to support the timely development of Decision Gate 2 documents for the three locations. An initiating Programme Steering Group meeting will be held in early April. A process to support Dublin site selection has been agreed with the DoH

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.Data Sharing Agreement with outstanding Voluntary hospitals.	1.HPVP DSA discussions ongoing with hospitals who have recently paused engagement

6. Reform of Mental Health

Ambition Statement 2023: to advance the reform of Mental Health, ensuring that all individuals have access to high quality Mental Health services through: (i) the implementation of key strategies (Sharing the Vision and Connecting for Life); (ii) expansion of online CBT and other digital supports; (iii) continued implementation of crisis resolution and CAMHS hub demonstrator projects; (iv) continued implementation of new models of care for older persons and dual diagnosis through demonstrator projects in three sites; and (v) expansion of individual placement support service programme.

Rating and Overview (4): Strong Assurance that the Ambition Statement will be substantially achieved on the basis that continued progress has been made in the implementation of Maskey recommendations, significant developments across CAMHS Hubs and Crisis Resolution Teams (recruitment and approval of SOPs), and implementation of new Models of Care for Older Persons and Dual Diagnosis

4 Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. CAMHS - percentage of accepted referrals /re-referrals offered first appointment and seen within 12 weeks by CAMHS Community Teams (December 2022 - 62.9%)	Target	78.0%	78.0%	78.0%										
	Actual		62.9%	62.4%										
2. CAMHS - reduce the number of people (with an accepted referral /re-referral for CAMHS Community Teams) waiting longer than 12 weeks to be seen (December 2022 n = 2,599)	Target	<2599	<2599	<2599										
	Actual		2,694	2,614										
3. CAMHS - percentage of urgent referrals to CAMHS Community Teams responded to within three working days (December 2022 - 93.1%)	Target	90.0%	90.0%	90.0%										
	Actual		91.1%	91.8%										
4. CAMHS - percentage of children admitted to CAMHS acute mental health units as a proportion of total admissions of children to acute mental health units	Target	85.0%	85.0%	85.0%										
	Actual		93.8%	93.9%										
5. Adult services - percentage of accepted referrals /re-referrals offered first appointment and seen within 12 week by General Adult Community Mental Health Team (December 2022 - 70.8%)	Target	75.0%	75.0%	75.0%										
	Actual		70.0%	69.7%										
6. Older Persons Services - percentage of accepted referrals /re-referrals offered first appointment and seen within 12 weeks by Psychiatry of Later Life Community Mental Health Team (December 2022 - 87.5%)	Target	95.0%	95.0%	95.0%										
	Actual		88.5%	88.3%										
7. NSD spend	Target	€14.00m	€0.00m	€0.00m	€0.00m	€3.1m	€4.65m	€6.2m	€7.55m	€9.1m	€10.65m	€12.2m	€13.75m	€14.00m
	Actual		€0.00m	€0.00m										

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Establish oversight arrangements to assure implementation of the Maskey Report and Mental Health Commission Report Recommendations including the wider improvement programme	Dec-23	On Track	National Oversight group meet monthly. Of the 63 actions: 22 are complete; 37 are in progress; four long term actions are to commence. Clinical review of all open cases in all CHO areas (as per recommendation under MHC review of CAMHS) has commenced - expected completion date Q2 2023
2. Recruit a new AND for Child and Youth Mental Health and Consultant Clinical Lead to develop and lead out comprehensive Service Improvement Project for Child and Youth Mental Health	Jun-23	On Track	Recruitment campaign for AND Child and Youth Mental Health and Clinical Lead completed 22 February. Shortlisting and interview process progressing
3. CAMHS Hubs: Implement CAMHS hubs across five existing pilot sites and complete interim evaluation report	Dec-23	On Track	CAMHS Standard Operating Procedure approved and MoC in development. One pilot site operational, and one pilot site preparing for soft launch Q1 2023. Remaining sites progressing recruitment of WTEs and preparing for implementation. M&E tender live on etenders
4. Crisis Resolution Services: Implement Crisis Resolution Services across five existing pilot sites and complete interim evaluation report	Dec-23	On Track	Four Crisis Resolution Teams operational. SOPs approved and MoC in development. M&E tender live on etenders. Pilot Site Learning network established and two meetings held. Data working group established and two meetings held. Branding for Cafe underway
5. Models of Care: Implement agreed models of care (older persons and dual diagnosis) in three pilot sites each	Oct-23	On Track	NCP Older persons- four pilot sites established and recruitment progressing. Dual Diagnosis - MoC endorsed by college, and recruitment processes underway in CHO 3, CHO 4 and CHO 9
6. Individual Placement Support: Expand the individual placement support service to 50 sites by adding an additional 11 sites to the existing 39 at CHO level, through our community partners	Dec-23	On Track	On approval of NSP 2023, additional 11 IPS Employment Specialist posts to be progressed, including two Homeless IPS posts Dublin Nth and Sth across agreed CMHTs as identified by the National OTs Oversight Group
7. Recovery and Engagement: Expand the lived experience co-production panel of Mental Health volunteers engaged in service improvement work nationally from 30 to 70 and engage 10,000 participants in recovery education programmes nationally	Dec-23	On Track	A review of all requests received to the National Volunteer Panel will take place Q3 2023. This will further inform volunteer planning. Recovery Education Quarterly report available April 2023
8. National Office for Suicide Prevention: Deliver suicide prevention gatekeeper training to 3,500 people (online and face to face) and train 60 new trainers to deliver the programmes	Dec-23	On Track	New trainers on board in January 2023 now engaged in planning process for delivery of suicide prevention training programmes (SafeTALK and Suicide Bereavement Training for Professionals). New online training programme in development. Training activity report available April 2023

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Approval of NSP 2023	1. Progress continues on key initiatives while awaiting NSP approval
2. Recruitment challenges noted across CHO areas	2. CHO areas working closely with local HR to identify existing panels and progress required campaigns

Ambition Statement 2023: to advance the reform agenda for disability services nationally, ensuring that people with disabilities have significantly improved access to high quality, person-centred services that meet their individual needs, promote their independence and inclusion, and reduce reliance on institutional care through: (i) urgent implementation of actions outlined in the Roadmap for Progressing Children's Disability Services; (ii) the implementation of key national strategies; (iii) progression of the sustainability impact assessment process; (iv) expansion of the neuro-rehabilitation project; and (v) implementation of the 'Action Plan for Disability Services 2023-2026'.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved on the basis that work is ongoing to progress the reform programme and there is a significant dependency on the ability to recruit necessary staffing with the required skills mix   **3**   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Percentage of Assessments of Need completed within 12 weeks as provided for in the regulations (Outturn 2022 - 30%)	Target	100.0%			100.0%			100.0%			100.0%			100.0%
	Actual													
2. Reduce by 50% the number of children waiting* for an Assessment of Need (December 2022 n = 4,613) *overdue for completion under the Disability Act 2005	Target	2,306												2,306
	Actual													
3. Reduce the number of speech and language therapy patients* 0 - 17yrs, 11mths on the assessment waiting list waiting to be seen (December 2022 n = 13,500) *Data is consolidated and does not categorise if the data is related to Disability Services, Primary Care Services or both.	Target	<13500	<13500	<13500										<13500
	Actual		14,520	14,096										
4. Reduce the number of psychology patients* 0 - 17yrs, 11mnths on the treatment waiting list waiting to be seen (December 2022 n = 12,000) *Data is consolidated and does not categorise if the data is related to Disability Services, Primary Care Services or both.	Target	<12000	<12000	<12000										<12000
	Actual		13,540	14,044										
5. Number of people living in congregated settings (currently 1,600 people) supported to transition to homes in the community vs. target (35 people transitioned in 2022)	Target	73	4	10	16	21	30	37	41	50	56	63	68	73
	Actual		3	6										
6. Number of people under 65 years of age currently living in nursing homes (currently 1,262 people) supported to transition to homes of their choice in the community vs. target (22 people transitioned into 2022)	Target	43	2	4	7	10	13	17	21	25	29	34	39	43
	Actual		4											
7. Progress the recruitment of 136 senior clinicians to facilitate children's disability network teams to restore on-site health and social care supports to 104 special schools, as required by Government	Target	136	0	0	0	0	0	64	76	88	100	112	124	136
	Actual		0	0										
8. Reduce the average vacancy rate across the 91 Children's Disability Network Teams (December 2022 - 34%)	Target	34.0%												
	Actual													
9. NSD spend (€9.7m heldback)	Target	€23.30m	€0.62m	€1.25m	€1.90m	€2.65m	€3.30m	€4.05m	€5.65m	€7.38m	€11.26m	€15.26m	€19.26m	€23.30m
	Actual		€0.20m											

