

Board Strategic Scorecard May 2023

HSE Board 31 May 2023

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Seirbhís Sláinte Building a Níos Fearr Better Health á Forbairt Service

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.



3

2023 In-Year Monthly Rating Scale (March– December 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; and 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; and 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.



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	3	3							
2. Unscheduled Care (Emergency Department Performance)	⇒			1	1	1							
3. Reform of Primary Care, Community & ECC	⇒			3	3	3							
4. Reform of Home Support & Residential Care for Older Persons	->			3	3	3							
5. Reform of Scheduled Care	->			4	3	3							
6. Reform of Mental Health	->			4	4	4							
7. Reform of Disability Services				3	2	2							
8. Prevention & Early Intervention	→			4	3	3							
9. Enhancing Bed Capacity	→			3	2	2							
10. Quality & Patient Safety	→			3	3	3							
11. Patient & Service User Partnership	→			4	3	3							
12. Recruitment & Retention	→			3	3	3							
13. Finance & Procurement	→			3	3	3							
14. eHealth	->			4	5	5							
15. Capital Infrastructure	→			3	2	2							
16. Communications	⇒			3	3	3							
17. Planning & Implementation of RHAs	→			4	3	3							
18. Climate Action	->			4	3	3							
19. Women's Health	→			3	3	3							
20. Trust & Confidence	->			3	3	3							
Operational Services Report – Annex													
Risk Management - Annex													

The BSS April 2023 Report (March reporting period) presented to the Board on 26 April 2023 was not approved due to only 62% KPI data available at the time of reporting.

Key Strategic Insights

Current Overall Average Rating

Each of the 20 scorecards returned a rating of which the overall average is 2.90 unchanged from the last reporting period

- One scorecard returned a rating of 5
- One scorecard returned a rating of 4
- 14 scorecards returned a rating of 3
- Three scorecards returned a rating of 2 (Reform of Disability Services, Enhancing Bed Capacity, Capital Infrastructure)
- One scorecard returned a rating of 1 (Unscheduled Care -EDP)
- As discussed in prior EMT meetings, it is anticipated that Unscheduled Care –EDP will continue to return a rating of 1 for the entire year.

KPIs & Deliverables

93% (n = 109) of the 117 KPIs profiled for update in this period were reported on. The total number of deliverables increased from 102 to 103 in this period (due to an addition in the Enhancing Bed Capacity scorecard)– all were reported on. Improvement Plans

A multi-annual 3-year improvement plan is under development to address critical issues underlying the delivery of 2023 Ambition Statement in the Unscheduled Care scorecard. **Key Insights**

- 1. Steady growth in recruitment is reported over Q1, with the Total Net Change on WTEs ahead of profile by 17%. The annual turnover rate is 2.1% against the Q1 profile of <2.3%.
- 2. Additional KPI improvements throughout Q1 across several scorecards include the number of additional service users removed from waiting lists due to community waiting list initiatives (Reform of Scheduled Care).
- 3. Examples of reported progress in deliverables include: (i) the development of dashboards that can be produced at Community Specialist Teams, CHO and National level, and flexed to reflect RHAs (Reform of Primary Care, Community & ECC), (ii) publication of the Waiting List Action plan (Reform of Scheduled Care), and (iii) the first meeting of the Digital Health Strategy Steering group (eHealth).
- 4. Unscheduled Care pressures persist.
- 5. Within Reform of Disability Services, assessment of need is behind target in the: (i) number of assessments completed within 12 weeks, and (ii) number of children waiting for an assessment of need.
- 6. Delays in deliverables across two scorecards are due to delays in review/engagement processes including with DOH/DCEIDY (Reform of Home Support and Residential Services; Reform of Disability Services).
- Resourcing and global impacts such as construction inflation and restricted availability and/or delays are impacting on the delivery of critical care beds, community beds and the completion of primary care centres (Enhancing Bed Capacity and Capital Infrastructure).



1. Public Health (COVID -19 Test & Trace and Programme for Vaccination / Immunisation)

3

Change

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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 2023 Ambition Statement will not be substantially achieved

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%	90.0%									
	Actual		97.0%	97.0%	100.0%									
2. Percentage of test results communicated in 48 hours following swab	Target	75.0%	75.0%	75.0%	75.0%									
	Actual		91.0%	92.0%	92.0%									
3. Percentage of close contacts successfully contacted within 24 operational hours of contacts being collected	Target	90.0%	90.0%	90.0%	90.0%									
	Actual		97.0%	95.0%	100.0%									
4. Percentage of referrals meeting three-day target from test referral to completion of contact tracing	Target	90.0%	90.0%	90.0%	90.0%									
	Actual		95.0%	96.0%	96.0%									
5. COVID-19 vaccine uptake for priority Health Care Workers (No. of workers 282.1k)	Target	50.0%*	50.0%*	50.0%*	50.0%*									
	Actual		26.0%	27.0%	27.0%									
6. COVID-19 vaccine uptake for people 65 years and over including those in Long Term Residential Care Facilities	Target	75.0%*	75.0%*	75.0%*	75.0%*									
(727k)	Actual		47.0%	48.0%	51.0%									
7. COVID-19 vaccine uptake for immunocompromised >12 years (146k)	Target	50.0%*	50.0%*	50.0%*	50.0%*									
	Actual		14.0%	15.0%	17.0%									
8. Influenza vaccine uptake in HSE Health Care Workers (No. of workers 105.6k)	Target	75.0%*	75.0%*	75.0%*	75.0%*									
	Actual			40.1%	40.3%									
9. Influenza vaccine uptake for people 65 years and over (743k)	Target	75.0%*	75.0%*	75.0%*	75.0%*									
	Actual		76.0%	75.8%	75.8%									
10. Influenza vaccine uptake for children within approved age category (No. of children 1.1m)	Target	50.0%*	50.0%*	50.0%*	50.0%*									
	Actual		15.0%	15.4%	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	0									

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

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 Complete implementation of the Test and Trace Transition Strategy and supporting plan 	Sep-23	On Track	The Test and Trace function has fully implemented the transition to the clinical, public health and surveillance led model. The key changes were implemented on 30 March 2023
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) 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) model

Key issues impacting delivery of ambition

Mitigating actions to address key issues

1. Improving access for children's flu vaccine to increase uptake

1. Business case to consider the administration of the children's nasal flu vaccine directly in primary schools

2. Unscheduled Care (Emergency Department Performance)

1

Change

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): Significant concerns that the 2023 Ambition Statement will not be achieved. are not achievable within 2023 & will require multi-year capacity improvements to meet targets. The unscheduled care system remains under considerable pressure & is coping with continued levels of COVID-19 in hospital, Norovirus, & the additional pressures from the Wexford incident & International Protection migration. Acute & Community services are working intensively to mitigate any risks resulting from the overcrowding in emergency departments & are working with PMIU & National Planning on the 3 year USC plan in addition to implementing learning from the After Action Review. At present, over 50% of KPIs are not within 20% of target. It is anticipated that the rating of 1 will improve as the winter surges ease & mitigating actions start to take effect.

