

**Health Service Executive** 

## National Service Plan 2016

Health Service Executive

Mental Health

Key Performance Indicator Metadata 2016

	Office Use	Key Performance Indicators Service Planning 2016	Reported	KPI Type	Healthy		KPIs	2015					KPIs	2016					
	Only KPI No. (source: target doc)	KPI Title	against NSP / DOP	Access/ Quality /Access Activity	Ireland / Corporate Plan / HI & CP	Report Frequency	2015 National Target / Expected Activity	2015 Projected outturn	2016 National Target / Expected Activity	Reported at National / CHO / HG Level	СНО1	СНО2	СНОЗ	СНО4	СНО5	СНО6	СНО7	СНО8	СНО9
	MH1	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by General Adult Community Mental Health Team	NSP	Quality		М	90%	92%	90%	СНО	90%	90%	90%	90%	90%	90%	90%	90%	90%
	MH2	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks / 3 months by General Adult Community Mental Health Team	NSP	Quality		м	75%	74%	75%	СНО	75%	75%	75%	75%	75%	75%	75%	75%	75%
	MH24	%. of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month	NSP	Access /Activity		М	18%	22%	18%	СНО	18%	18%	18%	18%	18%	18%	18%	18%	18%
	MH3	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by Psychiatry of Old Age Community Mental Health Teams	NSP	Quality		М	99%	98%	98%	СНО	98%	98%	98%	98%	98%	98%	98%	98%	98%
	MH4	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks / 3 months by Psychiatry of Old Age Community Mental Health Teams	NSP	Quality		М	95%	94%	95%	СНО	95%	95%	95%	95%	95%	95%	95%	95%	95%
	MH32	%. of new (including re-referred) Old Age Psychiatry Team cases offered appointment and DNA in the current month	NSP	Access /Activity		М	2%	3%	3%	СНО	3%	3%	3%	3%	3%	3%	3%	3%	3%
te	MH5	Admissions of children to Child and Adolescent Acute Inpatient Units as a % of the total number of admissions of children to mental health acute inpatient units	NSP	Quality		М	95%	71%	95%	National	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
NSP Suite	MH57	Percentage of Bed days used in HSE Child and Adolescent Acute Inpatient Units as a total of Bed days used by children in mental health acute inpatient units	NSP	Quality		М	New	New	95%	СНО	95%	95%	95%	95%	95%	95%	95%	95%	95%
	MH6	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by Child and Adolescent Community Mental Health Teams	NSP	Quality		М	78%	78%	78%	СНО	78%	78%	78%	78%	78%	78%	78%	78%	78%
	MH7	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks / 3 months by Child and Adolescent Community Mental Health Teams	NSP	Quality		М	72%	72%	72%	СНО	72%	72%	72%	72%	72%	72%	72%	72%	72%
	MH48	%. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month	NSP	Access /Activity		М	10%	12%	10%	сно	10%	10%	10%	10%	10%	10%	10%	10%	10%
	MH50	Total No. to be seen for a first appointment at the end of each month.	NSP	Access /Activity		М	2,632	2,509	2,449	СНО	394	53	289	465	123	446	251	237	191
	MH51	Total No. to be seen 0-3 months	NSP	Access /Activity		М	1,153	1,138	1,308	СНО	145	46	107	210	83	287	162	161	107
	MH56	Total No. on waiting list for a first appointment waiting > 3 months	NSP	Access /Activity		М	1,479	1,371	1,141	СНО	249	7	182	255	40	159	89	76	84
	MH55	Total No. on waiting list for a first appointment waiting > 12 months	NSP	Access /Activity		М	0	203	0	сно	0	0	0	0	0	0	0	0	0
	MH8	No. of admissions to adult acute inpatient units	DOP	Access /Activity		Q in arrears	12,947	12,726	12,726	СНО	1,212	1,472	980	2,202	1,332	1,074	1,386	1,548	1,520

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	MH9	Median length of stay	DOP	Access /Activity		Q in arrears	10	12.4	10	СНО	10	10	10	10	10	10	10	10	10
	MH10	Rate of admissions to adult acute inpatient units per 100,000 population in mental health catchment area	DOP	Access /Activity		Q in arrears	70.5	70.5	70.5	СНО	72.7	81.7	70.0	79.5	70.2	63.8	59.7	69.5	68.8
Adult Inpatient	MH11	First admission rates to adult acute units (that is, first ever admission), per 100,000 population in mental health catchment area	DOP	Access /Activity		Q in arrears	23.1	23.1	23.1	сно	18.9	31.8	18.6	25.3	25.7	19.1	21.9	22.4	23.0
ilt Inp	MH12	Acute re-admissions as % of admissions	DOP	Access /Activity		Q in arrears	67%	67%	67%	СНО	74%	63%	73%	68%	63%	70%	63%	68%	67%
Adu	MH13	Inpatient re-admission rates to adult acute units per 100,000 population in mental health catchment area	DOP	Access /Activity		Q in arrears	47.6	47.6	47.6	СНО	53.8	51.9	51.4	54.2	44.5	44.7	37.8	47.1	46.1
	MH14	No. of adult acute inpatient beds per 100,000 population in the mental health catchment area	DOP	Access /Activity		Q in arrears	21.6	21.6	21.6	СНО	23.2	22.2	20.8	25.4	18.8	18.3	21.5	18.8	23.6
	MH15	No. of adult involuntary admissions	DOP	Access /Activity		Q in arrears	1,714	1,724	1,724	сно	192	136	128	228	206		222	204	212
	MH16	Rate of adult involuntary admissions per 100,000 population in mental health catchment area	DOP	Access /Activity		Q in arrears	9.3	9.3	9.3	СНО	12.4	10.7	10.5	8.9	9.1		6.2	6.9	10.8
	MH18	Number of General Adult Community Mental Health Teams	DOP	Access		М	114	114	114	СНО	9	11	11	17	11	9	12	17	17
	MH19	Number of referrals (including re-referred)received by General Adult Community Mental Health Teams	DOP	Access /Activity		м	41,499	43,637	43,637	СНО	3,766	7,370	4,041	6,634	4,648	2,498	4,071	6,075	4,534
	MH20	Number of Referrals (including re-referred) accepted by General Adult Community Mental Health Teams	DOP	Access /Activity		м	39,424	39,122	41,448	СНО	3,578	6,999	3,837	6,300	4,417	2,372	3,866	5,771	4,308
	MH21	No. of new (including re-referred) General Adult Community Mental Health Team cases offered first appointment for the current month (seen and DNA below)	DOP	Access /Activity		м	46,846	37,624	41,810	СНО	4,177	5,412	3,268	6,851	4,701	2,223	5,656	5,036	4,486
	MH22	No. of new (including re-referred) General Adul Community Mental Health Team cases seen in the current month	DOP	Access /Activity		м	38,465	29,471	35,430	СНО	3,539	4,586	2,770	5,806	3,984	1,884	4,794	4,266	3,801
	MH23	No. of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month	DOP	Access /Activity		м	8,381	8,153	6,380	СНО	638	826	498	1,045	717	339	862	770	685
	MH24	%. of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month	DOP	Access /Activity		м	18%	22%	18%	сно	18%	18%	18%	18%	18%	18%	18%	18%	18%
	MH25	Number of cases closed/discharged by General Adult Community Mental Health Teams	DOP	Access /Activity		м	31,539	23,009	33,158	СНО	2,860	5,600	3,069	5,041	3,534	1,898	3,093	4,617	3,446
	MH26	Number of Psychiatry of Old Age Community Mental Health Teams	DOP	Access		м	25	26	26	СНО	3	4	2	1	4	2	3	5	2
	MH27	Number of referrals (including re-referred)received by Psychiatry of Old Age Mental Health Teams	DOP	Access /Activity		м	10,986	11,664	11,664	сно	1,789	1,759	1,068	423	1.574	1,096	1,023	1,646	1,286
e,	MH28	Number of Referrals (including re-referred) accepted by Psychiatry of Old Age Community Mental Health Teams	DOP	Access /Activity		м	9,887	10,953	11,082	СНО	1,701	,		402			972	1,563	1,222
of Old Age	MH29	No. of new (including re-referred ) Old Age Psychiatry Team cases offered first appointment for the current month (seen and DNA below)	DOP	Access /Activity		M	11,238	9,748	10,384	СНО	1,466		692			1,175			

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Psychiatry	MH30	No. of new (including re-referred) Old Age Psychiatry Team cases seen in the current month	DOP	Access /Activity		м	10,960	9,472	10,083	сно	1,424	1,291	672	483	1,260	1,140	1,020	1,785	1,008
Psyc	MH31	No. of new (including re-referred) Old Age Psychiatry cases offered appointment and DNA in the current month	DOP	Access /Activity		м	278	276	301	сно	42	39	20	14	38	35	30	52	31
	MH32	%. of new (including re-referred) Old Age Psychiatry Team cases offered appointment and DNA in the current month	DOP	Access /Activity		м	2%	3%	3%	СНО	3%	3%	3%	3%	3%	3%	3%	3%	3%
	MH33	Number of cases closed/discharged by Old Age Psychiatry Community Mental Health Teams	DOP	Access /Activity		м	7,910	7,058	8,866	СНО	1,360	1,337	812	322	1,196	833	778	1,251	977
	MH34	No. of child and adolescent Community Mental Health Teams	DOP	Access		м	64	62	62	СНО	6	6	5	10	6	7	8	8	6
	MH35	No. of child and adolescent Day Hospital Teams	DOP	Access		М	4	4	4	СНО	0	1	0	0	0	1	1	0	1
	MH36	No. of Paediatric Liaison Teams	DOP	Access		М	3	3	3	СНО	0	0	0	0	0	0	2	0	1
	MH37	No. of child / adolescent admissions to HSE child and adolescent mental health inpatient units	DOP	Access /Activity		м	231	256	281	сно	0	81	0	47	0	0	100	0	53
		No. of children / adolescents admitted to adult HSE mental health		Access		141	2.51	230	201	cho		01	Ŭ			0	100	0	33
	MH38	inpatient units	DOP	/Activity		м	<30	95	30	National	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				Access		141	<b>~</b> 50	55	50	INACIONAL						N/A			
	MH39	i). <16 years	DOP	/Activity		м	0	3	0	National	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	MH40	ii). <17 years	DOP	Access /Activity		м	0	37	0	National	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	MH41	iii). <18 years	DOP	Access /Activity		м	<30	55	30	National	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	MH42	No. and % of involuntary admissions of children and adolescents	DOP	Access /Activity		Annual	15	15	15	National	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	MH43	No. of child / adolescent referrals (including re-referred) received by mental health services	DOP	Access /Activity		м	17,254	17,964	18,864	СНО	1,406	1,637	1,982	2,344	2,140	2,030	2,743	2,742	1,840
int	MH44	No. of child / adolescent referrals (including re-referred) accepted by mental health services	DOP	Access /Activity		м	13,803	13,694	15,092	сно	1,124	1,309	1,586	1,875	1,713	1,624	2,195	2,193	1,473
Child & Adolescent	MH45	No. of new (including re-referred ) CAMHs Team cases offered first appointment for the current month (seen and DNA below)	DOP	Access /Activity		м	14,155	13,494	13,895	СНО	1,054	1,570	1,194	1,817	1,436	1,345	1,562	2,123	1,794
ild & ,	MH46	No. of new (including re-referred) child/adolescent referrals seen in the current month	DOP	Access /Activity		м	12,718	11,906	12,628	СНО	957	1,427	1,085	1,653	1,305	1,222	1,420	1,929	1,630
сч	MH47	No. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month	DOP	Access /Activity		М	1,437	1,588	1,259	СНО	96	142	108	165	130	123	141	191	163
	MH48	%. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month	DOP	Access /Activity		м	10%	12%	10%	СНО	10%	10%	10%	10%	10%	10%	10%	10%	10%
	MH49	No. of cases closed / discharged by CAMHS service	DOP	Access /Activity		М	11,042	12,442	12,072	СНО	900	1,047	1,268	1,500	1,370	1,299	1,756	1,754	1,178
	MH50	Total No. to be seen for a first appointment by expected wait time at the end of each month.	DOP	Access /Activity		м	2,632	2,509	2,449	СНО	394	53				446	251	237	191
	MH51	i) 0-3 months	DOP	Access /Activity		м	1,153	1,138	1,308	СНО	145	46	107	210	83	287	162	161	107

Office Use	Key Performance Indicators Service Planning 2016	Reported		Healthy		KPIs	2015	KPIs 2016													
Only KPI No. (source:	KPI Title	against NSP / DOP	Quality /Access	Ireland / Corporate Plan / HI &	Report Frequency	National	2015 Projected	2016 National Target /	Reported at National /	СНО1	CHO2	СНОЗ	CHO4	СНО5	сно6	СНО7	СНО8	СНО9			
target doc)	KPI IITIe		Activity	СР		Target / Expected Activity	outturn	Expected Activity	CHO / HG Level												
MH52	ii). 3-6 months	DOP	Access /Activity		м	534	595	585	СНО	93	4	80	112	23	107	60	62	44			
MH53	iii). 6-9 months	DOP	Access /Activity		м	314	355	346	СНО	98	1	50	94	13	47	11	12	20			
MH54	iv). 9-12 months	DOP	Access /Activity		м	614	217	210	СНО	58	2	52	49	4	5	18	2	20			
MH55	v). > 12 months	DOP	Access /Activity		м	0	204	0	СНО	0	0	0	0	0	0	0	0	0			