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Progressing Children's Disability Services: Improve the services to children and families by commencing the implementation of the action plan set out in the Progressing Disabilities Roadmap, (following Board and Ministerial approval)	Oct-23	Not Started	A draft of the plan, incorporating feedback from stakeholders, is being finalised for review by the P&D Committee at its meeting on 23 March. It will also be submitted to the Minister and DCEDIY for consideration. It is expected to be agreed and finalised no later than 14 April
2. Complete the Sustainability Impact Assessment process (review of model of service, workforce, finance, org structure and ICT) with one S38 and one S39 organisation and produce a report on the learnings from the process	Dec-23	On Track	Work progressing with S38 org. Report due 30 March, with final completion due 30 June. Significant work completed on org structure, estates, ICT and model of services. SAT process ongoing. Engagement with S39 ongoing, MOU progressing and SIA due to commence June 23
3. Community Neuro-Rehabilitation Teams: Establish four Community Neuro Rehabilitation Teams (CHOs 2,4,6 & 7)	Dec-23	Not Started	Awaiting further feedback regarding funding from DCEDIY
4. Monitoring System for New Directions: Develop a monitoring system to measure compliance with the 'Interim Standards for New Directions' to assist stakeholders to deliver services and supports in accordance with the vision and stated objectives outlined in the New Directions and the Value for Money reports	Dec-23	On Track	The inaugural meeting of the Steering Group to oversee this development was convened in February. A project plan is currently in development and will be considered at the 28 March meeting
5. Family Forums and Family Representative Groups: Establish 66 new Family Forums, bringing total to 91, and establish 9 CHO Family Representative Groups to ensure Service User and Family participation in CDNT service development at national, regional and local levels	Dec-23	On Track	35 Family Forums have been established and the remaining 56 are in train. Two Family Reps will be elected from each Forum onto the CHO CDNT Family Reps group. From this group, two family reps will be elected onto the CHO CDNT Governance Group
6. Implement the 'Action Plan for Disability Services 2023-2026' and seek to secure associated revenue and capital funding to address the capacity requirements outlined in the Disability Capacity Review Report	Oct-23	Not Started	On sign off of the Action Plan by DCEDIY the revenue and capital requirements will be considered in the context of the Estimates process for 2024
7. KPI development: Define the KPIs required for measurement of Disability services from 2024 and identify the required mechanisms and associated investment plan to measure these KPIs from Jan 2024	Sep-23	Not Started	This project is due to commence in Q2 when a group representative of all elements of disability service delivery will be formed to progress the review of the current suite of Disability KPIs

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. The sourcing and retention of suitably qualified staff to deliver on key areas which received new development funding in 2023	1.

8. Prevention and Early Intervention

Ambition Statement 2023: to continue to empower individuals to take greater control over their physical and mental health by: (i) delivering targeted interventions in areas to include smoking cessation, reducing alcohol consumption, promoting healthy food and exercise, establishing weight management programmes for young people; (ii) supporting positive mental health in the travelling community; (iii) reducing social isolation and promoting positive parenting; and (iv) focusing on addressing health inequalities within disadvantaged communities and vulnerable groups.

Rating and Overview (4): Strong assurance that the 2023 Ambition Statement will be substantially achieved on the basis that most KPIs and deliverables are on track and this position is expected to be maintained to year-end. Where there are material issues or risks to the achievement of the Ambition Statement, effective mitigations are in place.

4 Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1.Percentage of smokers on cessation programmes who were quit at four weeks	Target	48.0%			48.0%			48.0%			48.0%			48.0%
	Actual													
2. Number of frontline staff who completed the eLearning Making Every Contact Count brief intervention training	Target	5,748			1,939			3,352			4,805			5,748
	Actual													
3. Percentage of problem alcohol users (under 18 years) for whom treatment has commenced within one week following assessment	Target	100.0%			100.0%			100.0%			100.0%			100.0%
	Actual													
4. Number of people in the Traveller community who received information on or participated in positive mental health initiatives	Target	3,735			933			1,866			2,799			3,735
	Actual													
5. Number of staff who completed the eLearning Intercultural Awareness programme.	Target	3,000			750			1,500			2,250			3,000
	Actual													
6. Number of staff who completed the eLearning Introduction to Ethnic Equality Monitoring	Target	800			200			400			600			800
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1.Deliver targeted initiatives through 20 Slaintecare Healthy Communities to address health inequalities including smoking cessation services, Healthy Food Made Easy courses, Social Prescribing and Parenting courses targeting early childhood intervention	Dec-23	On Track	45/46 HSE staff in place for SHC area based team. All four SHC programmes operationalised. Q1 data due in April. 11/19 Community Food and Nutrition workers recruited to date. All social prescribing services are operational
2. Design a Physical Activity Referral Pathway to support referrals to physical activity programmes with funded organisations outside the health service in partnership with Sport Ireland	Dec-23	On Track	First steering group meeting held. Qualitative research tender awarded. Exercise Professional training tender closed, evaluation scheduled for March. Commenced planning for stakeholder engagement event. Alignment meeting held with Sport Ireland
3. Scope and develop a digital intervention to support reduced alcohol consumption by the general population using professional and community online support	Sep-23	Delayed	Australian app that was under adaptation for the Irish context is no longer a viable option (structural changes in the host Australian organisation). Similiar UK and Belgian apps now under review
4. Establish specialist weight management service for children and young people encompassing, diet and exercise as appropriate, in CHOs 5 and 7 with a view to testing the approach and seeking to implement nationally	Sep-23	On Track	CHOs have agreed end of Q3 for service commencement. Recruitment of priority posts ongoing.
5. Establish baseline information on HSE data systems that record ethnicity data in line with Ethnic Equality Monitoring	Dec-23	On Track	Planning and widespread circulation of invite to HSE staff and management for a webinar on 8 March, hosted by the HSE National Social Inclusion Office to launch new resources and training module and to promote implementation of Ethnic Equality Monitoring

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Recruitment environment continues to be challenging and is impacting on timelines for specialist weight management service for children and young people	1. Minimum team composition agreed to facilitate service commencement. CHOs advised to engage with NRS to strengthen promotion of campaigns and extend to an international market
2. Provision of free stop smoking medication in CHOs continues to be a challenge due to administrative burden	2. Continued engagement with DoH to progress payments for stop smoking medication through PCRS
3. Australian app to support reduced alcohol consumption that was under adaptation for the Irish context is no longer a viable option	3. Similiar UK and Belgian apps are now under review for possible adaptation

9. Enhancing Bed Capacity

Ambition Statement 2023: to deliver additional bed capacity during the year as follows: (i) the remaining 19 Critical Care beds funded under NSP 2022 and a further 9 Critical Care beds funded under NSP 2023 to reach a total of 351 beds; (ii) a further 209 acute beds; and (iii) to complete an additional 446 Community Beds.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. KPIs are currently within target, but delivery of the ambition is dependent on capital build, supply of materials and equipment, and recruitment/retention of the required skilled staff for these beds. Currently respiratory and infectious disease are at low levels, changes to the current epidemiological context and resultant IPC requirements may present access challenges to acute sites to complete required works.