КРІ	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									<236
	Actual		352	326	378									
2. Percentage of all attendees at ED who are in ED <24 hours	Target	97.0%	97.0%	97.0%	97.0%									97.0%
	Actual		94.7%	95.0%	94.6%									
3. Percentage of all attendees aged 75 years and over at ED who are discharged or admitted within nine hours of		99.0%	99.0%	99.0%	99.0%									99.0%
registration	Actual		50.9%	52.0%	50.0%									
4. Percentage of all attendees aged 75 years and over at ED who are discharged or admitted within 24 hours of	Target	99.0%	99.0%	99.0%	99.0%									99.0%
registration	Actual		87.1%	89.0%	87.4%									
5. Number of beds subject to delayed transfers of care (reflects average monthly figure)	Target	<350	<350	<350	<350									<350
	Actual		556	570	599									
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%									80.0%
*Data not available YTD	Actual													
7. Percentage of emergency re-admissions for acute medical conditions to the same hospital within 30 days of	Target	⊲1.1%	⊲1.1%	⊲1.1%	⊲1.1%									⊲1.1%
discharge* *Data is two months in arrears	Actual		11.4%	11.8%										

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Development of a 3-Year Unscheduled Care Plan and Improvement	Jul-23	On Track	Ongoing planning process commenced by Integrated Operations in partnership with colleagues from Strategy and CCO to develop USC Improvement Programme. This process will be ongoing in 2023
Programme			
2. Actions from After Action Review	Jul-23	On Track	Ongoing process - actions to feed into development of 3-Year Unscheduled Care programme

1. Recruitment challenges in relation to retention of existing staff and recruitment of additional staff within EDs
2. Infection control requirements and respiratory illness (including COVID-19)
3. Increasing and sustained attendances and admissions due to the changing population demographic particularly in our older patient cohort
4. Capital funding requirements, construction challenges in relation to quality, increased programme of works, overall campus development plans

Mitigating actions to address key issues

1. Ongoing engagement with HR regarding recruitment of staff alongside ongoing national and international recruitment campaigns

2. IPC requirements will continue to be managed in line with guidelines and evolving situation in relation to viruses. Promotion of vaccination uptake

3. Targeted focus on patient flow process and DToC

4. Ongoing engagements with Department of Health, Estates, Acute and Community Operations in relation to exploring capacity options including modular builds and planning derogation

3. Reform of Primary Care, Community and ECC

3

Change

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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. The ECC Programme is progressing as planned with the 2023 focus on Performance Management - Activity , Impact & Outcomes. The collection of a suite of activity metrics, developed in conjunction with clinical leadership of the ECC Programme has commenced with a standard methodology & process for data collection & analysis. Dashboards have been developed & can be produced at CST, CHO & National level & can be flexed to reflect RHAs. These dashboards are facilitating analysis of service delivery & emerging trends over time.

КРІ	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	0.23m	0.35m									
2. Number of reviews carried out in General Practice in the Chronic Disease Management Treatment Programme,	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
reducing requirement for hospital/ED attendance	Actual		34,804	75,839	126,178									
3. Number of patient contacts by Chronic Disease Community Specialist Teams (across Respiratory, Cardiology,	Target	187,940	3,743	8,825	17,008	27,353	39,853	54,516	71,338	90,318	111,460	134,759	160,217	187,940
Diabetes & Smoking Cessation)	Actual		3,743	8,825	18,162									
4. Number of patient contacts by Older Persons Community Specialist Teams	Target	88,985	3,876	8,985	14,393	20,448	27,074	34,267	42,033	50,367	59,273	68,746	78,789	88,985
	Actual		3,876	8,985	15,621									
5. Percentage of new patients seen by Older Persons Community Specialist Teams on the same day or next day of	Target	10.0%	10.0%	10.0%	10.0%									
referal	Actual		6.0%	14.0%	13.0%									
6. Percentage of patients with a frailty score of 6-9 (moderate to severe frailty) seen by Older Persons Community	Target	55.0%	55.0%	55.0%	55.0%									
Specialist Teams	Actual		46.0%	42.0%	46.6%									
7. Number of Community Diagnostics services (X-ray, CT, MRI, DEXA, Natriuretic Peptide Test, ECHO, Spirometry)	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
delivered	Actual		35,518	68,850	109,511									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 Optimise recruitment of the remaining 1,000 frontline primary care staff and leadership roles for completion of the ECC Programme (2,227 of 3,500 on boarded in 2022) 	Dec-23	On Track	Governance by ECC steering group of collaborative recruitment process between HR & operations. 2,417 WTE on boarded and 224 at an advanced stage of recruitment (Total 2,641 WTE's, 75% 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		Procurement process proposed to close out end of July, with a design period to follow in August to September. Proposed solution implementation in end of September/early October to targeted cohorts of stakeholders across the programme
3. Capital Infrastructure Programme	Dec-23	On Track	Work remains ongoing to support Chief Officers and Local Teams to ensure appropriate accommodation for existing and new teams
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 work streams in areas such as physiology and candidate CNS's
2. Capital Infrastructure - adequate space and accommodation for the delivery of services by multidisciplinary teams	2. Detailed plan developed & framework agreed, establishing monthly engagement with CHOs, started in March. Allows for more accurate & timely reporting of approved proposals
3. Implementation of the Interim ICT Solution	3.Proposals being developed for interim solution to support rollout of the ECC Programme, while ICCMS is being developed. Healthlink has commenced national roll out
4. Performance Management - Activity, Impact & Outcomes move from structural metrics to activity, impact and outcome metrics	4. Collection of a suite of activity metrics, developed in conjunction with NCAGLs. Dashboards developed & shared with CHOs. Targets set following significant engagement with stakeholders.

4. Reform of Home Support and Residential Care for Older Persons

3

Change

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

													5	
КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	Мау	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	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%
staff use the standardised care needs assessment tool (interRAI)	Actual		1.7%	1.5%	1.6%									
2. Number of interRAICare Needs Facilitators in place	Target	128	0	0	0	0	0	42	63	84	106	128	128	128
	Actual		0	2	7									
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	5.20m									
4. Reduce the number of people waiting for home support services following home support needs assessment	Target	<6680	<6680	<6680	<6680									
undertaken by community staff (December 2022 n = 6,680)	Actual		6,369	6,244	6439									
5. Number of people in receipt of Home Support (excluding provision from Intensive Home Care Packages)	Target	55,910	55,910	55,910	55,910									
	Actual		56,272	56,781	56,980									
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	€149.96m									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Establish the National Home Support Scheme Office	Oct-23	On Track	Office site identified with Project Manager assigned and works progressing with expected occupation Q3 2023. Head of Service, 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		Draft detailed Service Specifications for Procurement of Home Support System completed including validation by CHO Home Support Services. Preparation of Market Sounding Process completed. Work ongoing with GOU to agree commencement of procurement Peer Review processes
3. Establish new framework arrangements and pricing for the provision of publicly funded home support services	May-23	Delayed	Stage 1 outcome complete & tenderers notified. Stage 2 under consideration. Engagement continues with provider rep bodies and DoH. Potential non-implementation by deadline of 1 May 2023
4. Finalise new operating model for public community-based residential care for submission to HSE Board	Sep-23	On Track	Work remains ongoing through the National Community Public Based Residential Care Steering Group and associated work streams. Remains on track and on target for delivery
5. Finalise reformed Day Service Strategy for submission to HSE Board	Sep-23	On Track	Remains on track for delivery of target date

Key issues impacting delivery of ambition

1. Recruitment and retention of key clinical grades across publicly funded home support services

2. Collaboration with union bodies and wider clinical teams across community settings

3.Buy in from service delivery system to implement interRAI across priority areas in the context of competing demands

4.HSE is awaiting commencement of DGOU Peer review process which will enable approval for procurement of Home Support Service System

Mitigating actions to address key issues
1. Ongoing engagement with National Community Operations, HR and DoH to address recruitment and retention challenges across Home Support Services
2.Ongoing support to National Community Operations in respect of engagements with union bodies
3.Ongoing work of interRAI implementation Group and communication with service delivery areas
4.HSE continues to progress detailed planning for procurement and delivery of future Home Support ICT System and is engaging with HSE OCID and DoH re the matter