Menta	al Health Services	
1	KPI Title	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by General Adult Community Mental Health Teams
2	KPI Description	
		Wait time: The number of weeks/months from the point at which the referral is received by a member of the General Adult Community Mental Health team to the day the assessment takes
	MH1	place (less any delay due to client postponement of assessment) and excluding both of those days.
3	KPI Rationale	Wait times to access General Adult Community Mental Health Team for a mental health assessment provides a measure of service availability in the community and the timeliness of that access.
	Indicator Classification	Person Centred Care     Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management →
4	KPI Target	NSP 2016 target: > =90%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments offerred witin threee months and calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	
	Data Completeness	From General Adult Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of accepted referrals/re-referrals; number of accepted referrals.re-referrals within timeframe;
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this KPI:_Nationally -Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division, each ISA Manager
		and Executive Clinical Director, Area Mental Health Management Team.
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☑ Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
45		County Institution I Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) Other – give details:
16	reports ? Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
10	Additional Information	As reported in the HSE Performance Report
	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
oomacl	uetano ivi Data Manayei /	Division Ph. 045 880400
Speciali	ist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	I Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	al Health Services	
inemite		
1	KPI Title	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks / 3 months by General Adult Community Mental Health Teams
2	KPI Description	
		Wait time: The number of weeks/months from the point at which the referral is received by a
		member of the General Adult Community Mental Health team to the day the assessment takes
	MH2	place (less any delay due to client postponement of assessment) and excluding both of those days.
3	KPI Rationale	Wait times to access General Adult Community Mental Health Team for a mental health assessment provides a measure of service availability in the community and the timeliness of that access.
	Indicator Classification	Person Centred Care     Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management →
4	KPI Target	NSP 2016 target: > =75%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments
		offerred witin threee months and calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	
	Data Completeness	From General Adult Community Mental Health Teamto CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly Quarterly DBi-annually Annually DOther – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of accepted referrals/re-referrals; number of accepted referrals.re-referrals within timeframe;
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
		details:
		Please indicate who is responsible for monitoring this KPI:_Nationally -Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division, each ISA Manager
		and Executive Clinical Director, Area Mental Health Management Team.
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		Control Contr
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		□ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) Other – give details:
4.5	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	As reported in the HSE Performance Report
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
On a clair	at   aad	Division Ph. 045 880400
	st Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Nationa	I Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	I Health Services	
1	KPI Title	%. of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month
2	KPI Description	Percentage of new (including re-referred) cases offered first appointment and that did not attend (DNA) appointment when referred to General Adult Mental Health Team during the reporting period, by (i) over 16y and less than 18 years old (ii) over 18th birthday <b>A DNA</b> : if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA
-	MH24	
3	KPI Rationale	The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
	Indicator Classification	□Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce Use of Resources I Governance, Leadership and Management
4	KPI Target	NSP 2016 target: 18%
5	KPI Calculation	Count number of new cases DNA and divide by total number of new appointments offerred and calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	From General adult Community Mental Health Team to CHO Manager to Business Information
	Data Completeness	Unit.
	Data Quality Issues	onit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	number of appointments offered
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Specialis		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National	Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	al Health Services	
1	KPI Title	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by Psychiatry of Old Age Community Mental Health Teams
2	KPI Description	Wait time: The number of weeks/months from the point at which the referral is received by a member of the Psychiatry of Old Age Community Mental Health team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those
	MH3	days.
3	KPI Rationale	Wait times to access Psychiatry of Old Age Community Mental Health Team for mental health assessment provides a measure of service availability in the community and the timeliness of that access.
	Indicator Classification	Person Centred Care     Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management →
4	KPI Target	NSP 2016 target: > =98%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments offered within three months and calculate the percentage against the overall number of new/re-referred cases accepted.
6	Data Source	
	Data Completeness	From POA team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	
		Number of accepted referrals/re-referrals; numer of accepted referrals/re-referrals within timeframe
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:Nationally:- Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division. each ISA Manager and Executive Clinical Director, Area Mental Health Management Team
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months (previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	As reported in the HSE Performance Report
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	-	Division Ph. 045 880400
Speciali	st Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Nationa	I Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mental Health Services         1       KPI Title       % of accepted referrals / re-referrals offered first appointment and by Psychiatry of Old Age Community Mental Health Teams         2       KPI Description       Wait time: The number of weeks/months from the point at which the member of the Psychiatry of Old Age Community Mental Health teams         itemation       KPI Description       Wait time: The number of weeks/months from the point at which the member of the Psychiatry of Old Age Community Mental Health teams	d seen within 12 weeks / 3 months
by Psychiatry of Old Age Community Mental Health Teams           2         KPI Description         Wait time: The number of weeks/months from the point at which the member of the Psychiatry of Old Age Community Mental Health	d seen within 12 weeks / 3 months
member of the Psychiatry of Old Age Community Mental Health	
	team to the day the assessment
MH4 days.	
3 <b>KPI Rationale</b> Wait times to access Psychiatry of Old Age Community Mental H assessment provides a measure of service availability in the com access.	
Indicator Classification	
Safe Care Better Health and Wellbeing Use of Informatio	วท
Workforce□ Use of Resources ☑ Governance, Leade	ership and Management →
4 KPI Target NSP 2016 target: > =95%	
5 KPI Calculation Count number of new cases seen within 3 months and divide by a offered within three months and calculate the percentage against referred cases accepted.	
6 Data Source	
Data Completeness         From POA team to CHO Manager to Business Information Unit.	
Data Quality Issues	
7 Data Collection Frequency □Daily □Weekly √Monthly Quarterly □Bi-annually A	Annually DOther – give details:
8 Tracer Conditions Not applicable at this time	
9 Minimum Data Set	
Number of accepted referrals/re-referrals; numer of accepted refe	errals/re-referrals within timeframe
10 International Comparison Not applicable at this time	
11 KPI Monitoring KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually details: Please indicate who is responsible for monitoring this KPI:National Planning, Performance and Programme Management, Mental He and Executive Clinical Director, Area Mental Health Management	ally:- Yvonne O'Neill, Head of ealth Division. each ISA Manager
12 KPI Reporting Frequency □Daily □Weekly ☑ Monthly □Quarterly □Bi-annu details:	ually Annually Other – give
13       KPI report period       □Current (e.g. daily data reported on that same day of activity, r same month of activity)         ☑ Monthly in arrears (June data reported in July)       □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months (previous 12 month period)	monthly data reported within the
14         KPI Reporting Aggregation         □National         □Regional         ☑ CHO Area         □Hospital           □         County         Institution         ☑ Other – give details: individual teams	S
15 KPI is reported in which Performance Report (NSP) Other – give details: reports ?	
16 Web link to data http://www.hse.ie/eng/services/publications/corporate/performance	cereports/
17 Additional Information As reported in the HSE Performance Report	
Contact details for Data Manager / Yvonne O'Neill, Head of Planning, Performance and Programme	Management, Mental Health
Division Ph. 045 880400	-
	ie
Specialist Lead         Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.id           National Lead and Division         Anno O'Conner, National Division	

Menta	I Health Services	
1	KPI Title	%. of new (including re-referred) Old Age Psychiatry Team cases offered appointment and DNA in the current month
2	KPI Description	Number of new (including re-referred) cases offered first appointment and and that did not attend (DNA) appointment in the Psychiatry of Old Age Mental Health Team during the reporting period for patients over their 65th birthday <b>A DNA</b> : if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A <b>domiciliary DNA</b> is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
3	KPI Rationale	
		The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
	Indicator Classification	□Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
-	KDI Terret	Workforce Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target KPI Calculation	NSP 2016 target: 3% Count number of new cases DNA and divide by total number of new appointments offerred and
5		calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	
	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business
	Data Quality Issues	Information Unit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	number of appointments offered
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	<ul> <li>☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Specialis		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National	Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	al Health Services	
1	KPI Title	Admissions of children to HSE Child and Adolescent Acute Inpatient Units as a % of the total number of admissions of children to mental health acute inpatient units
2	KPI Description	This metric is designed to measure the total number of HSE/HSE funded Child and Adolescent Acute Inpatient admissions as a percentage of all acute inpatient admissions of children and adolescents whether admitted to HSE/HSE funded CAMHS acute inpatient units and or HSE/HSE funded Adult Mental Health Acute Inpatient Units and excluding admissions to private units.
3	KPI Rationale	This is a quality metric to measure compliance with the Mental Health Commission regulation in respect of admission of children and adolescents to age appropriate acute inpatient units. It is also designed to monitor the operation of the HSE/HSE funded Child and Adolescent Acute Inpatient units and demonstrate the benefots realisation from the investment in CAMHS acute inpatient
		provision.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification         (in some cases you may need to choose two).         □Person Centred Care       ☑ Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2016 target: > 95%
5	KPI Calculation	Count of all admissions of children to HSE/HSE funded CAMHs Acute Inpatient Units, count of all admissions of children and adolescents to HSE/HSE funded Adult Acute Mental Health Inpatient Units; Sum of both counts. Calculate percentage of number of children and adolescents admitted to HSE/HSE funded CAMHs inpatient units as against total number of admissions of children and adolescents excluding admissions to private units.
6	Data Source	
	Data Completeness	Health Research Board to BIU Non acute Team.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	The number of children and adolescents admitted to HSE/Hse funded CAMHS Inpatient Units; The number of children and adolescents admitted to HSE/HSE funded Adult Acute Mental Health Inpatient Units
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □ Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:Nationally:- Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division; ISA Managers and Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Dweekly Monthly Duarterly Bi-annually Annually Other – give details:
13	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months (previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	<ul> <li>☑National □Regional □Hospital</li> <li>□ County Institution ☑ Other – give details: CAMHs Acute Inpatient Units</li> </ul>
15	KPI is reported in which reports ?	☑ Performance Report (NSP)     Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	As reported in the HSE Performance Report
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
Speciali	et l oad	Division Ph. 045 880400 Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie

Menta	I Health Services	
1	KPI Title	Percentage of Ped days used in HSE Child and Adelegeent Asyte Innetient Units on a table of Ped
		Percentage of Bed days used in HSE Child and Adolescent Acute Inpatient Units as a total of Bed days used by children in mental health acute inpatient units
	KPI Description MH57	This metric is designed to measure the total number of HSE/HSE funded Child and Adolescent Acute Inpatient bed days used as a percentage of all acute inpatient bed days of children and adolescents whether admitted to HSE/HSE funded CAMHS acute inpatient units and or HSE/HSE funded Adult Mental Health Acute Inpatient Units and excluding admissions to private units.
3	KPI Rationale	This is a quality metric to measure compliance with the Mental Health Commission regulation in respect of admission of children and adolescents to age appropriate acute inpatient units. It is also designed to monitor the operation of the HSE/HSE funded Child and Adolescent Acute Inpatient units and demonstrate the benefots realisation from the investment in CAMHS acute inpatient provision.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care ☑ Effective Care Safe Care □ Better Health and Wellbeing □Use of Information
		Workforce         Use of Resources         Image: Control of Contro of Control of Control of Contro of Control of Control of
	KPI Target	NSP 2015 target: > 95%
5	KPI Calculation	Count of all Bed days of children to HSE/HSE funded CAMHs Acute Inpatient Units, count of all Bed Days of children and adolescents to HSE/HSE funded Adult Acute Mental Health Inpatient Units; Sum of both counts. Calculate percentage of number of children and adolescents bed days used to HSE/HSE funded CAMHs inpatient units as against total number of bed days used of children and adolescents excluding admissions to private units.
6	Data Source	
	Data Completeness	Health Research Board to BIU Non acute Team.
	Data Quality Issues	
	Data Collection Frequency	Daily DWeekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	The number of children and adolescents admitted to HSE/Hse funded CAMHS Inpatient Units; The number of children and adolescents admitted to HSE/HSE funded Adult Acute Mental Health Inpatient Units
10	International Comparison	Not applicable at this time
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         □Daily       □Weekly       ☑ Monthly       □ Quarterly       □Bi-annually       □Annually       □Other – give         details:       Please indicate who is responsible for monitoring this KPI:Nationally:- Yvonne O'Neill, Head of       Planning, Performance and Programme Management, Mental Health Division; ISA Managers and         Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months (previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National    ☑ CHO    □Hospital     □ County Institution    ☑ Other – give details: CAMHs Acute Inpatient Units
	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	As reported in the HSE Performance Report
	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Specialis		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National	Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	al Health Services	
4		
1	KPI Title	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by Child and Adolescent Community Mental Health Teams.
2	KPI Description	Wait time: The number of weeks/ months from the point at which the referral is received by a member of the CAMHS Community Mental Health Team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those days.
	MH6	(····· )·······························
3	KPI Rationale	Wait times to access CAMHS Community Mental Health Teams for a mental health assessment provides a measure of service availability in the community and the timeliness of that access. Monitoring the number of new (including re-referred) cases seen overall from referral and evaluating the trends over time per HSE region and across the service nationally as it relates to target. nitor trends in relation to referrals.
	Indicator Classification	Person Centred Care  Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information √
		Workforce $\Box$ Use of Resources $$ Governance, Leadership and Management $\Box$
4	KPI Target	NSP 2016 target: > =78%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments offered within three months and calculate the percentage against the overall number of new/re-referred cases accepted
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health team to CHO Manager to Business Information Unit.
-	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly Quarterly DBi-annually Annually DOther – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division; ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams.
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details:
13	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months (previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	Performance Report (NSP) Other – give details:
16	reports ? Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	As reported in the HSE Performance Report
	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	-	Division Ph. 045 880400
Speciali		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Nationa	Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