3

Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Critical Care Beds	Target	28	0	0	2	2	2	18	20	20	21	21	21	28
	Actual		0	0										
2. Acute Bed additions	Target	209	0	0	0	10	10	10	77	77	173	173	173	209
	Actual		0	0										
3. Community Bed (including rehabilitation beds) additions	Target	53	15	15	36	46	46	46	46	46	46	46	46	53
	Actual		15	15										
4. NSP Spend	Target													
	Actual													
5. WTEs Recruited (350 critical care, X acute beds, X community beds)	Target													
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.None	1.None

10. Quality and Patient Safety

Ambition Statement 2023: to continue to improve quality and patient safety, specifically to: (i) reduce healthcare associated infections; (ii) reduce surgical re-admissions; and (iii) improve the timelines for carrying out hip fracture surgery. In addition, we will : (iv) continue implementation of the Patient Safety Strategy; (v) design a National Quality and Patient Safety Surveillance System in maternity services; (vi) design and deliver a National QPS Competency Framework; and (vii) implement the Patient Safety Together platform.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved on that basis that there is a plan to review KPI #2 performance in totality at the end of Q1 through the NPOG governance process

3   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Rate of new cases of hospital acquired staphylococcus aureus bloodstream infection (SA BSI) per 10,000 bed days used	Target	<0.8	<0.8											
	Actual		0.6											
2. National Incident Management System: Percentage of reviews completed within 125 days of category one incidents from the date the service was notified of the incident	Target	70.0%	70.0%											
	Actual		48.0%											
3. Percentage of surgical re-admissions to the same hospital within 30 days of discharge	Target	<2.0%	<2.0%											
	Actual		1.7%											
4. Percentage of hip fracture surgery carried out within 48 hours of initial assessment	Target	85.0%			85.0%			85.0%			85.0%			85.0%
	Actual													
5. Rate of medication incidents as reported to National Incident Management System per 1,000 beds (aim to increase reporting)	Target	>3	>3											
	Actual		2.8											

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Produce (i) a quarterly publication on Patient Safety Together website of Patient/Staff stories, (ii) quarterly publication of Patient Safety Digest and (iii) quarterly publication of Patient Safety supplement	Mar-23	On Track	Platform launched 17 January. PST Community launched in March. Safety supplement published- 'The Risk of Smoking in our Acute Hospitals' .
2. Co-design and develop a National QPS Competency Framework	Dec-23	On Track	Key stakeholder engagement sessions scheduled for the 20 and 29 March. Social Media campaign launched. Literature review commenced.
3. Commence Quality & Safety Surveillance System in Maternity services as proof of concept i.e. research on best practice and statistical methods, design a ICT system and establish clinical and data governance and a programme office	Dec-23	On Track	Clinical Advisory Group established with representation from the six Maternity Networks. First meeting and Change Management Workshop took place. Partnership with Integrated Information Service agreed. IT procurement and WTE recruitment on schedule (GVIII's awaiting EMT approval)

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. None	1. None

11. Patient and Service User Partnership

Ambition Statement 2023: to continue strenghtening the culture of patient and service user partnership through direct involvement and leadership in planning and programme activities through: (i) progressing the Health Services Patient Engagement Roadmap and developing KPIs to measure the process; (ii) strengthening implementation of QIPs arising from Your Service Your Say policy, the National Care Experience Surveys and direct engagement; and (iii) building the capacity of staff to comply with the provisions of the Assisted Decision-Making (Capacity) Act, 2015 and the National Consent Policy.

Rating and Overview (4): Strong assurance that the 2023 Ambition Statement will be substantially achieved as current metrics are within 10% of target and there are sufficient indications from engagement with services that the quarterly and half yearly metrics in KPIs 5 & 6 respectively will be close to, if not, meeting/exceeding target. There has also been a successful outcome in the recruitment of the AND for Patient Engagement who will ensure that the work currently underway with the advocacy groups on the Roadmap will accelerate.

4 | Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Number of hospital groups and CHOs actively engaging in the implementation of the Patient engagement Roadmap	Target	15	0	0	0	10	15	15	15	15	15	15	15	15
	Actual		0	0										
2. Number of hospital groups and CHOs with ADM committees and designated ADM leads	Target	15	8	10	12	15	15	15	15	15	15	15	15	15
	Actual		13	13										
3. Number of staff that have completed the e-learning programme on assisted decision-making (population = circa 156k)	Target	35,880	0	0	1,000	4,000	8,000	12,500	18,000	21,000	24,000	28,000	32,000	35,880
	Actual		0	0										
4. Number of staff that have completed the e-learning programme on HSE National Consent Policy (population = circa 156k)	Target	39,000	7,500	9,000	11,000	13,000	15,000	18,000	21,000	24,000	28,000	32,000	36,000	39,000
	Actual		7,491	8,286										
5. Percentage of complaints to HSE investigated within 30 working days of being acknowledged by a Complaints Officer	Target	75.0%			75.0%									75.0%
	Actual													
6. Percentage of complaints to HSE where an Action Plan identified as necessary is progressing	Target	65.0%						65.0%						65.0%
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Support operational services preparation for implementation and compliance with the Assisted Decision Making (Capacity) Act 2015 through the development and provision of guidance and support materials, and training and mentorship programmes.	Dec-23	On Track	E-learning programme to be launched in March alongside delivery of two webinars. Information & briefing sessions to staff and services continue. HSE ADM Transitional Oversight Group establised in Feb. Planning underway for mentoring programme (launch Sept)
2. Develop and commence the implementation plan for the HSE Patient Engagement Roadmap	Apr-23	On Track	Implementation working group convened, two meeting have taken place to date
3. Develop a suite of KPIs to monitor progress towards and benefits arising from the implementation of the Patient Engagement Roadmap	Dec-23	On Track	Implementation working group convened, two meeting have taken place to date
4. Support operational services capability to monitor and report on compliance with mandatory recording of Action Plans on the Complaints Management System through provision of training and generation of quarterly compliance reports as outlined in the Your Service Your Say policy	Dec-23	On Track	First data set for new KPI will be available July 2023 to account for the legislative complaint management process timeframes. CMS training team provide on-going training and support to serviccs to ensure compliance with data entry on the CMS
5. The post of Assistant National Director to be in place by the end of Q2	Jun-23	On Track	AND Competition complete and candidate selected. Currently completing contract. Agreed transition with current Line Manager to June

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Staff having issues accessing HSELand due to problems with HSELand server	1. Aurion undertaking work to improve server
2. E-learning on ADM and consent is not mandatory in the HSE	2. Work has been undertaken looking at whether there are grounds to make the training mandatory
3. Consent lead role vacant for approx 6 months	3. Post now filled and programme now in place to increase publicity and resources

Ambition Statement 2023: to grow our workforce during the year by some 6,000 WTE (beyond December 2022 employment levels), and to attract and retain staff through further enhancements to our recruitment capability and our resourcing approach that enables us to continue to be an employer of choice.

Rating and Overview (3): The rating is based on the full data suite for January and almost full suite for February 2023. Quarterly data takes account of the natural peaks and trophs and is a more reliable measure alongside the quarterly turnover data. The rating is based on the February outturn, whereby all of the deliverables are on track, with notable improvements in KPI performance, particularly with 3 staff categories showing a total Net WTE change ahead of target, with two only marginally behind. This coupled with the performance on the other KPIs in the suite, have led to the rating assessment of 3 at this time.

3   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Average Time to Recruit – From receipt of job order to start date for HR Shared Services recruitment	Target	12.5wks	12.5	12.5										
	Actual		14.5	16.3										
2. Total Net Change WTE	Target	6,010	644	1,228	1,786	2,156	2,357	2,458	3,095	3,110	3,475	4,327	5,479	6,010
	Actual		588	1,441										
3. Medical & Dental Net Change WTE	Target	500	-28	-29	52	88	95	80	184	134	315	435	459	500
	Actual		-67	-35										
4. Nursing & Midwifery Net Change WTE	Target	1,950	246	673	842	996	1,082	1,064	1,189	1,093	1,069	1,217	1,788	1,950
	Actual		328	787										
5. Health & Social Care Professionals Net Change WTE	Target	1,000	151	107	184	197	158	90	133	159	285	612	887	1,000
	Actual		105	99										
6. Management & Admin Net Change WTE	Target	1,460	177	360	463	550	603	629	861	907	976	1,169	1,338	1,460
	Actual		270	517										
7. General Support Net Change WTE	Target	100	32	25	43	66	63	106	149	159	101	68	92	100
	Actual		55	63										
8. Patient & Client Care Net Change WTE	Target	1,000	67	93	202	259	356	490	579	659	728	828	917	1,000
	Actual		-104	10										
9. Annual Turnover Rate	Target	<10.0%			<2.3%			<2.3%			<2.7%			<2.7%
	Actual													
10. Staff Absence Rate	Target	≤4.0%	≤4.0%	≤4.0%										
	Actual		5.5%											

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Delivery of the 2023 HSE Resourcing Strategy to the point of implementation	Feb-23	Complete	
2. Commencement of the mobilisation of the Resourcing Strategy actions	Mar-23	On Track	Action owners continue to be identified. Steering Group have approved prioritised actions and a number of these actions have commenced
3. Develop and implement Phase 1 of the Talent Pool System, sharing information about open roles and opportunities for new and existing staff	Mar-23	On Track	Work continuing on Phase 1 HSE Career Hub (formally referred to Talent Pool System) and on track
4. Establish a Talent Attraction & Engagement Unit, delivering an attraction strategy specific to each grade category	Sep-23	On Track	EMT approval received in February 2023 and posts are progressing to recruitment stage
5. Commence implementation of a single talent acquisition solution (Applicant Tracking)	Dec-23	On Track	DGOU approval received March 2023
6. Complete the transition to new Recruitment Operating Model	Mar-23	On Track	Work progressing
7. Develop the plan to support the DoH negotiations to increase HSCP student places in Irish colleges	Sep-23	On Track	Continued engagement and collaboration with HSE & DoH, paper submitted to DoH February 2023 and additional information being prepared
8. Develop reporting of reasons for staff turnover and integrate into quarterly turnover reporting	Dec-23	On Track	Work progressing with the minimum data set for reasons completed