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 (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved Change 3 2023 Annual KPI T/A Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Target 1. Percentage of patients waiting longer than 15 months for an outpatient appointment <21% <20% ⊲19% 14.0% 12.0% 11.0% ⊲0.0% Target ⊲0.0% 18.0% 17.0% 16.0% 15.0% 13.0% 21.0% 18.9% Actual 20.4% 2. Percentage of patients waiting longer than 9 months for an inpatient or daycase procedure 15.0% Target ⊲0.0% <24.1% <23% <22% 20.0% 19.0% 18.0% 16.0% 14.0% 12.0% 11.0% ⊲0.0% Actual 24.1% 25.0% 25.4% 3. Percentage of patients waiting longer than 9 months for a GIScope <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% Target Actual 6.0% 6.0% 5.80% 4. Percentage of routine outpatients scheduled in chronological order Target 85.0% 85.0% 85.0% 85.00% 85.0% 60.0% 60.9% 61.00% Actual 5. Percentage of routine inpatient and day case procedures scheduled in chronological order Target 85.0% 85.0% 85.0% 85.00% 85.0% Actual 75.0% 75.0% 75.00% 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 1.2.5 Actual 1:2.6 1:2.6 1:2.5 7. Number of additional service users removed from waiting lists due to community waiting list initiatives 11,026 523 1207 1985 2805 4496 5,707 6,855 8,031 9,122 10,163 11,026 Target 3638 Actual 587 1200 2045 8. Number of additional appointments and procedures delivered through insourcing and outsourcing waiting list 4.0k 8.0k 14.0k 41.2k 49.2k 57.5k 69.0k 88.0k 97.9k 97.9k 22.6k 31.6k 79.4k Target initiatives (OPD, IPDC, GI, Advanced Clinical Prioritisation) 4.8k Actual 11.0k 14.1k 9. Spend to date €14.00m €22.00m €29.00m €45.00m €51.00m €58.00m Target €90.00m €6.00m €36.00m €67.00m €75.00m €82.00m €90.00m €19.00m 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	Complete	A 2023 Waiting List Action Plan was published in March and the development of a Multi Annual Plan remains under consideration
 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 anangements have been implemented in ULHG and demonstrated significant improvement in the waiting list. A review of the pilot identified a need to progress eEnablers to support the scaling of this project. Engagement is underway to scale across gynaecology
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. A review of the pilot identified a need to progress eEnablers to support the scaling of this strategy including text reminders and partial booking
4. Progress the implementation of the seven prioritised care pathways and commence implementation of the remaining 29 pathways	Dec-23	On Track	Funding letters issued for prioritised care pathways. National implementation oversight group meet regularly. Implementation & activity reporting commenced. Recruitment for 104.66 WTEs commenced for prioritised pathways. Engagement webinars per specialty with frontline staff have been held.
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 live in CHI and ULHG with 180 patients enrolled to date. A plan is being developed to expedite the implementation of this project, including an initiative to triage review waiting lists
6. Expand the implementation of HPVP from 19 to 28 hospitals	Dec-23	On Track	New solution offered to voluntary hospitals to address data sharing concerns. Five outstanding hospitals are engaging & scoping the technical solution. Three of the voluntary hospitals still outstanding. Active change management process in place to ensure widespread participation of the platform
7. Implement the Theatre Transformation Programme to optimise theatre utilisation in four Hospital Groups	Dec-23	On Track	National Perioperative Patient Pathway Enhancement Programme Steering Group established (meeting quarterly). Phase 1 sites agreed for mobilisation: 1) Saolta University HG (UHG, RUH and SUH); 2) Dublin Midlands HG (SJH, MRHT, Reeves Day Surgery Centre)
8. Support each Hospital Group to complete an analysis of health system demand and capacity at hospital and specialty level	Dec-23	On Track	An approach has been agreed to progress a demand and capacity analysis, commencing with the analysis of the five most at risk outpatient specialties nationally. This will be taken forward in collaboration with all hospitals
9. Continue to develop five surgical hubs and open the first hub by December 2023	Dec-23	On Track	Site level assessments have been conducted and proposed sites have been identified within each of the selected locations. Design teams have been appointed for Mount Carmel and Merlin Park. A project plan, including timelines, and proposed workforce model have been progressed
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	Governance structures in place and work progressing to appoint design teams for the programme to develop an exemplary elective hospital design and thereafter site specific design. Work ongoing with the DoH to finalise site(s) selection for Dublin

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 2023 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.

КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Νον	Dec
1. CAMHS - percentage of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by	Target	78.0%	78.0%	78.0%	78.0%									
CAMHS Community Teams (December 2022 - 62.9%)	Actual		62.9%	62.4%	60.4%									
2. CAMHS - reduce the number of people (with an accepted referral /re-referral for CAMHS Community Teams) waiting	Target	<2599	<2599	<2599	<2599									
longer than 12 weeks to be seen (December 2022 n = $2,599$)	Actual		2,694	2,614	2,651									
3. CAMHS - percentage of urgent referrals to CAMHS Community Teams responded to within three working days	Target	90.0%	90.0%	90.0%	90.0%									
(December 2022 - 92.8%)	Actual		91.1%	91.8%	91.4%									
4. CAMHS - percentage of children admitted to CAMHS acute mental health units as a proportion of total admissions of	Target	85.0%	85.0%	85.0%	85.0%									
children to acute mental health units	Actual		93.8%	93.9%	94.7%									
5. Adult services - percentage of accepted referrals / re-referrals offered first appointment and seen within 12 week by	Target	75.0%	75.0%	75.0%	75.0%									
General Adult Community Mental Health Team (December 2022 - 70.8%)	Actual		70.0%	69.7%	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 - 91%)	Target	95.0%	95.0%	95.0%	95.0%									
weeks by Psychiatry of Later Life Contributing Mental freature learn (December 2022 - 5170)	Actual		88.5%	88.3%	88.6%									
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	€0.00m									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 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. Interviews for both AND and Clinical Lead will be complete by w/e 07/04/23 and appointments made by June 2023
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 Q2 2023. Remaining sites progressing recruitment of WTEs and preparing for implementation. Monitoring & Evaluation tender live on e-tenders, closing April
 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. Cafe partners confirmed in 2 pilot sites, 3 in progress. SOPs approved. MoC in development. M&E tender live on etenders. Pilot Site Learning network set up & 2 meetings held. Data working group established & 2 meetings held. Cafe branding in development
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	Recruitment of an additional 11 IPS Employment Specialists including two Homeless IPS posts Dublin Nth and Sth across agreed CMHTs as identified by the National OTs Oversight Group will commence in Q2 2023. IPS Data is now gathered quarterly with Q1 report due May 2023
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. A recruitment campaign for the national co-production is currently underway to be concluded in Q2. The Recovery Education Quarterly report for Q4 2022 will be published in Q2 2023 with participant data
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	In Q4 2022, 3559 people participated in NOSP's suicide prevention programmes and 127 people attended the Suicide Bereavement for Professional Workshop. In March 2023 a 10 person ASSIST Train the Trainer event was delivered at Templemore Training college

Key issues impacting delivery of ambition

Mitigating actions to address key issues

1. Recruitment challenges noted across CHO areas

1. CHO areas working closely with local HR to identify existing panels and progress required campaigns

2

Change

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 for Holding Services; (ii) the implementation of key national strategies; (iii) progression of the sustainability impact assessment process; (v) expansion of the neuro-rehabilitation project; and (v) implementation of the 'Action Plan for Disability Services 2023-2026'.

Rating and Overview (2): Concerns that the 2023 Ambition Statement will only be partially achieved on the basis that the High Court Judgement in relation to the Assessment of Need for children is impacting progress on KPIs 1 and 2. A final draft of the clinical guidance for child AON was approved by the CCO's forum on 7 July 2022 and remains with the DCEDIY legal department for final sign off. Upon approval, implementation will commence supported by the secured C11m for the waiting list initiative.

КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	Мау	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 -	Target	100.0%			100.0%			100.0%			100.0%			100.0%
24.5%)	Actual				19.0%									
2. Reduce by 50% the number of children waiting for an Assessment of Need (December 2022 $n = 4,613$)	Target	2,306			4,613			4,306			3,306			2,306
*overdue for completion under the Disability Act 2005	Actual				5,484									
 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) 	Target	<13500	<13500	<13500	<13500									<13500
* Data is consolidated and does not categorise if the data is related to Disability Services, Primary Care Services or both	Actual		14,520	14,096										
 Reduce the number of psychology patients*0 - 17yrs, 11mths on the treatment waiting list waiting to be seen (December 2022 n = 12.000) 	Target	⊲2000	⊲2000	<12000	⊲2000									⊲2000
* Data is consolidated and does not categorise if the data is related to Disability Services, Primary Care Services or both	Actual		13,540	14,044										
5. Number of people living in congregated settings (currently 1,600 people) supported to transition to homes in the	Target	73	4	10	16	21	30	37	41	50	56	63	68	73
community vs. target (35 people transitioned in 2022)	Actual		3	6	13									
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	6	6									
7. Progress the recruitment of 136 senior clinicians to facilitate children's disability network teams to restore on-site	Target	136	0	0	0	0	0	64	76	88	100	112	124	136
health and social care supports to 104 special schools, as required by Government	Actual		0	0	0									
8. Reduce the average vacancy rate across the 91 Children's Disability Network Teams (December 2022 - 34%)	Target	34.0%												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	€0.53m	€1.54m									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 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	Feedback from the P& P Committee, DOH and Minister, Heads of Service and 11 Lead Agencies on the current Roadmap draft is being reviewed with a final version to issue to the Board the week of 11 April
 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	Significant work progressed with S38 org on Org Structure, Workforce, Finance, Estates, ICT and model of service. SAT process underway to inform final report by June 23. Good engagement with S39 org and draft MOU agreed, work will commence June 23
3. Community Neuro-Rehabilitation Teams: Establish four Community Neuro Rehabilitation Teams (CHOs 2,4,6 & 7)	Dec-23	On Track	Funding for CHOs 2 & 4 has been approved (2023) for two larger teams. Interim model of governance has been proposed by CHO 6 (pending steering committee sign off), allowing for progression to recruitment. Progress with stakeholders to agree governance for CHO's 2, 4 & 7 continues
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	Steering Group was commissioned in February and a draft project plan was presented at the March meeting for consideration. Work continues in April with the NDA to discuss the outcomes measurement process, and with Inclusion Ireland to agree an effective engagement model with service users
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	37 Family Forums have been established and have met at least once with a further 46 in train to commence in Q2 1 of 9 Family Representatives Groups has been established 3 family reps participate on the National CDNT Steering Group following a national Expression of Interest process in Q3 2022
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	The draft action plan remains with DCEDIY for ministerial sign off. On sign off of the Action Plan, the revenue and capital requirements will be considered in the context of the Estimates process for 2024
 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	On Track	The formal process for setting KPIs has commenced, engaging all disability services (Sustainability and Stability, Change and Innovation, and Operations). A working group has been identified to progress the review of the current suite of Disability KPIs, for completion in early Q3

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

8. Prevention and Early Intervention

2

Change

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 (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. Between 50% and 80% of KPIs and deliverables are on track/ within target. Mitigations are in place for risks or issues.

КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Νον	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				50.3%									
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				949									
3. Percentage of problem alcohol users (under 18 years) for whom treatment has commenced within one week followin	9 Target	100.0%			100.0%			100.0%			100.0%			100.0%
assessment	Actual				100.0%									
4. Number of people in the Traveller community who received information on or participated in positive mental health	Target	3,735			933			1,866			2,799			3,735
initiatives	Actual				2,902									
5. Number of staff who completed the eLearning Intercultural Awareness programme.	Target	3,000			750			1,500			2,250			3,000
	Actual				1,372									
6. Number of staff who completed the eLearning Introduction to Ethnic Equality Monitoring	Target	800			200			400			600			800
	Actual				60									

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	All HSE staff (46/46) in place for SHC area based team. All services including smoking cessation, HFME, social prescribing and parenting operationalised. 2023 Q1 data returned. 13/19 Community Food and Nutrition workers recruited
 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	Qualitative research with service users: recruitment & interviews commenced. Tender evaluation complete and contracting in progress for Exercise Professional training. Regular engagement with eHealth team to progress procurement for digital platform to support the pathway
 Scope and develop a digital intervention to support reduced alcohol consumption by the general population using professional and community online support 	Sep-23	Delayed	Planned adaptation of Australian-based app no longer viable. Further scoping of other international evidence-based digital interventions continues
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	Form A1 GVIII Ops Lead x 2 submitted to WFP. Priority recruitment: CHO 7 - two are at pre-employment and one at interview. CHO 5 - two are in post and two awaiting advertisement
5. Establish baseline information on HSE data systems that record ethnicity data in line with Ethnic Equality Monitoring	Dec-23	On Track	Webinar to launch new training module & promote implementation of EEM held 8 Mar with 100 attending. Of the 129 national health & social care data collections undertaken for inclusion of equity stratifiers in HSE datasets (HIQA catalogue), only 9 HSE/HPSC data sets collect ethnicity

Key issues impacting delivery of ambition

1. Recruitment environment continues to be challenging and impacting on timelines for children & young people weight mgt services

2. Release of staff to complete Making Every Contact Count eLearning remains challenging and impacted by system wide pressures in Q1

3. Lower uptake of training in Q1 than anticipated

Mitigating actions to address key issues

1. CHO's engaging with local HR & NRS to strengthen recruitment and monitor progress through pre-employment

2. Dissemination of APA research recommendations " Making MECC Work, Enhancing the implementation of the National. Programme in Ireland" and development of implementation plan to address same

3. Further promotion of 30 minute HSEland module with staff through HSE broadcast and additional communication through National Social Inclusion Office networks

9. Enhancing Bed Capacity

2

Change

→

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 the 446 Community Beds.

Rating and Overview (2): Concerns that the 2023 Ambition Statement will only be partially achieved on the basis that 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 PC requirements may present access challenges to acute sites to complete required works. Challenges in relation to retention of existing staff and recruitment of additional staff to open beds. Re-profiling of 19 beds in the community due to recruitment challenges. Beds expected to come on stream in July 2023

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	0									
2. Acute Bed additions	Target	209	0	0	0	10	10	10	77	77	173	173	173	209
	Actual		3	0	5									
3. Community Bed (including rehabilitation beds) additions	Target	53	15	15	36	46	46	46	46	46	46	46	46	53
	Actual		15	15	17									
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
1. Delivery of beds and WTEs as per profile (from 01/03/2023)	Dec-23		Acute: +2 NRH: Reflected in total capacity March 2023 data returns; +3 Letterkenny: Delivered in Jan with late notification to Acute Operations Critical care: CUH - challenges in recruitment of staff. CUH beds reprofiled 3 ICU beds in Q3 (Sept) & 2 ICU beds in Q4 (Dec) 2023

1. Increased timeframes to complete the capital programme of works including supply of materials and equipment has delayed the initial expected completion dates

2. Capital funding requirements, construction challenges in relation to quality, increased programme of works, overall campus development plans

3. Recruitment challenges in relation to retention of existing staff and recruitment of additional staff to open beds

4. Infection control requirements & access challenges to acute areas to undertake the work

	Mitigating actions to address key issues
1. Ongoing engag	jements with estates re: same
2. Ongoing engag planning derogati	ements with DoH, Estates, Acute and Community Operations in relation to exploring capacity options including modular builds and on
3. Ongoing engag	ement with HR regarding recruitment of staff alongside ongoing national and international recruitment campaigns
4. IPC requirement winter period	ts will continue to be managed in line with guidelines and evolving situation in relation to COVID-19 and seasonal viruses during the

1.