I         KPI Title         % of accepted referrals / re-referrals offered first appointment and seen within 12 weeks / 3 by Child and Adolescent Community Mental Health Teams.           2         KPI Description         Wait time: The number of weeks' months from the point at which the referral is received by member of the CAMHS Community Mental Health Team to the day the assessment takes p (less any delay due to client postponement of assessment) and excluding both of those day member of new (including re-referred) cases seen overall from referral and et the tends over time per HS Eregion and across the service nationally as it relates to target. Indicator Classification           3         KPI Rationale         Wait times to access CAMHS Community Mental Health Teams for a mental health assess: provides a measure of service availability in the community and the timeliness of that access Monitoring the number of new (including re-referred) cases seen overall from reflexes to target. Indicator Classification           3         KPI Target         Construction Centred Care           4         KPI Target         NSP 2016 target: >=72%           5         KPI Calculation         Count number of new cases seen within 3 months and divide by number of new appointmer offered within three months and calculate the percentage against the overall number of new referred cases accepted           6         Data Completeness         From CAMHS Community Mental Health team to CHO Manager to Business Information U           7         Data Collection Frequency         IDaily         IWeekly IM Monthly         Quarterly IM=innually Annually ID(ther - give det Panually	
by Child and Adolescent Community Mental Health Teams.           2         KPI Description         Wait time: The number of weeks/ months from the point at which the referal is received y, member of the CAMHS Community Mental Health Team to the day the assessment takes p (less any delay due to client postponement of assessment) and excluding both of those day MH7           3         KPI Rationale         Wait times to access CAMHS Community Mental Health Teams for a mental health assessr provides a measure of service availability in the community and the timeliness of that access Monitoring the number of new (including re-referred) cases seen overall from referral and e w the trends over time per HSE region and across the service nationally as it relates to target. Infor tends in relation to referrals.           Indicator Classification         DPresno Centred Care           Safe Care         Better Health and Wellbeing □Use of Information√           Workforce□Use of Resources √ Governance, Leadership and Management □         Vorkforce□Use of Resources √ Governance, Leadership and Management □           4         KPI Target         NSP 2016 target: > 72%         Count number of new cases seen within 3 months and divide by number of new appointner offered within three months and calculate the percentage against the overall number of new referred cases accepted           6         Data Source         Data Collection Frequency         Data Collection Frequency           7         Data Source         Data Oblection Streame         Form CAMHS Community Mental Health team of Anoually □Other – give delais:           11	
Wart ume: The Number of Weeks months from the point at Which the referral is received by y         member of the CAMHS Community Mental Health Team to the day the assessment takes p         (less any delay due to client postponement of assessment) and excluding both of those day          3       KPI Rationale       Wait times to access CAMHS Community Mental Health Teams for a mental health assessm          9       Wait times to access CAMHS Community Mental Health       Teams for a mental health assessm          1       Indicator Classification       IDeresno Centred Care         1       Indicator Classification       Control Centred Care         2       Safe Care       Detter Person         3       KPI Target       NSP 2016 target: >= 72%         5       KPI Calculation       Count number of new cases seen within 3 months and divide by number of new appointmer         offered within three months and calculate the percentage against the overall number of new         referred cases accepted         6       Data Source       From CAMHS Community Mental Health team to CHO Manager to Business Information U         Data Completeness          9       Minimum Data Set       Not applicable at this time         10       International Comparison       Not applicable this time time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis:          12       KPI Reporting Frequency       Daily       <	3 months
NH7         Wait times to access CAMHS Community Mental Health Teams for a mental health assess provides a measure of service availability in the community and the timeliness of that access Monitoring the number of new (including re-referred) cases seen overall from referral and ex the trends in relation to referrals.           Indicator Classification         □Person Centred Care         □Effective Care           Safe Care         Better Health and Wellbeing         □Use of Information:/           Workforce         Userson Centred Care         □Effective Care           Safe Care         Better Health and Wellbeing         □Use of Information:/           Workforce         Userson Centred Care         □Effective Care           Safe Care         Better Health and Wellbeing         □Use of Information:/           Workforce         Osafe Care         Count number of new cases seen within 3 months and divide by number of new appointmer offered within three months and calculate the percentage against the overall number of new referred cases accepted           Bata Completeness         From CAMHS Community Mental Health         From CAMHS Community Mental Health           Data Collection Frequency         □Daily         □Weekly ☑ Monthly         Quarterly           Bata Collection         Not applicable at this time         International Comparison         Not applicable at this time           1         KPI Monitoring         KPI will be moninfored on a (please indicate below) basis: □Daily <td>place</td>	place
3       KPI Rationale       Wait times to access CAMHS Community Mental Health Teams for a mental health assess provides a measure of service availability in the community and the timeliness of that access. Monitoring the number of new (including re-referred) cases seen overall from referral and a the trends over time per HSE region and across the service nationally as it relates to target. Intor trends in relation to referrals.         Indicator Classification       □Person Centred Care       □Effective Care         4       KPI Target       Safe Care       □Effective Care         5       KPI Calculation       Count number of new cases seen within 3 months and divide by number of new appointmer offered within three months and calculate the percentage against the overall number of new referred cases accepted         6       Data Source       □Daily       □Weekly ☑ Monthly       Quarterly       □Biannually       □Other – give del         7       Data Completeness       From CAMHS Community Mental Health       team to CHO Manager to Business Information U         0       International Comparison       Not applicable at this time       11       KPI Monitoring       Not applicable at this time         11       KPI Reporting Frequency       □Daily       □Weekly ☑ Monthly       □Quarterly       □Biannually       □Annually       □Annually       □Ater – give del         11       KPI Monitoring       KPI Will Übe monitoried on a (please indicate below) basis:       □Daily <t< td=""><td><b>,</b> -</td></t<>	<b>,</b> -
Safe Care □       Better Health and Wellbeing □Use of Information√         Workforce □Use of Resources √ Governance, Leadership and Management □         Workforce □Use of Resources √ Governance, Leadership and Management □         KPI Target       NSP 2016 target: >=72%         KPI Calculation       Count number of new cases seen within 3 months and divide by number of new appointmer offered within three months and calculate the percentage against the overall number of new referred cases accepted         Data Completeness       From CAMHS Community Mental Health team to CHO Manager to Business Information U         Pata Collection Frequency       □Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give del         8       Tracer Conditions       Not applicable at this time         9       Minimum Data Set       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals; number of accepted referrals/re-referrals; interfame         10       International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - gidetails: Please indicate who is responsible for monitoring this KPI: Nationally: Vonne O'Neill, Heac Planning, Performance and Programme Management, Mental Health Division; ISA Manager Executive Clinical Directors and Area Mental Health Management Teams.         12       KPI Reporting Frequency □Daily □Weekly ☑ Monthly □Quarterly □Bi-annualy □Annualy □Other – details: <td>ss. evaluating</td>	ss. evaluating
Workforce□Use of Resources √ Governance, Leadership and Management □           4         KPI Target         NSP 2016 target: > =72%           5         KPI Calculation         Count number of new cases seen within 3 months and divide by number of new appointmer offered within three months and calculate the percentage against the overall number of new referred cases accepted           6         Data Source         From CAMHS Community Mental Health team to CHO Manager to Business Information U           7         Data Collection Frequency         □Daily         □Weekly ☑ Monthly         Quarterly         □Bi-annually         Annually         □Other – give del           8         Tracer Conditions         Not applicable at this time         9         Minimum Data Set         Number of accepted referrals/re-referrals, number of accepted referrals/re-referrals within timeframe           10         International Comparison         Not applicable at this time         11         KPI Monitoring         KPI will be monitored on a (please indicate below) basis:         □Daily         □Oweekly         @ Monthly         Quarterly         □Bi-annually         □Annually         □Other – give details:           11         KPI Monitoring         KPI will be monitored on a (please indicate below) basis:         □Daily         □Weekly         @ Monthly         □Quarterly         □Bi-annually         □Annually         □Other – give details:           12	
4       KPI Target       NSP 2016 target: >=72%         5       KPI Calculation       Count number of new cases seen within 3 months and divide by number of new appointmer offered within three months and calculate the percentage against the overall number of new referred cases accepted         6       Data Source       From CAMHS Community Mental Health team to CHO Manager to Business Information U         7       Data Completeness       From CAMHS Community Mental Health team to CHO Manager to Business Information U         7       Data Collection Frequency       Daily       Weekly Ø Monthly Quarterly       Bi-annually Annually       Other – give det         8       Tracer Conditions       Not applicable at this time       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe         10       International Comparison       Not applicable at this time       KPI Will be monitored on a (please indicate below) basis:         11       KPI Monitoring       KPI Will be monitored on a (please indicate below) basis:       Please indicate who is responsible for monitoring this KPI: Nationally Yvonne O'Neill, Head Planning, Performance and Programme Management, Mental Health Division; ISA Manager Executive Clinical Directors and Area Mental Health Management Teams.         12       KPI report period       Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity)       Guarterly in arrears (quarter 1 data reported in quarter 2)       Rolling 12 months	
5       KPI Calculation       Count number of new cases seen within 3 months and divide by number of new appointmer offered within three months and calculate the percentage against the overall number of new referred cases accepted         6       Data Source       From CAMHS Community Mental Health team to CHO Manager to Business Information UI         7       Data Completeness       From CAMHS Community Mental Health team to CHO Manager to Business Information UI         7       Data Collection Frequency       Daily       Weekly Ø Monthly Quarterly       Bi-annually Annually       Other – give del         8       Tracer Conditions       Not applicable at this time       Minimum Data Set       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe         10       International Comparison       Not applicable at this time       Minimum Cata Set       Not applicable at this time         11       KPI Monitoring       KPI will be monitorid on a (please indicate below) basis:	
offered within three months and calculate the percentage against the overall number of new referred cases accepted         6       Data Source         Data Completeness       From CAMHS Community Mental Health team to CHO Manager to Business Information U         7       Data Collection Frequency       IDaily         8       Tracer Conditions       Not applicable at this time         9       Minimum Data Set       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe         10       International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis:         IDaily       IDweekly       Monthly       Quarterly         International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis:         IDaily       IDweekly       Monthly       Quarterly         IPlease indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Heac       Please indicate who is responsible for monitoring this KPI: Nationally: IVonne O'Neill, Heac         12       KPI Reporting Frequency       IDaily       IWeekly       Monthly       Quarterly       IBi-annually       Annually       Other – details:         13       KPI report period	
6       Data Source       From CAMHS Community Mental Health team to CHO Manager to Business Information U         7       Data Completeness       From CAMHS Community Mental Health team to CHO Manager to Business Information U         7       Data Collection Frequency       □Daily       Weekly ☑ Monthly Quarterly       □Bi-annually Annually       □Other – give del         8       Tracer Conditions       Not applicable at this time       9         9       Minimum Data Set       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe         10       International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – gidetails:         12       KPI Reporting Frequency       □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – details:         13       KPI report period       □Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity)         14       KPI Reporting Aggregation       □National □Regional ☑ CHO □Hospital         15       KPI is reported in which reports ?       ☑ Performance Report (NSP)       Other – give details:         16       Web link to data       http://www.hse.ie/eng/services/publications/corporate/performancereports/       Interview As reported	
Data Collection Frequency       Daily       Weekly       Monthly       Quarterly       Bi-annually       Annually       Other – give definition         8       Tracer Conditions       Not applicable at this time       9       Minimum Data Set       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe         10       International Comparison       Not applicable at this time       11         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis: Daily       Dease indicate below) basis:         11       KPI Monitoring       KPI weekly       Monthly       Quarterly       Bi-annually       Annually       Other – give defails:         12       KPI Reporting Frequency       Daily       Weekly       Monthly       Quarterly       Bi-annually       Annually       Other – give defails:         13       KPI report period       Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity)       Monthly in arrears (June data reported in July)       Quarterly in arrears (quarter 1 data reported in quarter 2)       Rolling 12 months (previous 12 month period)       IA       KPI Reporting Aggregation       INational       Regional       Chen – give details:       Individual teams       IS       Image: Security in arrears (quarter 1 data reported in quarter 2)       Rolling 12 months (previous	
7       Data Collection Frequency       □Daily       □Weekly ☑ Monthly Quarterly       □Bi-annually Annually       □Other – give definition         8       Tracer Conditions       Not applicable at this time       □         9       Minimum Data Set       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe         10       International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis:         □Daily       □Weekly ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give definits:         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis:       □Daily       □Neekly ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give definits:         12       KPI Reporting Frequency       □Daily       □Weekly ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give definits:         13       KPI report period       □Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity)       □ Rolling 12 months (previous 12 month period)       □Annually       □Quarterly in arrears (quarter 1 data reported in quarter 2)       □Rolling 12 months (previous 12 month period)       □Antothig 12 months (previous 12 month period)       <	Jnit.
8       Tracer Conditions       Not applicable at this time         9       Minimum Data Set       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe         10       International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis:	
9       Minimum Data Set       Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe         10       International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - of details: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually: -Yvonne O'Neill, Head Planning, Performance and Programme Management, Mental Health Division; ISA Manager Executive Clinical Directors and Area Mental Health Management Teams.         12       KPI Reporting Frequency       □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - details:         13       KPI report period       □Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity)         14       KPI Reporting Aggregation       □National □Regional ☑ CHO □Hospital         15       KPI is reported in which reports ?       ☑ Performance Report (NSP)       Other - give details: individual teams         15       KPI is reported in which reports ?       Inttr://www.hse.ie/eng/services/publications/corporate/performancereports/       As reported in the HSE Performance Report         17       Additional Information       As reported in the HSE Performance and Programme Management, Mental Heal Division Ph. 045 880400	etails:
10       International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - g details: Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head Planning, Performance and Programme Management, Mental Health Division; ISA Manageri Executive Clinical Directors and Area Mental Health Management Teams.         12       KPI Reporting Frequency       □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - details:         13       KPI report period       □Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity) ☑ Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in guarter 2) □Rolling 12 months (previous 12 month period)         14       KPI reporting Aggregation ■ County Institution ☑ Other – give details: neports ?         15       KPI is reported in which reports ?         16       Web link to data         17       Additional Information         As reported in the HSE Performance Report         Contact details for Data Manager / Division Ph. 045 880400	
10       International Comparison       Not applicable at this time         11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - g details: Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head Planning, Performance and Programme Management, Mental Health Division; ISA Manager Executive Clinical Directors and Area Mental Health Management Teams.         12       KPI Reporting Frequency       □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - details:         13       KPI report period       □Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity) ☑ Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in guarter 2) □Rolling 12 months (previous 12 month period)         14       KPI reported in which reports ?       ☑ Performance Report (NSP)       Other - give details: I Performance Report (NSP)         15       KPI is reported in which reports ?       ☑ Performance Report (NSP)       Other - give details: I Performance Report (NSP)         16       Web link to data       http://www.hse.ie/eng/services/publications/corporate/performancereports/ As reported in the HSE Performance and Programme Management, Mental Heal Division Ph. 045 880400	
11       KPI Monitoring       KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - g details: Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head Planning, Performance and Programme Management, Mental Health Division; ISA Manager Executive Clinical Directors and Area Mental Health Management Teams.         12       KPI Reporting Frequency       □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - details:         13       KPI report period       □Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity) ☑ Monthly in arrears (June data reported in July) □Quarterly in arrears (Quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)         14       KPI report a Aggregation reports ?       □National □Regional ☑ CHO □Hospital □ County Institution ☑ Other - give details: reports ?         16       Web link to data       http://www.hse.ie/eng/services/publications/corporate/performancereports/ 17       Additional Information         17       Additional Information       As reported in the HSE Performance Report Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Heal Division Ph. 045 880400	
□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - gidetails:         Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head Planning, Performance and Programme Management, Mental Health Division; ISA Manager Executive Clinical Directors and Area Mental Health Management Teams.         12       KPI Reporting Frequency       □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other - details:         13       KPI report period       □Current (e.g. daily data reported on that same day of activity, monthly data reported withi same month of activity)         14       KPI Reporting Aggregation       □Current (NSP)         15       KPI is reported in which reports ?       □ County Institution ☑ Other - give details: individual teams         16       Web link to data       http://www.hse.ie/eng/services/publications/corporate/performancereports/         17       Additional Information       As reported in the HSE Performance Report         Vonne O'Neill, Head of Planning, Performance and Programme Management, Mental Heal Division Ph. 045 880400	
details:       Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within same month of activity)         Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within same month of activity)         Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within same month of activity)         Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within same month of activity)         Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within same month of activity)         Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within same month of activity)         Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within same month of activity)         Image: Current (e.g. daily data reported in July)         Image: Current (e.g. daily data reported in J	ad of
same month of activity)       Image: Same month of activity)         Image: Same month of activity)       Image: Monthly in arrears (June data reported in July)         Image: Same month of activity)       Image: Monthly in arrears (June data reported in July)         Image: Same month of activity)       Image: Same month of activity)         Image: Same month of activity)       Image: Same month of activity)         Image: Same month of activity)       Image: Same month of activity)         Image: Same month of activity)       Image: Same month of activity)         Image: Same month of activity)       Image: Same month of activity)         Image: Same month of activity)       Image: Same month of activity)         Image: Same month of activity)       Image: Same month of activity)         Image: Same month of activity       Image: Same month of activity         Image: Same month of activity       Image: Same month of activity         Image: Same month of activity       Image: Same month of activity         Image: Same month of activity       Image: Same month of activity         Image: Same month of activity       Image: Same month of activity         Image: Same month of activity       Image: Same month of activity         Image: Same month of activity       Image: Same month of activity         Image: Same month of activity       Image: Same month of activity	- give
14       KPI Reporting Aggregation       □National       □Regional       ☑ CHO       □Hospital         15       KPI is reported in which reports ?       ☑ County       Institution       ☑ Other – give details: individual teams         16       Web link to data       http://www.hse.ie/eng/services/publications/corporate/performancereports/         17       Additional Information       As reported in the HSE Performance Report         Contact details for Data Manager /       Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Heal Division Ph. 045 880400	nin the
15       KPI is reported in which reports?       Image: Performance Report (NSP)       Other – give details:         16       Web link to data       http://www.hse.ie/eng/services/publications/corporate/performancereports/         17       Additional Information       As reported in the HSE Performance Report         Contact details for Data Manager /       Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Heal Division Ph. 045 880400	
reports ?           16         Web link to data         http://www.hse.ie/eng/services/publications/corporate/performancereports/           17         Additional Information         As reported in the HSE Performance Report           Contact details for Data Manager /         Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Heal Division Ph. 045 880400	
17         Additional Information         As reported in the HSE Performance Report           Contact details for Data Manager /         Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Heal Division Ph. 045 880400	
Contact details for Data Manager / Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Heal Division Ph. 045 880400	
Division Ph. 045 880400	
	alth
Specialist Lead Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	
National Lead and Division         Anne O'Connor, National Director Mental Health         Tel: 01 6352542         Dvision: Mental Health	