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Impact of reduced labour supply	1. Offer of employement to all graduating nurses, midwives and HSCPs currently in 4th yesr, following interview process
2. Reopening of international borders impacting on staff turnover	2. Increased international recruitment of nurses, midwives and HSCPs
3. Capacity to implement development changes across multiple data systems to capture turnover reasons	3. Competitve international relocation package launched to increase candidate pool
4.	4. Partnering with national and local services to identify key supports to implement turnover reasons across multiple systems

Ambition Statement 2023: to work during the year with operational colleagues to manage expenditure in line with LoD 2023. In addition: (i) progress the IFMS project; (ii) progress enhanced reporting and agreement of the SLA with DOH and DPER; (iii) progress Activity Based Funding; (iv) achieve the required milestones in the Internal Controls Improvement Plan; and (v) ensure that reporting of non-compliant procurement becomes the norm.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved.

3

Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Core Operational Services YTD Variance against agreed Budgets for 2023 (exc Pensions and Demand Led and COVID) noting the increased complexity of the financial framework for 2023	Target	within +/- 0.5%	+/- 0.5%	+/- 0.5%										
	Actual		2.9%	3.5%										
2. COVID19 Sanction v Spend	Target	<2.5%	<2.5%	<2.5%										
	Actual		90.0%	77.2%										
3. Procurement Spend Under Management (spend in 2022 was 68%)	Target	75.0%			61.5%			68.0%			73.5%			75.0%
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Deliver IFMS first go live	Jul-23	On Track	Standard configuration (template) complete and SIT1 execution commenced in March, as planned
2. Progress implementation of Activity Based Funding 2021-2023 plan (i) Further enhance hospital costing and pricing (ii) Support and enable the existing ABF programme (iii) Develop a roadmap for structured purchasing (iv) Scope and implement costing and activity measures for a community costing programme	Dec-23	On Track	Work commenced on a number of actions in 2021 and will continue throughout 2023 notwithstanding some actions impacted by COVID 19. Actions in total are now at 65% against a target of 66% but it is expected that these will be on target by year end
3. The Internal controls programme will progress (i) the development of a controls and compliance monitoring and reporting toolset and (ii) the performance management of the Internal Controls Improvement Plan with full implementation of an online repository	Dec-23	On Track	Work is underway on the roll-out of revised NFR's. Significant progress is being made and all tasks completed successfully to date
4. Agree SLA with DoH/DPER on enhanced reporting and monitoring arrangements	Jun-23	On Track	Work is on-going with recent engagement with DoH/DPER in relation to the development of agreed reporting profiles for 2023
5. Produce a report for ARC every quarter on non-compliant procurement (to include non-compliant procurement spend) that is based on the output of self-declaration from budget holders appropriately supported by procurement	Mar-23	On Track	ARC will receive report for Q 4 and final 2022 SIC report at meeting to be held on 24 March
6. Working with relevant colleagues, support the establishment and progression of a number of programmes to support quality and value improvements building on existing arrangements	Dec-23	On Track	Work is underway with DoH/HSE Finance/Ops to progress programmes as part of NSP 2023

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. None	1. None

14. eHealth

Ambition Statement 2023: to enable transformation of patient care by: (i) implementing the 2023 eHealth NSP and ICT Capital Plan; (ii) delivering a Digital Health Strategy; (iii) delivering Forensics Mental Health CMS; (vi) delivering a GP Lab eOrdering system; (v) rolling out the Children's Disabilities system to 91 community teams; (vi) delivery of IPMS to Community sites; (vii) protecting the HSE ICT estate from cyber-attacks; and (viii) delivering a modern desktop experience.

Rating and Overview (4): Strong assurance that the 2023 Ambition Statement will be substantially achieved on the basis that: delivery of all capital programmes are on target; Digital Health Strategy progressing to plan, National Forensic Hospital EHR implementation on track; Children's Disabilities system went live in CHO3; Community site IPMS solution commenced with vendor engagement underway; Cyber Transformation initiatives are ongoing; and digital cloud based collaboration delivery ahead of target for both HealthIRL and Office 365.	**4**	Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. eHealth ICT Capital spend	Target	€140.00m	€4.25m	€17.15m	€22.55m	€28.65m	€34.15m	€40.35m	€46.85m	€57.95m	€71.10m	€89.30m	€115.80m	€140.00m
	Actual		€4.25m	€13.6m										
2. Percentage of eHealth ICT Capital spend on Community programmes	Target	5.1%	5.1%	5.1%										
	Actual		8.6%	8.0%										
3. Number of new ICT professionals recruited to deliver 2022/2023 eHealth Service Plan	Target	250	21	42	63	84	105	126	147	168	189	210	231	250
	Actual		24	55										
4. Delivery of 90% of capital programmes on track (RAG status Green or Amber)	Target	90.0%	90.0%	90.0%										
	Actual		100.0%	100.0%										
5.														
6.														
7.														
8.														
9.														

Redacted

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Prepare and submit Digital Health Strategy and implementation plan	Jul-23	On Track	Digital Health Strategy development underway in coordination with DoH DoH focus is policy & framework; HSE focus is Strategy & Implementation Separate Strategy Steering Group being established Stakeholder consultation phase is >50% complete; programme now moving into Strategy Development phase
2. Delivery and Go-live of Specialised Care Services Clinical Management System for the National Forensics Mental Health Service	Sep-23	On Track	EHR implementation at the National Forensic Mental Health Service progressing toward Go-live in Q3 Solution build is underway, with set-up completed and solution validation continuing
3. Deliver GP Laboratory eOrdering solution to 4 pilot sites - Galway (GUH), Waterford (UHW), Navan (OLHN), Beaumont	Sep-23	On Track	Lab Order specification completed Technical engagement with GP practice vendors underway, as is negotiation on programme of work and delivery timelines
4. Rollout Children's Disabilities Network Teams Information Management System to 91 teams	Dec-23	On Track	Project provides a single, uniform system for the administration of services to children with disabilities by 91 Children Disability Network Teams (CDNTs) Application build and User Acceptance Testing (UAT) have been completed CHO3 Go-live completed
5. Delivery and Go-live of IPMS and Swiftqueue on 2 Community sites	Jun-23	On Track	Project examines suitability of iPMS & Swiftqueue as an interim solution for OPD services (Waiting Lists & Clinic Appointments) for Community Health until ICCMS is available Pilot commenced; As-Is process complete Vendor engagement commenced
6. Deliver Cyber Transformation programme (2023) for the HSE ICT estate	Dec-23	On Track	The CTO, CISO and CSE continue with cyber transformation initiatives across HSE Compliance, SOC, Tech Uplift, Threat Mgmt Mandiant and Trellix article 32 contracts getting extended to ensure continuity of service alongside procurements commencing