10. Quality and Patient Safety

Change

3

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

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КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Νον	Dec
1. Rate of new cases of hospital acquired staphylococcus aureus bloodstream infection (SA BSI) per 10,000 bed days	Target	⊲0.8	⊲0.8	⊲0.8	⊲0.8									
used	Actual		0.6	0.9	0.8									
2. National Incident Management System: Percentage of reviews completed within 125 days of category one incidents	Target	70.0%	70.0%	70.0%	70.0%									
from the date the service was notified of the incident	Actual		48.0%	48.0%	47.0%									
3. Percentage of surgical re-admissions to the same hospital within 30 days of discharge	Target	<2.0%	<2.0%	<2.0%	<2.0%									
(Data two months in arrears)	Actual		1.7%	1.4%	1.4%									
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%
(Data one quarter in arrears)	Actual													
5. Rate of medication incidents as reported to National Incident Management System per 1,000 beds (aim to increase	Target	>3	>3	>3	>3									
reporting) (Data three months in arrears)	Actual		2.5											

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 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		Launched 17 Jan. Published Jan - PSS on Open Disclosure with Vulnerable persons / Patient Safety Digest (PSD) by 2 / HSE National Patient Safety Alert (disseminated 09/22) previously developed by Patient Stories. Plan for Feb-PSS on risk of smoking while using our Health Services Plan March PSD
2. Co-design and develop a National QPS Competency Framework	Dec-23	On Track	Three stakeholder engagement sessions were held with 104 participants. 49 people have expressed an interest in being part of the co-design process. Scoping review of existing resources is ongoing and establishment of the co-design and advisory groups is in progress
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	Procurement (mini competition) published 16 March. Submissions due 24 April. Anticipated start date June

1.

Key issues impacting delivery of ambition

Mitigating actions to address key issues

11. Patient and Service User Partnership

Ambition Statement 2023: to continue strengthening 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 (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved													3	Change
КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	Мау	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	14									
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
			13	13	13									
3. Number of staff that have completed the e-learning programme on assisted decision-making (population = circa	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
156k)	Actual		0	0	1,105									
4. Number of staff that have completed the e-learning programme on HSE National Consent Policy (population = circa	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
156k)	Actual		7,491	8,286	9,115									
. Percentage of complaints to HSE investigated within 30 working days of being acknowledged by a Complaints		75.0%			75.0%			75.0%			75.0%			75.0%
Officer* *Data available 25/05/23	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
 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 launched early March-promoted via info sessions & HSE News. Memo detailing resources issued from COO & CCO. Two webinars hosted in March-over 2000 registering for each. Learning needs survey & mentorship programme under development. CHO1 ADM event-over 100 people in attendance
2. Develop and commence the implementation plan for the HSE Patient Engagement Roadmap	Apr-23	On Track	Implementation Working Group established with membership from patient reps, patient advocacy groups and HSE staff. Group has Chair and Co-chair from patient reps to ensure equal partnership approach. Meetings held monthly, face to face. Work will be aligned with the HSE Change Guide
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 meetings 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 services 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. Commencement date set for 26 June 2023

Key issues impacting delivery of ambition

1. E-learning on ADM and consent is not mandatory in the HSE

2. Await appointment of ADM posts in CHO areas and HG to support roll-out of the Act in local areas

3. Await appointment of AND to ensure appropriate leadership and governance of the working group is in place and that the Roadmap is accepted across the system as a guide to partnering with patients

Mitigating actions to address key issues

1. Work has been undertaken looking at whether there are grounds to make the ADM training mandatory

2. Working with CHO areas and HG in relation to establishing ADM committees and putting designated leads in place

3. AND start date agreed. Working group continue to work on developing Implementation plan

12. Recruitment and Retention

3

Change

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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): Some concerns that the 2023 Ambition Statement will not be substantially achieved on the basis that three KPIs are not within 20% target and one deliverable is delayed. Five out of the six staff categories are ahead of the WTE targets for March with 70% of KPIs within or exceeding the 10% target delivery. The Annual Turnover Rate is below quarter one profile at 2.1%

													4	
КРІ	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	12.5									
	Actual		14.5	16.3	16.7									
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	2,092									
3. Medical & Dental Net Change WTE	Target	500	-28	-29	52	88	95	80	184	134	315	435	459	500
	Actual		-67	-35	108									
4. Nursing & Midwifery Net Change WTE	Target	1,950	246	673	842	99 6	1,082	1,064	1,189	1,093	1,069	1,217	1,788	1,950
	Actual		328	787	867									
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	229									
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	741									
7. General Support Net Change WTE	Target	100	32	25	43	66	63	106	149	159	101	68	92	100
	Actual		55	63	60									
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	87									
9. Annual Turnover Rate	Target	⊲10.0%			<2.3%			<2.3%			<2.7%			<2.7%
	Actual				2.1%									
10. Staff Absence Rate	Target	≤4.0%	⊴4.0%	≤4.0%	≤4.0%									
	Actual		5.5%	4.8%	4.9%									

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	Feb-23
2. Commencement of the mobilisation of the Resourcing Strategy actions	Mar-23	On Track	Action owners 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	Delayed	Work continuing on Phase 1 HSE Career Hub (formally referred to Talent Pool System). Expected 'Go Live' Date of 17 April with a wider external launch to follow
 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 the recruitment process
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
 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
8. Develop reporting of reasons for staff turnover and integrate into quarterly turnover reporting	Dec-23	On Track	Minimum data set has been agreed with progress on the technical build requirements applications

Key issues impacting delivery of ambition

1. Impact of reduced labour supply

2. Reopening of international borders impacting on staff turnover

3. Capacity to implement development changes across multiple systems to capture turnover reasons

Mitigating actions to address key issues

1. Offer of employment to all graduating nurses, midwives and HSCPs currently in 4th year, following interview process

2. Increased international recruitment of nurses, midwives and HSCPs

3. Competitive international relocation package launched to increase candidate pool

4. Partnering with National HR and local services to identify key supports to implement turnover reasons across multiple systems

13. Finance and Procurement

3

Change

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.

КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Νον	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%	+/- 0.5%									
	Actual		2.9%	3.5%	3.6%									
2. COVID19 Sanction v Spend (Compliance - as for 2022 HSE to formally seek sanction via CEO to Sec Gen in advance	Target	<2.5%	<2.5%	<2.5%	<2.5%									
of any excess of costs over existing sanction)	Actual		90.0%	77.2%	70.3%									
3. Procurement Spend Under Management (spend in 2022 was 68%)	Target	75.0%			61.5%			68.0%			73.5%			75.0%
	Actual				65.3%									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Deliver JFMS first go live	Jul-23	On Track	System Integration Testing (SIT) – the first of two SIT cycles commenced at the beginning of March as planned. The IFMS Data Migration team met the SIT 1 entry criteria of 70% data load achieved. SIT 1 has identified no major defects to date. SIT 2 is planned to commence on 3 April 2023
 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	The ABF Implementation plan 2021 to 2023 comprises 35 actions under the 4 objectives outlined. At the end of 2022, 25 out of the 35 actions were completed. Of the remaining 10 actions 3 have been completed at end of March 2023 and the remainder are on track for completion by end December 2023
 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	A comprehensive controls report was published in Q4, 2022 for all Divisions / HGs and CHOs using a controls repository built with data from IA, C&AG and CARP reports from 2020 onwards. Tender has now been completed to further develop the repository to an online format enabling direct user access
 Agree SLA with DoH/DPER on enhanced reporting and monitoring arrangements 	Jun-23	On Track	Discussions are on-going between HSE & DoH to agree reporting metrics and timelines
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	Complete	Report produced and presented at ARC March 23
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 on-going

Key issues impacting delivery of ambition

1. NSP 2023 details a number of financial risks and issues of up to 10.2% (or €2.2bn) that may arise in 2023

Mitigating actions to address key issues

1. Financial Mgt Framework that builds on Financial Chap of NSP & significant int & ext engagement incl DOH & DPER re agreed areas of expenditure management incl COVID Hosp & Community Responses

14. eHealth

5

Change

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 (5): Strong assurance that the 2023 Ambition Statement will be fully achieved on the basis of strong progress on plan: 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 is live on 3 sites; Community site IPMS solution commenced with vendor engagement underway; Cyber Transformation initiatives are ongoing, with re-assessment of cyber maturity underway; digital cloud based collaboration delivery ahead of target for both HealthJRL and Office 365

КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
I. 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	€22.95m									
2. Percentage of eHealth ICT Capital spend on Community programmes	Target	5.1%	5.1%	5.1%	5.1%									
	Actual		8.6%	8.0%	6.0%									
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	69									
I. Delivery of 90% of capital programmes on track (RAG status Green or Amber)	Target	90.0%	90.0%	90.0%	90.0%									
	Actual		100.0%	100.0%	100.0%									
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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	Strategy Steering Group had 1st meeting 23 Mar, co-chaired by CTTO & COO Stakeholder consultation is complete; programme now in the 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	Solution set up is completed Testing, Verification & Validation almost complete End User Training stage commencing
3. Deliver GP Laboratory eOrdering solution to 4 pilot sites - Galway (GUH), Waterford (UHW), Navan (OLHN), Beaumont	Sep-23	On Track	Technical engagement with the labs and their vendors is ongoing Negotiation with GP practice vendors ongoing on programme of work and delivery timelines
4. Rollout Children's Disabilities Network Teams Information Management System to 91 teams	Dec-23	On Track	Three of 91 teams have gone live to date
5. Delivery and Go-live of IPMS and Swiftqueue on 2 Community sites	Jun-23	On Track	Pilot underway;-Scoping and As-Is and To-Be process complete Vendor engagement continues
6. Deliver Cyber Transformation programme (2023) for the HSE ICT estate	Dec-23	On Track	Extended the contracts of 2 providers (Mandiant and Trellix) from 03/23 to 12/23 Commenced a reassessment of HSE cyber maturity at the request of Board T&T Committee; ETA 06/23

Key issues impacting delivery of ambition

Mitigating actions to address key issues

1. None

15. Capital Infrastructure

2

Change

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 (2): Concerns that the 2023 Ambition Statement will only be partially achieved. Actions to progress the Capital and Estates Strategy are in progress. Capital Plan 2023 progressing. Expenditure in Q1, 2023 is behind profile and related primarily to the New Children's Hospital which is showing a variance of €17m to end March. Remainder of Capital Plan expenditure is within profile. Progress on completion of primary care centres and community beds is behind profile due to contractor supply chain and resource issues, but is expected to improve in Q2. Balance of profiled acute beds due in Q1 are scheduled to be delivered in Q2, 2023 also.

КРІ	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	€98.26m									
2. New primary care centres completed	Target	9			2			5			8			9
	Actual				0									
3. New critical care bed capacity completed	Target	16			0			16						
	Actual				0									
4. New (162 beds) and replacement (99 beds) acute bed capacity	Target	261			36			193			249			261
	Actual				18									
5. New (zero beds) and replacement (500 beds) community bed capacity	Target	500			130			266			332			500
	Actual				0									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 Take forward the implementation of the Capital and Estates strategy to include: establishing governance structures and procuring external subject matter experts developing strategic investment planning approaches developing strategic investment planning approaches developing strategic investment planning approaches implementing the estate data-set to support evidence-based capital decisions developing standardised, programmatic approaches to delivery of the capital plan mplementing digital technology in areas such as design, delivery and operation of the estate model of the capital and Estates Workforce Plan This is an ongoing process and deliverables will be refined further as process advances 	Dec-23	On Track	Process of procuring and appointing subject matter experts complete. Work-stream 5 of Implementation Plan in progress. Preparation for commencing other work-streams is underway
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	Development and preparation of tender documents is continuing while approval of the draft final business case is awaited from the DoH/Government
 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	Equipment replacement requirements in progress and on target against Capital Plan allocation. Review of Equipment Replacement Report has commenced
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	Provision of 16 additional critical care beds on Mater campus on schedule for delivery in Q2 2023. Projects in phase 2 are advancing in line with approvals

Key issues impacting delivery of ambition

1. Approval of the draft final business case for the NMH remains under consideration by the DoH/Government. Until approval received, progress to tender for construction cannot be achieved

2. Resourcing remains a key challenge for Capital and Estates in the delivery of the Capital Plan

3. Challenges associated with global impacts such as construction inflation, restricted availability and/or delays with materials due to Brexit or the war in Ukraine remain key to ability to deliver

Mitigating actions to address key issues 1. Continuous engagement with DoH colleagues on progress of approval

2. Development of Workforce Plan continuing. Approval to hire key technical staff and progress underway at end Q1

3. Continued market engagement to enable project delivery mechanisms

16. Communications

3

Change

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

КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	Мау	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	0.45m									
2. Increase public, partner and patient access to quality health information through visits to HSE.ie sites (15% increase	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
in 2023)	Actual		6.20m	11.50m	14.67m									6.20m
3. Improve engagement between HSE and our staff through internal comms channels: interactions vis internal comms	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
channels in 2023	Actual		0.28m	0.52m	0.86m									
4. Increase public understanding of HSE work via proactive news generation: national projects receiving coverage (two	Target	108	8	18	26	36	44	54	64	72	80	88	98	108
per week) in 2023	Actual		9	19	32									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 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 is progressing, March focus was on identifying the content and functionality needs of both national and regional services
 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	Delayed	Project is delayed while technical issues are being reviewed by the eHealth team
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	Work well advanced on this programme, preparing staff, public and partner information to issue when RHA plan is published end April, and reviewing naming research

Key issues impacting delivery of ambition

1. Public and staff website traffic is lower than our 2023 projections, likely due to ongoing reduction in COVID content visits

Mitigating actions to address key issues
1.

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 (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. Three of the nine deliverables are delayed based on target completion dates. Change 3 2023 Annual KPI T/A Jan Feb Jul Mar Apr May Jun Aug Sep Oct Nov Dec Target N/A Target Actual

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 Finalise and agree RHA implementation Plan, to include initial Target Operating Model for January 2024 	Apr-23	Delayed	Target date revised from March 2023 to April 2023 following detailed consideration by CEO. RHA Implementation Plan is being refined and finalised for submission to Government
2. Commence recruitment of the six RHA CEOs following DOH/DPER approval (April 2023) with offers issued by September 2023	Sep-23	On Track	Dialogue with DoH ongoing to provide requirements to secure approval with DPER
3. Commence recruitment of RHA Senior Management Teams following DOH/DPER approval	Sep-23	On Track	Dependent on securing approval for RHA CEOs and close out of detailed design/organisational structures. Begin recruitment following appointment of RHA CEOs. Appointments to take place early to mid 2024
 Finalise the Integrated Service Delivery Model with associated structures within RHAs aligned to national frameworks 	Jun-23	Delayed	Target date revised from April 2023 to June 2023 following detailed consideration by CEO. Schedule of engagements with key stakeholders in planning to provide inputs to detailed design. Optimum model to be agreed via ISD working group
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, HSE Centre and RHAs. Planning in progress for the development of national functions/structures
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	Engagement has commenced with service delivery system to assess detailed impact/risk on service continuity at CHO and HG level
 Establish arrangements, in partnership with DOH to progress the development of: (i) Population Based Resource Allocation; and (ii) Health Needs Assessments 	Apr-23	Delayed	Target date revised from March 2023 to April 2023 following detailed consideration by CEO. DoH currently establishing Population Based Resource Allocation working group. Terms of reference under development
 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 March. HSE RHA Programme management team fully in place
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

1. Need to ensure full alignment with other key policies and developments

2. Scale of change programme and deliverables to ensure safe transition to RHAs

3. Need to engage constructively on an ongoing basis with a wide range of stakeholders

4. Securing approval from DoH/DPER for RHA CEO posts in line with timelines

Mitigating actions to address key issues
1. Alignment with Slaintecare and HSE Corporate Plan
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 2024
3. Ongoing engagements aligned to the stakeholder engagement plan to inform the RHA programme of work
4. Ongoing dialogue re requirements to secure approval of posts