ale alle	al Health Services	
1	KPI Title	%. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month
2	KPI Description	Number of new (including re-referred) child / adolescent cases and Did Not Attend their first
	MH48	appointment
3	KPI Rationale	
		The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target - 10%
5	KPI Calculation	Count number of new cases DNA and divide by total number of new appointments offerred and
•		calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	
<u> </u>	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□ □Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
'	Data Conection Frequency	
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, whi those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
•	Data Oot	details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly √ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:
12	KPI Reporting Frequency	□Daily □Weekly √Monthly □Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	<ul> <li>√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which	✓ Performance Report (NSP) □ Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
-		
17	Additional Information	
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
lationa	I Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	al Health Services	
mente		
1	KPI Title	Total No. to be seen for a first appointment at the end of each month.
2	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
	MH50	
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care □Effective Care Safe Care □ Better Health and Wellbeing □Use of Information□
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4 5	KPI Target KPI Calculation	NSP 2016 target/Expected activity: 2,449 Count Point in time – the number of child/adolescent on waiting list at the each month by time length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       Please indicate who is responsible for monitoring this         KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	<ul> <li>√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Speciali		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Nationa	I Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	al Health Services	
Mente		
1	KPI Title	Total No. to be seen 0-3 months
2	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
	MH51	,
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).
		Safe Care Better Health and Wellbeing Use of Information
4	KDI Terret	WorkforceoUse of Resources √ Governance, Leadership and Management o
4 5	KPI Target KPI Calculation	NSP 2016 target/Expected activity: 1,308 Count Point in time – the number of child/adolescent on waiting list at the each quarter by time length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly Monthly √Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         □Daily       □Weekly       ☑       Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       Please indicate who is responsible for monitoring this         KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	<ul> <li>√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Speciali		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National	I Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	al Health Services	
merne		
1	KPI Title	Total No. on waiting list for a first appointment waiting > 3 months
2	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
	MH56	
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification         (in some cases you may need to choose two).         □Person Centred Care       □Effective Care         Safe Care       Better Health and Wellbeing       □Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4 5	KPI Target KPI Calculation	NSP 2016 target/Expected activity: 1,141 Count Point in time – the number of child/adolescent on waiting list at the each quarter by time length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
L	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         □Daily       □Weekly       ☑       Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give details:         Please indicate who is responsible for monitoring this       KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	<ul> <li>√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Specialis		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National	I Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	al Health Services	
monte		
1	KPI Title	Total No. on waiting list for a first appointment waiting > 12 months
2	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
	MH55	
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □ Person Centred Care □ Effective Care Safe Care □ Better Health and Wellbeing □Use of Information □
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4 5	KPI Target KPI Calculation	NSP 2016 target/Expected activity: 0 Count Point in time – the number of child/adolescent on waiting list at the each quarter by time length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         □Daily       □Weekly       ☑       Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       Please indicate who is responsible for monitoring this         KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	<ul> <li>√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) D Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
Contact	t details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Special Nationa	ist Lead I Lead and Division	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
4	KPI Title	Number of administration to adult and a long that with
1		Number of admissions to adult acute inpatient units
2	KPI Description	This metric is designed to measure the total number admitted to adult mental health acute inpatient
	MH8	units.
3	KPI Rationale	This metric is used to support the preparation of indicators based on rates of admission. Reduced
		admissions could be used as a proxy measure for provision of community alternatives. Similarly, a
		trend of increasing admission rates could alert the Area Mental Health Management Team to a lack
		of capacity in community settings and/or increased demand for secondary care mental health
		services
	Indicator Classification	Person Centred Care     Effective Care
		Safe Care□ Better Health and Wellbeing ☑ Use of Information
		Workforce DUse of Resources Governance, Leadership and Management
4	KPI Target	NSP 2016 target: 12,726
5	KPI Calculation	Count
6	Data Source	
	Data Completeness	Health Research Board to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly DMonthly Quarterly DBi-annually DAnnually DOther – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	The total number admitted to adult mental health acute inpatient units.
10	International Comparison	
	·····	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	· · · · · · · · · · · · · · · · · · ·	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
		details:
		Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division. ; ISa Managers,
		Executive Clinical Directors and area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Ø Quarterly Bi-annually Annually Other – give
12	Reporting requency	details:
12	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
15	Ri l'eport period	same month of activity)
		Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (guarter 1 data reported in guarter 2)
4.4	KPI Reporting Aggregation	□Rolling 12 months (previous 12 month period) □National □Regional ☑ CHO Area □Hospital
14	KPI Reporting Aggregation	
45	KDI is non-onted in which	□County □ Institution □Other – give details:
15	KPI is reported in which	Performance Report (NSP) D Other – give details:
40	reports ?	
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17 Additional Information		
Contact details for Data Manager		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
<u> </u>	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Ma	Mantal Haalth Camiaaa			
we	Mental Health Services			
1	KPI Title	Median length of stay		
	KPI Description			
_		Median length of stay is the middle number in the sequence of numbers created by listing all of the		
		figures for length of stay during the period of less than one year. Where such a sequence has an		
	мн9	even amount of numbers, the median is the average of the two middle numbers.		
3	KPI Rationale	Measurement of length of stay can be used as a comparator of service provision in conjunction with		
		other data having regard to evidence base for addressing certain diagnosis. It can also act as a		
		proxy for effective community secondary care provision.		
	Indicator Classification	Person Centred Care     Effective Care		
		Safe Care□ Better Health and Wellbeing ☑ Use of Information		
		Workforce Use of Resources  Governance, Leadership and Management		
4	KPI Target	NSP 2016 target: -10		
	KPI Calculation			
		Median length of stay is the middle number in the sequence of numbers created by listing all of the		
		figures for length of stay during the period of less than one year. Where such a sequence has an		
		even amount of numbers, the median is the average of the two middle numbers.		
6	Data Source			
	Data Completeness	Health Research Board to Business Information Unit.		
	Data Quality Issues			
7	Data Collection Frequency	Daily DWeekly DMonthly DQuarterly DBi-annually DAnnually DOther – give		
		details:		
8	Tracer Conditions	Not applicable at this time		
9	Minimum Data Set	The middle number in the sequence of numbers created by listing all of the figures for length of		
		stay during the period of less than one year. Where such a sequence has an even amount of		
		numbers, the median is the average of the two middle numbers.		
10	International Comparison	Not applicable at this time		
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:		
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give		
		details:		
		Please indicate who is responsible for monitoring this KPI: Nationally, Yvonne O'Neill, Head of		
		Planning, Performance and Programme Management, Mental Health Division; ISA Manager;		
-		Executive Clinical Directors and Area Mental Health Management Teams		
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give		
-		details:		
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the		
		same month of activity)		
		□Monthly in arrears (June data reported in July)		
		☑ Quarterly in arrears (quarter 1 data reported in quarter 2)		
		Rolling 12 months (previous 12 month period)		
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital		
4-		□County ☑ Institution □Other – give details:		
15	KPI is reported in which	☑ Performance Report (NSP)  ☐ Other – give details:		
40	reports ?			
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/		
17	Additional Information	The HRB collects and reports on the mean (i.e. the average) the median (as described at No. 7		
ļ		above and the range of length of stay. The calculations exclude patients with a length of stay		
		greater than one year. Further information about the way in which the calculations are made is		
· · · ·		detailed on Page 5 of the Quarterly HRB Report.		
Contact details for Data Manager		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health		
10	aiolist Lood	Division Ph. 045 880400		
<u> </u>	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie		
Natio	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health		

Me	ntal Health Services	
	KDI TH	
1	KPI Title	Rate of admissions to adult acute inpatient units per 100,000 population in mental health catchment per quarter.
2	KPI Description	This metric is designed to measure the rate of admission per 100,000 population in mental health
_	MH10	catchment to adult mental health acute inpatient units.
3	KPI Rationale	
Ŭ		Reduced admissions could be used as a proxy measure for provision of community alternatives.
	Indicator Classification	□Person Centred Care
		Safe Care□ Better Health and Wellbeing ☑ Use of Information√
		Workforce□Use of Resources□Governance, Leadership and Management □
4	KPI Target	NSP 2016 target: 70.5
	KPI Calculation	Total number of admissions to acute inpatient units divided by population aged 18 or over in mental
		health catchment * 100,000
		Rates are currently collected and calculated by HRB using existing MH catchment area populations
		rather than LHO area populations. This is particularly relevant given that rates are calculated per
		100,000 population. More info available from HRB
6	Data Source	
	Data Completeness	Health Research Board to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Total number of admissions to acute inpatient units divided by population aged 18 or over in mental
		health catchment
10	International Comparison	
		Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Dweekly Donthly Quarterly Di-annually Annually Other - give
		details:
		Please indicate who is responsible for monitoring this KPI: Nationally;- Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division, ISA Managers,
		Executive Clinical directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
		details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
		Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (quarter 1 data reported in July)
		Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□ Rolling 12 months (previous 12 month period) □ National □ Regional ☑ CHO Area □ Hospital
14	KEI Kepoling Aggregation	
15	KDI is reported in which	□County ☑ Institution □Other – give details: ☑ Performance Report (NSP) □ Other – give details:
15	KPI is reported in which	Performance Report (NSP)  Other – give details:
16	reports ? Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	nup.//www.nse.ie/eng/services/publications/corporate/periormancereports/
	act details for Data Manager	Vuonno O'Noill Hood of Dionning, Porformance and Programme Management, Markel Haalth
Cont	au uetans for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
/ Spe	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
_		
1	KPI Title	First admission rates to adult acute units (that is, first ever admission), per 100,000 population in
		mental health catchment area per quarter
2	KPI Description	First admissions are admissions of persons who were not previously admitted to the receiving
	MH11	hospital or unit or to any other psychiatric in-patient facility.
3	KPI Rationale	This metric is designed to measure first admission rates to adult acute units (that is, first ever
		admission). per 100,000 in the mental health catchment area.
	Indicator Classification	□Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
		☑ Workforce □Use of Resources□Governance, Leadership and Management □
4	KPI Target	NSP 2016 target: 23.1
5	KPI Calculation	Number of First admission to acute units (that is, first ever admission) during reporting period
		divided by population aged 18 years or over *100,000 First Admissions / rates are currently
		collected and calculated using existing MH catchment area populations rather than LHO area
		populations. This is particularly relevant given that rates are calculated per 100,000 population.
		More info available from HRB.
6	Data Source	
•	Data Completeness	Health Research Board to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give
'	Data collection requency	details:
8	Tracer Conditions	
0 9	Minimum Data Set	Not applicable at this time
9	Minimum Data Set	Number of First admission to acute units (that is, first ever admission) during reporting period
		divided by population of mental health catchment area aged 18 years or over
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly Monthly Quarterly Bi-annually Annually Other - give
		details:
		Please indicate who is responsible for monitoring this KPI:_Nationally:- Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division.; ISA Managers,
40	KDI Domontin z Erromuonou	Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		□County ☑ Institution □Other – give details:
15	KPI is reported in which	☑ Performance Report (NSP) □ Other – give details:
-	reports ?	- ···· · · · · · · · · · · · · · · · ·
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
,011L	aor actano ior Data Mandyel	
		Division Ph. 045 880400
		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
atic	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mor	Aental Health Services		
wei	Ital Health Services		
1	KPI Title	Acute re-admission as a percentage of admissions	
	KPI Description		
	MH12	Reate of readmission as a % of all admissions	
3	KPI Rationale		
		This metric is designed to measure the percentage of patients readmitted to adult mental health	
		acute inpatient units and is linked to the earlier metric on Total admissions - see comments there.	
	Indicator Classification	Person Centred Care 🗹 Effective Care	
		Safe Care□ Better Health and Wellbeing □ Use of Information ☑	
		Workforce□Use of Resources□Governance, Leadership and Management □	
4	KPI Target	NSP 2016 target: 67%	
5	KPI Calculation	<ol> <li>Total No. of Admissions minus total number of first admissions = total no. of readmissions</li> <li>Total no. of readmissions is divided by total admissions and presented as percentage</li> </ol>	
6	Data Source		
	Data Completeness	Health Research Board to BIU Non acute Team	
	Data Quality Issues		
7	Data Collection Frequency	Daily Dweekly Monthly Quarterly DBi-annually Annually Other – give details:	
8	Tracer Conditions	Not applicable at this time	
9	Minimum Data Set	Total No. of Admissions minus total number of first admissions = total no. of readmissions     Total no. of readmissions is divided by total admissions and presented as percentage	
10	International Comparison	Not applicable at this time	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division.; ISA Managers, Executive Clinical Directors, Area Mental Health Management Teams	
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details:	
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)	
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital	
		□County ☑ Institution □Other – give details:	
15	KPI is reported in which reports ?	Performance Report (NSP) D Other – give details:	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/	
	Additional Information		
Contact details for Data Manager		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400	
/ Spe	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	