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. None	1. None

Ambition Statement 2023: to take forward during the year the implementation of the Capital and Estates Strategy together with the 2023 Capital Plan to include: (i) new and replacement acute bed capacity; (ii) new and replacement community bed capacity; (iii) Government priority programmes and projects; and (iv) investment to support patient safety and mitigate clinical and infrastructural risk.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. Actions to take forward the implementation of the Capital and Estates Strategy are underway. Implementation of all elements of the Capital Plan are in progress. Expenditure year to date on the National Children's Hospital is behind profile - this is being followed up with the NPHDB.	**3**	Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Capital spend	Target	€1,027.00m	€18.30m	€59.50m	€111.50m	€170.70m	€262.40m	€335.20m	€401.00m	€482.30m	€559.60m	€634.20m	€751.40m	€1,027.00m
	Actual		€18.30m	€38.14m										
2. New primary care centres completed	Target	9		2		5				8				9
	Actual													
3. New critical care bed capacity completed	Target	16		0		16								
	Actual													
4. New (162 beds) and replacement (99 beds) acute bed capacity	Target	261		36		193				249				261
	Actual													
5. New (zero beds) and replacement (500 beds) community bed capacity	Target	500		130		266				332				500
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Take forward the implementation of the Capital and Estates strategy to include: (i) establishing governance structures and procuring external subject matter experts (ii) developing strategic investment planning approaches (iii) enhancing the estate data-set to support evidence-based capital decisions (iv) developing standardised, programmatic approaches to delivery of the capital plan (v) implementing digital technology in areas such as design, delivery and operation of the estate (vi) developing the Capital and Estates Workforce Plan This is an ongoing process and deliverables will be refined further as process advances	Dec-23	On Track	The establishment of governance structures and workstreams in progress to enable implementation of the Capital and Estates Strategy. Procurement process and appointment of external project matter experts is being finalised, with appointment and commencement of service scheduled for March
2. Progress the tender process for construction of the National Maternity Hospital on receipt of Government approval of the final business case	Dec-23	On Track	Approved final business case awaited from Government. Preparation for tender process continuing in background
3. Deliver the equipment replacement programme in accordance with the HSE Equipment Replacement Report; commission an update of the Equipment Replacement Report	Dec-23	On Track	Engagement continuing with all acute hospitals to progress approved equipping requirements in line with funding allocation in Capital Plan. Process commenced to update the Equipment Replacement Report 2016
4. Take forward phase 2 critical care infrastructure projects at Cork University Hospital, St Vincent's Hospital, St James Hospital, Beaumount Hospital and at the Mater Misericordiae Hospital	Dec-23	On Track	Phase 2 critical care infrastructure projects advancing with preparation of SAR's for approval by HSE Board

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. The approval of the draft final business case for the NMH remains under consideration by Government. Progression of tender for contruction not possible until approval received	1. HSE Capital and Estates are maintaining engagement with the DoH on the approval of the final NMH business case
2. Resourcing challenges within Capital and Estates to enable the delivery of the Capital Plan	2. Assessment of resourcing requirements in progress
3. Global challenges associated with construction inflation and restricted availability and/or delays with materials due to Brexit or the war in Ukraine	3. Continued engagement with the market to facilitate suitable project delivery mechanisms

Ambition Statement 2023: to ensure effective communications from health service teams, that builds the understanding of HSE services, and earns the trust and confidence of our service users and stakeholders at every level of society. Strategies include: (i) communications activity active on all channels, with our staff, in news media, with our partners, online, on social media and through public campaigns; and (ii) the development of accessible digital health services and communications.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved	**3**	Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Improve health behaviour and knowledge via HSE campaigns (QUIT, vaccine and other campaigns)	Target	1.25m	0.20m	0.30m	0.40m	0.40m	0.50m	0.60m	0.60m	0.70m	1.00m	1.60m	2.50m	2.90m
	Actual		0.20m	0.29m										
2. Increase public, partner and patient access to quality health information through visits to HSE.ie sites (15% increase in 2023)	Target	70.00m	6.30m	11.20m	16.80m	22.40m	28.00m	32.90m	38.50m	43.40m	49.70m	56.70m	63.70m	70.00m
	Actual		6.20m	11.50m										6.20m
3. Improve engagement between HSE and our staff through internal comms channels: interactions vis internal comms channels in 2023	Target	3.38m	0.35m	0.65m	0.93m	1.20m	1.47m	1.75m	1.99m	2.26m	2.57m	2.85m	3.13m	3.38m
	Actual		0.28m	0.52m										
4. Increase public understanding of HSE work via proactive news generation: national projects receiving coverage (two per week) in 2023	Target	108	8	18	26	36	44	54	64	72	80	88	98	108
	Actual		9	19										

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Deliver a stakeholder website within HSE.ie, supporting all HSE service teams, partners and stakeholders, providing information about the organisation and enabling critical digital health service developments and dedicated spaces for RHA and other services	Dec-23	On Track	Project initiated Feb 2023, priority content topics and service areas for development have been agreed and work has begun
2. Establish a personalised email subscription system for all HSE staff, enabling HSE staff to sign up for targeted updates and enabling HSE services to communicate relevant and effective messages to all staff	Jun-23	On Track	The project is progressing and support is being provided through eHealth
3. Deliver an integrated communications & engagement programme to (i) support the rollout of RHAs, including staff, stakeholder, public affairs & public communications, & (ii) designing an effective operating model for RHA communications teams	Dec-23	On Track	

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. None	1. None

Ambition Statement 2023: to continue during the year to progress the planning and phased implementation of Regional Health Areas (RHAs) in collaboration with all key stakeholders and in line with Government Policy and associated timelines.

Rating and Overview (4): Strong assurance that the 2023 Ambition Statement will be substantially achieved.

4   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
N/A	Target													
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Finalise and agree RHA implementation Plan, to include initial Target Operating Model for January 2024	Mar-23	On Track	Draft implementation Plan completed. Currently under review by the CEO. For further consideration by HSE Board and Slaintecare Programme Board at March meeting
2. Commence recruitment of the six RHA CEOs following DOH/DPER approval (April 2023) with offers issued by September 2023	Sep-23	On Track	Draft job specification for RHA CEO completed, approval and sign off now required. Ongoing dialogue with DoH re requirements to secure approval with DPER. To ensure preparedness for recruitment, tender process initiated with PAS for executive search
3. Commence recruitment of RHA Senior Management Teams following DOH/DPER approval	Sep-23	Not Started	Dependent on securing approval for RHA CEO, and close out of detailed design/organisational structures
4. Finalise the Integrated Service Delivery Model with associated structures within RHAs aligned to national frameworks	Apr-23	On Track	High level integrated service delivery model completed. Options for ISD Model drafted and considered at EMT meeting. The need for an ISD working group was agreed to consider and select preferred option, and to agree assessment criteria and detailed design with input from key stakeholders
5. Finalise and agree HSE National organisational structures, roles/responsibilities and associated processes /relationships between HSE National and RHAs	Sep-23	On Track	High level functional design completed setting out key activities between DoH, National HSE and RHAs. Draft Proposal setting out process for agreement of national functions/structures by Clinical, Operations and Strategy under consideration
6. Complete the redefinition of existing CHO/HG geographical boundaries to RHA defined areas, to include associated changes required for HR and Finance supported by change impact assessment	Dec-23	On Track	Initial high level impact assessment completed for CHOs/HGs aligning to new boundaries. Impact assessment questionnaire developed with input from Operations to assess detailed impact/risk for patient and service continuity
7. Establish arrangements, in partnership with DOH to progress the development of: (i) Population Based Resource Allocation; and (ii) Health Needs Assessments	Mar-23	On Track	DoH currently establishing Population Based Resource Allocation working group. Terms of reference under development
8. Agree and further embed programme governance with continuous input from all key stakeholders during further design and implementation phases	Apr-23	On Track	High level programme governance with RHA weekly working group meeting during February. Programme management team will be fully in place by end of March
9. Appoint approved Change Management Support Posts to support transition arrangements	Nov-23	Not Started	Initial engagement took place with National HR and DOH re regularisation of PMO posts in HGs and CHOs in advance of WRC deadline of June 2023

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Need to ensure full alignment with other key policies and developments	1. Alignment with Slaintecare, HSE Corporate Plan and other policy documents
2. Scale of change programme and deliverables to ensure safe transition to RHAs	2. Strong programme and change management process is crucial. Implementation plan sets out key essential elements to reach the target of RHAs in place by Jan 2024
3. Need to engage constructively on an ongoing basis with a wide range of stakeholders	3. Stakeholder engagement currently being tracked and feedback logged. Working closely with HSE Communications Team in agreeing engagement and communication plan for 2023
4. Securing approval from DoH/DPER for RHA CEO posts in line with timelines	4. Ongoing dialogue re requirements to secure approval

18. Climate Action

Ambition Statement 2023: to take forward the implementation of the HSE Climate Action Strategy 2022-2050 to include: (i) developing frameworks for implementation across the eight priority areas and ten corresponding interconnected Strategic Objectives; (ii) developing and providing a Climate Action Roadmap; and (iii) progressing implementation of the new Infrastructure Decarbonisation Roadmap.

Rating and Overview (4): Strong assurance that the 2023 Ambition Statement will be substantially achieved. Key deliverables within the Infrastructure Decarbonisation Roadmap are in progress.