18. Climate Action

3

Change

Ambition Statement 2023: to take forward the implementation of the HSE Climate Action Strategy 2022-2050 to include: (i) developing frameworks for implementation across six 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 (3): Some concerns that the 2023 Ambition Statement will not be substantially achieved. Key deliverables within the Infrastructure Decarbonisation Roadmap are in progress and largely on target

КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	Мау	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				€1.25m									
2. Large-scale deep energy retrofit pathfinder projects spend	Target	€7.50m			€1.00m			€2.50m			€4.00m			€7.50m
	Actual				€0.19m									
3. Number of utility meters installed at pilot locations to enhance metering of HSE data	Target	20			0			0			5			20
	Actual				0									
4. Expand from 111 to 140 the number of energy management teams in place in the HSE and S38 and S39	Target	140			115			120			130			140
organisations	Actual				112									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
 Progress implementation of the HSE Climate Action Strategy through the development of eight climate action work streams, 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	Delayed	Delayed commencing works predominately due to resourcing issues and finalisation of implementation resource. Work ongoing to: 1)Establish 'best practice' papers for all work programmes of the strategy 2)establish structures for implementation
 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	Preparation of draft design report in progress by technical advisors and design teams. Report under review and associated spend not utilised for payment of design teams and technical advisors
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	National Strategic Assessment report will be commenced when draft design report is completed (Deliverable #2)
 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	Collation of water consumption data from significant user sites continues. Verification of data in consultation with Uisce Eireann is ongoing
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		On Track	One programme completed in Q1 2023. Remaining programmes are on track for delivery

1.

Key issues impacting delivery of ambition

1. TBC pending update on KPI's

Mitigating actions to address key issues

19. Women's Health

3

Change

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

													U	
КРІ	T/A	2023 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Percentage of general gynaecology referrals streamed to ambulatory gynaecology unit/setting	Target	50.0%	50.0%	50.0%	50.0%									50.0%
	Actual		29.0%	42.5%	43.6%									
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	126									
3. Number of supra-regional gynae-oncology MDTs to be established and operational	Target	4			4									4
	Actual				2									
4. Percentage of patients (>14 years) seen by a forensic clinical examiner within 3 hours of a request to a Sexual	Target	90.0%			90.0%			90.0%			90.0%			90.0%
Assault Treatment Unit for a forensic clinical examination	Actual		91.2%	92.0%	91.0%									
5. Number of reimbursement claims for unlicensed Cariban dispensed (against code 66892) under Community Drug	Target	N/A												
Schemes	Actual		191	405	638									
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	€0.12m									
7. Number of unique individuals who have received benefits under the Free Contraception Scheme.	Target	N/A												
	Actual		55,809	52,699	56,707									
8. Percentage Breast Check screening uptake rate*	Target	70.0%			70.0%									70.0%
(EOY 2022 75.5%) *Reported quarterly in arrears	Actual													

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	This is being progressed under the leadership of NWIHP. It is possible the target completion date will be delayed by 1-2 months as a result of a consultant on-boarding delay in one regional hub. An update will be provided at the next reporting period
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 (NF), and (ii) complete operational readiness programme to enable commencement of publicly funded, publicly provided NF	Dec-23	On Track	This is being progressed under the leadership of NWIHP. Site visit to the NHS AHR facility undertaken. National Clinical Lead appointed. National tender being developed
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 under the leadership of NWIHP for 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 under the leadership of NWIHP for 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 first expanded Cervical Cancer Elimination Strategic Advisory Group met on 3 March 2023 and welcomed new partners from 221+ and Marie Keating on board. The modelling is progressing with initial reports expected in April 2023 and final outputs expected in August 2023

Key issues impacting delivery of ambition

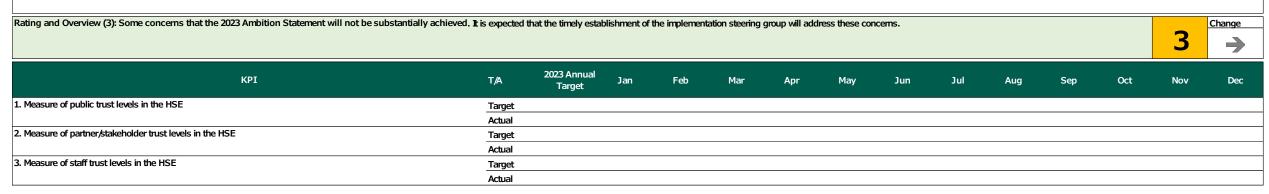
Mitigating actions to address key issues

1. Potential delay as a result of a consultant on board delay in one regional hub

1. Consultant appointment being closed out with HR. Start date being clarified , but later than anticipated based on appointees availability

20. Trust and Confidence

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.



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	No further update - work continues 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	Initiation dependant on establishment of the implementation steering group
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		Not Started	Initiation dependant on establishment of the implementation steering group

Key issues impacting delivery of ambition

1. None

Mitigating actions to address key issues
1. None

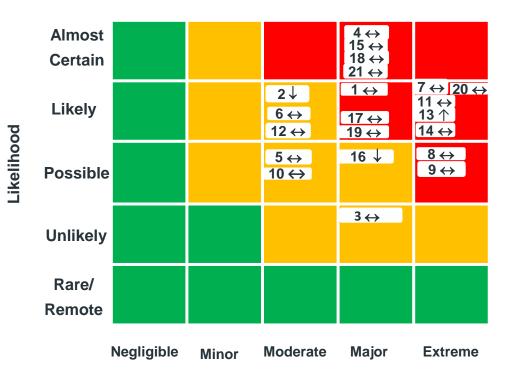
Appendix 1. Operational Services Report -redacted Pages 26 - 34

18. Risk Management

ISE Board Strategic S	corecard	10.1(15r	Manayement		
Overview: There are curre	ently 21 risks on the CRR. The current	risk ratings of the risks, per the Q1 2023	CRR report, are 14 Red & 7 Amber.		
Corporate Risk RAG Summ	nary				
RAG	Quarter 1, 2022	Quarter 2, 2022	Quarter 3, 2022	Quarter 4, 2022	Quarter 1, 2023
Red	7	11	12	16	14
Amber	10	8	7	5	7
Green	0	0	0	0	0
Corporate Risk Regist	ter [CRR] Update				
¹ Corporate Risks Q1 2023		Review [CRR] report is due to be co Red & 6 Amber residual risk rating	•	ting on the 25 April, 2023. There a	are currently 21 risks, & at the
	 CRR 002 Future trajectory CRR 013 Internal controls increased. CRR 016 Workforce & Rec 	g between Q1 2023 & Q4 2022 are of COVID rating reduced to 12 from & financial management increase cruitment reduced to 12 from 16, as	m 16, reflecting the reduction in inf ed to 20 from 15, due to the knowr s NSP targets are expected to be a	n budgetary risks in 2023. Therefo	bre the likelihood rating has been
² Risk Programme Priorities	Enterprise Risk Management March.	t Policy: The HSE's Enterprise Ris	k Management [ERM] Policy & Pro	ocedures 2023 was adopted by th	ne Board at its meeting on the 31
	3	the 25 April 2023 & will be live stre be four in-person events in Dublin,			1 0
³ Full Review of the HSE's Principal Risks	to determine whether the risks are set out in our revised Enter	each risk on the CRR by applying as currently expressed, are the rea <i>prise Risk Management Policy & P</i> & ARC for consideration & approva	al risks to the HSE achieving its str Procedures 2023. Once this review	ategic objectives & do they comp v has been completed, the CRO v	ly with standards for risk which
⁴ Board Approval of the HSE's Principal Risks		the Governance of State Bodies it priate'. The HSE Board on an annu		• • •	