Mei	ntal Health Services	
1	KPI Title	Insertions readmission rates to adult south units nor 100,000 negulation in montal health established
		Inpatient readmission rates to adult acute units per 100,000 population in mental health catchment area per quarter
2	KPI Description	Re-admissions are admissions of persons who were either previously admitted to the receiving
		hospital or unit or to any other psychiatric in-patient facility. The relevant number is calculated by
		subtracting the number of first admissions from total admissions and expressed as a rate per
_	MH13	100,000 head of population in mental health catchment area.
3	KPI Rationale	
		This metric is designed to measure readmission rates to acute units, per 100,000 population. Readmission rates can be an indicator of the effectiveness of interventions and/or an indicator of
		the prevalence of severe and enduring mental illness requiring episodic inpatient interventions.
	Indicator Classification	Person Centred Care I Effective Care
		Safe Care□ Better Health and Wellbeing □ Use of Information ☑
		Workforce Use of Resources Governance, Leadership and Management
4	KPI Target	NSP 2016 target: 47.6
	KPI Calculation	Re-admissions are admissions of persons who were either previously admitted to the receiving
		hospital or unit or to any other psychiatric in-patient facility. The relevant number is calculated by
		subtracting the number of first admissions from total admissions and expressed as a rate per
		100,000 head of population in mental health catchment area.
6	Data Source	
	Data Completeness	Health Research Board to BIU Non acute Team
7	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly DMonthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of Admissions to acute units, Number of First admission to acute units (that is, first ever
•		admission).
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI:_Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division; ISA Managers, Executive
12	KPI Reporting Frequency	Clinical directors and Area mental Health Management Teams
12	in reporting riequency	
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (quarter 1 data reported in quarter 2)
		Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
45	KDI is reported in which	□County ☑ Institution □Other – give details:
15	KPI is reported in which reports ?	Performance Report (NSP)  Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	<u>Internet and a second second and a second second</u>
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
/ Spe	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Mett	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
1	KPI Title	Number of adult acute inpatient beds per 100,000 population in the mental health catchment area
		per quarter
2	KPI Description	The total number of acute psychiatric beds within the mental health catchment per 100,000
	MH14	population.
3	KPI Rationale	The metric tracks the number of acute inpatient beds per 100,000 population to be measured
		against the recommendations in A Vision for Change
	Indicator Classification	Person Centred Care     Effective Care
		Safe Care□ Better Health and Wellbeing ☑ Use of Information
		Workforce Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2016 target: 21.6
	KPI Calculation	Number of acute Inpatient places / Population *100,000 / rates are currently collected and
-		calculated by HRB using existing MH catchment area populations rather than LHO area
		populations. This is particularly relevant given that rates are calculated per 100,000 population.
		More info available from HRB.
6	Data Source	
-	Data Completeness	Health Research Board to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly DMonthly Quarterly DBi-annually DAnnually DOther – give
•	Bata Concontent requeitey	details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of acute Inpatient places, Population of Mental Health Catchment
	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
••	i i monitornig	Daily Weekly Monthly Q Quarterly Bi-annually Annually Other – give
		details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Planning, Performance
		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health
		Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
12	in the politing frequency	
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
15	Ri l'eport period	same month of activity)
		Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (quarter 1 data reported in guarter 2)
4.4	KDI Departing Aggregation	CHO Area     CHO Area     CHO Area
14	KPI Reporting Aggregation	
45	KDI is non-outsid in sublish	□County ☑ Institution □Other – give details:
15	KPI is reported in which	Performance Report (NSP) Dother – give details:
40	reports ?	
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
Cont	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	Mental Health Services		
1	KPI Title	Number of adult involuntary admissions	
2	KPI Description	HRB (NPIRS) definition: The legal status recorded by NPIRS is that recorded on admission.	
		Changes may occur in legal status following admission but this is not recorded by the NPIRS.	
		In addition in accordance with 16(1)A of the Mental Health Act 2001 details of all Admission Orders	
		must be provided to the Mental Health Commission.	
	MH15		
3	KPI Rationale	The metric collects data of the number of adult service users who are admitted involuntarily under	
		the Mental Health Act.	
	Indicator Classification	□Person Centred Care	
		Safe Care□ Better Health and Wellbeing □ Use of Information ☑	
		Workforce□Use of Resources□Governance, Leadership and Management □	
4	KPI Target	NSP 2016 target: 1,724	
5	KPI Calculation	Count	
6	Data Source		
	Data Completeness	Health Research Board to Business Information Unit.	
	Data Quality Issues		
7	Data Collection Frequency	Daily DWeekly DMonthly Quarterly DBi-annually Annually Other – give	
		details:	
8	Tracer Conditions	Not applicable at this time	
9	Minimum Data Set	Number of adult involuntary admissions	
10	International Comparison	Not applicable at this time	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:	
	_	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give	
		details:	
		Please indicate who is responsible for monitoring this KPI:Yvonne O'Neill, Head of Planning,	
		Performance and Programme Management; ISA Managers; Executive Clinical Directors and Area	
		Mental Health Management Teams	
12	KPI Reporting Frequency	Daily Weekly Monthly Z Quarterly Bi-annually Annually Other -	
		give details:	
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the	
		same month of activity)	
		Monthly in arrears (June data reported in July)	
		$\sqrt{\text{Quarterly in arrears}}$ (quarter 1 data reported in quarter 2)	
		Rolling 12 months (previous 12 month period)	
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital	
		□County ☑ Institution □Other – give details:	
15	KPI is reported in which	☑ Performance Report (NSP) □ Other – give details:	
	reports ?		
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/	
	Additional Information		
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health	
	and solutio for bata manager	Division Ph. 045 880400	
/ Spe	ecialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	
	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health	
Mail			

Me	ntal Health Services	
1	KPI Title	
1	KPI IIIle	Data of adult involvement administration and 100,000 nonvolution in monthly hould be addressed and super-
2	KPI Description	Rate of adult involuntary admissions per 100,000 population in mental health catchment per quarte
2	KPI Description	HRB (NPIRS) definition : The legal status recorded by NPIRS is that recorded on admission. Changes may occur in legal status following admission but this is not recorded by the NPIRS.
		In addition in accordance with 16(1)A of the Mental Health Act 2001 details of all Admission
		Orders must be provided to the Mental Health
	MH16	
3	KPI Rationale	The metric collects data of the rate per 100,000 population of adults admitted involuntarily under
J	RFT Rationale	the Mental Health Act 2001.
	Indicator Classification	□Person Centred Care
		Safe Care ■ Better Health and Wellbeing □ Use of Information ☑
		Workforce Use of Resources Governance, Leadership and Management
4	KPI Target	NSP 2016target: 9.3
5	KPI Calculation	No. of involuntary admissions expressed as a rate per 100,000 population
6	Data Source	
0	Data Completeness	Health Research Board to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly DMonthly DQuarterly DBi-annually DAnnually DOther – give
'	Data concetton requency	details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of involuntary admissions of adults
-	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	it i monitoring	Daily Dweekly Monthly Q Quarterly DBi-annually Annually Other – give
		details:
		Please indicate who is responsible for monitoring this KPI Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division; ISA Managers, Executive
		Clinical directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
12	in Thepotting Trequency	details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
10		same month of activity)
		Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (quarter 1 data reported in quarter 2)
		Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
14	And the porting Aggregation	□County ☑ Institution □Other – give details:
15	KPI is reported in which	☑ Performance Report (NSP) □ Other – give details:
15	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
-	Additional Information	
	tact details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
Joint	avi actalis ivi Data manayel	Division Ph. 045 880400
Sne	ecialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
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Me	Mental Health Services		
1	KPI Title	Number of General Adult Mental Health Team	
2	KPI Description	The General Adult Community Mental Health Team coordinates a range of interventions for	
		individuals in a variety of locations, including home care treatment, day hospital, outpatient facilities	
		and in-patient units, and interacts and liaises with specialist catchment or regional services to	
		coordinate the care of individuals who require special consideration. A Vision for Change	
		recommends that there should be one General Adult Community Mental Health Team per 50,000	
		population	
	MH18		
3	KPI Rationale	The General Adult Community Mental Health Team is the core mechanism for the delivery of	
		secondary care mental health services to adults and the KPI is to monitor the provision of	
		community mental health services	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification	
		(in some cases you may need to choose two).	
		Person Centred Care     Effective Care	
		Safe Care Better Health and Wellbeing Use of Information	
		Workforce□Use of Resources ☑ Governance, Leadership and Management □	
4	KPI Target	NSP 2016 target: 114	
5	KPI Calculation	Count (point in time)	
6	Data Source	From General Adult Community Mental Health Team to CHO Manager to Business Information	
	Data Completeness	Unit.	
	Data Quality Issues		
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give	
		details:	
8	Tracer Conditions	Not applicable at this time	
9	Minimum Data Set	The number of General Adult Community Mental Health Teams	
10	International Comparison	Not applicable at this time	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:	
••	g	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give	
		details:	
		Please indicate who is responsible for monitoring this KPI:_RDPI, Yvonne O'Neill, Head of	
		Planning, Performance and Programme Management.	
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other –	
	in the polaring the quelley	give details:	
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the	
		same month of activity)	
		☑ Monthly in arrears (June data reported in July)	
		Quarterly in arrears (quarter 1 data reported in quarter 2)	
		Rolling 12 months (previous 12 month period)	
1/	KPI Reporting Aggregation		
14	A A A A A A A A A A A A A A A A A A A	□National □Regional ☑ CHO Area □Hospital □ County □Institution ☑ Other – individual team	
15	KPI is reported in which	☑ County ☐ Institution ☑ Other – Individual team ☑ Performance Report (NSP) ☐ Other – give details:	
13			
16	reports ? Web link to data	http://www.baa.ia/ang/aan.iaaa/publicationa/aangarata/parfarmanaaranarta/	
		http://www.hse.ie/eng/services/publications/corporate/performancereports/	
	Additional Information	Manage ONL-10 Line is a Distance of Discourse of Discours	
cont	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health	
10	alaliat I and	Division Ph. 045 880400	
	ecialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	
Natio	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health	

Mei	ntal Health Services	
1	KPI Title	Number of referrals (including re-referred) received by General Adult Mental Health Team
	KPI Description	This metric is designed to measure the number of referrals received (i) over 16y and less than 18 years old (ii) over 18th birthday referred to each General Adult Mental Health Team during the reporting period. First or re-referrals to General Adult Services generally take place in an outpatient clinic or may occasionally be seen in the patient's home. The patients are for the most part home-based. Homes include : - a private house ( owned or rented etc ) - a private or public residential setting e.g. a nursing home - transitory accommodation e.g. hostel for the homeless , refugee centre or B&B Referrals do not include: i. Referrals between members of the community mental health team. ii. Specialist clinics such as for adults with ADHD. iii. Referrals seen in hospital settings ( whether general , maternity , geriatric etc )
	MH19	
3	KPI Rationale	The KPI is intended to measure the level of demand for the General Adult Community Mental
		Health Team
	Indicator Classification	□Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
	KPI Target	NSP 2016 target: 43,687
	KPI Calculation	Count (Cumulative)
6	Data Source	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Completeness	Unit.
-	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	number of referrals by age group
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		oDaily qWeekly ☑ Monthly oQuarterly oBi-annually oAnnually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
12	KPI Reporting Frequency	Clinical Directors and Area Mental Health Management Teams
12	na riteporting riequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
4-		□ County □Institution ☑ Other – individual team
15	KPI is reported in which	☑ Performance Report (NSP) Other – give details:
16	reports ? Web link to data	http://www.boo.jo/op/joog/publications/comparate/parformer.comparts/
	Web link to data Additional Information	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	ast actuing for Data manayer	Division Ph. 045 880400
/ Spe	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
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Ma	utal I a alth Camilana	
Me	ntal Health Services	
1	KPI Title	Number of referreds (including to referred) concented by Concerd. Adult Martel Haalth Toors
-		Number of referrals (including re-referred) accepted by General Adult Mental Health Team
2	KPI Description	This metric is designed to measure the number of referrals accepted based on the criteria operated
		by General Adult Mental Health Team in the reported period by (i) over 16y and less than 18 years
		old (ii) over 18th birthday referred to each General Adult Mental Health Team during the reporting
	MH20	period.
3	KPI Rationale	The purpose of this metric is to gain information over time on the numbers of referrals accepted to
		support the monitoring and evaluating of trends over time per area/ region and across the service
-		nationally.
	Indicator Classification	□Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce□Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2016 target: 41,448
5	KPI Calculation	Count (Cumulative)
6	Data Source	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Completeness	Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Dweekly Monthly oQuarterly Bi-annually Annually Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	number of referrals accepted, by age
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		oDaily qWeekly I Monthly oQuarterly oBi-annually oAnnually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
		details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		County Institution I Other – give details: individual teams
15	KPI is reported in which	Performance Report (NSP)
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
-	Additional Information	
	tact details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
/ Spe	ecialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
<u> </u>	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
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Mer	ntal Health Services	
1	KPI Title	Number of new (including re-referred) cases offered first appointment and Seen or DNA by wait time by (i) over 16y and less than 18 years old (ii) over 18th birthday referred to General Adult Mental Health Team during the reporting period. i) <1 Weeks
		ii) > 1 Weeks but <= 2 Weeks
		iii) > 2 Weeks but <= 3 Weeks
		iv) > 3 Weeks but <= 4 Weeks
		v) > 4 Weeks but <= 8 Weeks
		vi) > 8 Weeks but <= 12 Weeks
		vii) >12 Weeks
2	KPI Description	Refers to General Adult Community Mental Health Team. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode Wait time: The number of Weeks from the point at which the referral is received by a member of the General Adult MH team to the day the assessment takes place (less any delay due to client
		postponement of assessment) excluding both of those days Sub Definitions
		Wait Time is day referral received in the office when it is date stamped by admin staff. (Triage in each service should be efficient and mechanisms put in place it occurs as close as possible to day received )
		A DNA if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA
	MH21	
3	KPI Rationale	Wait times to General Adult MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
	Indicator Classification	□Person Centred Care
		Safe Care⊡ Better Health and Wellbeing □ Use of Information ☑
4	KDI Terret	Workforce ☑ Use of Resources Governance, Leadership and Management □
	KPI Target KPI Calculation	NSP 2016 target: 41,810 Count (Cumulative)
-	Data Source	
	Data Completeness	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Quality Issues	Unit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
	Tracer Conditions	Not applicable at this time
	Minimum Data Set International Comparison	Number of referrals , number appointments offered, number of DNA, by age Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive
12	KPI Reporting Frequency	
	KPI Reporting Frequency KPI report period	Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         Daily       Weekly       Monthly       Quarterly       Bi-annually       Annually       Other – give         details:       Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       ☑       □Urrent (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       ☑       ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)
13	KPI report period	Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       ☑       □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)       □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)       □
13		Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       ☑       ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National       □Regional ☑ CHO Area
13 14 15	KPI report period	Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       ☑       □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)       □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)       □
13 14 15	KPI report period KPI Reporting Aggregation KPI is reported in which	Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       ☑       ☑       ☑       ☑       ☑       ☑       ☑         ☑ Monthly       ☑       ☑       ☑       ☑       ☑       ☑       ☑       ☑         ☑
13 14 15 16	KPI report period KPI Reporting Aggregation KPI is reported in which reports ?	Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily       □Weekly       ☑ Monthly       □Quarterly       □Bi-annually       □Annually       □Other – give         details:       ☑ <td< td=""></td<>
13 14 15 16 17	KPI report period KPI Reporting Aggregation KPI is reported in which reports ? Web link to data	Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         Daily       Weekly       Monthly       Quarterly       Bi-annually       Annually       Other – give         details:       Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)       Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         Image: Current (e.g. daily data reported in July)       Image: Current (e.g. daily data reported in July)         Image: Current (e.g. daily data reported in July)       Image: Current (e.g. daily data reported in July)         Image: Current (e.g. daily data reported in July)       Image: Current (e.g. data reported in July)         Image: Current (e.g. data reported in July)       Image: Current (e.g. data reported in Quarter 2)         Image: County in arrears (June data reported in Quarter 2)       Image: Current (e.g. data reported in Quarter 2)         Image: County Institution Image: CHO Area       Image: Cho Area         Image: County Institution Image: Cho Area       Image: Cho Area         Image: Current (e.g. daily conter – give details:       Image: Cho Area         Image: County Institution Image: Cho Area       Image: Cho Area         Image: County Institution Image: Cho Area       Image: Cho Area         I
13 14 15 16 17 Conta	KPI report period KPI Reporting Aggregation KPI is reported in which reports ? Web link to data Additional Information	Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         Daily       Weekly       Monthly       Quarterly       Bi-annually       Annually       Other – give         details:       Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)       Image: Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         Image: Current (e.g. daily data reported in July)       Image: Current (e.g. daily data reported in July)         Image: Current (e.g. daily data reported in July)       Image: Current (e.g. daily data reported in July)         Image: Current (e.g. daily data reported in July)       Image: Current (e.g. daily data reported in July)         Image: Current (e.g. daily data reported in July)       Image: Current (e.g. data reported in July)         Image: Current (e.g. data reported in July)       Image: Current (e.g. data reported in July)         Image: Current (e.g. data reported in July)       Image: Current (e.g. data reported in Quarter 2)         Image: Count (e.g. data reported in Quarter 1 data reported in Quarter 2)       Image: Current (e.g. data reported in Quarter 2)         Image: Count (for the regive data report (for the regive data reported teams)       Image: Count (for the regive data report (for the regive data report (for the regive data reported teams)         Image: Cou