4

Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Programme spend on shallow energy retrofit improvements	Target	€12.50m			€1.30m			€2.80m			€5.00m			€12.50m
	Actual													
2. Large-scale deep energy retrofit pathfinder projects spend	Target	€7.50m			€1.00m			€2.50m			€4.00m			€7.50m
	Actual													
3. Number of utility meters installed at pilot locations to enhance metering of HSE data	Target	20			0			0			5			20
	Actual													
4. Expand from 111 to 140 the number of energy management teams in place in the HSE and S38 and S39 organisations	Target	140			115			120			130			140
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Progress implementation of the HSE Climate Action Strategy through the development of eight climate action workstreams, associated implementation and measurement plans, and the development and delivery of an internal staff communication campaign and training programmes. Complete funding proposal for implementation for the next six years	Dec-23	On Track	Mitigations are addressing delays in starting works principally due to resourcing. Work has commenced to set up a PMO and implementation working structure inclusive of 8 work streams (Appointing chairs, working group members, agreeing TORs and Implementation work plan to end 2023)
2. Produce a draft report following establishment of the large scale deep energy and carbon retrofit pilot pathfinder programme to inform future solutions, costs and actions	Apr-23	On Track	Work underway by technical advisors and design teams on the preparation of the Stage 1 Design Report
3. Produce a National Strategic Assessment Report (SAR) outlining the proposed approach to taking forward large-scale energy retrofits across all healthcare sites, informed by learnings from the pathfinder sites. Commence SAR preparation in May to present to HSE National Capital Steering Group in August	Aug-23	Not Started	Work on National Strategic Assessment Report will commence in May upon completion of Stage 1 Design Report (referenced in deliverable 2)
4. Gather, compile and verify data on water consumption for the top 170 significant users as part of a water conservation training programme	Dec-23	On Track	The process to gather and compile water consumption data from the top 170 significant user sites is in progress
5. Deliver four national energy efficient design training programmes for design team framework professionals, HSE staff and section 38 and 39 organisations during 2023. Two programmes will be delivered by Q2 and two programmes by Q4 2023	Dec-23	On Track	Training Programme one completed in January

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.Availability of dedicated resources and knowledge/expertise required	1. EY supporting strategy implementation and exercise ongoing by CSO to review possiblity of a flatter governance structure

Ambition Statement 2023: to focus during the year on: (i) the expansion of ambulatory gynaecology and endometriosis services; and (ii) the introduction of publicly funded Assisted Human Reproduction services. In addition, there will be ongoing focus on: (iii) the implementation of the National Maternity Strategy; (iv) access to the free contraception scheme and Cariban for hyperemesis; (v) access to rapid access breast clinics and sexual assault treatment units; and (vi) modelling and planning for setting a target for elimination of cervical cancer.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. It is hoped to see an increase in the percentage of referrals to Ambulatory Gynaecology settings over the coming months.

3   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Percentage of general gynecology referrals streamed to ambulatory gynaecology unit/setting	Target	50.0%	50.0%											
	Actual		29.0%											
2. Number of new patients seen per month at regional infertility hubs	Target	1,500	0	0	150	300	450	600	750	900	1,050	1,200	1,350	1,500
	Actual		0	0										
3. Number of supra-regional gynae-oncology MDTs to be established and operational	Target	4												4
	Actual													
4. Percentage of patients (>14 years) seen by a forensic clinical examiner within 3 hours of a request to a Sexual Assault Treatment Unit for a forensic clinical examination	Target	90.0%												
	Actual													
5. Number of reimbursement claims for unlicensed Cariban dispensed (against code 66892) under Community Drug Schemes	Target	N/A												
	Actual		191	405										
6. Spend on Cariban	Target	€1.30m	€0.10m	€0.20m	€0.30m	€0.40m	€0.50m	€0.60m	€0.70m	€0.80m	€0.90m	€1.00m	€1.20m	€1.30m
	Actual			€0.05m										
7. Number of unique individuals who have received benefits under the Free Contraception Scheme.	Target	N/A												
	Actual		55,809	52,699										
8. Percentage Breast Check screening uptake rate (EOY 2022 75.5%)	Target	70.0%	70.0%											
	Actual		59.3%											

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Complete implementation of Models of Care for ambulatory gynaecology and endometriosis	Dec-23	On Track	This is being progressed under the leadership of NWIHP for December 2023
2. Complete phase one of the Model of Care for Infertility with the roll out of the sixth and final regional infertility hub	Jun-23	On Track	NWIHP is leading on extensive enagagement with both internal and external stakeholders to the HSE (eg HPRA UK Regulators) with a site visit planned in the UK
3. Commence phase two of Model of Care for Infertility to include: (i) engaging with the DoH to operationalise the provision of publicly funded, privately provided in vitro fertilisation (IVF), and (ii) complete operational readiness programme to enable commencement of publicly funded, publicly provided IVF	Dec-23	On Track	NWIHP is leading on extensive engagement with both internal and external stakeholders to the HSE (eg HPRA UK Regulators) with a site visit planned in the UK
4. Design and implement three women's health hubs as proofs of concept ie. formal evaluation incorporating the patient experience, staff experience and quantitative data on referral pathways	Dec-23	On Track	This is being progressed for the planned completion date of December 2023
5. Complete the review of the Maternity and Infant scheme in line with the National Maternity Strategy implementation plan	Sep-23	On Track	This is being progressed for the planned completion date of September 2023
6. Progress baseline modelling and structures in preparation for Ireland setting a target for the elimination of cervical cancer and undertake research to explore beliefs and attitudes regarding self-sampling for cervical screening	Dec-23	On Track	The National Screening Service is leading on this piece of work

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. In relation to KPI 3- the target set for 4- National Gynaecology /Oncology MDM's centralisation is underway and progress expected in Q2	1. None

Ambition Statement 2023: to continue to build trust in HSE services and understanding of how the HSE works, how resources are used and how our work delivers for Ireland through: (i) implementation of the 34 actions in the Trust and Confidence Strategy; and (ii) using the results to work in partnership with the delivery system to evaluate the impact of our actions, in order to strengthen the organisation's response.

Rating and Overview (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. It is expected that the timely establishment of the steering group will address these concerns

3   Change

KPI	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Measure of public trust levels in the HSE	Target													
	Actual													
2. Measure of partner/stakeholder trust levels in the HSE	Target													
	Actual													
3. Measure of staff trust levels in the HSE	Target													
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Set up effective implementation structures for the Trust and Confidence Strategy	Jun-23	On Track	Work is advanced to establish an implementation steering group under the leadership of the CEO's office, expected early Q2 2023
2. Establish monthly reporting on public levels of trust in the HSE	Jun-23	Not Started	The implementation steering group will initiate this deliverable once established, expected early Q2 2023
3.Undertake and share with all HSE National Directors a review of the national representative survey results at each interval, showing trends in trust levels of HSE services including activities and improvements allowing for review and improvement	Jun-23	Not Started	The implementation steering group will initiate this deliverable once established, expected early Q2 2023

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.None	1. None

Appendix 1. Operational Services Report – Redacted 26-35
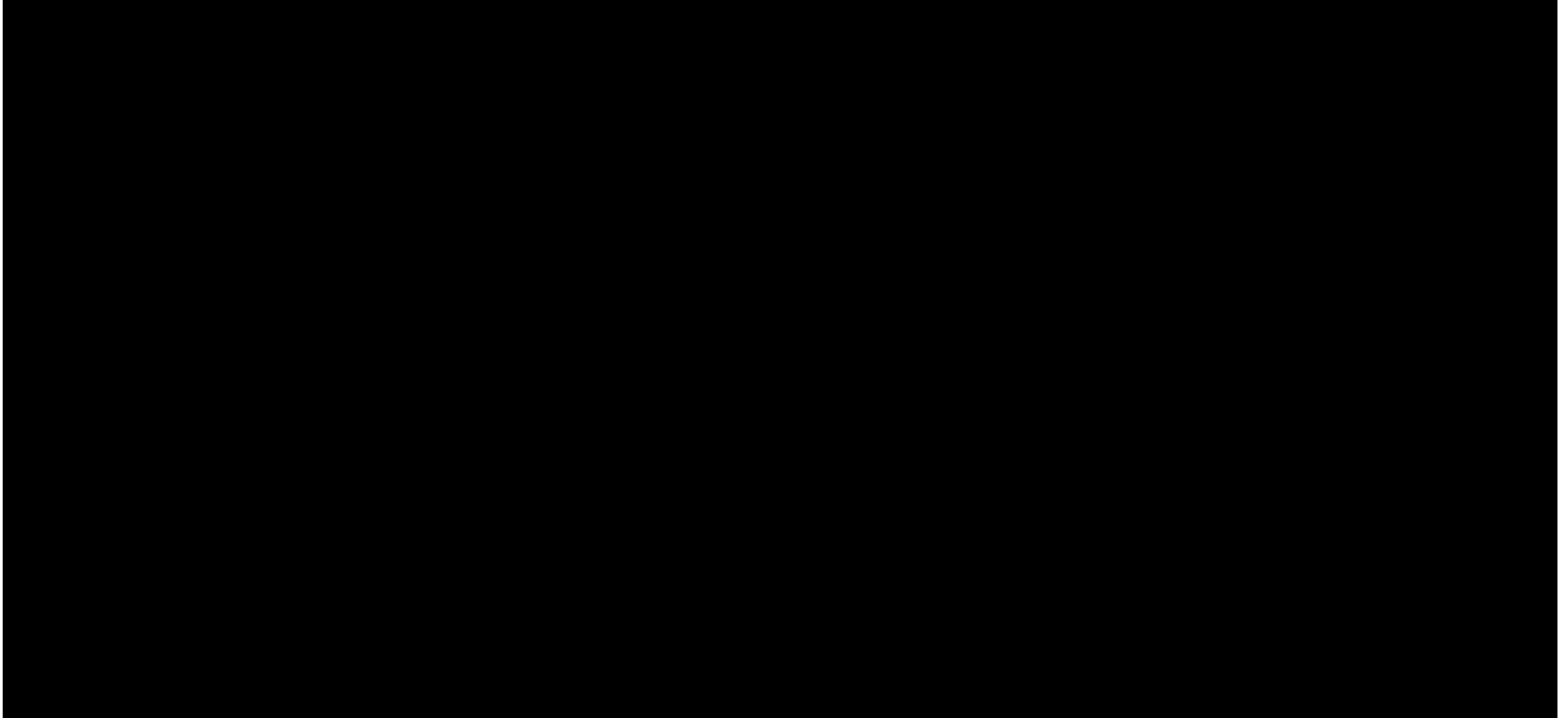
Appendix 2:Risk Management