Residual rating changes Q4 2022 to Q1 2023

↑ Increasing \downarrow Decreasing \leftrightarrow No change • New/ Emerging



	Risk Title	Risk Rating					
Risk ID			Residual rating [with		Risk		
-		controls]	01	Movemen t	Appetite		
CRR 001	Major Disruption to Clinical & Non Clinical Service Continuity	Q4 16	Q1 16	\leftrightarrow	Target =6</td		
CRR 002	Future trajectory of COVID	16	12	\downarrow	=6</td		
CRR 003	New pandemic outbreak [serious/high consequence] infectious disease [non-COVID]	8	\leftrightarrow	=6</td			
CRR 004	Access to care	20	20	\leftrightarrow	=6</td		
CRR 005	Inadequate & ageing infrastructure/ equipment	9	9	\leftrightarrow	<12		
CRR 006	Delivery of Major Capital Projects	12 12					
CRR 007	Anti-Microbial Resistance & Health Care Associated Infections	20	20	\leftrightarrow	=6</td		
CRR 008	Safety incidents leading to harm to patients	15	15	\leftrightarrow	=6</td		
CRR 009	Health, wellbeing, resilience & safety of staff	15	15	\leftrightarrow	<12		
CRR 010	Climate action	9	9	\leftrightarrow	=25</td		
CRR 011	Digital environment & cyber failure	20	20	\leftrightarrow	=6</td		
CRR 012	Delivering Sláintecare	12	12	\leftrightarrow	=25</td		
CRR 013	Internal controls & financial management	15	20	\uparrow	<12		
CRR 014	Sustainability of screening services	20	20	\leftrightarrow	=6</td		
CRR 015	Stability & Transformation of Disability Services	20	20	\leftrightarrow	=6</td		
CRR 016	Workforce & Recruitment	16	12	\downarrow	<12		
CRR 017	HSE Funded Agencies	16	16	\leftrightarrow	=6</td		
CRR 018	Assisted Decision Making Capacity Legislative Changes	20	20	\leftrightarrow	=6</td		
CRR 019	Displaced Ukrainian Population & International Protection Applicant Population	16	16	\leftrightarrow	=6</td		
CRR 020	Workplace Violence & Aggression	20	20	\leftrightarrow	<12		
CRR 021	Data Protection	20	20	\leftrightarrow	=6</td		

18. Risk Management

HSE | Board Strategic Scorecard Risk ratings [Inherent & Residual] as at Q1 2023

Risk Summary Table											
			Risk Appetite	2	Risk Rating						
Risk ID	Risk Title	Owner	Risk	Risk appetite theme	Inherent rating			Residual rating [Risk Appetite
			appetite		Likelihood	Impact	Rating	Likelihood	Impact	Rating	Target
CRR 001	Major Disruption to Clinical & Non Clinical	CO0	Averse	Operations & service	4	5	20	4	4	16	=6</td
	Service Continuity			disruption			20				
CRR 002	Future trajectory of COVID	CCO	Averse	Patient Safety	4	5	20	4	3	12	=6</td
CRR 003	New pandemic outbreak [serious/high	CCO	Averse	Patient Safety	2	5	10	2	4	8	=6</td
	consequence] infectious disease [non-COVID]										., .
CRR 004	Access to care	CO0	Averse	Operations & service	5	5	25	5	4	20	=6</td
				disruption							
CRR 005	Inadequate & ageing infrastructure/ equipment	CSO	Cautious	Property & Equipment	3	4	12	3	3	9	<12
CRR 006	Delivery of Major Capital Projects	CSO	Cautious	Property & Equipment	5	3	15	4	3	12	<12
CRR 007	Anti Microbial Resistance & Health Care	ССО	Averse	Patient Safety	5	5	25	4	5	20	=6</td
	Associated Infections		/ Werse	i dicite surcey	5	3			3		
CRR 008	Safety incidents leading to harm to patients	CO0	Averse	Patient Safety	4	5	20	3	5	15	=6</td
CRR 009	Health, wellbeing, resilience & safety of staff	NDHR	Cautious	People	5	5	25	3	5	15	<12
CRR 010	Climate action	CSO	Eager	Strategy	5	4	20	3	3	9	=25</td
CRR 011	Digital environment & cyber failure	CIO	Averse	Security	5	5	25	4	5	20	=6</td
CRR 012	Delivering Sláintecare	CSO	Eager	Strategy	4	4	16	4	3	12	=25</td
CRR 013	Internal controls & financial management	CFO	Cautious	Financial	4	5	20	4	5	20	<12
CRR 014	Sustainability of screening services	CCO	Averse	Patient Safety	5	5	25	4	5	20	=6</td
CRR 015	Stability & Transformation of Disability Services	CO0	Averse	Operations & service	5	5	25	5	4	20	=6</td
				disruption							
CRR 016	Workforce & Recruitment	NDHR	Cautious	People	4	5	20	3	4	12	<12
CRR 017	HSE Funded Agencies	CO0	Averse	Operations & service	4	5	20	4	4	16	=6</td
				disruption							·, · ·
CRR 018	Assisted Decision Making Capacity Legislative	CO0	Averse	Patient Safety	5	5	25	5	4	20	=6</td
	Changes										., .
CRR 019	Displaced Ukrainian Population & International	CO0	Averse	Operations & service	5	4	20	4	4	16	=6</td
	Protection Applicant Population			disruption							, .
CRR 020	Workplace Violence & Aggression	NDHR	Cautious	People	5	5	25	4	5	20	<12
CRR 021	Data Protection	CO0	Averse	Security	5	5	25	5	4	20	=6</td

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 & Patient Safety
	Capacity expansion	Acute, Community & Critical Care beds & ECC	2	Unscheduled Care (Emergency Department Performance)
		Programmes	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 & ECC
			4	Reform of Home Support & Residential Care for Older Persons
			6	Reform of Mental Health Services
			7	Reform of Disability Services
			8	Prevention & Early Intervention
		Embed IPC improvements	10	Quality & Patient Safety
		Social inclusion improvements	6	Reform of Mental Health Services
			8	Prevention & Early Intervention
	Wider health & wellbeing agenda	Health promotion, tackling obesity, prevention of chronic diseases, addiction services, targeted measures under the Healthy Communities Initiative	8	Prevention & Early Intervention
			16	Communications
			3	Reform of Primary Care, Community & ECC
	Research & Evidence	Use of data & research to inform patient care, reform & population health & wellbeing.	8	Prevention & Early Intervention
			19	Women's Health
	eHealth initiatives & digital solutions	Increased focus to enable better management & use of health information & access to that information by clinicians & patients	14	eHealth
			5	Reform of Scheduled Care
			3	Reform of Primary Care, Community & 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 /	Key workforce initiatives	Increase the no. of Advanced Nurse/Midwife Practitioner posts	12	Recruitment & Retention
governance programme		Continued development of home support services	4	Reform of Home Support & Residential Care for Older Persons
areas		Continue recruitment initiatives for therapy professionals	12	Recruitment & Retention
	Regional Health Areas (RHAs)	Undertake all work & 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	Reform of Primary Care, Community & ECC
			14	eHealth
	Public health capability	Expanding infectious disease surveillance	1	Public Health (COVID -19 Test & Trace & Programme for Vaccination/Immunisation)
		Growing our public health workforce	1	Public Health (COVID -19 Test & Trace & Programme for Vaccination/Immunisation)
			12	Recruitment & Retention
		Implementing new systems capabilities in relation to incident management;	10	Quality & Patient Safety
Capital Allocation 2023		Provision of €1,157 million in capital funding	15	Capital Infrastructure
			14	eHealth
Appendix 2: Specific	Womens Health	Expansion of free contraception	19	Women's Health
Conditionality attaching	Disabilities	Children Community-Based Disability Services	7	Reform of Disability Services
to the funding for individual service areas	Vaccination Programme	Transition towards a more sustainable model of Covid vaccination delivery	1	Public Health (COVID -19 Test & Trace & Programme for Vaccination / Immunisation)
	Testing, Tracing & 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 & Programme for Vaccination/Immunisation)
	Public Health Reform	Recruitment of Public Health Consultants	1	Public Health (COVID -19 Test & Trace & Programme for Vaccination/Immunisation)