Mei	ntal Health Services	
1	KPI Title	Number of new (including re-referred) cases offered first appointment and Seen by wait time by (i) over 16y and less than 18 years old (ii) over 18th birthday referred to General Adult Mental Health Team during the reporting period. i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 4 Weeks vi) > 8 Weeks but <= 12 Weeks vii) >12 Weeks
2	KPI Description	Refers to General Adult Community Mental Health Team. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode Wait time: The number of Weeks from the point at which the referral is received by a member of the General Adult MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days Sub Definitions Wait Time is day referral received in the office when it is date stamped by admin staff. (Triage in each service should be efficient and mechanisms put in place it occurs as close as possible to day received ) A DNA if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a
		DNA
2	MH22 KPI Rationale	
3	KPI Rationale	Wait times to General Adult MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care□ Better Health and Wellbeing □ Use of Information ☑
		Workforce I Use of Resources Governance, Leadership and Management
	KPI Target	NSP 2016 target: 35,430
-	KPI Calculation	Count (Cumulative)
	Data Source	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Completeness Data Quality Issues	Unit.
	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of referrals, number appointments offered, number of DNA, by age
	International Comparison	Not applicable at this time
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	<ul> <li>☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□ Monthly in arrears (June data reported in July)</li> <li>□ Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□ Rolling 12 months(previous 12 month period)</li> </ul>
	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
_	KPI is reported in which reports ?	Performance Report (NSP) D Other – give details:
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
_	Additional Information	
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
NI 41		

Mei	ntal Health Services	
1	KPI Title	Number of new (including re-referred) cases offered first appointment and DNA by wait time by (i) over 16y and less than 18 years old (ii) over 18th birthday referred to General Adult Mental Health Team during the reporting period. i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) >12 Weeks
2	KPI Description	Refers to General Adult Community Mental Health Team. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode Wait time: The number of Weeks from the point at which the referral is received by a member of the General Adult MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days Sub Definitions Wait Time is day referral received in the office when it is date stamped by admin staff. (Triage in each service should be efficient and mechanisms put in place it occurs as close as possible to day received ) A DNA if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA
	MH23	
3	KPI Rationale	Wait times to General Adult MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
	Indicator Classification	□Person Centred Care
		Safe Care
		Workforce Ø Use of Resources Governance, Leadership and Management□
	KPI Target	NSP 2016 target: 6,380
-	KPI Calculation	Count (Cumulative)
	Data Source Data Completeness	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Quality Issues	Unit.
	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
	Tracer Conditions	Not applicable at this time
	Minimum Data Set	Number of referrals , number appointments offered, number of DNA, by age
10	International Comparison	Not applicable at this time
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
	KPI report period	<ul> <li>☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	☑ Performance Report (NSP) □ Other – give details:
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
16	TTED IIIK to data	
	Additional Information	
17		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
17 Conta / Spe	Additional Information	

Me	ntal Health Services	
1	KPI Title	%. of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month
2	KPI Description	Percentage of new (including re-referred) cases offered first appointment and that did not attend (DNA) appointment when referred to General Adult Mental Health Team during the reporting period, by (i) over 16y and less than 18 years old (ii) over 18th birthday <b>A DNA:</b> if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA
3	KPI Rationale	
Ū		The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
	Indicator Classification	□Person Centred Care
		Safe Care□ Better Health and Wellbeing □Use of Information
		Workforce Use of Resources I Governance, Leadership and Management
4	KPI Target	NSP 2016 target: 18%
5	KPI Calculation	Count number of new cases DNA and divide by total number of new appointments offerred and calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	From General adult Community Mental Health Team to CHO Manager to Business Information
	Data Completeness	Unit.
_	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly oQuarterly DBi-annually Annually Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	number of appointments offered
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily DWeekly Monthly DQuarterly DBi-annually Annually Other – give details:
13	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
/ Spe	ecialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
4		
1	KPI Title	Number of cases closed/discharged by General Adult Mental Health Team
2	KPI Description	This metric is designed to measure the number of cases closed/discharged to other service or to
		Primary Care or through case of death (i) over 16y and less than 18 years old (ii) over 18th
		birthday from the General Adult Mental Health Team during the reporting period.
		(include in cases closed/discharged those cases that were seen and discharged from service in
		initial assessment)
	MH25	
3	KPI Rationale	KPI is designed to measure throughput of General Adult Community Mental Healht Teams in
		conjunction with other indicators.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care ☑ Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information√
		Workforce I Use of Resources Governance, Leadership and Management
4	KPI Target	NSP 2016 target: 33,158
5	KPI Calculation	Count (Cumulative)
6	Data Source	
•	Data Completeness	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Quality Issues	-Unit.
7	Data Collection Frequency	Daily Dweekly Monthly oQuarterly DBi-annually Annually Other – give
'	Data collection requency	details:
8	Tracer Conditions	not applicable at this time
9	Minimum Data Set	number of cases, number discharged
	International Comparison	not applicable at this time
10	international comparison	not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
i i		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
		details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		□ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □ Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
	act details for Data Manager	Vianna O'Naill Haad of Planning Deformance and Programma Management Mantal Haalth
5011	act uctains for Data Mandyer	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
C	vaialist Lood	Division Ph. 045 880400
	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
vatio	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	Number of Psychiatry of Old Age Mental HealthTeams
2	KPI Description	The Psychiatry of Old Age Service coordinates a range of interventions for individuals in a variety
		of locations, including home care treatment, day hospital, outpatient facilities and in-patient units,
		and interacts and liaises with specialist catchment or regional services to coordinate the care of
	MH26	individuals who require special consideration.
3	KPI Rationale	Measure of the provision of Psychiatry of Old Age Teams by population as per Vision recommendations
	Indicator Classification	Person Centred Care  Effective Care
		Safe Care□ Better Health and Wellbeing □ Use of Information ☑
		Workforce□Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2016 target: 26
	KPI Calculation	Count (point in time)
6	Data Source	From Develoption of Old Astronomic Montal Handle Handle Old Montanta Device of
	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business
	Data Quality Issues	Information Unit.
7	Data Collection Frequency	Daily DWeekly Monthly Quarterly DBi-annually DAnnually Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of Teams
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	_	Daily Weekly I Monthly Quarterly Bi-annually Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give
		details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
14	KPI Reporting Aggregation	8
45	KDL is non-orted in which	County Institution I Other – give details: individual teams     Performance Report (NSP)      Other – give details:
15	KPI is reported in which	
40	reports ? Web link to date	
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
Cont	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
· · ·	ecialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	
		Number of referrals (including re-referred) received by Psychiatry of Old Age Mental Health Teams
2	KPI Description	This metric is designed to measure the number of referrals received by the Psychiatry of Old Age
	•	Service team during the reporting period for patients over their 65th birthday
		First or re/referrals to the Psychiatry of Old Age Service consist mostly of those whom will be seen
		on domiciliary assessment but some may be seen in OPD settings.
		The patients are for the most part home-based. Homes include :
		- a private house ( owned or rented etc )
		- a private or public residential setting e.g. a nursing home
		- transitory accommodation e.g. hostel for the homeless , refugee centre or B&B
		Referrals do not include:
		i. Referrals between different members of the team.
		ii. Referrals to specialist clinics such as memory clinics.
		iii. Referrals seen in hospital settings. ( whether general , maternity , geriatric etc )
	MH27	
3	KPI Rationale	The purpose of this metric is to gain information over time on the numbers of referrals accepted to
		support the monitoring and evaluating of trends over time per area/ region and across the service
		nationally.
	Indicator Classification	□Person Centred Care
		Safe Care□ Better Health and Wellbeing □Use of Information√
		Workforce $$ Use of Resources $\Box$ Governance, Leadership and Management $\Box$
	KPI Target	NSP 2016 target: 11,664
5	KPI Calculation	Count (Cumulative)
6	Data Source	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business
	Data Completeness	Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
		details:
	Tracer Conditions	Not applicable at this time
-	Minimum Data Set	Number of referrals
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly I Monthly Quarterly Bi-annually Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly I Monthly Quarterly Bi-annually Annually Other – give
		details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		□ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □ Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
-	Additional Information	
_	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	and and the Data manager	Division Ph. 045 880400
Sno	cialist Lead	
	onal Lead and Division	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
Induc	nai Leau anu Division	

Mo	ntal Health Services	
INIC		
1	KPI Title	
-		Number of referrals (including re-referred) accepted by Psychiatry of Old Age Mental Health Team
2	KPI Description	This metric is designed to measure the number of referrals accepted based on the criteria operated
-	na i Beschpuoli	the Psychiatry of Old Age Team during the reporting period for patients over their 65th birthday
	MH28	
3	KPI Rationale	The purpose of this metric is to gain information over time on the numbers of referrals accepted to
3	IN I Nationale	support the monitoring and evaluating of trends over time per area/ region and across the service
		nationally.
	Indicator Classification	□Person Centred Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information
		Workforce Use of Resources Ø Governance, Leadership and Management
4	KPI Target	NSP 2016 target: 11,082
5	KPI Calculation	Count (Cumulative)
6	Data Source	From Psychiatry of Old Age Community Mental Health Team to ISA Manager to Business
	Data Completeness	Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly oQuarterly DBi-annually Annually Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of referrals
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	5	Daily Weekly Monthly Quarterly Bi-annually oAnnually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
	······································	details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
-	- Proprieta	same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
••		□ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □ Other – give details:
10	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
-	Additional Information	
	tact details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
0011	ave actano for Data manager	Division Ph. 045 880400
/ Sne	ecialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
· · ·	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
Mail		

Mer	ntal Health Services	
1	KPI Title	Number of new (including re-referred) cases offered first appointment and Seen or DNA in the Psychiatry of Old Age Mental Health Team by wait time during the reporting period for patients over their 65th birthday i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iii) > 2 Weeks but <= 4 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) >12 Weeks
2	KPI Description	Refers to Psychiatry of Old Age Mental Health Service. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the
		Patient has been previously referred to the same profession for the same condition at the same location. A re- referral always marks the start of a new episode Wait time: The number of Weeks from the point at which the referral is received by a member of the Community MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days Sub Definitions Wait Time is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received)
		A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
	MH29	
3	KPI Rationale	Wait times to Psychiatry of Old Age MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
	Indicator Classification	□Person Centred Care
		Safe Care□ Better Health and Wellbeing □Use of Information
		Workforce Use of Resources I Governance, Leadership and Management
4	KPI Target	NSP 2016 target: 10,384
	KPI Calculation	Count (Cumulative)
6	Data Source	From Bouchistry of Old Aco Community Montol Haolth Toom to CHO Monoger to Ducinose
	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
	Tracer Conditions	Not applicable at this time
	Minimum Data Set	number of appointments offered
	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	DNational DRegional D CHO Area Hospital
	KPI Reporting Aggregation KPI is reported in which reports ?	DNational DRegional D CHO Area Hospital
15	KPI is reported in which	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams ☑ Performance Report (NSP) □ Other – give details:
15 16	KPI is reported in which reports ?	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15 16 17	KPI is reported in which reports ? Web link to data	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams ☑ Performance Report (NSP) □ Other – give details:
15 16 17 Conta	KPI is reported in which reports ? Web link to data Additional Information	□National       □Regional       ☑ CHO Area       □Hospital         □ County       Institution       ☑ Other – give details: individual teams         ☑ Performance Report (NSP)       □ Other – give details: <u>http://www.hse.ie/eng/services/publications/corporate/performancereports/</u>

2 K 	KPI Title KPI Description KPI Description	Number of new (including re-referred) cases offered first appointment and Seen in the Psychiatry of Old Age Mental Health Team by wait time during the reporting period for patients over their 65th birthday i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) > 12 Weeks Refers to Psychiatry of Old Age Mental Health Service. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re- referral always marks the start of a new episode Wait time: The number of Weeks from the point at which the referral is received by a member of the Community M team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days Sub Definitions Wait Time is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in th house when the clinician arrives to carry out the assessment.
2 K 	(PI Description	of Old Age Mental Health Team by wait time during the reporting period for patients over their 65th birthday i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 8 Weeks vii) > 12 Weeks vii) > 12 Weeks Refers to Psychiatry of Old Age Mental Health Service. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re- referral always marks the start of a new episode Wait time: The number of Weeks from the point at which the referral is received by a member of the Community M team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days Sub Definitions Wait Time is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the
	ИН30	birthday i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) > 12 Weeks <b>Refers to Psychiatry of Old Age Mental Health Service.</b> <b>Re-referred case:</b> A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re- referral always marks the start of a new episode <b>Wait time:</b> The number of Weeks from the point at which the referral is received by a member of the Community M team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days <b>Sub Definitions</b> <b>Wait Time</b> is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) <b>A DNA:</b> if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A <b>domiciliary DNA</b> is defined as a confirmed appointment for the domiciliary but the person not being present in the
	ИН30	<ul> <li>i) &lt;1 Weeks</li> <li>ii) &gt; 1 Weeks but &lt;= 2 Weeks</li> <li>iii) &gt; 2 Weeks but &lt;= 3 Weeks</li> <li>iv) &gt; 3 Weeks but &lt;= 4 Weeks</li> <li>vi) &gt; 3 Weeks but &lt;= 4 Weeks</li> <li>vi) &gt; 4 Weeks but &lt;= 8 Weeks</li> <li>vi) &gt; 8 Weeks but &lt;= 12 Weeks</li> <li>vii) &gt; 12 Weeks</li> </ul> <b>Refers to Psychiatry of Old Age Mental Health Service. Re-referred case:</b> A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode <b>Wait time:</b> The number of Weeks from the point at which the referral is received by a member of the Community M team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days <b>Sub Definitions Wait Time</b> is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) <b>A DNA:</b> if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A <b>domiciliary DNA</b> is defined as a confirmed appointment for the domiciliary but the person not being present in the
N 3 K	ИН30	<ul> <li>ii) &gt; 1 Weeks but &lt;= 2 Weeks</li> <li>iii) &gt; 2 Weeks but &lt;= 3 Weeks</li> <li>iv) &gt; 3 Weeks but &lt;= 4 Weeks</li> <li>iv) &gt; 3 Weeks but &lt;= 4 Weeks</li> <li>vi) &gt; 4 Weeks but &lt;= 8 Weeks</li> <li>vi) &gt; 8 Weeks but &lt;= 12 Weeks</li> <li>vii) &gt; 12 Weeks</li> </ul> <b>Refers to Psychiatry of Old Age Mental Health Service. Re-referred case:</b> A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode <b>Wait time:</b> The number of Weeks from the point at which the referral is received by a member of the Community M team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days <b>Sub Definitions Wait Time</b> is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) <b>A DNA:</b> if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A <b>domiciliary DNA</b> is defined as a confirmed appointment for the domiciliary but the person not being present in the
N 3 K	ИН30	<ul> <li>iii) &gt; 2 Weeks but &lt;= 3 Weeks</li> <li>iv) &gt; 3 Weeks but &lt;= 4 Weeks</li> <li>iv) &gt; 3 Weeks but &lt;= 4 Weeks</li> <li>vi) &gt; 4 Weeks but &lt;= 8 Weeks</li> <li>vii) &gt; 8 Weeks but &lt;= 12 Weeks</li> <li>viii) &gt; 12 Weeks</li> </ul> <b>Refers to Psychiatry of Old Age Mental Health Service. Re-referred case:</b> A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode <b>Wait time:</b> The number of Weeks from the point at which the referral is received by a member of the Community M team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days <b>Sub Definitions Wait Time</b> is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) <b>A DNA:</b> if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A <b>domiciliary DNA</b> is defined as a confirmed appointment for the domiciliary but the person not being present in the
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N 3 K	ИН30	vii) >12 Weeks         Refers to Psychiatry of Old Age Mental Health Service.         Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode         Wait time: The number of Weeks from the point at which the referral is received by a member of the Community M team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days         Sub Definitions         Wait Time is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received)         A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA         A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the
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		Wait times to Psychiatry of Old Age MH team for mental health assessment provide a measure of
		service access in the community and the timeliness of that access.
1.		
	ndicator Classification	Person Centred Care     I Effective Care
		Safe Care□ Better Health and Wellbeing □Use of Information
		Workforce Use of Resources I Governance, Leadership and Management
4 K	(PI Target	NSP 2016 target: 10,083
	(PI Calculation	Count (Cumulative)
6 D	Data Source	
0	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business
	Data Quality Issues	Information Unit.
7 D	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
		details:
8 T	Fracer Conditions	Not applicable at this time
9 N	Ainimum Data Set	number of appointments offered
10 li	nternational Comparison	Not applicable at this time
11 K	(PI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly I Monthly Quarterly Bi-annually Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12 K	(PI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
	,	details:
13 K	(PI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
	· · · · · · · · · · · · · · ·	same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in guily)
		Rolling 12 months(previous 12 month period)
	(PI Reporting Aggregation	□ National □ Regional ☑ CHO Area □ Hospital
44 14	API Reporting Aggregation	
14 K		County Institution Ø Other – give details: individual teams
15 K	(PI is reported in which	Performance Report (NSP) D Other – give details:
15 K r	(PI is reported in which eports ?	
15 K r 16 V	(PI is reported in which eports ? Neb link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
15 K rd 16 V 17 A	(PI is reported in which eports ? Veb link to data Additional Information	http://www.hse.ie/eng/services/publications/corporate/performancereports/
15 K rd 16 V 17 A	(PI is reported in which eports ? Neb link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/ Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
15 K r 16 V 17 A Contac	(PI is reported in which eports ? Veb link to data Additional Information	http://www.hse.ie/eng/services/publications/corporate/performancereports/