Overview: There are currently *21* risks on the CRR. The current risk ratings of the risks, per the Q4 2022 CRR report, are 16 **Red** and 5 **Amber.**
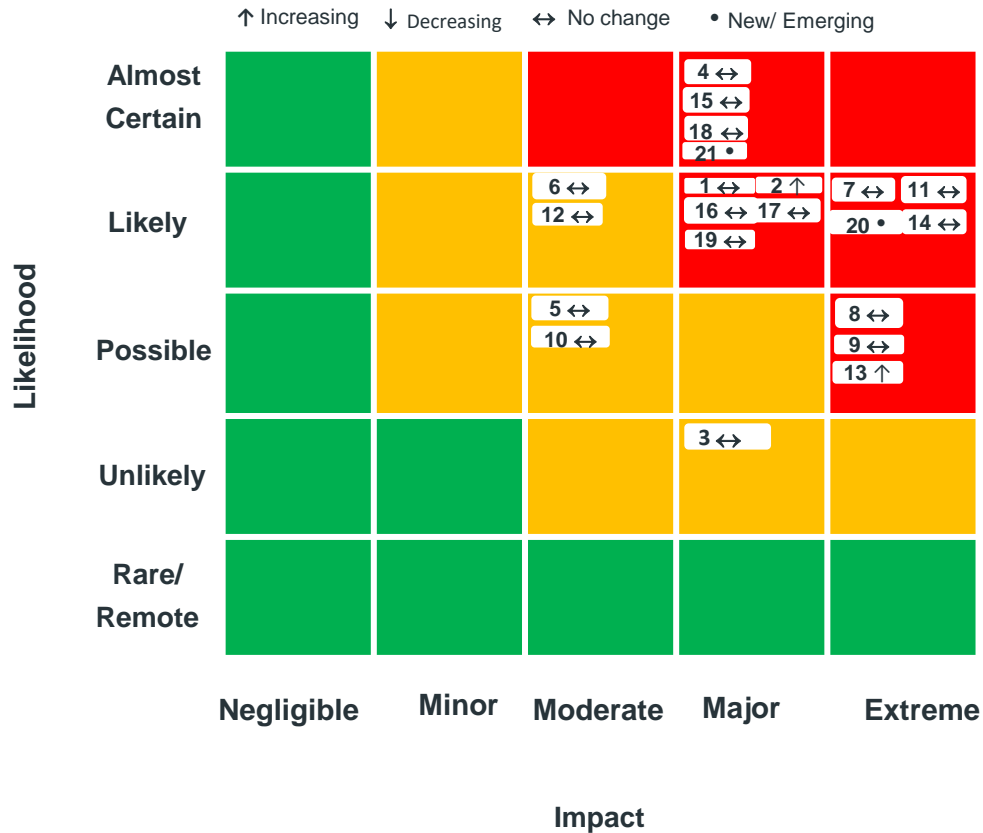
Corporate Risk RAG Summary

RAG	Quarter 4, 2021	Quarter 1, 2022	Quarter 2, 2022	Quarter 3, 2022	Quarter 4, 2022
Red	18	7	11	12	16
Amber	8	10	8	7	5
Green	1	0	0	0	0

Corporate Risk Register [CRR] Update

1	**Corporate Risks Q1 2023**	The Q4 2022 Corporate Risk Report was approved by the EMT are their meeting on the 7th February, 2023 and reviewed by the ARC on the 10th of February, 2023. The Q1 2023 CRR is currently under review and due for submission in early April. There are currently **21** risks, and at the time of reporting there were **16 Red** and **5 Amber** residual risk ratings.
2	**Risk Programme Priorities**	**Review of the Risk Management Policy:** Work on developing the HSE's revised risk management policy has been concluded. Following consideration by the EMT and ARC, the final draft *Enterprise Risk Management [ERM] Policy and Procedures 2023* will be tabled for approval by the Board at its meeting on the 31 March. The provisional launch date for the Policy is the 19th April 2023. An awareness and communication programme will support the launch and there will be four in-person events in Dublin, Cork, Galway and Donegal, together with a series of webinars and training.
3	**Full Review of the HSE's Principal Risks**	The CRO has commenced a systematic examination of each risk on the CRR based on applying *'first principles'* as recommended in the 'Moody' Report. This means the review will seek to determine whether the risks as currently expressed, are the real risks to the HSE achieving its strategic objectives and do they comply with standards for risk which are set out in our revised Enterprise Risk Management Policy and Procedures 2023. Once this review has been completed, the CRO will present a set of findings and recommendations to the EMT and ARC for consideration and approval. The review to be concluded in Q2 2023.
4	**National Risk Assessment**	A short submission from the HSE has been made for consideration in the National Risk Assessment - the annual strategic risk assessment for Ireland led by the Taoiseach's office.
5	**Board Approval of the HSE's Principal Risks**	Under the Code of Practice for the Governance of State Bodies it is the responsibility of the Board to 'review management reporting on risk management and note/approve actions as appropriate'. The HSE Board on an annual basis approves the CRR. The Q4 2022 [End of year] CRR will be tabled for approval by the Board at its March meeting.

Heat Map

Residual rating changes from Q3 to Q4 2022

↑ Increasing ↓ Decreasing ↔ No change • New/ Emerging

Likelihood (vertical) / **Impact** (horizontal)

Likelihood ↓ / Impact →	Negligible	Minor	Moderate	Major	Extreme
Almost Certain				4 ↔ / 15 ↔ / 18 ↔ / 21 •	
Likely			6 ↔ / 12 ↔	1 ↔ 2 ↑ / 16 ↔ 17 ↔ / 19 ↔	7 ↔ 11 ↔ / 20 • 14 ↔
Possible			5 ↔ / 10 ↔		8 ↔ / 9 ↔ / 13 ↑
Unlikely				3 ↔	
Rare/ Remote					

Risk ID	Risk Title	Risk Rating — Residual rating [with controls]		Movement	Risk Appetite Target
		Q3	Q4		
CRR 001	Major Disruption to Clinical and Non Clinical Service Continuity	16	16	↔	</=6
CRR 002	Future trajectory of COVID	12	16	↑	</=6
CRR 003	New pandemic outbreak [serious/high consequence] infectious disease [non-COVID]	8	8	↔	</=6
CRR 004	Access to care	20	20	↔	</=6
CRR 005	Inadequate and ageing infrastructure/ equipment	9	9	↔	<12
CRR 006	Delivery of Major Capital Projects	12	12	↔	<12
CRR 007	Anti-Microbial Resistance and Health Care Associated Infections	20	20	↔	</=6
CRR 008	Safety incidents leading to harm to patients	15	15	↔	</=6
CRR 009	Health, wellbeing, resilience and safety of staff	15	15	↔	<12
CRR 010	Climate action failure	9	9	↔	</=25
CRR 011	Digital environment and cyber failure	20	20	↔	</=6
CRR 012	Delivering Sláintecare	12	12	↔	</=25
CRR 013	Internal controls and financial management	10	15	↑	<12
CRR 014	Sustainability of screening services	20	20	↔	</=6
CRR 015	Stability and Transformation of Disability Services	20	20	↔	</=6
CRR 016	Workforce and Recruitment	16	16	↔	<12
CRR 017	HSE Funded Agencies	16	16	↔	</=6
CRR 018	Assisted Decision Making Capacity Legislative Changes	20	20	↔	</=6
CRR 019	Displaced Ukrainian Population and International Protection Applicant Population	16	16	↔	</=6
CRR 020	Workplace Violence and Aggression	N/A	20	New	<12
CRR 021	Data Protection	N/A	20	New	</=6

Risk ratings [Inherent and Residual] as at December 2022

Risk Summary Table										
			Risk Appetite		**Risk Rating**					
					Inherent rating			**Residual rating [with controls]**			**Risk Appetite**
Risk ID	**Risk Title**	**Owner**	**Risk appetite**	**Risk appetite theme**	**Likelihood**	**Impact**	**Rating**	**Likelihood**	**Impact**	**Rating**	**Target**
CRR 001	Major Disruption to Clinical and Non Clinical Service Continuity	COO	Averse	Operations & service disruption	4	5	20	4	4	16	</=6
CRR 002	Future trajectory of COVID	CCO	Averse	Patient Safety	4	5	20	4	4	16	</=6
CRR 003	New pandemic outbreak [serious/high consequence] infectious disease [non-COVID]	CCO	Averse	Patient Safety	2	5	10	2	4	8	</=6
CRR 004	Access to care	COO	Averse	Operations & service disruption	5	5	25	5	4	20	</=6
CRR 005	Inadequate and ageing infrastructure/ equipment	CSO	Cautious	Property and Equipment	3	4	12	3	3	9	<12
CRR 006	Delivery of Major Capital Projects	CSO	Cautious	Property and Equipment	5	3	15	4	3	12	<12
CRR 007	Anti-Microbial Resistance and Health Care Associated Infections	CCO	Averse	Patient Safety	5	5	25	4	5	20	</=6
CRR 008	Safety incidents leading to harm to patients	COO	Averse	Patient Safety	4	5	20	3	5	15	</=6
CRR 009	Health, wellbeing, resilience and safety of staff	NDHR	Cautious	People	5	5	25	3	5	15	<12
CRR 010	Climate action failure	CSO	Eager	Strategy	5	4	20	3	3	9	</=25
CRR 011	Digital environment and cyber failure	CIO	Averse	Security	5	5	25	4	5	20	</=6
CRR 012	Delivering Sláintecare	CSO	Eager	Strategy	4	4	16	4	3	12	</=25
CRR 013	Internal controls and financial management	CFO	Cautious	Financial	4	5	20	3	5	15	<12
CRR 014	Sustainability of screening services	CCO	Averse	Patient Safety	5	5	25	4	5	20	</=6
CRR 015	Stability and Transformation of Disability Services	COO	Averse	Operations & service disruption	5	5	25	5	4	20	</=6
CRR 016	Workforce and Recruitment	NDHR	Cautious	People	5	5	25	4	4	16	<12
CRR 017	HSE Funded Agencies	COO	Averse	Operations & service disruption	4	5	20	4	4	16	</=6
CRR 018	Assisted Decision Making Capacity Legislative Changes	COO	Averse	Patient Safety	5	5	25	5	4	20	</=6
CRR 019	Displaced Ukrainian Population and International Protection Applicant Population	COO	Averse	Operations & service disruption	5	4	20	4	4	16	</=6
CRR 020	Workplace Violence and Aggression	NDHR	Cautious	People	5	5	25	4	5	20	<12
CRR 021	Data Protection	COO	Averse	Security	5	5	25	5	4	20	</=6

Total 15-25	16
Total 6-12	5

Appendix 3: BSS Alignment with 2023 Letter of Determination (LoD)

The following provides an overview of the BSS scorecard alignment with the 2023 Letter of Determination. The BSS reference describes the scorecard number that aligns to the LoD specification.

LoD Section	Sub-section	LOD Description	BSS ref	Referenced in 2023 BSS
I. Waiting Lists		Waiting List Action Plan	3	Reform of Primary Care, Community & ECC
			5	Reform of Scheduled Care
			7	Reform of Disabilities
II. Eligibility		Extending Free Contraceptive Scheme Access to IVF treatment.	19	Women's Health
III. Better Services	Women's Health	National Maternity Hospital readiness & Service developments & Women's Health Hubs.	19	Women's Health
	National Strategies	National Maternity Strategy	19	Women's Health
		Patient Safety Strategy	10	Quality and Patient Safety
	Capacity expansion	Acute, Community & Critical Care beds & ECC Programmes .	2	Unscheduled Care (Emergency Department Performance)
			9	Enhanced Bed Capacity
			15	Capital Infrastructure
			3	Reform of Primary Care, Community & ECC
	Community healthcare	Expand specialist services	3	Reform of Primary Care, Community and ECC
			4	Reform of Home Support & Residential Care for Older Persons
			6	Reform of Mental Health Services
			7	Reform of Disability Services
			8	Prevention and Early Intervention
		Embed IPC improvements	10	Quality and Patient Safety
		Social inclusion improvements	6	Reform of Mental Health Services
			8	Prevention and Early Intervention
	Wider health and wellbeing agenda	Health promotion, tackling obesity, prevention of chronic diseases, addiction services, targeted measures under the Healthy Communities Initiative	8	Prevention and Early Intervention
			16	Communications
			3	Reform of Primary Care, Community and ECC
	Research and Evidence	Use of data and research to inform patient care, reform and population health & wellbeing.	8	Prevention and Early Intervention
			19	Women's Health
	eHealth initiatives and digital solutions	Increased focus to enable better management and use of health information and access to that information by clinicians and patients	14	eHealth
			5	Reform of Scheduled Care
			3	Reform of Primary Care, Community and ECC

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Appendix 3: BSS Alignment with 2023 Letter of Determination (LoD)

The following provides an overview of the BSS scorecard alignment with the 2023 Letter of Determination. The BSS reference describes the scorecard number that aligns to the LoD specification.

LoD Section	Sub-section	LoD Description	BSS ref	Referenced in 2023 BSS
IV. Workforce & other key modernisation / governance programme areas	Key workforce initiatives	Increase the no. of Advanced Nurse/Midwife Practitioner posts	12	Recruitment and Retention
		Continued development of home support services	4	Reform of Home Support & Residential Care for Older Persons
		Continue recruitment initiatives for therapy professionals	12	Recruitment and Retention
	Regional Health Areas (RHAs)	Undertake all work and transition planning to implement RHAs.	17	Planning & Implementation of RHAs
	Finance Reform Programme	First phase of the IFMS project across the Health System.	13	Finance & Procurement
	ICT solution for ECC Programme	Interim ICT solution for the ECC Programme	3 / 14	Reform of Primary Care, Community and ECC / eHealth
	Public health capability	Expanding infectious disease surveillance	1	Public Health (COVID -19 Test & Trace and Programme for Vaccination/Immunisation)
		Growing our public health workforce	1 / 12	Public Health (COVID -19 Test & Trace and Programme for Vaccination/Immunisation) / Recruitment and Retention
		Implementing new systems capabilities in relation to incident management;	10	Quality and Patient Safety
Capital Allocation 2023		Provision of €1,157 million in capital funding	15 / 14	Capital Infrastructure / eHealth
Appendix 2: Specific Conditionality attaching to the funding for individual service areas	Womens Health	Expansion of free contraception	19	Women's Health
	Disabilities	Children Community-Based Disability Services	7	Reform of Disability Services
	Vaccination Programme	Transition towards a more sustainable model of Covid vaccination delivery	1	Public Health (COVID -19 Test & Trace and Programme for Vaccination / Immunisation)
	Testing, Tracing and Disease Surveillance	Testing for COVID-19 focus on the mitigation of the severe impacts of COVID-19 for those most vulnerable to the disease	1	Public Health (COVID -19 Test & Trace and Programme for Vaccination/Immunisation)
	Public Health Reform	Recruitment of Public Health Consultants	1	Public Health (COVID -19 Test & Trace and Programme for Vaccination/Immunisation)