and the second division of the second divisio	ntal Health Services	
1	KPI Title	
'	RFI IIUe	Number of new (including re-referred) cases offered first appointment and DNA in the Psychiatry
		of Old Age Mental Health Team by wait time during the reporting period for patients over their 65th
		birthday
		i) <1 Weeks
		ii) > 1 Weeks but <= 2 Weeks
		iii) > 2 Weeks but <= 3 Weeks
		iv) > 3 Weeks but <= 4 Weeks
		v) > 4 Weeks but <= 8 Weeks
		vi) > 8 Weeks but <= 12 Weeks
		vii) >12 Weeks
2	KPI Description	Refers to Psychiatry of Old Age Mental Health Service.
		<b>Re-referred case:</b> A re-referral is the referral of a patient to a health professional of a specific profession, when the
		patient has been previously referred to the same profession for the same condition at the same location. A re- referral always marks the start of a new episode
		Wait time: The number of Weeks from the point at which the referral is received by a member of the Community M
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		A <b>Jaminilian</b> , DNA is defined as a confirmed ennoistment for the demisition, but the access not being access to the
		A <b>domiciliary DNA</b> is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
		nouse when the chilician arrives to carry out the assessment.
	MH31	
3	KPI Rationale	Wait times to Psychiatry of Old Age MH team for mental health assessment provide a measure of
		service access in the community and the timeliness of that access.
	Indicator Classification	Person Centred Care  Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce Use of Resources 🗹 Governance, Leadership and Management 🗆
4	KPI Target	NSP 2016 target: 301
5	KPI Calculation	Count (Cumulative)
6	Data Source	
	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business
	Data Quality Issues	Information Unit.
	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	Not applicable at this time
-	Minimum Data Set	number of appointments offered
	International Comparison	
	international oompanoon	Not applicable at this time
11		
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
11		KPI will be monitored on a (please indicate below) basis: Daily Weekly ⊠ Monthly Quarterly Bi-annually Annually oOther – give details:
11		KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
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12 13	KPI Monitoring KPI Reporting Frequency KPI report period	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)
12 13	KPI Monitoring KPI Reporting Frequency	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital
12 13 14	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital         □ County Institution ☑ Other – give details: individual teams
12 13 14	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital
12 13 14 15	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which reports ?	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital         □ County Institution ☑ Other – give details: individual teams         ☑ Performance Report (NSP) □ Other – give details:
12 13 14 15 16	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which reports ? Web link to data	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital         □ County Institution ☑ Other – give details: individual teams
12 13 14 15 <u>16</u> 17	KPI Monitoring KPI Reporting Frequency KPI report period KPI reporting Aggregation KPI is reported in which reports ? Web link to data Additional Information	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital         □ County Institution ☑ Other – give details: individual teams         ☑ Performance Report (NSP) □ Other – give details:
12 13 14 15 16 17	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which reports ? Web link to data	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital         □ County Institution ☑ Other – give details: individual teams         ☑ Performance Report (NSP) □ Other – give details:
12 13 14 15 16 17 Conta	KPI Monitoring KPI Reporting Frequency KPI report period KPI report period KPI is reported in which reports ? Web link to data Additional Information act details for Data Manager	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (quarter 1 data reported in quarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital         □ County Institution ☑ Other – give details: individual teams         ☑ Performance Report (NSP) □ Other – give details:
12 13 14 15 16 17 Conta	KPI Monitoring KPI Reporting Frequency KPI report period KPI reporting Aggregation KPI is reported in which reports ? Web link to data Additional Information	KPI will be monitored on a (please indicate below) basis:         Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:         Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,         Performance and Programme Management, Mental Health Division, ISA Managers, Executive         Clinical Directors and Area Mental Health Management Teams         □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give         details:         ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)         □Monthly in arrears (June data reported in July)         □Quarterly in arrears (June data reported in guarter 2)         □Rolling 12 months(previous 12 month period)         □National □Regional ☑ CHO Area □Hospital         □ County Institution ☑ Other – give details: individual teams         ☑ Performance Report (NSP) □ Other – give details:         http://www.hse.ie/eng/services/publications/corporate/performancereports/

Me	ntal Health Services	
1	KPI Title	%. of new (including re-referred) Old Age Psychiatry Team cases offered appointment and DNA in the current month
2	KPI Description	Number of new (including re-referred) cases offered first appointment and and that did not attend (DNA) appointment in the Psychiatry of Old Age Mental Health Team during the reporting period for patients over their 65th birthday A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or reoffer appointment this would then be constituted as a DNA A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
	MH32	
3	KPI Rationale	The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
	Indicator Classification	□Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce Use of Resources 🗹 Governance, Leadership and Management 🗆
	KPI Target	NSP 2016 target: 3%
5	KPI Calculation	Count number of new cases DNA and divide by total number of new appointments offerred and calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	From Doughistry of Old Age Community Mental Health Team to CHO Menager to Ducinese
	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	information Unit.
7	Data Collection Frequency	Daily      Weekly      Monthly oQuarterly      Bi-annually      Annually      Other – give      details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	number of appointments offered
10	International Comparison	Not applicable at this time
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily     Weekly     Monthly     Quarterly     Bi-annually     Annually     Other – give     details:
13	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
	The second regarded and the second se	□ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	Image: Second processing and the second procesing and the second processing and the second processing and
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	napar www.noo.ao/ong/sor woos/publicationarcorporate/periormancereporta/
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
/ Sno	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
Induc		

Mei	ntal Health Services	
1	KPI Title	Number of cases closed/discharged by Psychiatry of Old Age Mental Health Team
2	KPI Description	This metric is designed to measure the number of cases closed/discharged to other service or Primary Care or through case of death by the Psychiatry of Old Age Team during the reporting period for patients over their 65th birthday. (include in cases closed/discharged those cases that were seen and discharged from service in
	MH33	initial assessment)
3	KPI Rationale	The purpose of this metric is to gain information over time on the numbers of cases closed/discharged and monitoring and evaluating the trends over time per area/ region and across the service nationally.
	Indicator Classification	Person Centred Care     Iffective Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2016 target: 8,866
	KPI Calculation	Count (Cumulative)
6	Data Source	
•	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business
	Data Quality Issues	Information Unit.
7	Data Collection Frequency	Daily DWeekly Monthly DQuarterly DBi-annually DAnnually DOther – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of cases discharged, closed
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give details:
13	KPI report period	<ul> <li>Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>Monthly in arrears (June data reported in July)</li> <li>Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP)
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
-	Additional Information	
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Spe	ecialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	Number of Child and Adolescent Community Mental Health Teams
2	KPI Description	Vision for Change recommended the number of Community Child and Adolescent Mental Health
	MH34	Teams.
3	KPI Rationale	Implementation of recommendations of A Vision for Change and to address the Regulations of the
		Mental Health Commission.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care     Effective Care
		Safe Care□ Better Health and Wellbeing □Use of Information□
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target: 62
5	KPI Calculation	Count point in time
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly √Quarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	1 team per 50,000 head of population as per VFC
9	Minimum Data Set	No of CAMHS Commnunity Mental Health Teams
10	International Comparison	No
11	KPI Monitoring	Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
-		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other -
		give details:
13	KPI report period	VCurrent (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
-		□ County □ Institution ☑Other – give details: Individual Teams
15	KPI is reported in which	✓ Performance Report (NSP) □Other – give details:
-	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	Ũ	Division Ph. 045 880400
Spec	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

	ntal Health Services	
1	KPI Title	Number of Child and Adolescent Day Hospital Teams
2	KPI Description	
	МН35	<i>Vision for Change</i> has recommended the number of Child and Adolescent Day Hospital Teams.
3	KPI Rationale	Implementation of recommendations of A Vision for Change and to address the Regulations of the
		Mental Health Commission.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care
		Safe Care□ Better Health and Wellbeing □Use of Information□
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target: -4
5	KPI Calculation	Count point in time
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other –
		give details:
8	Tracer Conditions	As per VFC
9	Minimum Data Set	As per VFC
10	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		oDaily oWeekly o Monthly oQuarterly oBi-annually √Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
		details:
13	KPI report period	$\sqrt{\text{Current}}$ (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		□Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		□ County □ Institution ☑ Other – give details: Individual Teams
15	KPI is reported in which	☑ Performance Report (NSP) □Other – give details:
	reports ?	
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
Conf	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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-	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

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1	KPI Title	Number of Paediatric Liaison Teams
	KPI Description	
-	MH36	Vision for Change recommended number of Paediatric Liaison Teams.
3	KPI Rationale	Monitor implementation of recommendations of A Vision for Change
•	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		Workforce□Use of Resources ☑ Governance, Leadership and Management □
	KPI Target	NSP 2016 target: -3
5	KPI Calculation	Count point in time
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other -
		give details:
8	Tracer Conditions	1 team per 300,000 head of population as per VFC
9	Minimum Data Set	As per VFC
	International Comparison	ves
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
••	i i monitoring	
		oDaily oWeekly o Monthly oQuarterly oBi-annually $\sqrt{Annually}$ oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – giv
		details:
13	KPI report period	$\sqrt{Current}$ (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		County Institution Other – give details: Individual Teams
15	KPI is reported in which	☑ Performance Report (NSP) □Other – give details:
-	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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pec	ialist Lead onal Lead and Division	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie

Mei	ntal Health Services	
1	KPI Title	Number of Child/Adolescent admissions to HSE/HSE Funded Child and Adolescent mental health
		in-patient units
2	KPI Description	
	MH37	Number of admissions to HSE Child and Adolescent Inpatient Units.
3	KPI Rationale	To monitor the number of admissions to each C&A unit
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care     Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources I Governance, Leadership and Management o
	KPI Target	NSP 2016 target: -281
5	KPI Calculation	Count Cumulative
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Inpatient psychiatric treatment is usually indicated for children and adolescents with severe psychiatric disorders such as schizophrenia, depression, and mania. Other presentations include severe complex medical-psychiatric disorders such as anorexia / bulimia. Admission may also be required for clarification of diagnosis and appropriate treatment or for the commencement and monitoring of medication. The increasing incidence of the more severe mental health disorders in later adolescence increases the need for inpatient admission.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details. For each addmission a form is sent to the Mental Health Commission informing of admission
10	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI: Health Service and Mental Health commisson
	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	$\sqrt{c}$ urrent (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
		□Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	☑National ☑Regional ☑ CHO Area □Hospital □ County ☑ Institution □Other – give details:
15	KPI is reported in which reports ?	Performance Report (NSP) DOther – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
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-	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	Number of children/adolescents admitted to adult HSE mental health inpatient units:
		i) <16 yrs
		ii) <17 yrs
		iii) <18 yrs
2	KPI Description	
	MH38-41	Number of children/adolescents admitted to adult HSE mental health inpatient units.
3	KPI Rationale	The Mental Health Commission code of practice on regulating the admission of children under 18 to
		adult inpatient units. From July 1st 2009, no child under 16 is to be admitted to an adult inpatient
		unit except in exceptional circumstances, from December 2010, no child under 17 can be admitted
		to an adult inpatient unit except under exceptional circumstances. With effect from 1st December
		2011, no child under 18 should be admitted to an adult inpatient unit unless in exceptional
		circumstances. This metric is to monitor compliance with the code of practice.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources I Governance, Leadership and Management o
	KPI Target	NSP 2016 target: - 30 (<16 yrs - 0, <17 yrs - 0, <18 yrs - <30)
5	KPI Calculation	Count Cumulative
6	Data Source	
	Data Completeness	Mental Health Commission to Business Information Unit.
7	Data Quality Issues	Doite Divisitie Marthly D. Australy DDiscoursely DArmarky DOther size
7	Data Collection Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
8	Tracer Conditions	details: The Mental Health Commission set a timeline for achievement of this goal. From July 2009 no
0		admission of children under the age of 16 years, except in specified exceptional circumstances, to
		adult units was to take place. In December 2010 this age limit increased to include children under
		the age of 17 years. In December 2011 this increased to include all children under the age of 18
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
9		details, Parental/Guardian consent forms. Parent/Guardian contact details. For each addmission a
		form is sent to the Mental Health Commission informing of admission
10	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑ Monthly □ Quarterly □Bi-annually □Annually □Other – give
		details: Mental Health Commission
12	KPI Reporting Frequency	□Daily □Weekly ØMonthly □ Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	I Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		Comparison of the second seco
14	KPI Reporting Aggregation	ØNational □Regional □ CHO Area □Hospital
15	KPI is reported in which	□ County     □ Institution     □Other – give details:     □     Performance Report (NSP)     □Other – give details:
15	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	nup.nwww.noc.iorengroenweeo.publicationo/corporate/performaticereporto/
	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
Spec	alist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
-	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

	ntal Health Services	
vie	Ilai rieailii Services	
1	KPI Title	Number of involuntary admissions of children and adolescents
-	KPI Description	Involuntary admission of children is regulated by procedures under Section 25 of the Mental Health
-	MH42	Act.
3	KPI Rationale	To monitor the trend of involuntary admission.
•	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		$\square$ Person Centred Care $\checkmark$ Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources Governance, Leadership and Management o
4	KPI Target	NSP 2016 target: - 15
5	KPI Calculation	Count Cumulative
6	Data Source	
0	Data Completeness	_ CAMHS Team /Approved Centre to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□ Daily □Weekly Monthly Quarterly □Bi-annually √Annually □Other – give details:
1	Data Collection Frequency	□Daily □Weekly Monthly Quarterly □Bi-annually √Annually □Other – give details:
8	Tracer Conditions	Involuntary admission of children is regulated by procedures under Section 25 of the Mental Health
		Act.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details. For each addmission a
		form is sent to the Mental Health Commission informing of admission
10	International Comparison	Yes
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	_	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually → Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI:Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	
		□Daily □Weekly Monthly Quarterly □Bi-annually √Annually □Other – give details:
13	KPI report period	$\sqrt{C}$ urrent (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	☑National □Regional □ CHO Area □Hospital
		$\Box$ County $\Box$ Institution $\Box$ Other – give details:
15	KPI is reported in which	☑ Performance Report (NSP) □Other – give details:
IJ	-	
16	reports ? Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
		nup.//www.nse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	Manage Oliveille Hand of Dispersion Defensions (DD) March March (1997)
on	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
•	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
latio	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

VIE	ntal Health Services	
1	KPI Title	Number of child/adolescent referrals (including re-referred) received by mental health services
2	KPI Description	This metric is designed to measure the number of child/ adolescents (i) under 16yrs and (ii) over
		16years but not yet reached their 18th birthday referred to each CAMH Service during the reportin
	MH43	period.
3	KPI Rationale	
		The purpose of this metric is to gain information over time on the numbers of referrals to support t
		monitoring and evaluating of trends over time per area/ region and across the service nationally.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target:-18,864
5	KPI Calculation	Count Cumulative– the total number of child/adolescent referrals received each month
6	Data Source	
0	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – giv
'	Data collection Frequency	
0	Tresser Canditions	details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
_		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Dweekly Monthly Duarterly DBi-annually DAnnually DOther – give
		details:
		Please indicate who is responsible for monitoring this
		KPI:
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – giv
		details:
13	KPI report period	$\sqrt{C}$ urrent (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		□Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		□ County □ Institution ☑ Other – give details: Individual Teams
15	KPI is reported in which	☑ Performance Report (NSP) □Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
Cont	tact details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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pec	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	

Mei	ntal Health Services	
1	KPI Title	No. of child / adolescent referrals (including re-referred) accepted by Mental Health Services
2	KPI Description	
_		This metric is designed to measure the number child/ adolescent (i) under 16y and (ii) over 16y but
	MH44	not yet reached their 18 <sup>th</sup> birthday accepted by each CAMH Service during the reporting period.
	KPI Rationale	
		The purpose of this metric is to gain information over time on the numbers of referrals accepted,
		based on the criteria operated by the CAMHS team in that particular reporting period and
		monitoring and evaluating the trends over time per HSE region and across the service nationally
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care     Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
	KPI Target	NSP 2016 target - 15,092
	KPI Calculation	Count Cumulative- the total number of child/adolescent referrals aceppted each month
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give
		details:
		Please indicate who is responsible for monitoring this
	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	$\sqrt{Current}$ (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		County Institution Other – give details: Individual Teams
15	KPI is reported in which	☑ Performance Report (NSP) □Other – give details:
40	reports ?	
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
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-	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

wie	ntal Health Services	
1	KPI Title	No. of new (including re-referred ) CAMHs Team cases offered first appointment for the current
•		month (seen and DNA)
2	KPI Description	Number of new (including re-referred) child / adolescent cases seen or Did Not Attend their first
2	-	
2	MH45 KDI Dationala	appointment
3	KPI Rationale	To monitor trends in relation to referrals.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Derson Centred Care     DEffective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target - 13,895
5	KPI Calculation	Count number of new appointments offerred and subtract those who did not attend
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Dweekly Monthly D Quarterly DBi-annually Annually Other - give
		details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
•		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
3	Minimum Data Set	details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
	International Comparison	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this
		KPI:
12	KPI Reporting Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
		details:
13	KPI report period	$\sqrt{C}$ urrent (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
••		□ County □ Institution ☑ Other – give details: Individual Teams
15	KPI is reported in which	☑ Performance Report (NSP) □Other – give details:
10	-	
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
17		
:ont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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-	onal Lead and Division	r niip manayan dio wentai Anaiyst Email, phiip.iidiidydni@iise.ie
aliC		Anna O'Cannar National Director Mantal Health, Tak 04 0250540, Duisian Mantal Haalth
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	No. of now (including to referred) child/adalassont referrels even in the ourrent month
	KPI Description	No. of new (including re-referred) child/adolescent referrals seen in the current month
2	MH46	Number of new (including re-referred) child / adolescent cases seen or Did Not Attend their first
3	KPI Rationale	appointment To monitor trends in relation to referrals
ა	Indicator Classification	
	indicator classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care
		Safe Care Better Health and Wellbeing Use of Information
-		WorkforceoUse of Resources √ Governance, Leadership and Management o
	KPI Target	NSP 2016 target - 12,628
	KPI Calculation	Count number of new appointments offerred and subtract those who did not attend
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	$\sqrt{C}$ urrent (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (guarter 1 data reported in guarter 2)
		Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
14		5
15	KPI is reported in which	
15	-	☑ Performance Report (NSP) □Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
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•	onal Lead and Division	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
vatiC	Inal Leau and DIVISION	

	ntal Health Services	
1	KPI Title	No. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month
2	KPI Description	Number of new (including re-referred) child / adolescent cases seen or Did Not Attend their first
	MH47	appointment
3	KPI Rationale	To monitor trends in relation to referrals
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care DEffective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target - 1,259
5	KPI Calculation	Count number of new appointments offerred and subtract those who did not attend
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other - give
		details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Dweekly Monthly Quarterly DBi-annually Annually Other – give
		details:
		Please indicate who is responsible for monitoring this
		KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		□ County □ Institution ☑Other – give details: Individual Teams
15	KPI is reported in which	☑ Performance Report (NSP) □Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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latio	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	%. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month
2	KPI Description	Number of new (including re-referred) child / adolescent cases and Did Not Attend their first
	MH48	appointment
3	KPI Rationale	
-		The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care DEffective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
	KDI Target	
4	KPI Target	NSP 2016 target - 10%
5	KPI Calculation	Count number of new cases DNA and divide by total number of new appointments offerred and
		calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
•		details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	rt i montoring	□Daily □Weekly √ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
40	KDI Dementing Freeman er	Please indicate who is responsible for monitoring this KPI:
	KPI Reporting Frequency	□Daily □Weekly √Monthly □Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	$\sqrt{\text{Current}}$ (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital
		□ County Institution √Other – give details: individual teams
15	KPI is reported in which	Performance Report (NSP) D Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
10	Web link to data	nup.//www.nse.ie/eng/services/publications/corporate/performaticerepons/
17	Additional Information	
Con	tact details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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	onal Lead and Division	
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Mei	Vental Health Services	
	KPI Title	Number of cases closed/discharged by CAMHS service
	KPI Description	This metric is designed to measure the number of cases closed/discharged from each CAMH Service during the reporting period.
	MH49 KPI Rationale	The number of this matrix is to agin information area time on the numbers of access
3	KPI Rationale	The purpose of this metric is to gain information over time on the numbers of cases closed/discharged and monitoring and evaluating the trends over time per area/ region and across the service nationally.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4		
	KPI Target	NSP 2016 target: - 12,072
-	KPI Calculation	Total number of child/adolescent cases closed/discharged.
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
	Data Collection Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Cases are closed or discharged back to GP, Other CAMHS, Other Community Service and Adult Service
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.Discharge summary lette
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □ Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) □Quarterly in arrears (guarter 1 data reported in guarter 2)
14	KPI Reporting Aggregation	□Rolling 12 months(previous 12 month period) □National □Regional ☑ CHO Area □Hospital □ County □ Institution ☑Other – give details: Individual Teams
15	KPI is reported in which	
15	-	☑ Performance Report (NSP) □Other – give details:
40	reports ? Web link to date	
	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	

Me	ntal Health Services	
4	MDI TH	
	KPI Title	Total No. to be seen for a first appointment at the end of each month.
2	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of
	MH50	assessment).
2	KPI Rationale	No it times to CAMUC for monthly books and any ide a managing of the management time of the
3		Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target/Expected activity: 2,449
	KPI Calculation	
		Count Point in time – the number of child/adolescent on waiting list at the each month by time length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
•		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
5		details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	$\sqrt{Current}$ (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
Spec	ialist Lead	Division Ph. 045 880400 Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
4		
	KPI Title	Total No. to be seen 0-3 months
2	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the
		CAMHS team to the day the assessment takes place (less any delay due to client postponement of
	MU64	assessment).
3	MH51 KPI Rationale	Wait times to CAMUS for mental health approximent provide a measure of the response time of the
3		Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care DEffective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target/Expected activity: 1,308
	KPI Calculation	Count Point in time – the number of child/adolescent on waiting list at the each quarter by time
•		length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly Monthly √Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly I Monthly Quarterly Bi-annually Annually Other –
		give details:
		Please indicate who is responsible for monitoring this
		KPI:
12	KPI Reporting Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give
		details:
13	KPI report period	$\sqrt{Current}$ (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
4.4	KDI Deve entire y Agreene vertier	Control Contr
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital
15	KPI is reported in which	<ul> <li>☐ County Institution √Other – give details: individual teams</li> <li>☑ Performance Report (NSP) Other – give details:</li> </ul>
15	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
	act details for Data Manager /	Manage ON-10 Line of Planning D. (
Joint	ast actuins for Data manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
Snor	ialist Load	Division Ph. 045 880400
	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
watic	Dial Leau and Division	Anno O'Conner National Director Montal Health Tal: 01 6252542 Division: Montal Health
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	Total No. on waiting list for a first appointment waiting 3-6 months
	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
	MH52	assessmenty.
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).         □Person Centred Care       □Effective Care         Safe Care□       Better Health and Wellbeing □Use of Information□
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target/Expected activity: 585
	KPI Calculation	Count Point in time – the number of child/adolescent on waiting list at the each quarter by time length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily DWeekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         Daily       Weekly       Monthly       Quarterly       Bi-annually       Annually       Other –         give details:       Please indicate who is responsible for monitoring this       KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which reports ?	☑ Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
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-	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
1	KPI Title	Total No. on waiting list for a first appointment waiting 6-9 months
	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
	MH53	
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).
		Safe Care Better Health and Wellbeing Use of Information
4	KDI Townet	WorkforceoUse of Resources √ Governance, Leadership and Management o
	KPI Target KPI Calculation	NSP 2016 target/Expected activity: 346
-		Count Point in time – the number of child/adolescent on waiting list at the each quarter by time length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
-	Data Quality Issues	
	Data Collection Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         □Daily       □Weekly       ☑       Monthly       □Quarterly       □Bi-annually       □Annually       □Other –         give details:       Please indicate who is responsible for monitoring this         KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	<ul> <li>√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP) Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
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-	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
4		
	KPI Title	Total No. on waiting list for a first appointment waiting 9-12 months
2	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the
		CAMHS team to the day the assessment takes place (less any delay due to client postponement of
		assessment).
	MH54	
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the
	Indicator Classification	service.
	indicator classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
	KPI Target	NSP 2016 target/Expected activity: 210
5	KPI Calculation	Count Point in time – the number of child/adolescent on waiting list at the each quarter by time
		length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
		while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	5	Daily Weekly Monthly Quarterly Bi-annually Annually Other –
		give details:
		Please indicate who is responsible for monitoring this
		KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give
		details:
13	KPI report period	$\sqrt{C}$ urrent (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital
••	······································	$\Box$ County Institution $\sqrt{Other - give details: individual teams}$
15	KPI is reported in which	☑ Performance Report (NSP) Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
	act details for Data Manager /	
5011	ast astans for Data manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	Total No. on waiting list for a first appointment waiting > 12 months
	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
	MH55	
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).         □Person Centred Care       □Effective Care         Safe Care□       Better Health and Wellbeing □Use of Information□
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
4	KPI Target	NSP 2016 target/Expected activity: 0
	KPI Calculation	Count Point in time – the number of child/adolescent on waiting list at the each quarter by time length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         □Daily       □Weekly       ☑       Monthly       □Quarterly       □Bi-annually       □Annually       □Other –         give details:       Please indicate who is responsible for monitoring this       KPI:
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	<ul> <li>√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>□Monthly in arrears (June data reported in July)</li> <li>□Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>□Rolling 12 months(previous 12 month period)</li> </ul>
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital □ County Institution √Other – give details: individual teams
15	KPI is reported in which reports ?	Performance Report (NSP)  Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
	Additional Information	
	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
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	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mer	ntal Health Services	
1	KPI Title	Teams Number of Active Cases
2	KPI Description	The total number of cases currently active in the team at the end of March and at the end of September.
3	KPI Rationale	Allows the service to measure Caseload trends across teams and caseload can then be compared per whole time equvilent numbers.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care □Effective Care Safe Care□ Better Health and Wellbeing □Use of Information□ WorkforceoUse of Resources √ Governance, Leadership and Management o
	KPI Target	N/A KPI
	KPI Calculation	Count point in time
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly Monthly Quarterly ⊠Bi-annually Annually □Other – give details:
8	Tracer Conditions	File on case must be open i.e not discharged to another service.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:         Daily       Weekly       Monthly       Quarterly       Bi-annually       Annually       Other – give         details:       Please indicate who is responsible for monitoring this         KPI:
12	KPI Reporting Frequency	$\Box$ Daily $\Box$ Weekly Monthly Quarterly $\sqrt{Bi}$ -annually Annually $\Box$ Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County □ Institution ☑Other – give details: Individual Teams
15	KPI is reported in which reports ?	□ Performance Report (NSP) □Other – give details:
16	Web link to data	
	Additional Information	
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
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-	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542

Mei	ntal Health Services	
4		Tatel Number of Seas to Seas' Consultation Annointeents
	KPI Title	Total Number of 'face to face' Consultation Appointments
2	KPI Description	
-		The total number of 'face to face' Consultation Appointments, Clinic, Home, Hospital, School or Other
3	KPI Rationale	The purpose of this metric is to gain information over time on the numbers of appointments offerred
		by the CAMHS team in that particular reporting period and monitoring and evaluating the trends
		over time per HSE region and across the service nationally.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		Person Centred Care     Effective Care
		Safe Care Better Health and Wellbeing Use of Information
		WorkforceoUse of Resources $$ Governance, Leadership and Management o
	KPI Target	N/A KPI
5	KPI Calculation	Count point in time
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	Daily Dweekly Monthly Quarterly Bi-annually Annually Other – give
		details:
8	Tracer Conditions	File on case must be open i.e not discharged to another service.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	5	Daily Weekly Monthly Quarterly Bi-annually Annually Other – give
		details:
		Please indicate who is responsible for monitoring this KPI:
12	KPI Reporting Frequency	
		□Daily □Weekly Monthly Quarterly ☑ Bi-annually Annually □Other – give details:
13	KPI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
14		□ County □ Institution ☑ Other – give details: Individual Teams
15	KPI is reported in which	□ Performance Report (NSP) □Other – give details:
15	reports ?	
16	Web link to data	
	Additional Information	
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